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## QUALITY OF CONTEMPORARY STUDENTS LIFE AND LIFESTYLE

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**Abstract.** *Quality of life is a concept, and at the same time, one of the basic concerns of all the management systems of modern society. Quality is a concept that refers to a subjective attitude of man, from the perspective of his intelligence and relates to human needs and desires. In order to improve the quality of life, any society creates an increasingly complex infrastructure through which all the multidimensional aspects of life are pursued. This was due to the fact that modern man is aware that all aspects contribute to the definition of his quality of life, both as an individual, as a member of human society, and as a universal entity. In the present research, we proposed a study on the evaluation of indicators related to the quality of life of students and the way in which students self-appreciate their lifestyle. The standardized questionnaire on quality of life - SF-36, was applied to a sample of 250 students from non-profile faculties within three higher education institutions: "Alexandru Ioan Cuza" University of Iasi, Romania; "Vasile Goldiș" Western University of Arad, Romania and the State University of Moldova, Chisinau, which aimed to assess the indicators regarding the quality of life of students, as well as the level of self-assessment of their healthy lifestyle.*

**Keywords:** *quality of life, health, students, lifestyle, physical and emotional well-being.*

**Introduction** The term quality of life was defined by economist John Kenneth Galbraith and sociologist Arthur Schlesinger, and was later developed by the futurist Bertrand de Jouvenel, later the definition of quality of life appeared in the dictionary by Alexander Szalay (1980). K. Schuess was the first to use the quality of life as a "reinforced" notion in the study "Quality of Life Research and Sociology", along with J. Fisher, who mentioned this term in the "Annual Review of Sociology", no. / 1985 [8].

The proper studies of the quality of life appeared a little later in the field researched by sociologists, although it was already used in some works, without giving much importance to its significance. This term was proposed by the American sociologist C.W. Milles, as a main target in sociological studies

in the late 1950s, without knowing its linguistic meaning.

As a notion, the "standard of living" dates back to the 1960s when the North American information society, based on the idea that the reason for economic growth does not require the formation of an autonomous goal, but, as a priority, can be the means to create more favorable conditions for a better life, in order to meet the appropriate requirements to live in the community.

According to Robert Stebbins's definition, lifestyle is "a distinctive set of shared patterns of behavior, which is organized around a coherent set of interests or social conditions, or both, which is justified and explained by a set of values", attitudes and orientations, and which, under certain conditions, becomes the basis for a common social identity of those who share it" [1].

We can say that certain characteristics make up the formation of a "lifestyle", characteristics related to individual data such as temperament, character traits and baggage of cultural knowledge, but of course with the stage of society development. The lifestyle is largely reflected in the qualitative programming that each individual organizes, performing the multitude of actions in a specific style through different behavioral combinations (personal clothing, how to communicate, etc.).

R. Mukherjee Ramkrishna considers that the standard of living and lifestyle are nothing but components of the way of life [3].

The way of life refers to the community, and the "lifestyle" can be typical of both the community and each individual. Scientists investigating this phenomenon face here the impediment to the logic of these terms. A difference from a methodological perspective, was analyzed by C. Zamfir, as the lifestyle seen as a descriptive model - the way of nation life of which it is part (for example the way of life of Moldovan citizens); according to a descriptive and / or predictive model - initiated with the help of the grounded benchmark (the way of life of a social group); the way of life according to an internal model and structure - the belief of the life way and according to the guiding type as a principle of its orientation [4].

Quality, in general, is a principle with reference to the individual and his positive parts, the part of judgment from the point of view of his intellect and personal interests and needs, human desires and ideals [2]. The standard of living is a term, we can say recently, used in the terminology of science that deals with human society, the expression penetrating not only in terminology, but also in the major structural issues of some disciplines. The Frenchman Bertrand de Jouvenel, the scientist who grounded the theoretical and systematic idea of "quality /

standard of living" started from the following conception: "quality / standard of living" follows the way in which the individual designs his organization of existence, construction of a pleasant character and the attractiveness of the existential factors" [7]. Quality of life is a concept and at the same time one of the basic concerns of all the management systems of the modern society. In order to improve the quality of life, any society creates an increasingly complex infrastructure, through which all the multidimensional aspects of life are pursued. This was due to the fact that modern man is aware of all aspects that contribute to the definition of his quality of life, both as an individual, as a member of human society, and as a universal entity.

**The purpose.** The research aims to evaluate and assess the quality of students non-profile life.

#### **Research objectives:**

- Identification of the sample of students - respondents for the application of the standardized questionnaire SF-36;
- Evaluating and assessing the quality of non-profile students life;
- Identify the level of self-esteem of students' healthy lifestyle.

**The methods.** The following methods were used in the research: sociological survey, mathematical-statistical method, comparative analysis and graph. The standardized questionnaire for assessing the quality of life (SF-36) was applied to a sample of 250 students (110 girls and 140 boys) from higher education institutions: "Alexandru Ioan Cuza" University, Iasi, Romania; "Vasile Goldiș" Western University, Arad, Romania and the State University of Moldova, Chisinau, between March and April 2021.

#### **Results and discussion**

According to the recommendations of the World Health Organization (WHO), the criteria for characterizing and analyzing quality of life are [5]:

| No. | Criteria              | Components   |
|-----|-----------------------|--|
| 1.  | Physical              | Physical well-being, health, physical mobility, adequate nutrition, availability of free time, good quality medical care, health insurance, favorite leisure activities (hobbies and their satisfaction), optimal fitness.   |
| 2.  | Psychological         | Happiness, self-satisfaction, sense of self-worth, avoidance of excessive stress, self-esteem, richness of spiritual life, sense of security.  |
| 3.  | Level of independence | Autonomy in life, ability to make personal choices, ability to make decisions, personal self-control, presence of clearly defined values and goals, self-management in life, dependence on drugs and medical treatments.   |
| 4.  | Social life           | Existence of a status and social role, acceptance in different social groups, accessibility of social support, stimulation of the work climate, participation in community activities, activity in non-governmental organizations, membership in a spiritual-religious community. Degree of joy of intimacy, affection, friends, social contacts, social support (dimensions of social support). |
| 5.  | Environment           | Job security, adequate income, adequate food, ecology, employment, property, ownership (real estate), housing, professional competence, professional fulfillment, education levels appropriate to the profession, right to vote, right to property, access to education and culture, the right to a speedy and fair trial.   |
| 6.  | Spirituality          | Religion, conceptions and attitudes.   |

In this research we will focus specifically on the criteria related to the physical well-being of students, including healthy lifestyle, defined as prosperity, flourishing, well-being and represent the level of expression of satisfaction. It crowns all the appreciations on the various aspects of personal life, of the changes and their results, of the favorable conditions that ensure the development of life. Welfare, aspiration and effect are essentially the balance between mind, body and spirit, achieved through the action of all determinants, to maintain health, ensure prosperity and personal happiness. Approached from the point of view of health, well-being is a successful combination of all types of health, being likened to a complex

image of life, in which the components are found [2].

WHO defines health as the absence of disease in combination with physical, psychological and social well-being [5]. Some authors state that health is the process of maintaining and developing the physiological, biological and psychological functions, the optimal social and work activity, the maximum duration of the creative process [3].

The development of higher education in the conditions of contemporary society has considerably intensified the intellectual effort of students, by increasing the flow of information, the wide implementation of information technologies in the training process. These conditions have generated the

sedentarization of the modern student's way of life, associated with the process of continuous complication of learning and overwork tasks.

The SF-36 standardized questionnaire, applied to research students, allows the assessment and analysis of life quality according to the following criteria: physical functioning (PF), which reflects the degree to which physical condition limits physical activity (self-care, walking, climbing stairs, transport with heavy loads, etc.); physical role play (RP) - the influence of physical condition on daily role play activities (work, daily tasks); pain intensity (body pain - BP) and its effect on the ability to engage in daily activities, including household chores and away from home; general health (GH) - an assessment of the current state of students health; vital activity (VA) involves the feeling of being full of strength and energy or, conversely, exhausted, low vital activity;

social functioning (SF) is determined by the degree to which a physical or emotional state limits social activity (communication); role-based functioning due to emotional state (role-emotional - RE) involves assessing the degree to which emotional state interferes with performance at work or other daily activities (including time consuming, decreased workload, reduced quality, etc.); mental health (MH) characterizes mood, the presence of depression, anxiety and a general indicator of positive emotions [6].

At the same time, in the appreciation of the life quality, a major importance has the subjective opinion of the person, who meets the objective and subjective factors that characterize his style and quality of life.

The analysis of the results obtained from the application of the questionnaire reflects the following data for each parameter (indicator), as follows:

| Indicator   | Boys      | Girls     |
|---|-----------|-----------|
| Physical functioning (PF)   | 85,9±0,1  | 87,6±0,1* |
| Physical role play (RP)   | 64,1±0,1* | 55,4±0,1  |
| Pain intensity (body pain - BP)                                     | 62,9±0,1  | 73,9±0,2* |
| General health (GH)   | 73,7±0,1  | 82,4±0,1* |
| Vital activity (VT)   | 61,9±0,1* | 57,2±0,1  |
| Social functioning (SF)   | 74,1±0,1  | 74,2±0,1  |
| Role-based functioning due to emotional state (role-emotional - RE) | 55,5±0,1  | 66,4±0,1* |
| Mental health (MH)  | 63,6±0,1  | 69,2±0,1* |

Note. Significant differences \* -  $P < 0,001$

The analysis of the **PF (physical functioning)** indicator showed that the respondents' subjective appreciation of daily physical effort, which is not limited by health problems, is higher in girls than in boys ( $P < 0,001$ ). At the same time, the **RP (physical role play)** parameter was rated higher by boys. This can be explained by the fact that women are more concerned about their health and are characterized by anxiety,

pessimism and attention to their own problems.

Starting from the fact that the subjective assessment of the indicators **BP (pain intensity)** and **GH (general health)** is influenced by similar factors, their indices were higher in girls.

**VT (vital activity / vitality)**, which is related to energy and joy of life, was highly valued by boys, while the results of the **SF**

(**social functioning**) indicator, which refers to the self-assessment of the level of interaction with friends and colleagues, does not differ much in the two groups of respondents.

The **RE** parameter (**role-based functioning due to the emotional state / role-emotional**), reflects the extent to which the emotional state influences the daily activity. In this context, girls rated it higher than boys, as the personality traits of girls influence the appreciation of this parameter.

The analysis of the results obtained when assessing the parameter **MH (mental health)**, shows that its self-esteem is higher in girls.

At the same time, the data analysis showed a high level of healthy living in 8.7% of the responding students: of which, 3.8% - boys, 4.9% - girls. This way of life includes: at least 3 times a week performing physical activity activities, and daily use of its forms, such as: morning gymnastics, cold shower, observance of the personal hygiene rules, etc.

The average level of healthy living is characteristic for 36.7% of the responding students (17.9% - boys, 19.7% - girls), in whose life there are some characteristics of the healthy lifestyle, and the activities of physical culture are episodic.

The low level of healthy living is characteristic for 48.8% of the responding students (30.1% - boys, 18.7% - girls), they have an indifferent attitude towards healthy

living, practically do not use the means of culture physical or do it to a small extent and quite rarely (walks, outdoor games).

The very low level of healthy living is characteristic of 4.9% of students (2.8% boys and 2.1% girls), they have a passive or negative attitude towards healthy living, considering it useless or impossible to achieve in the current conditions.

In **conclusion**, we can mention that at a number of parameters, such as **PF (physical functioning)**, **GH (general health)**, **SF (social functioning)** and **RE (role-based functioning due to emotional state / role-emotional)** the results are higher in girls category. This can be explained by a number of factors: the ability of girls to rationally organize their daily routine, thus minimizing the discomfort associated with the time crisis, a factor that significantly influences the emotional state of students; the more responsible attitude of the girls towards the study process, having a higher level of motivation and certain stereotypes in behavior.

At the same time, we can mention the predominantly low level of healthy living of the responding students, which imposes the need to further promote the concept of healthy lifestyle among students, including the role of movement and physical culture in maintaining health and result, of the life quality of contemporary students.

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