

A Study on Mental Health of Under Graduate & Post Graduate Medical Students

Pathak Manan M*, Dr.Bharat N.Panchal**, Dr.Ashok U.Vala***, Dr.Sneha Vadher****

*PG Student,**Professor &HOD, Department of Psychiatry, ***Associate Professor, Department of Psychiatry,

****Senior Resident, Department of Psychiatry, Government Medical College, Bhavnagar, Gujarat-364001.

Abstract: Background: "21st century is a journey from illness to wellness in order to achieve a good mental health." So the question pops up in a mind that what is health?? The probable answer can be: Living a healthy life means lifestyle choices that support your physical, mental, spiritual, and emotional well-being. Mental health will be gained once you will be starting balance of emotional, physical, spiritual state of mind and body. Showing willingness for achieving mental health means you start taking care of Emotions, Stress levels, and develop self mechanisms to cope up with sudden outbursts and get prepared to take very good care of your happy-go-lucky life.^[1] Methods: Mental Health Inventory is 2X2 cross sectional study scale standardized by Jagdish and Shrivastav (1983) were used. It can be utilized to access positive aspects of mental health. It can be used for both group and individual for ages 15 and above. Each item from 1 to 56 given in the test booklet to be rated on 4 point rating scale. It covers six dimension of sound mental health.^[2] 120 medical students from Under Graduate & Post Graduate medical courses have been selected from Government Medical College, Bhavnagar. 't' test were used to find out significant difference of the study. Results: The findings of the study there by revealed that Table 3 seems different compare to others. The calculated 't' value for Male Medical Students of Under Graduate and Female Medical Students of under Graduate was greater than tabular value. Interpretation: The significant difference found between the Male and Female Medical Students of Under Graduate. Conclusion: There was a significant changes found about the six dimensions of Mental Health Inventory between male and female medical students of under graduate.[Pathak M Natl J Integr Res Med, 2019; 10(5): 15-18]

Key Words: Mental Health Inventory, Mental health, UG and PG Medical Students, Mental Health Status

Author for correspondence: Pathak Manan M, Plot No.1108/B, Ambawadi Road, Nr.Mangla Mata Temple, Bhavnagar, Gujarat-364001, E- mail: smilemanan0709@gmail.com, M :+91-9265087151

Introduction: Our health management can be challenging from time to time; when one aspect of your wellbeing requires more attention than others, you can struggle to maintain good balance in other areas. To be healthy body, mind and spirit, it is important to be aware of all aspects of health - your mental, emotional, and spiritual parts play a vital role in your physical well-being and vice versa.¹

The best benefit condition is more than the absence of disease or disorder; this means that to overcome the problems and circumstances by using external resources and to get recovered from difficult or troubleshooting situations. This distance between health and behaviour can help you to prevent long-term or at least delay so that you can run to make better decisions about your well-being.

Mental health is essential to live a complete and productive life. While giving your support for healing and well-being, it is crucial to build up and continue a set of skills and plan to start or reduce the duration of any type of illness. Rather than being free from illness, one has understood how, when and why they needs help and get prepared to fight things like a stigma.

Things that can be helpful to build balance and overall well-being are dependent upon the improvement of food, exercise, sleep, healthy self-image, and the expansion of elasticity-enhancing skills. Every one of us passes through a stressful life in our lifespan, and to deal with it one must develop good coping skills, which ultimately allows them to gain mental health to face and taught to tackle of a heavy stress.

Materials and Methods: Cross-Sectional. 120 medical students from Under Graduate & Post Graduate medical courses have been selected from Government Medical College, Bhavnagar. With the sample size of 60-60 Males & Females. 60 Males and Females respondent of Under Graduate Medical Students. 60 Males and Females respondent from Post Graduate Medical Students. Numbers of relevant articles on the same topic have been reviewed while studying this.³⁻²⁵

Instrument: Mental Health Inventory scale was standardized by Jagdish and Shrivastav² will be used. It is available in two languages-English and Hindi. It can be utilized to access positive aspects of mental health. It can be used for both group and individual for ages 15 and above.

Each item from 1 to 56 given in the test booklet to be rated on 4 point rating scale. It covers six dimension of sound mental health.

The preliminary format of the MHI was tried out administered on a sample of 200 subjects belonging to various socio-cultural, age, sex, and education groups. For item analysis, biserial coefficients of correlation were computed. The significance of the correlation at .001 level was fixed as the criterion for retaining an item. On the basis of significance out of 72 items, 56 items, including 32 'false-keyed' and 24 'true-keyed' have been selected to constitute the final format of the inventory, see the Table-1.

Table: 1 Item Numbers in Various Dimensions of Mental Health

Sr.no	Dimensions	Items	Posi tive	Negat ive	Total
1	Positive Self Evaluation	*1,*7,*13, 19,*23,27, 32,38,45,5 1	6	4	10
2	Perception of Reality	6,8,*14,*2 4,*35,41,* 46,52	4	4	8
3	Integration of Personality	*2,*9,*15, *18,20,*25 ,*28,33,36, 40,47,53	1	11	12
4	Autonomy	*3,*10,29, 42,48,54	2	4	6
5	Group-Oriented Attitudes	4,*11,*16, *21,26,*30 ,39,43,49, 55	4	6	10
6	Environmental Mastery	5,12,17,22 ,31,34,37, 44,50,56	7	3	10
* FALSE KEYED ITEMS			24	32	56

Table 2: Reliability coefficient of different dimensions of mental health and overall.

Sr. No	DIMENSSIONS	RELIABILI TY INDEX
1	Positive Self Evaluation	0.75
2	Perception of Reality	0.71
3	Integration of Personality	0.72
4	Autonomy	0.72
5	Group-Oriented Attitudes	0.74
6	Environmental Mastery	0.71
Over all		0.73

The reliability of the inventory was determined by 'split-half method' using odd-even procedures. Reliability coefficient of different dimensions of mental health can be seed in Table 2.

Results: we can clearly see that the calculated 't' value for male medical students of under graduate and female medical students of under graduate is greater than tabular value.

There is a no significance difference between the male medical students of under graduate and female medical students of under graduate is rejected.

Table: 3 Mental Health Scores of Male and Female Medical Students Of Under Graduate (N= 60)

Group	N	Mean	SD	P Val use
Male	30	166.67	23.16	<0.05
Female	30	155.47	15.31	

Discussion: During the commencing of this study we can come to know that the level of stress, anxiety, and the balance of emotional, physical, spiritual state of mind and body is disrupted in male and female medical students of under graduate.

However, there is no significance different at milestone level found in comparison with under graduate and post graduate medical students. There was a no chronic or typical changes found about the six dimensions of Mental Health Inventory between male and female medical students of under graduate and post graduate. While testing the third hypothesis, there was a significant difference found in males of under graduate medical students in comparison with female medical students of under graduate.

This study also reveals that type of the gender has no severe effect on the mental health of medical students. But, the type of study i.e. work under graduate level has a significant level of stress, anxiety, problem in sleep deprivation, inadaptable to environmental measures. There was a no dimensional misunderstanding found at any level at severe level.

Limitations: Whilst the finding of the study could be applied in the most instances, there are some important exceptions or limitations that are

inherent to every study. The sample size is too small, thus the findings cannot be generalized at a vast context.

As the data was collected from the same government medical college therefore; the data have very similar. The collection of the data was dependent on survey methods, as the questionnaires were filled by the students together in the classroom. Thus there could be chances of duplication of the data. The sample population of this study belongs to urban demography; therefore the result may not be applicable to rural or tribal areas.

These results cannot be applicable to those who are already in job level. Likewise, if they were Senior resident doctors or Junior resident doctors. This study limits its implications to Indian socio-demographic domain and may not be generalized to citizens of other ethnicities or foreigners.

Suggestions: There is no doubt that further research is required in the same field for the better understanding of all the six dimensions of Mental Health Inventory which is equally divided between males and females. It can also helpful to increase the overall growth and development of medical students at the time of shaping their career. There are suggestions for future research references in this related field of the study. The current study can be undertaken the premise of different levels of medical studies levels i.e. MBBS First Year, MBBS Second Year, MBBS Third Year, MBBS Fourth Year, Internship level of MBBS-Fifth Year.

The current study should also be comparing in stream wise i.e. Medical, Commerce, and Arts to get exact level of their Mental Health Status. Further, we can compare this study or we can compare two Medical and Para Medical groups to be studied properly. On another side we can compare Medical group with Clerical group people to see the differentiate values and the significant difference of the Mental Health Inventory.

The present study type is cross sectional thus it could be used gender with their localities, gender with Urban and Rural, gender with Upper class and Middle class, gender with Single parent and both the parent etc. Study can be worked out by keeping any 3 main dimensions of the Mental

Health Inventory also. In a future perspective, one can study the level of stress, anxiety, depression in collaboration with their Emotionality, Maturity and the level of their IQ. The Work Stress, Study Stress, Family Stress, Interpersonal relation can also be researched in future perspective.

Acknowledgment: I would like to express my sincere gratitude to Dr.M.D.Chavda, Course Coordinator, IGNOU, Principal and HOD (Department Of Psychology), L.D.Arts College for being the project guide and mentoring me throughout the project. It is a great pleasure for me to acknowledge Mr.Vishal Parmar, Academic Counsellor, IGNOU and all those who have contributed to this project directly or indirectly. It would be unfair and unjust if I fail to show my appreciation and gratitude.

I would sincerely like to express my deep sense of gratitude and thankfulness to Dr. H. B. Mehta, Dean, GMC, Bhavnagar.

References:

1. <https://www.psychologytoday.com/us/basics/health>
2. Test manual by Jagdish and Srivastava, A K. Mental Health Inventory. Varanasi: Manovaigyanik Parikchan Sansthan: 1983
3. Abdulghani HM. Stress and depression among medical students: across sectional study at a College in Saudi Arabia. Pak J Med Sci Q.2008;24(1):12–17.
4. Adhikari Arjab, #1 Dutta Aman, #1 Sapkota Supriya, #1 Chapagain Abina, #1 Aryal Anurag, #2 and Pradhan Amita 1, BMC Med Educ. 2017; 17: 232. Published online 2017 Nov
5. 28. doi: 10.1186/s12909-017-10830
6. Adlaf EM, Gliksman L, Demers A, Newton-Taylor B. The prevalence of elevated psychological distress among Canadian undergraduates: findings from the 1998 Canadian campus survey (editorial). J Am Coll Health. 2001;50:67–72.
7. Ashouri Fazilat Pour 1, Rasekhi Sepehr 1,* 1 Student Research Committee, Hormozgan University of Medical Sciences, Bandar Abbas, Iran, Published online 2015 September 10. <http://iejm.hums.ac.ir/article-1-60-en.pdf>
8. Barikani A. Stress in Medical Students. Medical Education. 2008;11(1&2):41–44.
9. Benevides-Pereira A, Gonçalves MB. Transtornos emocionais e a formação em

- Medicina: um estudo longitudinal. Rev Bras Educ Med. 2009; 33(1):10-23.
10. Bute Jayashri B, Bachhotiya Abhishek, Arora V K, Kori Sangeeta Department of Community of Medicine, Index Medical College, Indore, Madhya Pradesh, India. Correspondence to: Jayashri B Bute, E-mail: drjayashri@gmail.com Received December 21, 2015. Accepted January 06, 2016 <https://www.ejmanager.com/mnstemps/67/67-1450714558.pdf?t=1551100537>
 11. Center C, Davis M, Detre T, et al. "Confronting depression and suicide in physicians: a consensus statement," JAMA. 2003; 289: 3161-6.
 12. Chandrashekhar T Sreeramareddy, Pathiyil R Shankar, VS Binu, Chiranjoy Mukhopadhyay, Biswabina Ray and Ritesh G Menezes. Psychological morbidity, sources of stress and coping strategies among undergraduate medical students of Nepal. BMC Medical Education 2007, 7:26 doi:10.1186/1472-6920-7-26. Available from: <http://www.biomedcentral.com/1472-6920/7/26>.
 13. Dyrbye LN, Thomas MR, Shanafelt TD (2006) Systematic review of depression, anxiety, and other indicators of psychological distress among U.S. and Canadian medical students Acad Med 81(4): 354–73
 14. Dyrbye LN, Thomas MR, Shanafelt TD. Medical student distress: causes, consequences, and proposed solutions. Mayo Clinic Proc. 2005; 80(12):1613-22.
 15. Dyrbye LN, Thomas MR, Shanafelt TD. Systematic review of depression, anxiety, and other indicators of psychological distress among US and Canadian medical students. Acad Med. 2006; 81(4):354-73.
 16. Fink, Arlene. *Conducting Research Literature Reviews: From the Internet to Paper*. Fourth edition. Thousand Oaks, CA: SAGE, 2014. <http://libguides.usc.edu/writingguide/literaturereview>
 17. Garg Kabir 1, Agarwal Manu 2, Dalal Pronob Kumar 2
1 Department of Psychiatry, National Institute of Mental Health and Neurosciences, Bengaluru, Karnataka, India. 2 Department of Psychiatry, King George's Medical University, Lucknow, Uttar Pradesh, India, web published on 18-jan-2018 <http://www.indianjpsychiatry.org/article.aspx?issn=0019-5545;year=2017;volume=59;issue=4;spage=502;epage=504;aulast=Garg>
 18. Gaur ADR, Vohra AK, Subash S, Khurana H. Prevalence of psychiatric morbidity among 6–14 yrs old children. Indian JCommunity Med. 2003;28(3):133–7.
 19. Gebru AA, Berhe KK, Gebr HB. Assessment of prevalence and associated factors of mental distress among first year regular students of Mekelle University main campus, Mekelle City 2010/11; a cross sectional study. Am J Adv Nurs Res. 2014;1(1):5–14.
 20. Ghodasara SL, Davidson MA, Reich MS, Savoie CV, Rodgers SM. Assessing student mental health at the Vanderbilt University School of Medicine. Acad Med. 2011; 86(1):116-21.
 21. Givens, Jane L. MD; Tjia, Jennifer MD, Academic Medicine: September 2002 - Volume 77 - Issue 9 - p 918–921 https://journals.lww.com/academicmedicine/Fulltext/2002/09000/Depressed_Medical_Students__Use_of_Mental_Health.24.aspx
 22. <http://www.math.montana.edu/jobop/phdpre/p/documents/phd6.pdf>
 23. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5704530/>
 24. Jafari Najmeh,1 Loghmani Amir,1 and Montazeri Ali 2, Int J Prev Med. 2012 Mar; 3(Suppl1): S107–S112. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3399312/>
 25. Jamali A, Tofangchiha S, Jamali R, Nedjat S, Jan D, Narimani A, et al. Medical students' health-related quality of life: roles of social and behavioural factors. Med Educ. 2013; 47(10):1001-12.

Conflict of interest: None
Funding: None
Cite this Article as: Pathak MM, Panchal BN, Vala AU, Vadhe S. A Study on Mental Health of Under Graduate & Postgraduate Medical Students. Natl J Integr Res Med 2019; Vol.10(5): 15-18