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An Analysis of Quality of Life Among Post Graduate Teachers (PGT) By Using Whoqol: A Study in Sambalpur District, Odisha

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ABSTRACT: *The present study aims to analysis the quality of life (QoL) among Post Graduate Teachers (PGTs) in Sambalpur District, Odisha, using the World Health Organization Quality of Life (WHOQOL) assessment tool. The research focuses on understanding the various dimensions of well-being, including physical health, psychological health, social relationships, and environmental factors, that contribute to the overall quality of life of PGTs. Through a case study approach, data were collected from a representative sample ofPGTs across the district from nine higher secondary school in Sambalpur district and the WHOQOL-BREF questionnaire was administered to assess their perceptions andexperiences. The findings reveal significant insights into the challenges and stressors facedby PGTs in their professional and personal lives, highlighting areas for potential intervention and support. The study underscores the importance of addressing the holistic well-being of educators to enhance their quality of life, which in turn can positively impact their teaching effectiveness and the broader educational environment. The results of this research are expected to inform policymakers and educational institutions in developing strategies to improve the quality of life for teachers, thereby contributing to the overall improvement of the education system in the region. Additionally, the study highlights the need for targeted support programs, such as stress management workshops and mental health resources, to address the specific challenges faced by PGTs. Implementing these initiatives can lead to a more supportive work environment, further enhancing the overall educational outcomes in the district.*

Key Words: *Quality of life (QOL), Post Graduate Teachers (PGTs), WHOQOL-BREF,Physical Health, Psychological Health, Social Relationships, Environmental Factors*

I. Introduction

Quality of life (QoL) is a multifaceted concept that encompasses the general well-being and satisfaction of individuals in their personal and professional lives. For PGTs, QoL is particularly influenced by a combination of work-related factors, including job satisfaction, work-life balance, compensation, professional development opportunities, and the working environment. PGTs play a pivotal role in shaping the educational experiences and futures of their students, and thus, their own well-being directly impacts the quality of education they deliver.

The academic profession is often characterized by high levels of stress and workload, with demands for research output, teaching excellence, and administrative responsibilities. These pressures can affect PGT's mental and physical health, leading to burnout and reduced job satisfaction. Moreover, the socio-economic conditions, institutional support, and policieswithin educational institutions significantly contribute to their QoL.

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By prioritizing the QoL of PGTs, institutions can enhance the educational outcomes for students and ensure a more sustainable and fulfilling career for educators. (Silva et al., 2024)

The World Health Organization (WHO, 1994) defines quality of life as "individuals' perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns." It is a comprehensive concept influenced in a multifaceted manner by an individual's physicalhealth, psychological condition, degree of independence, social connections, personal beliefs,and their interaction with significant aspects of their environment. The WHOQOL is a quality-of-life assessment tool created by the WHOQOL Group, in collaboration with fifteen international field centers, with the aim of developing a cross-culturally applicable quality of life evaluation. Quality of life in the four domains can be influenced by various factors suchas age, gender, living in rural or urban areas, and health or disease status. (Apidechkul, 2011)

The role of teachers in the teaching profession has expanded significantly, now demanding a diverse range of qualities and responsibilities. Modern educators are expected to exhibit creativity, perseverance, and patience while also being humorous, skilled, and approachable. Their roles extend beyond mere instruction; teachers must actively engage in social interactions, recognize their status as role models, and uphold high ethical and moral standards. Furthermore, staying informed on the latest developments in education is crucial, as it supports their own continuous learning and benefits their students' education. This evolving role emphasizes the importance of teachers being adaptable and committed topersonal and professional growth (Hunger et al., 2016). Teaching is a profession marked by ongoing mental and emotional stress, which can eventually become a significant health hazard for educators. The continuous demands and pressures associated with the job can lead to cumulative strain, potentially impacting teachers' overall well-being and posing risks to their physical and mental health (Bogaert et al., 2014*).* Teachers experienced different primary stressors based on their job roles. However, interactions with supervisors and colleagues were consistently linked to stress levels among teachers, regardless of their position. (Tsubono & Ogawa, 2022)

The quality of life among female teachers is generally lower than that of their male counterparts and tends to decline with age. The physical and mental health of teachersdeteriorates due to occupational stress and strain, but access to coping resources can help improve their well-being. This study highlights the importance of sufficient coping resources,particularly social support within the workplace, as a crucial factor in enhancing teachers' quality of life. Additionally, implementing psychological interventions and offering counselling services could help alleviate stress and improve teachers' overall well-being. (Yang et al., 2009). Women's experiences during menopause are complex and can be influenced by various factors in their lives. It is not necessarily a wholly negative experience. (Mishra & Kuh, 2006)

II. Review Literature

Gholami et al. (2013) study on 522 Neyshabur healthcare staff found good internal consistency and domain agreement of the WHOQOL-BREF scale, with physical health and environmental health influenced by chronic sickness and schooling years. In another study done by Chavaan & Gharwade (2023) on 556 postgraduate medical residents in Maharashtra found varying QOL ratings, with physical health having the highest median score, followed by psychological, social, and environmental domains. Alrayes et al. (2020) study found significant disparities in the quality of life (QOL) of dentistry professionals in Saudi Arabia, with medical sickness and years after graduation significantly impacting QOL ratings. Astudy at King Saud University's College of Dentistry found favorable overall QOL and satisfaction with health, with environmental domain rated highest and significant correlations found between physical health and psychological and social relationships. Alshibani, Al-Kattan (2019). Using the WHOQoL-BREF instrument, Maqsood et al. (2021) carried out multi center cross-sectional research among medical professionals in ICUs and emergency rooms throughout Saudi Arabia. The authors presented the average ratings for Quality of Life(QOL) and its many dimensions, highlighting correlations with demographic variables as age,gender, marital status, occupation, work history, and workload. Fernandes

and Rocha (2009) studied on 242 elementary school teachers found that physical and environmental domains had the lowest overall quality of life scores, and demanding work significantly impacted their physical, psychological, and environmental quality of life. A study by Yang and Wang (2009) found that 3570 school teachers in Heping District, Shenyang, China, had lower quality of life scores than the general population. Male teachers scored higher in physical functioning and vitality. Factors such as age, role overload, and psychological strain were found to affect quality of life. Ribas and García's (2014) systematic literature review found that the quality oflife related to the voice of professors is often negatively impacted by the physical demands ofteaching, such as loud speaking in noisy environments and frequent breath needs. A study by Zadeh and Begum (2011) found that 20.9% of software engineers experienced severe insomnia, with 35.2% experiencing mild insomnia and 43.9% being normal sleepers. Severe insomnia led to lower SF-36 scores, indicating poorer physical and mental health, emphasizing the need for improved sleep quality among this population. Choi et al. (2012) found that personal and behavioral factors, such as older age, marital status, medical comorbidities, depression, and smoking, were associated with poorer health-related quality oflife among 498 Operating Engineers. Adekeye et.al 2024 study found that 18.9% of bankersin Ado-Ekiti, Nigeria, had low stress perceptions, 77.1% had moderate stress, and 4.0% had high stress perceptions. The study found a significant association between stress and QOL. Fahmy et al 2022 study found that teachers are a profession with a notably high incidence of work-related musculoskeletal disorders (WRMSDs). Various individual, occupational, and psychosocial factors contribute to the development of these disorders. WRMSDs are a significant and expensive occupational health issue, leading to a diminished quality of life forteachers.

III. Objectives of the study

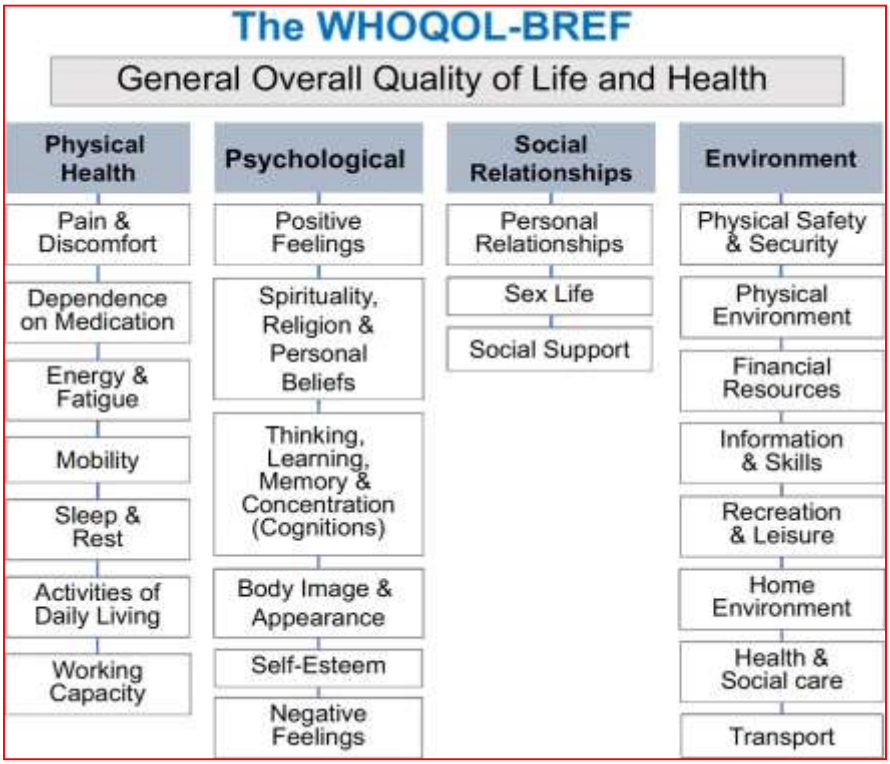
The overall goal of this study is to analysis the quality of life (QoL) of Post Graduate Teachers (PGTs) in Sambalpur District, Odisha, using the World Health Organization Qualityof Life (WHOQOL) assessment method. The study intends to achieve the following objectives.

1. To study the socio demographic profile of Post Graduate Teachers (PGTs) in Sambalpur District, Odisha.
2. To assess the quality of life of Post Graduate Teachers (PGTs) in Sambalpur District, Odisha by using the WHOQOL scale, focusing on four domains of physical health, psychological well-being, social relationships, and environmental factors.

IV. Materials and Methodology

Study Design-

This research utilized a cross-sectional study design to assess the quality of life (QoL) of PostGraduate Teachers (PGTs) in Sambalpur District, Odisha. The study employed both qualitative and quantitative approach by using the WHOQOL-BREF instrument to measure QoL across four domains: physical health, psychological well-being, social relationships, andenvironmental factors.



The WHOQOL-BREF questionnaire contains two items from the Overall QOL and General Health and 24 items of satisfaction that divided into four domains: Physical health with 7 items (DOM1), psychological health with 6 items (DOM2), social relationships with 3 items (DOM3) and environmental health with 8 items (DOM4).

Study Population-

The study targeted PGTs working in various educational institutions within the SambalpurDistrict. The inclusion criteria were:

- Teachers with at least one year of teaching experience.
- Teachers who provided informed consent to participate in the study

Study Area-

Participants in this study were drawn from a variety of educational institutions in the Sambalpur area to ensure a varied sample. Nine higher secondary schools from Sambalpur district were chosen for the current investigation.

Sl. No.	Name of the higher secondary school	Number of participants	Male	Female
1	Gangadhar Meher Higher Secondary School.	15	5	10
2	Government Women's Higher Secondary School.	12	6	6
3	Netaji Subash Chandra Bose Higher Secondary School.	10	5	5
4	Guru Nanak Public School.	10	4	6
5	SurajMal Higher Secondary School.	8	4	4
6	Vikas Higher Secondary School.	13	6	7
8	Samaleswari Higher Secondary School.	15	5	10
9	Kendriya Vidyalaya	17	3	14
Total		**100**	**38**	**62**

Sample Size-

To explore the quality of life among higher secondary school teachers, a sample size of 100 respondents was determined. This sample included 38 male respondents and 62 female respondents.

Data Collection Instrument

The data collection tools were

- A socio-demographic questionnaire was administered to collect data on age, gender,and marital status.
- The WHOQOL-BREF questionnaire, a standardized instrument developed by the World Health Organization. It consists of four domains -Physical Health, Psychological Well-being, Social Relationships & Environmental Factors.
- Data were collected through online mode.

Statistical Analysis: -

After collecting the data, several statistical methods were utilized for analysis. Means and medians are examples of descriptive statistical methods. Both parametric and non-parametric tests have examined the relationship between variables. Chi-square tests were used to determine the significant link between respondents' demographics profile, i.e. age, and married status. The inter correlation matrix was used to analysis the relationship between age, gender, marital status, and several Quality of Life (QoL) domains.

V. Result and Discussion: Table-1 Gender Distribution

Gender	Frequency (N=100)	Percentage (%)
Male	38	38
Female	62	62
Total	**100**	**100**

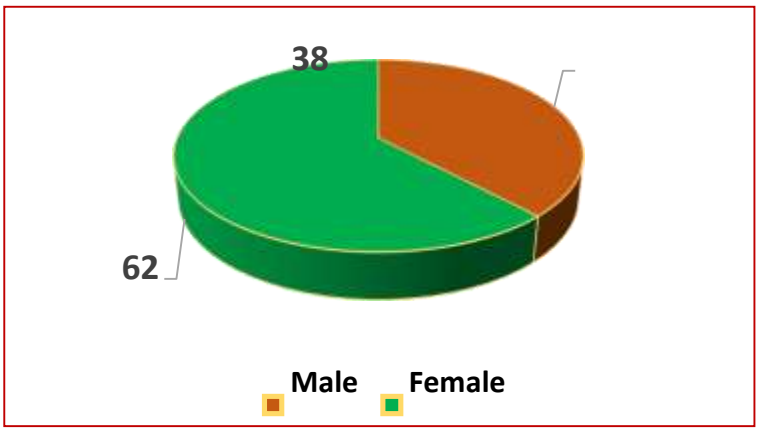


Fig: 1 Percentage of gender distribution

The gender distribution appears in Table 1. To explore the quality of life among higher secondary school teachers, 38% of male respondents and 62% of female respondents were included in the current study.

Table-2 Gender Distribution

Age Groups	Male (N=38)	Percentage(%)	Female(N=62	Percentage(%)	Chi- square test	P-Value
28-32	6	15.78	12	19.35	χ^2=7.33	P=0.11 P<0.05
33-37	12	31.57	12	19.35		
38-42	8	21.05	4	6.45		
43-47	6	15.78	6	9.67		
48-53	6	15.78	18	29.03		
Total	**38**	**100**	**62**	**100**		

Table 2 depicts the gender distribution of respondents. In comparison to other age groups, themajority of male respondents (31.57%) were between the ages of 33 and 37 years, while the majority of female respondents (29.03%) were between the ages of 48 and 53 years. There is no significant relationship (χ^2=7.33) between age group and gender.

Table-3 Marital Status of the respondents

Marital Status	Male	Percentage (%)	Female	Percentage (%)	Chi-square test	P-Value
Married	12	31.57	24	38.70	χ^2=0.51	P=0.47 P<0.05
Unmarried	26	38.42	38	61.29		
Total	**38**	**100**	**62**	**100**		

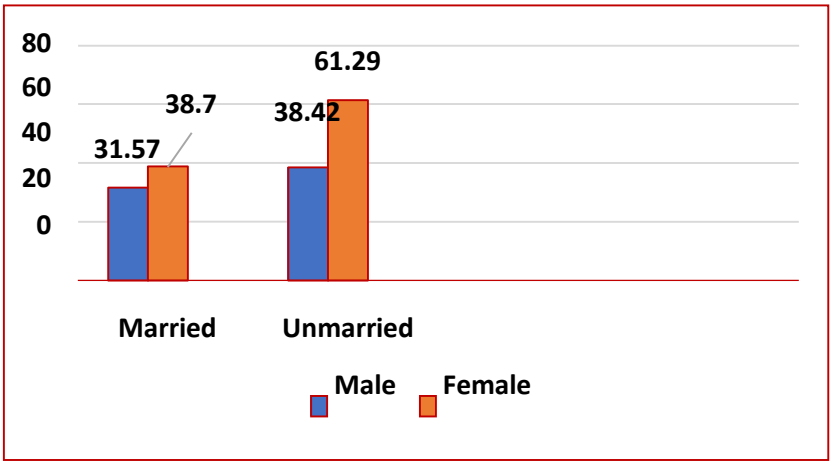


Fig 2: Percentage of Marital Status of the respondents

Table 3 indicates the marital status of the respondents. It was found from the study that from the 100 respondents most 61.29% of the female and 38.42% of male respondents were unmarried as compare to others. It was found that there was no significant relationship (χ^2=0.51) between the married and unmarried

respondents with respective to both genders.

Table-4 Distribution average Quality of life (QOL) of respondents.

Gender	Frequency(N=100)	Physical Domain (Mean SD)	Psychological Domain (Mean, SD)	Social- Relation Domain(Mean, SD)	Environmental Domain (Mean, SD)
Male	38	53 ±9.45	45.27 ±13.46	78.16 ±9.26	87.11 ±3.44
Interpretation		Good	Good	Very Good	Very Good
Female	62	56.01 ±11.25	44.09 ±10.61	77.45 ±10.61	82.71 ±8.70
Interpretation		Good	Good	Very Good	Very Good

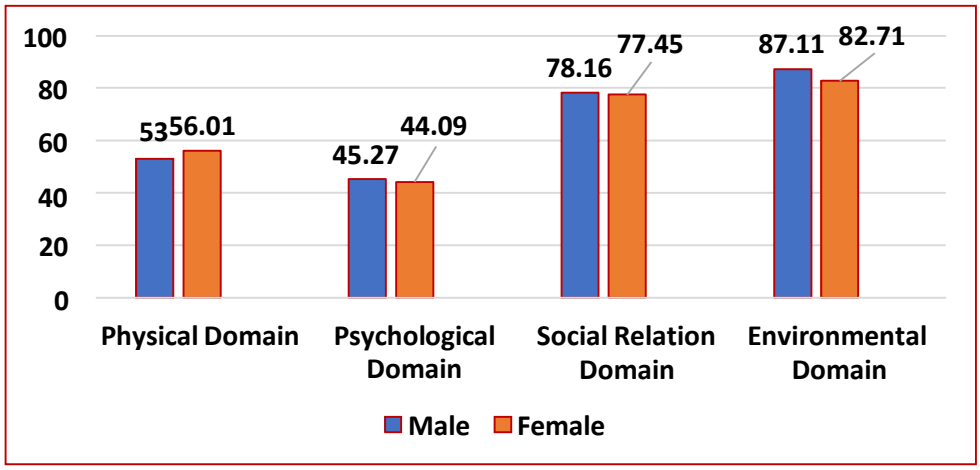


Fig: Distribution of Respondent's Average Quality of life

Table-4 Indicates the Distribution average Quality of life (QOL) of respondents. It was revealed that the average quality of life (QoL) in physical domain and psychological domain among male and female respondents was found "Good" i.e. (53±9.45 and 56.01±11.25) & (45.27±13.46 and 44.09±10.61) respectively. Whereas in social relation domain and environmental domain among both genders found "Very Good" i.e. (78.16±9.26 and77.45±10.61) & (87.11±3.44 and 82.71±8.70) respectively.

Table-5 Inter correlation Matrix Among Age, Gender, Marital Status, Physical,Psychological, Environmental Domain and QOL: -

Variables	*Age*	*Gender*	*Marital Status*	*Physical*	*Psychological*	*Social-Relation*	*Environment*	*QOL*
Age	*1*							
Gender	*-0.10563*	*1*						

Marital Status	*0.11738*	*-0.07211*	*1*					
Physical	*-0.13591*	*0.18245*	*-0.03611*	*1*				
Psychologica	*-0.04772*	*0.01131*	*0.28006*	*0.28958*	*1*			
Social-Relation	*-0.09814*	*0.03804*	*-0.06111*	*-0.02847*	*-0.07216*	*1*		
Environment	*-0.19951*	*-0.27884*	*0.01455*	*-0.208*	*-0.19405*	*0.28911*	*1*	
QOL	*-0.19829*	*0.04708*	*0.12864*	*0.6521*	*0.68258*	*0.44167*	*0.16081*	*1*

The above table (5) shows the relationship between the key variables used in the presentstudy.

There exists a positive significant relationship between age and marital status at 0.05 level of significance. There also a negative significance relationship between age and gender, physical, Psychological, social relation and environment domain and quality of life at 0.05 level of significance.

There is a positive significant relationship between gender and physical, psychological and social relation domain, QOL at 0.05 level of significance whereas there is no significant relationship between gender and marital status and environmental domain at 0.05 levelsignificance.

There is a positive significant relationship between marital status and psychological, environmental domain and quality of life (QOL) at the 0.05 level of significance. There is also no significance relationship between marital status physical and social relation domain at
0.05 level of significance.

There is a positive significant relationship between physical domain with psychologicaldomain and quality of life (QOL) at the 0.05 level of significance. whereas there is a negativesignificance relationship between social relation domain, environmental domain and quality of life (QOL) at the 0.05 level of significance.

There is a positive significant relationship between psychological domain and quality of life (QOL) at the 0.05 level of significance whereas there is also exit a negative significance between psychological domain and social domain & environmental domain at the 0.05 level of significance.

There is a positive significant relationship between social relation and environment domain &Quality of life (QOL) at the 0.05 level of significance.

VI. Conclusion

The study found that Post Graduate Teachers (PGTs) in Sambalpur District, Odisha, generallyexperience a good quality of life (QoL) in the physical and psychological domains and a very good QoL in social relations and environmental factors. The findings indicate that female respondents scored slightly higher in the physical domain, while male respondents hadmarginally higher scores in social relationships and environmental factors. To further improve the QoL among PGTs, the following suggestions are proposed:

- Implement programs that specifically address psychological well-being, as this domain showed variability. Providing mental health resources and counselling services can enhance psychological resilience.
- Encourage policies that promote a better work-life balance, especially for female teachers who might face additional social and familial responsibilities.
- Continuous professional development opportunities should be made available to enhance job satisfaction and social relationships among teachers.
- Strengthen support systems within schools, fostering a positive and collaborative environment, which can

improve overall QoL.

By focusing on these areas, the overall quality of life for PGTs can be significantly improved,benefiting both teachers and the educational institutions they serve.

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