

Original Research Paper

Psychology

EFFICACY OF NEED BASED COUNSELLING ON PSYCHOSOCIAL AND ACADEMIC PROBLEMS OF STUDENTS IN HEALTH PROFESSIONAL COURSES.

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ABSTRACT

Background: Health professional courses are perceived as very stressful courses. It is usually observed that students from such courses undergo tremendous mental health changes during their education.

Objectives: 1. To identify the emotional problems experienced by students studying in health professional courses. 2. To assess the social problems experienced by students of health professional courses. 3. To identify the academic problems of students of health professional courses. 4. To identify the health problems of students of health professional courses. 5. To find out the effectiveness of counselling on emotional, social and academic problems of the students.

Research Design: A longitudinal study (2013-2017) **Population:** Students from health professional courses.

Sample size: 2025 students. Material: problem identification sheet developed by Students Guidance Clinic

Results: Emotional problems were resolved for 31.9% of the counselled students. Academic improvement was seen in 27.10 % of the counselled students. Social problems were resolved for 18.4 % of the counselled and health issues were addressed for 19.40 % of the counselled students.

Conclusion: Need based counselling was found effective in resolving the psycho-social, academic and health problems of the students from health professional courses.

KEYWORDS: Need based counselling, psychosocial and academic problems, students of health professional courses

INTRODUCTION:

Health professional course is perceived as very stressful course. It is usually observed that students from such courses undergo tremendous mental health changes during their education. Health professional courses are very prestigious in the society whether it is Allopathy, Ayurveda, Homeopathy, Dentistry, Physiotherapy and Nursing disciplines. It is highly taxing and carrying mental pressure as compared with other professional courses. They have varying degree of academic, personal emotional, social issues as compared with students of other professional courses. They are continuously expected to be skilled in autonomous, or self directed learning, equipped for a life time clinical practice

Students from various medical professions represent highly educated and skilled population which is always under significant pressure because of their vast syllabus, peer competition for academic performance, continuous evaluation, and long duration of training as well as complex routine of observation, interpretation, acquiring and retaining factual information, developing new skills for accurate diagnosis and treatment. These courses considered as toughest due to long hours of studies, time bound assignments, seminars, postings in various clinical departments, and examinations both written and oral. All these make health professional courses more stressful. The entry to these course lead to many psychological changes in students. Emotional problems increase during the period of all undergraduate courses of medical education which can lead more mental health problems in students and may have negative effect on overall personality of the students. Ahmed, Banu, Fageer and Sawaidi (2009) reported that 28.6 % medical students and doctors from Dubai medical college of girls, showed depression and 28.7% showed anxiety.

A study revealed that 51.3% medical students were affected by depression by depression, 66.9% by anxiety and 53% stress. 5th semester students showed highest depression, anxiety and stress as compared with 2nd semester students. Higher scores of depression, anxiety and stress was found in female students and students belong to lower semester, young age and non smokers. (Iqbal,Gupta and Venkatrao,2015)

Givens and Tija (2002) reported that 24% of medical students were depressed and out of that 22% students approached mental health

counselling services. Those students who did not use counselling services revealed common barriers as lack of time (48%), lack of confidentiality (37%), stigma associated with mental health services (30%), cost (28%), fear of documentation on academic record (24% and fear of unwanted intervention (26%)

Dhar, Walia, Das (2009), found that 48.83% newly admitted B.Sc. nursing students were having mild stress and 11.62% were having moderate stress. Students reported highest rank for academic stress. They perceived most stressful "difficulty in participation in social life because long hours", "Shortage of time for self study" and problems in getting log book completed.

A cross sectional study at a medical colleges in Saudi Arabia, Abdulghani (2008) reported that the prevalence of all types of stress among 57% students and severe stress among 19.6% students. It has seen that the significant association between years of study and stress levels was found, 60.3% students reported stress due to their studies and 2.8% students due to home environment.

In transition to clinical setting the student may experience a loss of external control which leads to increase in depression or anxiety symptoms, students also suggests that mental health worsen after begin medical college and remaining poor throughout training, it is not just undergraduate study period which brings about these changes, it may continue later in internship, post graduate study and may reach to burn out level. Students from medical, nursing and practicing physicians are more vulnerable to psychosocial health problems that may adversely affect their physical, mental and social life.

A study conducted by Paul, Hinman, Dottl, Passon (2009) evaluated that approximately 79% of the schools provide a variety of support services. Students generally sought assistance for problems related to testing, management of time and instructional materials, course remediation, and needing tutors during their first two years. Help for general stress and anxiety remained constant across all four years. The second year students exhibited the highest percentage of depression and anxiety. "Crying" was the most common of depressive symptoms and fear of worst happening" was the most common anxiety manifestation in medical students.

Twenty eight percent medical students were found to have emotional disorders and factors responsible for emotional disorders were relationship of students with their parents, siblings, lecturers, course mate, boy and girl friend as well as pressure prior to examination and periods of medical training (Nur, Cetinkaya, sabamcigullari, Ozsahin, Kavaku, 2008).

Objectives:

- 1. To identify the emotional problems experienced by students studying in health professional courses.
- 2. To assess the social problems experienced by students of health professional courses.
- 3. To identify the academic problems of students of health professional courses.
- 4. To identify the health problems of students of health professional courses.
- 5. To find out the effectiveness of counselling on emotional, social and academic problems of the students.

MATERIAL AND METHODS:

Setting: students' guidance clinic of a medical university in Central India.

Research approach: A longitudinal study (2013-2017)

Research design: Retrospective study

Sampling technique: Non probability purposive sampling

Population: Students from health professional courses **Sample size:** 2025 UG entrants. Age: 18-25 years

Inclusion criteria: Both male and female

Material: Problem identification sheet developed by students' guidance clinic

Method of data collection:

The proposal of the study was approved by the institutional ethics board. Permission of the college authorities was taken before recruiting the study participants. Informed consent was taken from each of the participants.

Data Analysis Procedure

The collected data was analyzed based on the objectives of the

Table No 2: Areas of problems identified

Academic problems	Personal / Emotional problems	Health Problems	Social Problems		
 Difficulty in studies Lack of concentration Exam Fear and Failure Loss of interest in studies 	 Anger and irritability Anxiety Sadness and suicidal thoughts Worry about future Inferiority Complex Financial Issues 	Generic Health Issues Some specific Issues	Peer relationship Parental Conflict Relationship Issues Hostel/Hostel authority related Problems Teachers and higher authority Related Problems		

Table No. 3: Outcome of counseling on the problem status

Year	Low Attendance			Low Performance			Self approached		
	Students	Students	% Students	Students	Students	% Students	Students	Students	% Students
	approached	improved	Improved	approached	improved	Improved	approached	improved	Improved
2013-14	605	498	82.3	233	213	89.4	61	50	81.9
2014-15	161	104	78.1	339	288	83.7	81	70	86.4
2015-16	141	116	86.2	183	179	97.8	52	41	78.8
2016-17	36	34	94.4	101	87	82	42	37	86
Total	933	752	79.32	856	767	88.05	236	198	83.54

Table No 3 shows the outcome after need based guidance and counselling. From the duration of 2013- 2017, total 933 health professional students approached for counselling for their low attendance, out of 933, 752, (32%) improved their attendance level after counselling sessions. Total 856 students approached guidance unit for their low performance in the first PCT exam, i.e. failed in exam having less than 30 % marks. Out of that 767 (88.05%) students improved in their academic performance. Total 236 students visited to counselling clinic voluntarily for their problems apart from low attendance and low performance, out of 236, 198 (93.54) students reduced their stress level and improved in mental status

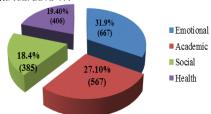
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Table no 1: Distribution of beneficiaries from 2013-2017

study. Descriptive and inferential statistics were used.

Health	2012014	2014-2015	2015-2016	2016-2017	Total				
professions									
Medical	369	124	73	28	621				
Dental	131	98	72	15	316				
Ayurvedic	193	152	67	30	442				
Nursing	211	217	168	89	685				
Physiotherapy				23	23				
Total	904	591	380	185	2025				

Table no. 1 shows that total beneficiaries from 2013-2017 who visited to students guidance clinic for getting guidance and support for the issues were 2025, in which 621 students from medial discipline, 316 from dental discipline, 442 from Ayurvedic discipline, 685 students from Nursing Discipline and 23 from Physiotherapy discipline. Total 904 students from all the health profession who visited in academic year 2013-2014, 591 were in the academic year 2014-2015, 680 were visited in the year of 15-16 and 185 students visited in the year 2016-17.



Graph 1: Distribution of the problems of the students

Graph no. 1 reveals that students visited in the four area of assistance, academic, emotional, social and health. Out of 2025 health professional students were 667 (31.9%), visited to counselling unit to resolve their personal emotional issues, 567 (567) students visited to deal with their academic problems , 385 (18.4%) students visited for dealing with social problems and 406 (19.40%) students approached to counselling unit to take out guidance on health related issues.

DISCUSSION:

The findings of the study indicated that academic, personal emotional, social and health issues do have negative effect on students personal and academic life and timely guidance and counselling support system plays an important role and have a positive effect on students attendance in the class and their exam performance.

This findings supported by a study conducted by Mahadevan, Saikuma (2013) reported that there was an increase in the average marks by about 15%-25% among 43% of the students and by about

10% -15% of marks among 13% of the students. There was no marked improvement among 31% of them and there was no change in 4% of the students .The second part of the study showed that the number of sessions correlated positively with the academic performance.

CONCLUSION:

Need based counselling was found effective in resolving the psycho-social, academic and health problems of the students from health professional courses.

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