Relationship Between Health Related Quality of Life and Academic Achievementof Females in Selected Senior Secondary School of Rural Delhi

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Abstract

The research literature on Health related quality of life and academic achievement as it relates to human health is vast and growing. Findings of present study reveal that there is no significant co-relation between "Health related quality of life and academic achievement" butQuality of life and health status can be influenced through effective education system, especially in the developing nations like India. Academic performance in terms of scores will not have the influencing effect on the health status, whereas, quality of education, opportunity for children to experience school education and facilitation of schools as a medium for enhancing quality of life and health status through effective health promotion programs and policies can add-on to the larger dimension towards improving the status of youth in India. The current emphasis on the academic achievements scores through tough examination systems and continuous evaluation programs for monitoring academic curriculum progress will have least influence on proving quality of life to the present youth, apart from making them eligible for pursuing professional courses and career opportunities.

Keywords: Education,Health,Quality of life

Introduction

Health is an important determinant of a person's quality of life although it is not the only one. Other factors such as culture, religion, environment, education and finance can also affect quality of life but they are often beyond the scope of health care. Health-related quality of life (HRQOL) is the main concern of health care professionals and is becoming an important health outcome indicator (Greenfield and Nelson,1992; Wilson and Cleary, 1995; Lam,1997). As pointed out by Guyatt et.al.(1993),Health related quality of life is a concept that tries to embrace the spirit of the WHO definition of health(including physical,emotional and social wellbeing) (who1948) by including both personal health status and social wellbeing when assessing health. Evaluation of Health related quality of life should be subjective, as the person being assessed rates his own status (Lam 1997).

Salami (2001) emphasised on 'academic behaviour' as something of great importance to parents, teachers and students themselves. Even the larger society is aware of the long term effects of positive or negative academic behaviour since graduates from educational institutions are expected to shape the destiny of society. Unfortunately academic behaviour of students is becoming worrisome and this has remained a matter of grave concern to many educationists (Aremu, 2001). These students have many obstacles to overcome in order to achieve their optimal academic performance (Womble, 2003). This creates a need to investigate the relationship between health related quality of life and academic achievement among senior secondary school level females. It is also essential to compare the health related quality of life and academic achievement of senior secondary school level females in Delhi. Reviews of various studies reveal significant relationships with academics and health parameters, but most of the studies give more reason to understand the relationship under different demographic conditions and different parameters leading to different conclusions of the similar issues.

Methodology

Selection of subjectsFor the purpose of the study, non -probability sampling was adopted where in the female subjects were identified belonging to the age category between 16-18 and studying in senior secondary school in Delhi. The following stages were incorporated towards selection of subject:

Identification of the Subjects

Girl students studying in Class XI were selected as sample for the study.

Participants

50participants were selected on the basis of snowball sampling(Non -Probability sampling technique). Only female subjects were made part of the study.Samples were selected from the schools of district North-West (B) of Delhi.

Selection of the variables

Sixteen variables related to Health related quality of life had been selected for the study:

1. Health,
2. Self-Esteem,
3. (3)Goals and Values,
4. Money,
5. Work,
6. Play,
7. Learning,
8. Creativity,
9. Helping,
10. Love,
11. Friends,
12. Children,
13. Relatives,
14. Home,
15. Neighbourhood,
16. Community

Tool for the Study

Health Related Quality of Life (HRQL) inventory by Frisch(1994)was used to assess the level of health related quality of life.Information of the participants were gathered via the information sheet after informed consents of the girl students. In the information sheet, data of the students include their name, gender, class, date of birth and academic achievement was gathered. The participant's performance in last examination was taken from their academic record. This represents the participant's academic achievement score.Administration of the QuestionnaireA valid and standardized questionnaire was administered by the research scholar to 50 female participants after informed consent and explaining the objective of the study. All subjects answered the questionnaire separately without consulting others. The subject were exhorted to provide realistic and true opinion and the research scholar assured the respondents that the information given by them would be kept confidential and utilized for the purpose of the study only.After establishing the scientific authenticity of the questionnaire, data wascollected.StatisticalProcedureCorrelationstatisticw ameasure the relationship between health related quality of life and academic achievement among senior secondary school level females ofrural Delhirecorded through administration of questionnaire.

Table No. 1: Descriptive Assessment of Quality of Life and Academic Achievement

Correlation: Point Bi-Serial *Variable*

1. Academic Score: Ratio scale
2. Quality of life Norm referencing: Interval

Descriptive Statistics	Mean	Std. Deviation	N
Health	1.9200	.72393	50
Academic	57.1800	17.58442	50
Correlation			**Academic**
Health	Pearson Correlation		-.166
	Sig. (2-tailed)		.251
	N		50

Table 1 reveals that mean value of health related quality of life is 1.9200 and standard deviation is .72393 of 50 samples. Mean value of academic achievement is 57.1800 and standard deviation is 17.58442 of 50 samples. The correlation scores of -.166 between health related quality of life and academic achievement reveals that there is no significant relationship between the HRQL and Academics.

Table No. 2: Correlation between Health related quality of life and academic achievement by using Non- parametric correlation method

Nonparametric Correlation: Spearmen rank correlation:

Academic achievement : RankQuality of life: Rank

			Rank of QOLI2	Rank of Academic
Kendall's tau_b	Rank of QOLI2	Correlation Coefficient	1.000	-.033
		Sig. (2-tailed)	.	.744
		N	50	50
	Rank of Academic	Correlation Coefficient	-.033	1.000
		Sig. (2-tailed)	.744	.
		N	50	50
Spearman's rho	Rank of QOLI2	Correlation Coefficient	1.000	-.062
		Sig. (2-tailed)	.	.669
		N	50	50
	Rank of Academic	Correlation Coefficient	-.062	1.000
		Sig. (2-tailed)	.669	.
		N	50	50

Table no.2 reveals that Kendall tau rank correlations between HRQL and Rank of Academics is -.033. The Spearman's rank correlation between HRQL and Rank of Academics is -.062. The non-

parametric statistics do not reveal significant relationship between the variables.

Discussion of Findings

Quality of life and health status can be influenced through effective education system, especially in the developing nations like India. Academic performance in terms of scores will not have the influencing effect on the health status, whereas quality of education, opportunity for children to experience school education and facilitation of schools as a medium for enhancing quality of life and health status through effective health promotion programmes and policies can add on to the larger dimension towards improving status of youth in India. The current emphasis on the academic achievement scores through tough examination systems and continuous evaluation programmes for monitoring academic curriculum progress will have least influence on improving quality of life to the present youth , apart from making them eligible for pursuing professional courses and career opportunities.

Conclusion

Academic performance score which are considered as an essential component to determine children success requires re-emphasises towards more essential parameters. Quality of curriculum, effective implementations of educational programs, scholastic and co-scholastic developments within children can be considered as provided more emphasises than mere academic scores, the later would help in promoting quality of life with components of health.

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