124 - UNIVERSITY PROFESSORS QUALITY OF LIFE IN THE WEST OF PARANA STATE, BRAZIL

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INTRODUCTION

In the last few years, with regards to health, a lot has been studied and discussed about. Christopher Boorse, has defined health as a state of an individual with no diseases (1977), but, according to contemporary researchers and institutions, such definition has become outdated! A good example is the World Health Organization - WHO (1998), which defines health as a state of complete physical, mental and social well-being of an individual, and not merely the lack of diseases.

In order to achieve acceptable health levels, one of the parameters to be considered is the Quality of Life (QL), which differs from individual to individual, and is made out of several variables, inserted into a continuous & inconstant process, which refers to the physical, emotional, social and spiritual well-being of an individual. According to WHO (1998), the definition of QL related to health would be: the individual's perception of his /her position in life, built up in a cultural and values context, respecting his/her expectations, standards and concerns. Dantas (1997) states that the QL is directly dependent on the demands the person presents. Therefore, it's possible define somebody's QL level as the degree of care & needs of a particular person.

For many people, QL is a matter of choice, and therefore, its level is directly related to the person's lifestyle. According to Nahas (1997), QL has a complex concept, multi-determined and it should be interpreted as a continuum process, and not as a dichotomy: having or not having QL.

It is known that a good QL level is an essential parameter for determining the concept of health, and vice versa, which means that, although relevant, the currently used parameters for establishing levels for the population health (eg.: diseases, mortality rates, etc.), should not be considered sufficient.

Therefore. the interest in studies involving people's lifestyles has been growing substantially in the last decades, mainly due the curiosity of knowing whether an active lifestyle and healthy life, associated with health care and regular physical activity, could contribute towards the promotion of health, and improve the QL of individuals. (PRIESS, 2011, apud ANDRADE, 2001).

So, it is known that estimating the QL level of an individual, or specific group, is vital for understanding the real situation in which such an individual / group is found, in order to establishing guidelines for improving the QL levels of such individual / groups.

Considering the teaching labor is a basic training job for all other professions, estimating the QL level of teachers & professors and establishing the relationships between the working conditions and the teaching labor itself, can provide consistent indications for developing intervention strategies and health promotion (PRIESS, 2011).

Given the above, the objective of this research was to determine and evaluate the Quality of Life of university professors, by using the Questionnaire SF-36 Instrument: a validated questionnaire chosen for assessing the QL of university professors from 2 institutions in the west of Paraná state, comparing and correlating the eight domains the instrument proposes to evaluate among themselves: motor capacity, limitation on physical aspects, pain, general health state, vitality, social aspects, limitation on emotional aspects, and mental health, in order to establish a profile for the QL of the sample.

This research is justified by the wish at drawing a profile for the QL of university professors, professionals who work directly in the formation of numerous careers, and therefore, should maintain their QL at satisfactory levels, so that they could perform their work properly.

Priess (2011), in his researches on the QL of university professors, defends that the importance of this is justified by the need of understanding the relationship between the working conditions and teaching, as well as the lifestyle and work-related diseases in the lives of university professors. Priess (2011) believes that the results have a practical application, thus being able to provide consistent indicators for the development of intervention strategies and health promotion, thereby fostering, after the analysis of the results, the identification of possible health risks, and the adoption of a more active and healthy lifestyle.

METODOLOGY

This is a descriptive and cross-sectional nature research. According to Thomas & Nelson (2007), a descriptive research aims to observe, record and analyze the phenomena without going into the merit of its content. In descriptive researches, there is no interference from the researcher, who is restricted only to observe the criteria of scientific authenticity, given phenomenon, and how often it takes place.

The sample consisted of 65 university professors (30 men, and 35 women) from two private institutions: Uniamérica and Uniguaçu, universities located in the west of Paraná state, based in the cities of Foz do Iguaçu and São Miguel do Iguaçu respectively . The sample was selected at random, according to the sample size calculation, with a confidence interval of 95%. The methodology used in this research was a quantitative trait, which is suitable for measuring the opinions, attitudes, behaviors and preferences.

For developing this research, the instrument chosen was the Medical Outcome Study Short-Form 36 Health Survey (SF-36), which is a multidimentional questionnaire made out of 36 questions, translated & validated for the Brazilian population by Ciconello et alli (1999). The SF-36 is nowadays one of the mostly used instruments for accessing the QL of different populations.

This instrument consists of 36 questions pertaining to eight QL domains related to physical and mental health, and evaluates the past four weeks experienced by the respondent. The domains for motor capacity, physical limitations, pain, and general health correspond to the physical component for the QL, whereas the domains vitality, social relationships, emotional limitations, and mental health represent the mental component for the QL.

For evaluating the results, one RawScale was calculated, where the results of each component were plotted, in order to graduate the scores on a scale from 0 to 100 for each of the 8 components, being the worst state of the component rated as zero (0), and the best state rated as one hundred (100), thereby allowing the individual an analysis of each dimension. The internal consistency of the SF-36 is good, with the Cronbach coefficient ranged from 0.76 to 0.90 for all the questionnaire domains.

The research was was held in July 2013, in the cities of Foz do Iguaçu and São Miguel do Iguaçu, at Uniguaçu Uniamérica universities, at the end of the academic recess. All respondents assessed were properly instructed on how to fill in the questionnaire, and signed off a free consent letter; they were also informed on the research objectives, reiterating the confidentiality of the names and data, which would be only used for this research.

For the statistical analysis, the Microsoft Office Excel® 2009 software was used. In order to tabulate the results and make the data analysis, a descriptive statistics was used for determining the averages & frequency; the Pearson correlation test was also applied, in order to check if the different domains assessed by the questionnaire had any significant direct correlation (0.05) or highly significant correlation (0.01) among themselves.

RESULTS AND DISCUSSION

We now present a description of the sample, divided by gender (Table 1), and age (Table 2) means:

TABLE 01: GENDER

Frequency	Percentage	Valid Percentage
Male	30	46,2
Female	35	53,8
Total	65	100,0

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TABLE 02: AGE AVERAGES & STANDARD DEVIATION, BY GENDER

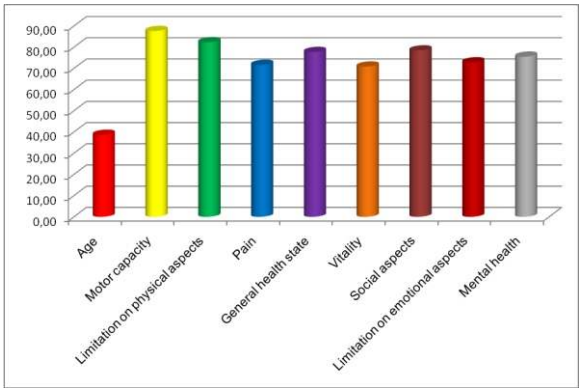
	Cases	Average Age	Standard Deviation
Male	30	37,23	7,195
Female	35	39,85	8,345
Total	65	38,64	7,886

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The sample, although chosen at random, was made, on average, out of young university professors, who were under 40 years-old.

Subsequently, we present the Graphic 1, which shows the average values for each of the domains: motor capacity, limitation on physical aspects, pain, general health state, vitality, social aspects, limitation on emotional aspects, and mental health, respectively:

GRAPHIC 01: UNIVERSITY PROFESSORS QUALITY OF LIFE

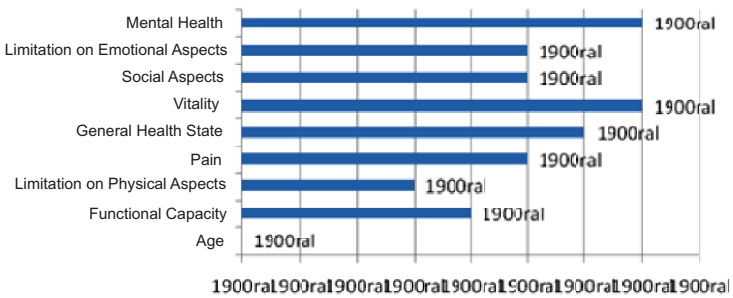


CASTILHA, 2014

By the results shown in the graphic above, it's possible to note that the values of all domains exceeded 70% on average, which rank the Quality of Life of the sample as satisfactory, considering the average age - 38 years-old. Priess (2011) held a similar study to check up on the QL of 88 university professors, and found very similar results to the ones on this research.

Also, for the domains listed in the graphic shown above, we have applied a statistical test: Pearson correlation, in order to verify if the domains had any significant direct correlation (0.05) or highly significant correlation (0.01) among themselves. The only variable not influenced any area was the age of the respondents. The domain that stood out the most to influence other areas was Mental Health. According to the Pearson correlation, the domain Mental Health correlated itself with all SF-36 questionnaire domains - Motor Capacity = 0.00; Limitation on Physical Aspects = 0.033; Pain = 0.00; General Health = 0.00; Vitality = 0.00; Social Aspects 0.00; Limitation on Emotional Aspects = 0.002. The only data which did not correlate significantly with others was the age of the respondents (p = 0.841).

GRAPHIC 2: CORRELATED DOMAINS - PEARSON CORRELATION



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The SF36 domains correlated with each other; Vitality and Mental Health domains were the only ones to correlate directly with the others, except with the age of respondents.

CONCLUSION

Considering the objectives of this study, and based on the evidence presented in the literature, plus the results found by the research held, it is concluded that:

-There are numerous studies on Quality of Life, with different groups of people and professionals; there are also several validated instruments for data collection & the development of such; all are of great importance and can contribute significantly towards a better understanding of the issues described, and towards the various factors that can influence the lifestyle and quality of people's lives.

-The research results show that the sample presented a satisfactory Quality of Life level - average above 70%, in all the eight domains assessed by the instrument. This result may be explained by the low average age of the sample: 38 years-old - people at this age are less susceptible to some types of diseases. Another likely hypothesis, not reported in this study, was the fact that the survey was conducted at the end of the academic recess in July, when the professors were coming back from their time off, and therefore could present themselves at a lower stress level, among other variables, which would result in a better QL level than it would be expected throughout the regular term. Therefore, it is recommended that such survey is again applied to the same sample at a different time of the year (i.e: at the mid of the term), so that the results could be compared to each other, in order to test this hypothesis.

It is expected that, from this research, as well as from others, university professors, and others from different areas, can gain a better awareness of how important it is to adopt a healthier life style, as this may considerably improve their Quality of Life levels.

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UNIVERSITY PROFESSORS QUALITY OF LIFE IN THE WEST OF PARANA STATE, BRAZIL

ABSTRACT

This study aimed to verify and evaluate the quality of life of university professors from 2 private universities in the west of Parana state, though the instrument 'SF-36' questionnaire, comparing and co-relating the 8 aspects this questionnaire intends to evaluate: motor capacity, limitation on physical aspects, pain, general health state, vitality, social aspects, limitation on emotional aspects, and mental health, for then tracing a profile of these professors' quality of life. The study was classified as field, exploratory, and descriptive, and the sample was chosen at random, following an intention criteria regarding institution, totalizing 65 people (30 men and 35 women), with ages between 25 and 62 years-old. The results show a low average-age (38,65%) among the surveyed, and a quality of life level classified as good - over 70% in every aspect. When co-related, the aspects 'vitality' and 'mental health' were the only ones which co-related directly with all the other aspects, except with the 'age'.

KEYWORDS: Quality of life; University professors; Life style

QUALITÉ DE VIE DES ENSEIGNANTS DE L'ENSEIGNEMENT SUPERIEUR DE L'OUEST DU PARANÁ

RÉSUMÉ

Le but de cette étude était d'évaluer et d'évaluer la qualité de vie des enseignants de deux établissements privés d'enseignement supérieur dans l'ouest du Paraná par le questionnaire SF-36 instrument, la comparaison et la corrélation ensemble des huit domaines que l'instrument se propose d'évaluer fonctionnement physique, limitations dues à, la douleur physique corporelle, la santé générale, la vitalité, le fonctionnement social, rôle émotionnel, et la santé mentale, puis dessiner un profil de la qualité de vie des enseignants en question. L'étude a été classé comme champ, exploratoire et descriptive, et l'échantillon a été choisi au hasard, mais des critères suivants propre intentionnalité de l'institution, pour un total de 65 personnes (30 hommes et 35 femmes), ages: 25 et 62 ans. Les résultats indiquent un âge moyen faible (38,65% de) parmi les répondants, et la vie satisfaisante du niveau de qualité moyenne - supérieure à 70% dans les huit domaines. Quand corrélation, la santé mentale et des domaines de vitalité ont été les seuls à en corrélation directe avec tout le monde sauf avec l'âge des répondants.

MOTS-CLÉS: La Qualité de la Vie. Enseigner dans L'enseignement Supérieur. Mode de Vie.

CALIDAD DE VIDA DE LOS PROFESORES DE EDUCACIÓN SUPERIOR DEL OESTE DE PARANÁ

RESUMEN

El objetivo de este estúdio fue diagnosticar y evaluar la calidad de vida de los profesores de dos instituciones privadas de educación superior em el oeste de Paraná através del cuestionario SF-36, comparando y correlacionando juntos los ocho dominios que el instrumento se propone evaluar: el funcionamiento físico, limitación física, el dolor, salud general, vitalidad, función social, estado emocional y salud mental, y luego dibujar un perfil de la calidad de vida de los docentes en cuestión. El estúdio fue clasificado como de campo, exploratorio y descriptivo, y la muestra fue seleccionada al azar, por los critérios de intencionalidad propios de la institución, totalizando 65 individuos (30 hombres y 35 mujeres), con edades comprendidas entre los 25 y los 62 años. Los resultados indican un promedio de edad considerado bajo (38,65%) entre los encuestados, y el promedio de calidad de vida satisfactorio - superior al 70% em los ocho dominios. Los datos de la salud mental y vitalidad son los únicos que se correlacionan directamente con todos, excepto con la edad de los encuestados.

PALABRAS CLAVE: Calidad de vida; La enseñanza en la Educación Superior; Estilo de vida.

QUALIDADE DE VIDA DE PROFESSORES DE EDUCAÇÃO SUPERIOR DO OESTE DO PARANÁ

RESUMO

O objetivo desse estudo foi verificar e avaliar o nível de qualidade de vida de docentes de 2 instituições de ensino superior privado do oeste do Paraná através do instrumento questionário SF-36, comparando e correlacionando entre si os oito domínios que o instrumento se propõe a avaliar: capacidade funcional, limitação por aspectos físicos, dor, estado geral de saúde, vitalidade, aspectos sociais, limitação por aspectos emocionais, e saúde mental, para então traçar um perfil do nível de qualidade de vida dos docentes em questão. O estudo foi classificado como de campo, exploratório e descritivo, e a amostra foi selecionada de maneira aleatória, porém seguindo critérios de intencionalidade próprias à instituição, totalizando 65 indivíduos (30 homens e 35 mulheres), com idades compreendidas entre 25 e 62 anos. Os resultados apontam uma média de idade baixa (38,65%) entre os pesquisados, e o nível médio de qualidade de vida satisfatório - acima de 70%, em todos os 8 domínios. Quando correlacionados entre si, os domínios Vitalidade e Saúde Mental foram os únicos a se correlacionarem diretamente com todos, exceto com a Idade dos entrevistados.

PALAVRAS-CHAVE: Qualidade de vida; Docência no Ensino Superior; Estilo de vida.