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ANALYSIS OF THE QUALITY OF LIFE OF NURSING STUDENTS IN A UNIVERSITY OF NORTHEAST BRAZIL

 *1Francisco Rosemiro Guimarães Ximenes Neto, ¹Francisco Diogenes dos Santos, ¹Luiza Jocymara Lima Freire, ¹Vitória Ferreira do Amaral, ¹Eliany Nazaré Oliveira,
 ¹ Maristela Inês Osawa Chagas Vasconcelos, ¹ Izabelle Mont' Alverne Napoleão Albuquerque, ²Carmen Elizabeth Kalinowski and ²Isabel Cristina Kowal Olm Cunha

> ¹State University of Vale do Acaraú (UVA), Sobral – Ceará, Brazil ²Federal University of São Paulo (UNIFESP), São Paulo – São Paulo, Brazil

| ARTICLE INFO | ABSTRACT | |
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| Article History: Received 11 th December, 2017 Received in revised form 19 th January, 2018 Accepted 01 st February, 2018 Published online 30 th March, 2018 | The process of university training of Nursing students requires a workload that involves numerous face-to-face classes, hours of individual study, besides the involvement with research and extension activities, which can be inferred in their quality of life. However, this study aimed to analyze the quality of life of Nursing students of a university in the Northeast of Brazil, based on an exploratory-descriptive study, under a quantitative approach, carried out with 106 Nursing students of the Undergraduate Nursing Course of the State University of Vale of Acaraú (UVA), | |
| <i>Key Words:</i> Nursing, Nursing Education, Nursing students, Quality of life | Sobral-Ceará - Brazil, during the period from September 2014 to April 2015. The data collection was performed using the Quality of Life Index of Ferrans and Power. The results show that students present a good quality of life, having seen the high degree of satisfaction, with high averages in all domains, mainly in the family domain. However, there is a need for university spaces that welcome students' cultural diversity in a holistic and cross-cultural way. | |

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INTRODUCTION

The quality of life of university students, especially those of Nursing, has been the focus of several analyses and studies, in order to identify stressors in the daily routine of teaching, which impacts on their health and, consequently, the quality of life. their lives. Students often come to the university under strong pressure and stress from the entrance exam, bringing countless expectations and desires that are in keeping with the new reality they are experiencing as university students (Almeida, Espírito Santo, 2012). The term quality of life was first used in the United States of America (USA), shortly after World War II, with the purpose of describing the material goods conquered after the war. Next, the concept was expanded with the intention of comparing the development and economic power of the various nations, through economic indicators such as per capita income and Gross Domestic

**Corresponding author:* Francisco Rosemiro Guimarães Ximenes Neto, State University of Vale do Acaraú (UVA), Sobral – Ceará, Brazil. Product (GDP). Over time, it has also embraced the social concept and attributed growth through other indicators, such as education, housing, spirituality and health(Almeida, Espírito Santo, 2012; Arronqui et al., 2011). However, despite the various studies on the quality of life, there is still no consensus on its definition that can sum it up symbolically, as it pervades several individual aspects of each human being. However, there has been a growing appreciation of the issues related to quality of life to the concept of health, to the detriment of the concept of "absence of disease" to a broader one, which psychological physical involves: aspects, level of independence, relationships social, the environment and spirituality (Moura et al., 2016). From these premises the World Health Organization (WHO), through its Division of Mental Health defined the quality of life as, "the individual's perception of his position in life in the context of the culture and value system in which he lives and in relation to their goals, expectations, standards and concerns" (WHO, 1994). In this perspective, studies point out situations that do not



promote the quality of life among Nursing students, since in the process of adaptation that requires admission to university, they may experience financial, family, psychological, social problems, other teeth; as well as, in their insertion in the field of practice, to face moments of pain, suffering and death. Such situations can provoke in the student feelings of fear, anxiety, anxiety and stress, due to his inexperience of life (Oliveira, Mininel, Felli, 2011; Bampi et al., 2013). It is also worth mentioning the lack of spaces within the universities for the reception, the leisure, the coexistence with the other students, besides the lack of support to face the situations lived, lack of valorization of the developed activities, excessive time load of the course and relation teacher-student deficit (Arronquiet al., 2011). Thus, from this context to which the students are submitted, the present study aims to analyze the quality of life of Nursing students of a University of the Northeast of Brazil.

MATERIALS AND METHODS

An exploratory-descriptive study, conducted under a quantitative approach, was carried out with 106 Nursing students regularly enrolled in the Undergraduate Nursing Course of the Vale do Acaraú State University (UVA), Sobral – Ceará, Brazil, from September 2014 to April 2015. In order to collect the data about obtaining the Quality of Life Index, the Quality of Life Index of Ferrans and Power instrument was adapted and translated into Portuguese (Ferrans, Powers, 1992; Kimura, Silva, 2009). Such an instrument consists of 33 items, which in each part, to which subjects attribute values on an increasing, scale of satisfaction and importance, ranging from 1 to 6. In the first part, the scale varies from very dissatisfied (1) to the very satisfied (6) and in the second, of no importance (1) the very important (6)"(Ferrans, Powers, 1992). These 33 items are thus distributed in four dimensions (subscales):

- Health/functioning (13 items): health, health care, pain, energy (fatigue), physical independence, control over one's life, long life, sexual life, family responsibilities, being helpful to people, concerns, leisure activities, possibility of happy future;
- Socioeconomic (8 items): friends, support of people, neighborhood, place of residence, work/not having work, schooling, financial needs;
- Psychological/spiritual (7 items): peace of mind, faith in God, personal goals, happiness, satisfaction with life, personal appearance, with self;
- Family (5 items): family health, Children, family happiness, Spouse, family support.

To obtain the Quality of Life Index, the following formula was used: $QLI = [(SAT rec x IMP) of each item \div number of items$ answered] + 15, where: SAT rec = recoded value of each satisfaction item (- 2.5 to +2.5). IMP = gross value of each item of importance (1 and 6) (Correa, 2011). The results of the scores were grouped by domain, ranging from zero to 30 points, divided into the Health/Functioning, Socioeconomic, Psychological/Spiritual and Family domain, with the lowest and highest values found and the average of the instruments applied. The data were organized using Excel 8.0 software and processed in the statistical software IBM Statistical Package for Social Sciences (SPSS) version 20.0. During the development of the study, the ethical and legal aspects of the research were observed according to Resolution No. 466/2012 of the National Health Council (CNS), with protocol submitted to the Committee of Ethics in Research (CEP) of Vale do

Acaraú State University (UVA) under CAE No. 50965515.8.0000.5053, which was approved by the opinion No. 1,385,277.

RESULTS AND DISCUSSION

Quality of Life Index (QoLI) of Nursing Students of a Public University of the Interior of the State of Ceará

Table 1 shows the QoLI averages of Nursing students of a State Public University of the State of Ceará / Brazil, divided according to the domains of the Ferrans and Powers Quality of Life Assessment Instrument (Ferrans, Powers, 1992).

 Table 1: Quality of Life Index (QoLI) of Nursing Students generated by each domain

| Domain | Minimum | Average | Maximum |
|-------------------------|---------|---------|---------|
| Health/Function | 2.50 | 22 | 29.54 |
| Socioeconomic | 18 | 21.68 | 24 |
| Psychological/Spiritual | 6 | 23.85 | 30 |
| Family | 6 | 24.40 | 30 |

The data presented in table 1 are derived from the calculation of the scores, where "each item of satisfaction is weighted by its correspondent of importance. This results in combined values, the highest represent high satisfaction and high importance and the lowest, low satisfaction and high importance. This scoring scheme is based on the premise that people who are satisfied with areas they consider important enjoy a better quality of life than people who are dissatisfied with areas they consider important"(Ferrans, Powers, 1992). Values oscillation were verified in all domains, mainly in the Health/Functioning domain, where the lowest value was close to the minimum value of the instrument, while some subjects considered their satisfaction and importance to excellent health, approaching the maximum value of the instrument. This fact generated a relatively high average score. However, the low minimum value in the health domain, which takes into account health care, pain perception, energy (fatigue), concerns, sexual life, leisure activity, among others, can be justified by the excessive workload, with a large volume of undergraduate and extracurricular and even labor activities, which produces sleep and energy deficits.

Studies on quality of life of nursing students present similar results (Moura, 2016; Oliveira, Mininel, Felli, 2011) and point to course overload as a factor of negative influence on students' quality of life. Research points out as a result of this overload factors such as: stress, physical and mental exhaustion, body aches, discouragement, anxiety, headache and migraine, drop in immune resistance, colds and flu, irritation, disinterest, gastritis, among others, being the most stress referred by the students (Oliveira, Mininel, Felli, 2011). The socioeconomic domain had the highest minimum value, 18 points, but its average score was the lowest, this results from the maximum value of this domain being the lowest when compared to the other domains, being, therefore, the domain of lower oscillation, which suggests a certain homogeneity regarding the economic situation of the nursing students of the sample. This fact can be justified by the fact that these students have the financial support of the family during graduation, which is not always able to meet their needs and expenses, mainly in relation to leisure activities and quality of life; This fact was also observed in a study that aimed to know the perception of quality of life of 56 nursing

students from the College of Health Sciences of the University of Brasília (Bampi et al., 2013). The Psychological/Spiritual domain, as well as the Family domain, presented a minimum value of six scores and a maximum value corresponding to 30, although the means of these two domains differ, since the mean was not calculated from the minimum and maximum value of each but the sum and division of the scores of all the instruments applied. This result demonstrates a higher degree of student satisfaction with family and family support than with their spirituality and self-satisfaction. It should be emphasized that facets such as: personal beliefs, positive feelings, self-esteem and self-image, evaluated by the Psychological/Spiritual domain, are factors that favor the students' quality of life. In an integrative review study about the mental health of the student of Nursing, it was verified that at different moments of life are permeated by factors that cause stress, a phenomenon not unlike his academic trajectory, in which students experience feelings of fear, frustrations, tensions, anxieties and anxieties that can lead to pathological disorders if adaptation does not occur. In the specific case of Nursing students, the moment of clinical practice is a potentiator of the occurrence of these disorders (Correa, 2011).

Regarding spirituality, studies point out that religion is an escape from students to the overloaded routine of the course, so that they forget the problems and distract themselves; but as evidenced in this study, spirituality presented a low satisfaction score, which can be attributed to the overload of academic activities, generating fatigue and fatigue among students, who prefer to rest to religious meetings/beliefs (Sousa et al., 2013). The Family domain, which evaluates health and family support, presented the highest average score, 24.40 points, which shows that although most of the students are temporarily away from the family, they receive a good family support, favoring the facing difficulties. Studies already carried out on the quality of life of Nursing students show that family support is directly related to academic and professional success, since it will be able to deal with situations that do not promote quality of life, namely insecurity, fear, anguish, which prepares the student for his acting as an academic and soon after as a professional. It stresses that the family represents the pillar of the life of any human being, and that peaceful coexistence and mutual support for overcoming future problems is important (Espiridião et al., 2013).

Conclusion

The analysis of the quality of life of nursing students allows, from the subjectivity attributed to it, to affirm that these students have a good quality of life, having seen the high degree of satisfaction, with high averages in all domains, mainly in the Family domain. However, in spite of this result, it is necessary that new investigations about the quality of life be carried out in order to identify problems that compromise the quality of teaching and, consequently, the formation of nurses capable of dealing with the daily life of their care and of the care of its clientele - families, subjects and communities. The results expressed herein allow us to identify factors that do not promote the quality of life of university students, specifically those of Nursing, which may cooperate in the formulation of strategies aimed at resolving conflicts that affect the quality of life and provide physical, emotional, family and psychological. However, it is essential that universities become aware of their role not only in the technical, but also socio cultural training of the nurse, taking into account the reflexes in the professional career of the students. Strategies that favor quality of life should be encouraged, both among teachers and students, through the development of groups, leisure spaces, moments of coexistence, among others; which will undoubtedly provide favorable conditions for coping with the future uncertainties that will be experienced when they leave university.

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