# Quality of Life of Students in the Epidemic Situation of Coronavirus 2019: A Case Study: Students in an Autonomous University

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#### **Abstract**

Background: The quality of life of students is a reflection of their well-being. The adjustment of students to study especially during the coronavirus disease 2019 epidemic situation has caused the teaching system to adjust to changing daily life patterns. Planning a student's life in terms of academic, health, and social life is important that students have proper planning. To provide students with a good quality of life in the university and success in learning.

Objective: To study the relationship between learning, health, and social lifestyle planning on the quality of life of students at an autonomous university in Thailand.

Methods: The study had a cross-sectional predictive correlational design and included 270 students in an autonomous university in Thailand. Descriptive statistics, Pearson's correlation coefficient, and stepwise multiple linear regression were used for data analysis.

Results: The overall quality of life of students' total mean was 3.50. The students had the highest level of quality of life in life planning. The overall lifestyle planning average was 3.42, with health lifestyle planning having the highest average. The social quality of life was positively correlated with educational quality of life (r=.231). Lifestyle planning accounted for 5.20 % of the variation in the quality of life.

Conclusion: Lifestyle planning affects the quality of life of students. This research, research was conducted during the study period in which the students were studying in an online format. Due to the policy of teaching in the government sector. The limitations of this research are Limited time storage and a study of information with a specific group of students The recommendation for further research is that the research model should be modified including qualitative research to get more complete information.

**Keywords**: Quality of life, Planning, Student.

# Introduction

Planning is an important starting point for students in higher education to provide

instruction that prepares them for their future careers. This makes teaching in higher education more intense, and students in higher

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education who need to adjust from studying in secondary school to university level good adaptation ensures that students can get a good education. However, if students have improper adjustment, it will affect students such as depression, and stress and lead to suicide. The 2019 coronavirus pandemic has forced students to adjust and plan their lifestyles in terms of education, health, and socialization. To provide students with a quality of life in learning quality of life in health Social quality of life and quality of life in planning so that students can adjust and can graduate according to the study plan.

Harvey and Green (1993) first began examining the multiple meanings of quality in higher education and outlined five overarching definitions exceptional, perfection, fitness for purpose, value for Money, and transformation. Given the origins of notions of quality and the complexities of the varied stakeholders involved in higher education, tensions emerged between approaches which focused assurance and accountability, and approaches that focused on the enhancement of educational processes and student learning (Chung Sea Law, 2010; Harvey and Williams, 2010; Houston, 2008; Kis, 2005; Krause, 2012). Stemming from concepts borrowed from industry, accountability was increasingly associated with a verification process that aptly rendered account to external groups such as accreditation bodies, government agencies, and the public. The enhancement-oriented approach focused on internal processes associated with student learning such as improvement of curriculum and the quality of academic programs (Williams, 2016).

In the context of university students, to be considered psychologically hardy, students must be able to overcome the psychological problems generated by stress which may affect their ability to study, and/or manage their lives effectively (Nguyen et al., 2012) Several studies have examined the role of hardiness in the attitudes and behaviors of university students. Cole et al. (2004) investigated the role of hardiness in students' attitudes toward motivated learning and found that students' hardiness affects initial learning, and post-learning, motivation. Research by Abdollahi et al. (2015) and Abdollahi et al. (2018) revealed that hardiness can help prevent stress and

suicidal ideation among undergraduate students, and can assist them with moderating the interrelationships between their problemsolving skills and their perception of stress. Research on the levels of hardiness and its components that are necessary for university students to experience success at university remains an unexplored area, however. For this reason, the overarching aim of this study is to employ a necessary condition analysis (NCA) to decipher these necessary conditions. The remainder of the paper presents a literature review on hardiness, quality of university life, quality of life, and learning performance, followed by research questions, methods, results, and discussion and implications.

In addition to education, The lifestyle of the students has changed a lot. self-care wearing a mask, social distancing, washing hands, and a more self-care lifestyle This new way of life (New normal) should continue to change. Student health The obvious impact of students on physical health was the study that had to change from studying at the university to studying at home. Sitting in front of a computer screen for hours a day spoils the eyes Eye fatigue, dry eyes, burning eyes, blurred vision, headache, and muscle aches. having to live in isolation and reduce social activities. Research reports have shown that fear, anxiety, and being alone No, society and others have all affected the well-being and mental health of people during the current situation of the coronavirus disease 2019 epidemic. that can be seen generally in various news media such as news of stressed students until the end of life. In addition, many students have symptoms such as stress, and social issues that affect students mainly, for example, the social shift from meeting to talking online. Society in the era of the coronavirus disease 2019 epidemic has made a huge change in our lives. Causing students to have a plan for daily life in education, health, and society to reflect the quality of life of students. The administrators or related parties can apply the research findings to create policies that are in line with the students' needs. Make students ready to study in life. and have a good quality of life in learning.

# **Methods Study Design**

This cross-sectional predictive correlational study was conducted on residents of the students in an autonomous university in Thailand from August 1 to October 30, 2021. Collect data from subjects who have given consent to participate in the research. Collect data from subjects who have given consent to participate in the research. The inclusion criteria for the sample consisted of students aged 18 years and over, capable of communicating, reading, listening, and giving consent to participate in the research. The researcher has informed about the risks. duration, and data collection from the research participants will be presented as an overview. and did not affect the respondents. The sample exclusion criteria were Those who are unable to participate in the research project throughout the project. The convenient sampling method was used, and the sample size was calculated using Taro Yamane. As such, we increased the number of samples by approximately 10% to anticipate the potential incomplete responses to the questionnaires. The total population is 826 students. The sample was based on probability sampling by the method of stratified sampling according to the proportion of the population.

#### Research Instruments

Three research instruments were employed in this study: (1) Sociodemographic questionnaires; (2) Information about student lifestyle planning; (3) Information about the level of quality of life of students.

# Sociodemographic Variable

Part 1 General information of the respondents, comprising 11 items, consisting of age, sex, religion, domicile, income, source of income, expenditure, living condition while studying, field of study, year, and cumulative grade point average.

# Information about student lifestyle planning

Part 2 Information about student lifestyle planning. The survey consisted of 3 aspects, education, health, and social. The questionnaire was in the form of a rating scale of 5 points, totaling 15 items. The questionnaire was a 5-level rating scale, the highest level was scored 5 points. Agree with the question on a high level, score 4 points; Agree with the

question at a moderate level, score 3 points; Agree with the question on a low level, score 2 points; Agree with the question at the lowest level, score 1 point. It is a tool created by the researcher from the literature review and by bringing the questionnaire to consult with experts. The Cronbach's alpha coefficient in this study was 0.86

Information about the level of quality of life of students

Part 3 Information about the level of quality of life of students which consists of 3 areas: education, health, social, and lifestyle planning. The questionnaire was in the form of a rating scale, 5 points, 20 items, with the respondents choosing to answer exactly the opinions at any level. The questionnaire was a 5-level rating scale, the highest level was scored 5 points. Agree with the question on a high level, score 4 points; Agree with the question at a moderate level, score 3 points; Agree with the question on a low level, score 2 points; Agree with the question at the lowest level, score 1 point. It is a tool created by the researcher from the literature review and by bringing the questionnaire to consult with experts. The Cronbach's alpha coefficient in this study was 0.90.

# **Data Collection**

Data were collected by using questionnaires. Data were collected from August 1 to October 30, 2021. We used a convenience sample of 270 students who were willing to participate in the study. The participants then signed a consent form, and each people spent around 10completing minutes the self-report questionnaires. Checked all questionnaires, and if an incomplete questionnaire was found, the participant was asked to complete the questionnaire. However, respondents who were not willing to participate could withdraw anytime.

# Data Analysis:

Analysis of personal data with descriptive statistics such as frequency and percentage, analysis of lifestyle planning and quality of life by frequency, percentage, mean and standard deviation. Analyze the relationship between life planning and quality of life of students with Pearson's correlation statistics. We also used stepwise-multiple regression analysis to

determine the predictive factors of the students' quality of life. P-value < 0.05 was considered statistically significant

## **Ethical Consideration**

The present study was approved by the Ethical Committee from Suan Sunandha Rajabhat University Committee certificate **Ethics** number: COA 2-016/2022 and the directors of five faculties. Each participant received explanations about the study and had their rights protected throughout, including confidentiality and the right to refuse or withdraw from the study. The participants also received information and signed a consent form.

#### **Results:**

# Characteristics of the Participants

Most of the respondents were 19 years old, 114 (38.00%) were female, 251 persons (83.70%) were Buddhist, 221 persons (73.70%) were domiciled, central region, and 109 persons (36.30%). Earn/month, most of them earn 5,000-10,000 baht, 129 people (43.00%) Expenditure Enough for 198 people (66.00%) The most income source from parents 162 people (53.60%). The place to stay while studying is a student dormitory for 145 people (48.30%). Most of them study in majors. In Public Health Sciences, 85 people (28.30%) were first-year students of 115 (38.30%) and most of them had the most cumulative GPA of 2.00-2.50, 148 people (49.30%) as shown in Table 1.

Table 1 Sociodemographic status of the student at an autonomous university in Thailand (n=300)

| Sociodemographic | Number | Percent |
|------------------|--------|---------|
| Age (years)      |        |         |
| 18               | 5      | 1.70    |
| 19               | 14     | 38.00   |
| 20               | 84     | 28.00   |
| 21               | 55     | 18.30   |
| 22               | 35     | 11.70   |
| 23               | 7      | 2.30    |
| Gender           |        |         |
| Male             | 49     | 16.30   |
| Female           | 251    | 83.70   |
| Religion         |        |         |
| Buddhist         | 221    | 73.70   |

| Christ   16,90   Other   1   .30   Domicile   North   22   7.30   Northeast   77   25,70   Central   109   36,30   Western   35   11,70   Eastern region   12   4.00   South   45   15.00   Income earned/month   under 5000   47   15,70   5,001 - 10,000   129   43.00   more than   124   41,30   10,000   Expenses   enough to spend   in debt   14   4.70   Source of income father   54   18,20   mother   73   24,50   parent   162   53,60   other   11   3,60   Condition   of residence while studying   student   dormitory   outer tower   90   30,00   Field of study   Applied   Thai traditional medicine   Department of public health   Department of medical and public health secretary   Science (Children's health care)   Science (Health and beauty subject)   Department of traditional Cannabis   13   4,30   5,70   Eastern   23,70   Eastern   24,50   Easter   |           |      |       |
|--|-----------|------|-------|
| Other         1         .30           Domicile         7         25.70           Northeast         77         25.70           Central         109         36.30           Western         35         11.70           Eastern region         12         4.00           South         45         15.00           Income         earned/month         45         15.70           5,001 – 10,000         129         43.00           more         than         124         41.30           10,000         Expenses         enough to spend         198         66.00           enough to spend         198         66.00         66.00           not enough to spend         198         66.00         66.00           spend         14         4.70         80         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         89         29.30         80         60.00  | Christ    |      |       |
| North  | Islam     | 51   |       |
| North  | Other     | 1    | .30   |
| Northeast  | Domicile  |      |       |
| Central         109         36.30           Western         35         11.70           Eastern region         12         4.00           South         45         15.00           Income earned/month         15.00         15.00           under 5000         47         15.70           5,001 – 10,000         129         43.00           more than 124         41.30           10,000         129         43.00           enough to spend not enough to spend not enough to spend in debt         198         66.00           spend not enough to spend in debt         14         4.70           Source of income father         54         18.20           mother         73         24.50           parent         162         53.60           other         11         3.60           Condition of residence while studying         48.30           student dormitory         0         30.00           house         65         21.70           Field of study         Applied Thai folional medicine         66         22.00           Department of medical and public health         66         22.00           Science (health care)         7         2.30   | North     | 22   | 7.30  |
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| care for the elderly)  Science (Health and beauty subject)  Department of traditional Chinese medicine  Department of public health and health promotion  Cannabis 13 4.30 science   |           |      |       |
| elderly)  Science (Health and beauty subject)  Department of traditional Chinese medicine  Department of public health and health promotion  Cannabis science  Science (Health 18 6.00 6.00 6.00 6.00 6.00 6.00 6.00 6.0   |           | 7    | 2.30  |
| Science (Health and beauty subject)  Department of traditional Chinese medicine  Department of public health and health promotion  Cannabis 13 4.30 science  |           |      |       |
| and beauty subject)  Department of 8 2.70 traditional Chinese medicine  Department of 71 23.70 public health and health promotion  Cannabis 13 4.30 science  |           | 10   |       |
| Department of traditional Chinese medicine  Department of public health and health promotion  Cannabis 13 4.30 science   |           | 18   | 6.00  |
| traditional Chinese medicine  Department of public health and health promotion  Cannabis 13 4.30 science   |           | 0    | 2.70  |
| medicine  Department of 71 23.70 public health and health promotion  Cannabis 13 4.30 science  |           | 8    | 2.70  |
| Department of public health and health promotion  Cannabis 13 4.30 science   |           |      |       |
| public health and health promotion  Cannabis 13 4.30 science   |           | 71   | 22.70 |
| health promotion  Cannabis 13 4.30 science   |           | /1   | 23.70 |
| Cannabis 13 4.30 science   | -         |      |       |
| science  |           | 12   | 4.20  |
|  |           | 13   | 4.30  |
| Major in   2   .70   |           | 2    | 70    |
|  | Major in  | 12   | ./0   |

| business          |     |       |
|-------------------|-----|-------|
| management health |     |       |
| administration    |     |       |
| Year class        |     |       |
| Year 1            | 115 | 38.30 |
| Year 2            | 91  | 30.30 |
| Year 3            | 52  | 17.30 |
| Year 4            | 42  | 14.00 |
| Cumulative GPA    |     |       |
| less than 2.00    | 2   | .60   |
| 2.00 - 2.50       | 73  | 24.70 |
| 2.51 - 3.00       | 148 | 49.30 |
| 3.01 - 3.50       | 76  | 25.30 |
| Currently         | 0   | 0.00  |
| studying in       |     |       |
| semester 1 – no   |     |       |
| grades yet        |     |       |

# Lifestyle planning

The overall picture of all three aspects of lifestyle planning had a total mean of 3.42 and a standard deviation of .45. The health lifestyle planning had the highest mean of 3.47 and a standard deviation of .45. .71, followed by social quality of life with a mean of 3.46 and a standard deviation of .61, followed by quality of life in education with a mean of 3.31 and a standard deviation of .66, respectively, as shown in the table. 2.

Table 2 Mean and standard deviation of life planning of students at an autonomous university in Thailand (n=300)

| Lifestyle planning             | <u>x</u> | SD. |  |
|--------------------------------|----------|-----|--|
| Overview of lifestyle planning | 3.42     | .45 |  |
| - Education                    | 3.31     | .66 |  |
| - Health                       | 3.47     | .71 |  |

| - Social | 3.46 | .61 |
|----------|------|-----|
|          |      |     |

Quality of life of students

The overall quality of life in all 4 areas had a total mean of 3.50 and a standard deviation of .30. The mean quality of life for health had the highest mean of 3.52 and a standard deviation of .58. Followed by the level of quality of life in lifestyle planning with a mean of 3.48 and a standard deviation of .59; a mean of social quality of life with a mean of 3.46; a standard deviation of .54; quality of life of education with a value mean 3.43 and standard deviation of .58 respectively as shown in Table 3.

Table 3 Mean and standard deviation quality of life of a student at an autonomous university in Thailand (n=300)

| Quality of life                                     | $\bar{\mathbf{x}}$ | SD. |
|---|--------------------|-----|
| An overview of the quality of life level            | 3.50               | .30 |
| -Level of quality of life in learning               | 3.43               | .58 |
| - Level of quality of life in health                | 3.52               | .58 |
| - Social quality of life level                      | 3.46               | .54 |
| - The level of quality of life in planning for life | 3.48               | .59 |

Lifestyle planning was low and positively correlated with quality of life in education (r=.231). The educational quality of life was low and positively correlated with quality of health life (r=.23). 114) and social quality of life had a low positive correlation with the quality of life planning (r=.115) as shown in Table 4.

Jatuporn Ounprasertsuk 6114

| Table 4 Pearson correlation coefficient during lifestyle planning and quality of life level of the student |
|--|
| at an autonomous university in Thailand (n=300)  |

| Variable                         | Study planning | Health planning | Social planning | Quality of life in education | Quality of life in health | The social quality of life | Quality of life in life planning |
|----------------------------------|----------------|-----------------|-----------------|------------------------------|---------------------------|----------------------------|----------------------------------|
| Study planning                   | 1              |                 |                 |                              |                           |                            |                                  |
| Health planning                  | .224**         | 1               |                 |                              |                           |                            |                                  |
| Social planning                  | .45            | .298**          | 1               |                              |                           |                            |                                  |
| Quality of life in education     | 027            | .100            | .231**          | 1                            |                           |                            |                                  |
| Quality of life in health        | .083           | .009            | 062             | .114*                        | 1                         |                            |                                  |
| Quality of life in social        | 091            | 040             | .004            | 014                          | 022                       | 1                          |                                  |
| Quality of life in life planning | .028           | 019             | .016            | 058                          | .042                      | .115*                      | 1                                |

Note \*It was statistically significant at the .05 level (p < .05).

The ability to explain variations in lifestyle planning and quality of life of students

Learning planning health planning and social planning. The variation in the quality of life

could be explained by 5.20%. It was found that health planning had the most direct impact on quality of life, as shown in Table 5.

Table 5 Regression coefficients of predicted variables and statistics of Life planning and quality of life of students

| Measure         |       | Unstandardized Stan Coefficients Coe |      | t     | p-value |
|-----------------|-------|--------------------------------------|------|-------|---------|
|                 | В     | Std.Error                            | Beta |       |         |
| Constant        | 1.509 | .300                                 |      | 5.037 | .000    |
| Study planning  | .000  | .022                                 | 022  | 037   | .970    |
| Health planning | .070  | .019                                 | .227 | 3.759 | *000    |
| Social planning | .012  | .025                                 | .027 | .483  | .629    |

p-value<0.05, R2=0.052, Adjusted R2 = 0.040, F=4.176

# **Discussion**

In this research, it was found that The students' lifestyle planning during the coronavirus epidemic was an average of 3.42 and the overall quality of life was an average of 3.50. Both the lifestyle planning and the student's quality of life were at a good level. It was found that social lifestyle planning had a low positive correlation with the educational quality of life at a statistically significant level of 0.05, and lifestyle planning could explain the variation in the quality of life at 5.20%

The quality of life of students is essential to student life. The results of this research are consistent with Hossain, Hossain, & Chowdhury. (2018) the results suggest that: "curriculum quality", "teaching competence", "service facility", and "service delivery" provided by a private university are positively related to "perceived value (PV)", while students' perceived satisfaction (SPS) is dependent on "service facility"; PV and SPS drive to students' "intention for continued education (ICE)", and ICE eventually improves the quality of students' lives. Additionally, PV and SPS are interrelated. The mediating roles of PV and SPS are also identified. With the evolving research in postsecondary quality and transformative learning, along with increasing demand for research in program development and higher education reform, it is increasingly important to better understand the impact of institutional structures and programmatic practices on student learning. As one of the study participant's remarked (Groen, 2021) This is because life planning is important in the various activities of students, especially adaptation during the spread of the virus. Good planning will enable students to adapt to the adjustments in teaching and learning, socializing, and, most importantly, health care. Healthcare planning is of the utmost importance, as research shows. If a student is infected with the 2019 coronavirus, it will affect the student in many aspects, whether it is academic. Staying connected with your friends on social media in different ways is why it's important to stay healthy. (Tho, 2019) The students must have a health plan. infection prevention studies spread of infection as well as the rapid and continuous vaccination process which makes this research different from previous research. to study the quality of life of students during normal times Not studied during the 2019 coronavirus epidemic. As well as the study by Groen. (2021) It was found that the quality of life of students in private universities depends on the teaching style of quality teachers. In this regard, teachers should give importance to students. Emphasis is placed on adapting to changes in the environment and the surrounding context. by taking into account the readiness of the learners as the main and in addition, equipment to facilitate students is important that can promote learners' learning as well. Planning a student's life is a starting point for students to have a plan of action that can make it easier for them to practice. Melles, Lodewyckx, & Hariharan. (2022)said educational institutions should relate to adaptation both from adapting within the university to keep up with the changing world adaptation, external which is uncontrollable factor. for the university to survive in the current crisis. which can meet the satisfaction of students is important. From these conclusions, it is pointed out that the quality of life of students is an important part that the administrators or related parties have to pay great attention to. Especially during the 2019 coronavirus epidemic, students need to adjust. Life planning in various areas, including education, health, and social to maintain quality learning safe health, and the ability to live with others appropriately In this regard, the quality of life of students is good, resulting in happy learning. and succeed in studying according to the goals of the students that have been set.

#### **Conclusion**

This research is a study of the lifestyle planning of students at an autonomous university in Thailand that need to be adapted to the teaching and learning system, health care, and socializing, which may affect the quality of life of students. The results of the research indicated that lifestyle planning affects the quality of life of students. However, the administrators of those involved must pay attention to planning the student's life accordingly. So that students do not stress and can plan a lifestyle in an appropriate form to provide students with the best quality of life.

# Limitation

This research is a survey result in only qualitative data and conducting a study of specific individuals limited study period. Therefore, there should be a qualitative research study to obtain complete information from diverse sample groups to lead to the creation of appropriate practice guidelines and should increase the study period. In addition, there should be a comparative study with student groups at each university. To find a way to promote student lifestyle planning during the 2019 coronavirus epidemic situation that is most suitable for students.

**Declaration of Conflicting Interest** 

The authors declare no conflict of interest.

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Jatuporn Ounprasertsuk 6116

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