Research Paper

Mental Health Status and Coping Among Students in Different Professional Courses

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ABSTRACT

Mental health is the level of psychological well-being or an absence of a mental disorder. Stress, anxiety and depression are prominent features which are related to coping strategy used by an individual. Student of professional courses faces different situations like difficult academic demands, high expectation of family and the coping with the new environment. All these factors may be stressful to the students and may lead to anxiety, depressive episodes and burn out. Some students may have poor coping strategy which may lead to substance abuse, behavioral disturbances and even suicidal attempt. In this context aim of the present study is to find out mental health status, stress and coping among students in different professional courses. Methodology: 100 students (25 each of MBBS, BTECH, MBA and BA LLB) were selected from Jaipur and divided into four groups. They were assessed on the General Health questionnaire- 12 (GHQ), Depression Anxiety and Stress scale (DASS), and Coping strategy Inventory. Findings suggested that depression level was higher in MBA students and stress level was higher in BALLB students. MBA student were higher on Emotion Focused Engagement and Disengagement Coping Strategy.

Keywords: *Stress, Anxiety, Depression, Coping Strategy, Professional Course Students*

Mental health is the level of psychological well-being or an absence of a mental disorder. Stress, anxiety, and depression are prominent features of mental health which require adequate coping strategies used by an individual. Student of professional courses faces different situations like difficult academic demands, high expectation of family and the coping with the new environment.

A considerable amount of stress in training of professional courses stems from academic pressure, perfectionist standards, and demanding nature of jobs which also involves the personal and emotionally draining aspects of life. In the Indian scenario, too much content is

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delivered in a short span of time and the students are required to undertake many examination (Cherkil, Gardens &Soman, 2013).

Stress in these courses could lead to detrimental effects on health, academic performance, memory and learning, problem solving abilities, and job performance. The perception of stress and the ways in which it is managed is largely determined by the coping strategies adopted by the person.

Coping styles employed also predicts psychological distress, poor adjustment, and coping to result in poor academic performance among students (Cherkil, Gardens &Soman, 2013).

METHOD

Sample

To collect the data, the proposed study consisted of 100 students attending four different professional courses namely medical (MBBS), law (BALLB), management (MBA) and technical (BTech) from different institutes located in Rajasthan, India. From the total 100 participants 25 students were from MBBS 25 students were from BALLB and 25 each from MBA and B.Tech. The participants were randomly selected from their collages. From the total sample of the study there were 51 females and 49 males, and their age range was 18 years to 25 years old.

Tools

- **General Health Questionnaire (GHQ 12):** General Health Questionnaire (GHQ12) was developed by Golberg & Blackwell in 1970.This instrument targets two areas – the inability to carry out normal functions and the appearance of distress – to assess well-being in a person. The instrument is considered as reliable and has been translated into 38 different languages. When correlated with the global quality of life scale, the GHQ showed negative correlation. This demonstrates the inverse relationship with an increase in distress leading to a decrease in quality of life.
- **Depression Anxiety Stress Scale (DASS):** The Depression, Anxiety and Stress Scale - 21 Items (DASS-21) is developed by Gomez in 2002. It is a set of three self-report scales designed to measure the emotional states of depression, anxiety, and stress. Each of the three DASS-21 scales contains 7 items, divided into subscales with similar content. The depression scale assesses dysphoria, hopelessness, devaluation of life, self-deprecation, lack of interest / involvement, anhedonia and inertia. The anxiety scale assesses autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The stress scale is sensitive to levels of chronic nonspecific arousal. It assesses difficulty relaxing, nervous arousal, and being easily upset / agitated, irritable / over-reactive and impatient. The DASS-21 therefore has no direct implications for the allocation of patients to discrete diagnostic categories postulated in classificatory systems such as the DSM and ICD.
- **Coping Strategies Inventory Short Form (Tobin,1984):** The Coping Strategies Inventory-Short Form (CSI-SF) measures four coping strategies based on 16 items: 4 items each indicating problem-focused vs. emotion-focused engagement or disengagement.

Research Design: It is a descriptive research design.

Statistics: The data is analysed using SPSS version 22. The variables of mental health status are compared on the different professional courses using both descriptive and inferential statistics.

RESULTS

Table 1: Socio Demographic Details

Courses / Demographic Variable		MBBS		BALLB		MBA		BTech	
		f	%	f	%	f	%	f	%
Sex	Male	11	44	12	48	11	44	15	60
	Female	14	56	13	52	14	56	10	40
Age		Mean	S.D	Mean	S.D	Mean	S.D	Mean	S.D
		23.24	1.71	20.86	0.99	23.18	3.18	19.83	1.16

The above table showed the level of depression in different courses. As evident from the table, students of MBBS seemed to have higher levels of depression, when compared to BALLB, MBA and BTech. Also, BALLB seemed to have higher depressive features when compared to MBA and BTech. However, the above findings were not found to be statistically significant. It was however found that depressive features were significantly higher in MBA students when compared to the BTech students.

Table 2: Mean and Standard Deviation of mental health status (depression, anxiety and stress) and One-way ANOVA scores for the students belonging to four different courses namely.

Courses / Variables	MBBS		BALLB		MBA		BTECH		
	MEAN	SD	MEAN	SD	MEAN	SD	MEAN	SD	F
Depression	11.28	8.18	13.68	7.88	16.56	6.01	10.16	6.21	3.944*
Anxiety	13.2	7.81	15.36	8.67	16.34	6.15	11.52	4.09	2.442
Stress	14.4	7.32	18.96	8.56	8.88	3.62	14	6.07	11.674*

*Significant at 0.01 level

The above table shows the mean and SD values of the various mental health status dimensions including depression, anxiety, and stress among the different professional courses. The result indicating the depression was higher among the MBA students as compared to the other courses as the mean of depression for the MBA group (Mean=16.56, SD=6.01) followed by the BALLB group (Mean= 13.68, SD=7.88). On the Anxiety dimension MBA students mean (Mean=16.34, SD=6.15) is greater as compared to the other course students. The Stress dimension's mean is highest in BALLB group as compared to other groups, on the BALLB group mean is 18.96, SD=8.56 followed by the MBBS group mean (Mean=13.2, SD=7.81).

The table shows the value of the one-way ANOVA and F value which was used to test the overall significance difference among the four different groups (namely MBSS, BALLB, MBA, BTECH) about the dimensions of depression and stress were found as 3.944 and 11.674 respectively which is statistically significant at 0.01 level.

Table 3: Mean, Standard Deviation and One-way ANOVA Scores of Problem and Emotion Focused Engagement and Problem and Emotion Focused Disengagement as a coping mechanism scores for the students belonging to four different courses namely.

Courses Variables	MBBS		BALLB		MBA		BTECH		F
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Problem focussed Engagement	17.24	6.92	16.48	6.23	16.52	4.7	18.04	3.68	1.329
Emotion Focussed Engagement	16.24	6.03	16.24	7.09	19.88	4.26	15.08	5.08	4.163*
Problem focussed Disengagement	13.76	5.07	15.24	4.41	16.2	5.48	15.16	3.98	1.106
Emotion focussed Disengagement	13.48	6.35	15.04	7.12	17.92	5.48	13.76	5.91	3.156**

*Significant at 0.01 level
**Significant at 0.05 level

The above table shows the mean and SD values of the various coping dimensions including problem and emotion focused engagement and disengagement among the different professional courses. The result indicating the problem focused engagement was higher among the BTECH students as compared to the other courses as the mean of problem focused engagement for the BTECH group (Mean=18.04, SD=3.68) followed by the MBBS group (Mean= 17.24, SD=6.92). On the emotion focused engagement dimension MBA students mean (Mean=19.88, SD=4.26) is greater as compared to the other course students. The problem focused disengagement dimension's mean is highest in MBA group as compared to other groups, on the MBA group mean is 16.20, SD=5.48 followed by the BTECH group mean (Mean=15.16, SD=3.98). On the emotion focused disengagement dimension MBA group has the highest mean (Mean=17.92, SD=5.48) as compared to rest of the groups.

The above table explains the value of the one-way ANOVA and F value which was used to test the overall significance difference among the four different groups (namely MBSS, BALLB, MBA, BTECH) about the different dimensions of Coping, on the dimension of Emotion Focused Engagement found as 4.162 which is statistically significant at 0.01 level. The dimension of Emotion focused disengagement found as 3.156 which is significant at 0.05 level.

DISCUSSION

The results of the present study show that on depression and stress dimension significant difference was found at 0.01 level. It was found that on depression MBA students has significantly higher depression level than rest of the group. Similarly, on stress it was found to be higher in BALLB students when compared to other groups. Bayram & Bilgel (2008) in their research stated that high prevalence of depression, anxiety and stress symptoms among MBA students is alarming. This shows the need for primary and secondary prevention measures, with the development of adequate and appropriate support services for this group. Skead & Rogers (2014) argued that law students manifested higher level of stress due to which impacts their mental health and wellbeing. Nandi M, et al. (2012), found in their research that the stress incidence in medical students in a particular institution in India is

high and is negatively affecting their mental well-being. Panday et al. (2012) found that there are academic stressors as well as psychological stressors which affect the performance of MBA students. In academic stressors lack of time for recreational activities and pedagogy of teaching were having high impact. Whereas in behavioral stressors cultural effect having high impact on performance. Due to stress the students were facing the problems like suffer from headache, sleeplessness, nervousness and moodiness.

Although on the anxiety dimension there was no significant difference found among the four different groups. This may be due to their extensive and rigorous curriculum. Quik et al. (2019) stated that the anxiety level was most prevalent among students pursuing MBBS from the Middle Eastern and Asian countries. Chenganakkattil, Babu, & Hyder (2017) found that when compared the medical and engineering students on the stress, depression and anxiety dimensions it reflected that higher rate of depression and anxiety. Due to the demand of the curriculum and parental and peer pressure to perform better enhances their anxiety level and sometimes it leads to poor mental health (Vitasari et al. 2010).

On the coping style of the dimension of Emotion Focused Engagement and Emotion Focused Disengagement significant difference was found among the different professional course groups on 0.01 level and 0.05 level, respectively. On the Emotion Focused Engagement MBA student group scored more than rest of the groups. On the Emotion Focused Disengagement MBA student group scored more than rest of the groups. Ogoma (2020) found that emotion-focused coping significantly diminished the sense of reduced personal accomplishment as a contrary to the expectation. In terms of avoidant coping elevated emotional exhaustion and depersonalization tends to occur. de la Fuente et al. (2020) found the similarly findings for engineering students.

There were no significant differences found in the use of problem focused engagement and problem focused disengagement as a coping style in any the groups. This is because all the group uses the similar coping mechanism to deal with stressful events. In the study done by Sinha & Latha (2018) argued that in medical students problem focused engagement coping mechanism is used.

CONCLUSION

The results of the present study show that on depression and stress dimension significant difference was found at 0.01 level. It was found that on depression MBA students has significantly higher depression level than rest of the group. Similarly, on stress it was found to be higher in BALLB students when compared to other groups. Coping style of the dimension of Emotion Focused Engagement and Emotion Focused Disengagement significant difference was found among the different professional course. On the Emotion Focused Engagement MBA student group scored more than rest of the groups. On the Emotion Focused Disengagement MBA student group scored more than rest of the groups.

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