

# Providing psychological assistance to Medical, Dental, and Paramedical students

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**Abstract - We are living in a period of knowledge explosion, and the availability of healthy and competent human resources has become the most crucial aspect in the success of every society. None of the studies have looked at the entire student experience in medical school. This technique aims to identify possible stresses among kids and treat them at the proper moment. Teachers and mentors who responded positively agreed that these students are the future physicians of tomorrow and that, in addition to academic and clinical training, they should be given the psychological support they require to ensure their well-being. Psychosocial assistance has been established as a result of the current research to assist our medical students who are having trouble fulfilling the demands of their education, training, and clinical practices. Medical schools should establish and supervise programs aimed at keeping their students healthy. It will undoubtedly affect their performance and efficiency.**

**Keywords - Medical, dental, paramedical, student, psychological, stress, motivation**

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## 1. INTRODUCTION

Educating students is essential if we are to improve our country's economy and advance a wide range of vital industries and subsectors. In recent years, India has surpassed all other emerging countries in terms of the number of medical colleges (both public and private). Students can begin medical school immediately after completing their 12th-grade schooling if they pass an admission exam. As a result, students who go on to higher school for a career face an abrupt rise in the level of academic difficulty. In addition, as they go through their program, they must deal with the stress of both academic and clinical requirements. Indeed, medical, dental, and paramedical educations are extremely rigorous and demanding throughout the course of their education. In our medical colleges, in addition to learning about the fundamentals of medicine, our students must also learn about clinical skills, communication, problem solving, stress coping, and moral, ethical, and legal duties. In order for them to reach their full potential, they need a variety of types of psychological care. Several studies have shown that medical students' general well-being is affected by the pressures they encounter during their medical training. It has been observed that the most prevalent causes of stress are tests and examinations, time constraint and too much content to be learned, lagging behind in work and competing expectations. Those who are eager to become physicians must be given the chance to learn in an environment that promotes their development, not their deterioration. It is common for health hazards to come from physical effort, social exploration,

physical and mental transitional periods, and increased experimental behavior. Poor intelligence and uncontrolled emotions are the most common factors that hinder a student's progress, as are a lack of communication skills, interpersonal difficulties, disorganization and undesirable personality traits, a higher level of stress and anxiety, a poor diet, a lack of entertainment options, a lack of language proficiency (the medium of instruction), a poorly organized study schedule, or an unplanned study schedule. In addition, drug and alcohol addiction, as well as homicide and suicide, are also contributing factors in certain cases. As a result, students are prevented from taking advantage of educational opportunities that may help them advance personally and professionally. When a student's health or the health of his or her family is jeopardized, the quality of medical care supplied to patients suffers as well. Doctors in the process of learning are more likely to make mistakes when they are under pressure. [1]

## 1.2 Challenges Faced by Medical Students

### 1. Aptitude in English

Language is the most important factor in the education of professionals. All of India's prominent professions are considered to be easier to achieve with competence in English. Because of its cultural and religious variety, there is no one language spoken by all of the states and areas of the nation. When students attend professional colleges in India, the medium of instruction quickly shifts from the vernacular to primarily English. The medical

academic world after the 12th grade is filled with complex medical terms that must be learned by medical students in order to grasp and learn about the clinical world. Some medical students have realized that it is difficult for them to grasp things in English, and this has caused them to lose confidence in themselves and hurt their self-image. Additionally, students who excelled in their medical school's written and oral tests did so because of their strong command of the English language. Because of this, it is essential for students to be fluent in English, yet many of them fall behind because they find it difficult to adjust to the language. A lack of skill in the English language might be a problem for medical students, and we need to investigate this more.[2]

## 2. Intelligence

Intelligence may be regarded as encompassing mental qualities essential for adaptability, as well as selection and moulding of any environmental setting. Empirical data reveals that medical professional possesses at least above average intellectual capacity. A student attends medical, dental and paramedical professional degree usually after qualifying admission exams. But owing to commercialization of medical education this criterion is not always followed consequently not all students reflect needed degree of intelligence. Coles, C.R. (1990) said that aside the curriculum and teaching techniques bad academic challenges might be linked to learning issues among medical students. If we consider any possibility of learning disability among any of the medical students, right to education act in India doesn't allow any educational university to segregate such students rather NAAC (National Assessment and Accreditation Council) advocates to provide support for all the students regardless of their calibre. There is a need to examine the efficiencies and shortcomings of the students in order to direct them towards suitable field otherwise we will notice rising dropouts.[3]

## 3. Emotional Intelligence

Much of our success and failure in life, according to current academic studies, is not due to our cognitive talents as assessed by IQ tests, but rather to our abilities to build and maintain social relationships, present ourselves in a positive light, and influence how other people see us. Emotional intelligence has a significant impact on one's ability to succeed as a healthcare practitioner. Emotional intelligence (EI) is a sort of intelligence that may be more significant in achieving one's goals than standard intelligence as evaluated by IQ testing. People who lack this knowledge are considered to lack emotional intelligence (EI). It's the capacity to detect, analyze and control one's own and other people's emotions in a positive manner. It was a model by Daniel Goleman (1998) that outlined Emotional Intelligence is made up of five components: Emotional and behavioral self-awareness; self-regulation; adapting to changing conditions; self-awareness and self-regulation The

ability to control the emotions of others in order to influence them in a positive manner. Empathy, Even while making a decision, it is important to consider the sentiments of others. Goal-setting and using emotional variables to attain them, as well as to enjoy the learning process and persevere in the face of obstacles. Adolescence is commonly acknowledged to be a time of intense emotional upheaval. It is because of this that in their professional education they face several hurdles, such as competency (Educational & Professional), adaptability to various situations, and interpersonal skills. They must be able to maintain a healthy equilibrium between their own self-knowledge and their social awareness in light of the current situation. Because of this, Emotional Intelligence had to be taken into account.

## 4. Motivation

If you are considering a profession in health care, this is one of the most important indicators." Goal-directed behavior may be described as being motivated by a variety of causes. The 'whys' of behavior are the needs or goals that motivate our actions and help us to make sense of our behavior. Based on the behavior we watch, we assume that a person has a specific reason for their actions." In order to influence behavior, it primarily affects the biological, emotional, social, and cognitive elements that drive it. As a result, in the health care industry, an individual's willingness to exert and maintain effort in order to sustain his services to society is crucially important to grasp the concept of motivation. Medical competence is the immediate objective of the students in this study. Because of this, people must be motivated in order to fulfill their desire to learn and achieve success in the workplace. Students' motivation levels can help explain why some students do well while others struggle to complete their instruction. Students' academic performance, efficiency, and sense of self-worth are all positively impacted by high levels of motivation. Physical exertion, sleep deprivation, bad food, trauma exposure, excessive socializing, a lack of mentor contribution, and burnout have all been linked to low levels of motivation. As a result, medical students' motivation must be maintained throughout their study in order to assure a significant number of effective healthcare professionals in our country.[4]

## 5. Communication Skills

In the last several decades, the importance of good communication skills in medical school has been recognized. The ability to effectively convey information to and from patients and colleagues is a must for all medical practitioners. Knowledge is exchanged through communication. Despite the fact that it is frequently taken for granted, the ability to communicate effectively is critical for those in the healthcare industry. Furthermore, a lack of this quality has a significant impact on the flow of

information. According to the Medical Council of India (MCI) Vision 2015, the foundation course for undergraduate students of MBBS would include training in communication skills. Students in the paramedical profession may consider developing and implementing a training program to improve their communication skills as well. It is regarded a disadvantage to have poor communication skills in order to participate actively in dyadic lectures as well as seminar sessions and viva examinations. Even after being exposed to a wealth of information, many students remain unable to articulate their thoughts and ideas. As a result, their self-esteem and self-confidence suffer, making communication skills training an even greater need.

## 6. Interpersonal Skills

Because medical care cannot be provided in the absence of a team, it is essential for a doctor to be socially adept as well as technically proficient. One of the most important roles in healthcare is the teamwork between the various members of the healthcare team: senior and junior healthcare professionals as well as support workers and technical personnel. It is important to understand the subject matter before assimilation can take place, and listening skills are a key component of this study because it is only through clear comprehension that knowledge can be assimilated. Since just hearing does not guarantee comprehension, listening has remained an underappreciated and underappreciated talent. Doctors can only deliver the best care to patients if they pay close attention to what their patients are saying. As a result, recent research suggests that training should begin with an assessment of students' listening abilities. Educators will be compelled to focus on teaching students how to listen effectively as a result of this.[5]

## 2. REVIEW OF LITERATURE

**Aboalshamat, K.T. et al (2018)** found that in spite of extreme stressful experience medical students seemed to be generally satisfied with their lives, however at the time of investigation they affirmed psychological distress. It was also found that religious attitude, spiritual intelligence and self-efficacy were related to happiness but not to achievement. Nearly 2/3rd of the students had below average resilience thus resilience should serve as one of the aspects when building psychosocial support for the medical students.[6]

**Gupta et al (2017)** also reported that professional students were more comfortable with English as mode of instructions but there was a section of students who was struggling to understand concepts in English. Another important skill is interpersonal skills (listening skills) for which we reviewed the related literature and found that it is comparatively less explored among medical students. Good listening skills are quite significant in clinical setup and for a student it is

found to be positively correlated to good academic performance and efficacy.[7]

**Rajkumar, E. et al (2015)**, Through their studies, importance of psychosocial support in terms of suggesting intervention strategies in order to manage depression among students have been realised.[8]

**Lumely S et al (2015)** in order to explore the relationship between academic performance, extracurricular activity, and quality of life at medical school in the UK to aid our understanding of students' work-life balance, found that study skills and duration of study hold significant importance for the academic performance of the students. It is more likely that those who perform better feel better about their life. In another study related to extracurricular activities found that there is little correlation between academic performance and extracurricular activities but absence of extracurricular activities leads to deterioration in exam performance.[9]

The present study is an attempt in direction to support medical students. It's been observed that not all the students get exposed to skill based communicative language and hence even after receiving their professional degree they are unable to fetch a good job and excel in their life. **Khan A. (2015)** also concluded in his study that Spoken English is a well-established problem for students from vernacular medium. They 39 make basic grammatical errors and struggle to speak fluently and hence it affects them unfavourably. It is the agony of the student who find comprehending the lecture and the course content difficult. They even hesitate to approach their teachers and peers for any kind of support.[10]

**Rajan, S. et al (2014)** attempted to understand listening style of medical undergraduates, 62% students were found to be passive listeners and only 3% were active listeners and no significant difference in the listening style of males and females. Besides active listening and making note while attending a lecture can lectures has proven to increase scores in exams by more than 20%(156) . Improvement in listening will improve their communication skill.[11]

**Ali, S. et al, (2013)** designed his study to investigate the factors affecting academic performance of medical undergraduate students and the area covered were gender, age, faculty of study (present teachers), schooling, guardian or parents, economic status, living or residential area, medium of schooling, tutor trends, daily study hours. The results reported positive correlation with economic status, daily study hours which contribute to positive effects of academic performance.[12]

In other study conducted by **Bhochhibhoya, A. (2011)** under the title of sources of social support among international college students in United states, this particular study has provided the

evidence as a necessity of social support; Akabri, E. 2011 reported that in the presence of support while pursuing their goals, students were found to feel happier and were motivated to achieve their goals.[13]

**Lievens, F. et al (2002)** attempted to study personality characteristics and academic stress among medical students by using NEO-PI-R, he found out that students were high on extraversion and agreeableness, and students with conscientiousness were less likely to clear examination successfully. He also mentioned that high extraversion will be beneficial for collaboration with a team, communication skills and student's life and even after becoming health professionals.[14]

### 3. OBJECTIVE OF THE STUDY

1. To assess the various psychological variables (Intelligence Quotient, Aptitude for English Language, Emotional Intelligence,) for the purpose of identifying problem solving needs.
2. To assess the various psychological variables (Motivation, Communication, Listening Skills, Personality Organization, Stress and Stress Coping Strategies) for the purpose of identifying problem solving needs.

### 4. METHODOLOGY

#### (A) Research Design

Knowledge has its origin in depth, but this becomes much more refreshed when it is clubbed with observation and analysis through experimentation. Through research we try our level best to develop the world of knowledge in order to signify its existence with current reality of world. It is a descriptive research which is intervention based and prospective in nature.

Considering this study, we will choose this title in order to help our students of different medical, dental & paramedical sciences with reference to developing a psychosocial support.

This study has been conducted on 1st year undergraduate students (2018-19) of MBBS, BDS & PARA MEDICAL (B.O.T, B.P.T, B.M.L.T., BSC. Nursing, BM.R.D.I.T & G.N.M) batch.

#### (B) Sample

Since this study will be intended to work for the benefit of the students, therefore all the 1st year students of batch viz. MBBS, BDS, Para medical (BOT, BPT, GNM, BSC NURSING, BMRDIT, BMLT) 2018-19 Batch will be taken. After fulfilling the consent form students will be examined. Total sample size comprised of 81 from M.B.B.S, 88 from B.D.S. and 203 from Paramedical courses, thus 372 students.

### 5. DATA COLLECTION TECHNIQUES / ASSESSMENT MEASURES

This study has been conducted in three phases. During first phase, a multiple-choice questionnaire comprising of 20 questions will be prepared and administered after establishing its reliability and validity. As a result, all the related responses will be collected. Then study proceeded to second phase. It will be referred by administration of above listed tests. During the initiation of second phase, when English aptitude will be concluded then the development of groups comprising of one leader (better scores in English aptitude) and few other students. This structure helped the student in improving their communication skills. After collecting the data by the administration of aforesaid psychological tests, the study entered in third phase.

**Observations:** Observation of this study will be reported through various tables and diagrams.

**Laboratory Investigation:** The investigation procedure employed in this study has been collectively in terms of administering psychological tests and checklists in groups except individual counseling in clinic of department.

### 6. PROCEDURES

To gather the information for data collection, various types of questionnaire and checklist will be administered, and responses will be taken on the basis of either multiple choice question or yes or no on different rating scales.

### 7. RESULT & DISCUSSION

Total students who participated were 372, out of which 81 were from MBBS group, 88 were from BDS group and 203 were from para medical group.

**Table 1: Showing the batchwise strength of total sample**

M.B.B.S	81
B.D.S	88
PARA MEDICAL	203
TOTAL STUDENTS	372

**Table 2: Showing comparative profile of responses on 62-A Multiple choice questionnaire for all the students.**



QUESTION	OPTION A	OPTION B	OPTION C	OPTION D
1	5%	41%	52%	2%
2	5%	26%	48%	21%
3	30%	16%	35%	19%
4	27%	5%	39%	29%
5	10%	53%	22%	15%
6	12%	50%	28%	10%
7	7%	14%	76%	3%
8	24%	47%	9%	20%
9	21%	44%	13%	22%
10	13%	33%	44%	10%
11	12%	15%	3%	70%
12	51%	36%	7%	5%
13	15%	13%	61%	11%
14	12%	10%	72%	6%
15	65%	22%	2%	11%
16	9%	26%	62%	3%
17	8%	27%	62%	3%
18	10%	40%	42%	8%
19	8%	29%	60%	3%
20	65%	22%	4%	9%

Table 3: Showing frequency distribution of overall students as per their level of Intelligence

	Frequency	Percentage
BELOW AVERAGE	55	20.1
AVERAGE	102	37.2
ABOVE AVERAGE	76	27.7
SUPERIOR	41	15.0
TOTAL	274	100.0

Table 4: Showing frequency distribution of all the students as per their English Aptitude.

LEVEL	SPELLINGS	SENTENCES	TOTAL

			SCORE
BELOW AVERAGE	49.7%	76.6%	31.8%
AVERAGE	19.2%	20.8%	42.6%
ABOVE AVERAGE	20.0%	1.6%	21.3%
EXCELLENT	11.1%	0.8%	4.2%

Table 5: Showing the frequency distribution of all the students as per their Emotional Intelligence

LEVEL OF EQ	FREQUENCY	PERCENTAGE
LOW	280	96.9
AVERAGE	8	2.8
HIGH	1	0.3

Table 6: Showing frequency distribution of all the students as per their Level of Motivation.

LEVEL	FREQUENCY	PERCENTAGE
VERY LOW	0	0%
LOW	0	0%
INDIFFERENT/NEUTRAL	26	9%
HIGH	232	80%
VERY HIGH	31	11%
TOTAL	289	100%

Table 7: Showing distribution of students as per their communication skills

	FREQUENCY	PERCENTAGE
INEFFECTIVE	0	0%
VERY INEFFECTIVE	0	0%
AVERAGE	18	10%
EFFECTIVE	139	79%
CONFIDENT	19	11%
TOTAL	176	100%

Table 8: Showing frequency distribution of students as per their level of Interpersonal (listening skills) skills

LEVEL	FREQUENCY	PERCENTAGE
VERY POOR	0	0%
POOR	49	27%
AVERAGE	127	72%
GOOD	1	1%
VERY GOOD	0	0%
TOTAL	177	100%

**Table 9: Showing distribution of students as per their level of stress.**

	FREQUENCY	PERCENTAGE
LOW	37	15%
MODERATE	127	71%
HIGH	33	14%
TOTAL	242	100%

**Table 10: Showing distribution of students as per their level of anxiety**

Level Of Anxiety	FREQUENCY	PERCENTAGE
LOW	41	17%
VER LOW	20	8%
NORMAL	58	24%
HIGH	40	16%
VERY HIGH	84	35%
TOTAL	243	100%

**Table 11: Showing distribution of students as per their level of depression.**

Level Of Depression	FREQUENCY	PERCENTAGE
NORMAL	118	48%
BORDERLINE	27	11%

MILD	53	22%
MODERATE	33	14%
EXTREME	13	5%
TOTAL	244	100%

**Table 12: Showing distribution of students as per Stress Coping Level.**

LevelOf stress coping	FREQUENCY	PERCENTAGE
POOR	9	4%
AVERAGE	214	87%
GOOD	22	9%
TOTAL	245	100%

## 8. CONCLUSION

The study's findings suggest that the day students enter medical school, we should begin providing them with psychosocial precautionary measures that include education about their daily functioning and time management so that they can make the most of their time. We should also provide them with information about the right attitude to take advantage of the facilities available to them, so that they can improve their intelligence. Stress, anxiety, and other discomforts must be dealt with by students. We hope to raise public awareness of this issue and recommend a psychological assistance plan for those who need it most. All students should be brought up to grade level so that they can comprehend the lecture material and score well on the English quizzes based on grammatical orientation in the first year. Students should be encouraged to present their subject-related themes and engage in quiz-based tests by their subject professors. Additionally, we must consider each student as a unique individual with his or her own set of personal challenges, such as difficulties adjusting to college life, relationships with family and friends, and other concerns. It is also advised that common problems like depression and long-term psychological conflicts be addressed by grouping pupils so that their time may be better controlled for individual issues like cognitive behavioral treatment. Students who are receiving regular assistance, however, have no issues recovering from common day-to-day issues within 3-5 sessions twice a week, whereas students who aren't receiving regular assistance, however, have issues recovering from issues like depression and poor self-management, which can take anywhere from 1-3 months to resolve. The issue has always come from the students' perspective, as some were hesitant to continue and others were unable to. They were

unable to evaluate their adjustment profile because of their lack of appreciation for the intervention's usefulness as a result of this attitude. It is strongly essential that teachers keep an eye on their pupils and provide them with comments on a regular basis.

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