

31.4 % of the total number of respondents were final year students (5<sup>th</sup> year in local universities and 6<sup>th</sup> year in all the foreign universities). Responses of the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> and local 5<sup>th</sup> year students were 13.9 %, 8.8 %, 17.5 %, 20.4 % and 8 % respectively.

Among foreign medicine undergraduates, depression, anxiety and stress was highest in Belarus. But number of responses from Georgia, Russia, China was comparatively low so it should be further studied with higher number of participants. When comparing the results of all foreign medical undergraduates with local medical undergraduates, the latter showed the highest counts with notably high depression and stress levels.

### **Conclusions**

The findings of the present study suggests that the depression, anxiety and stress are high in local medical undergraduates when compared with foreign Sri Lankan medical undergraduates. The reason for this difference could be certain educational methods and tough exam structure in local universities but it should be further studied by considering relevant demographics. However, it would have been better if there was an organized system to address the mental health issues of the participants, especially the ones with high risks. Both foreign and local universities should plan and implement a system for occasional screening and provision of psychological support from mental health professionals when necessary.

### **LITERATURE**

1. Le, M. T. H., Tran, T. D., Holton, S., Nguyen, H. T., Wolfe, R., & Fisher, J. (2017). Reliability, convergent validity and factor structure of the DASS-21 in a sample of Vietnamese adolescents. PloS one, 12(7), e0180557. <https://doi.org/10.1371/journal.pone.0180557>
2. Amarasingha, A. A. D. S., Peiris, H. H., & Amarasingha, A. A. B. N. (2022). Depression, anxiety, stress and perceived mental healthcare need of Sri Lankan undergraduates studying in selected countries affected by COVID-19. Galle Medical Journal, 27(3), 85–92. DOI: <http://doi.org/10.4038/gmj.v27i3.8096>
3. Lovibond SH, Lovibond PF (1995) Manual for the Depression Anxiety Stress Scale. Sydney: Psychology Foundation.
4. Rotenstein, L. S., Ramos, M. A., Torre, M., Segal, J. B., Peluso, M. J., Guille, C., Sen, S., & Mata, D. A. (2016). Prevalence of
5. Depression, Depressive Symptoms, and Suicidal Ideation Among Medical Students: A Systematic Review and Meta-Analysis. JAMA, 316(21), 2214–2236. <https://doi.org/10.1001/jama.2016.17324>

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## **THE EFFICIENCY OF STRESS COPING STRATEGIES USED BY MEDICAL STUDENTS AND ITS EFFECTS ON THE PREVALENCE OF PERSONALITY AND MOOD RELATED DISORDERS**

### **Introduction**

The study of medicine is considered one of the most stressful fields of study. It is a never ending and highly demanding career which leaves many students in a high risk of burnout [1]. According to studies, the estimated prevalence of stress among medical students is 28.5–78 % [2]. Most medical students tend to use harmful coping mechanisms or even completely ignore the effects of stress, not knowing that their overall health depends on it. [3] These students tend to show changes in their personalities, vulnerability and tend lead to suicidal ideations and depressive states [4].

### ***Goal***

The ultimate goal of this research was to identify psychological coping mechanisms that can reduce stress resistance in medical students, which can be used for the subsequent development of programs aimed at improving the adaptation of medical students studying in foreign countries.

### ***Materials and Methods of research***

The study was carried out at the faculty of international students at Gomel State Medical University, Belarus. A total of 40 students participated. Different questionnaires were given out in order to assess the dynamics. The study comprised of male and female medical students with no age difference  $p = 0.32$ , from first to the final year.

All of the students that participated in the study were given a consent form. The questionnaires given were one about basic information, The Beck's Depression Inventory in order to assess the intensity of depression, The Personality self-portrait questionnaire to assess the participant's normal personality styles. Next, the students were given the key questionnaire of the research work, The Ways of Coping Checklist (WCCL) which measures coping based on Lazarus and Folkman's (1984) stress coping theory, and was carried out in two phases. All the questionnaires used were standard, ethically approved tests and standard keys were used to obtain the results. All statistical analysis of the study was performed using Microsoft Excel and SPSS Statistics version 22.0

### ***The Results of the research and their discussion***

The result of the first questionnaire which is The Beck's Depression Inventory shown in figure 1.

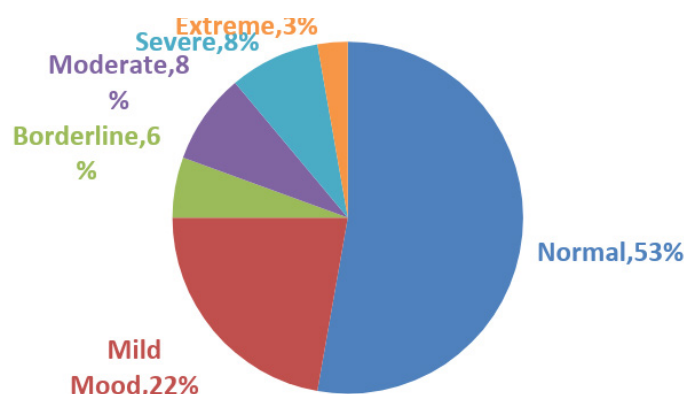


Figure 1 – Percentage distribution of participants by score of Beck's depression inventory

The result of The Personality Self-portrait Questionnaire is shown in figure 2.

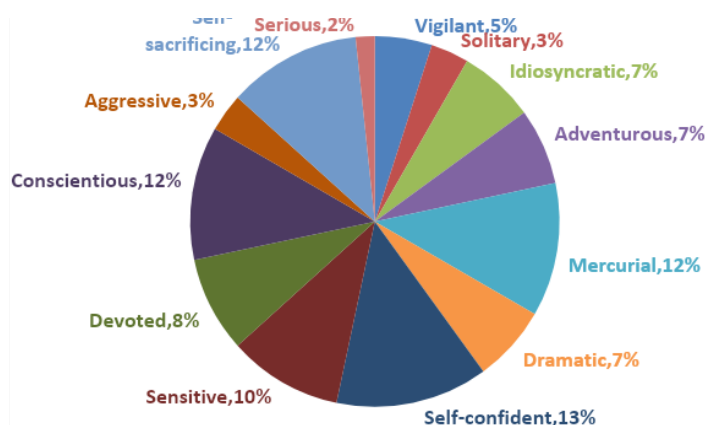


Figure 2 – Percentage distribution of prevalence of the fourteen personality types

Next, as for the assessment of ways of coping questionnaires, Data was gathered from the students at two different times during comparatively different stress levels. And the results obtained were grouped into eight scales, which included one problem-focused and six emotion-focused scales, and an eighth scale containing a combination of both problem-focused and emotion-focused items. Namely, Problem focused coping, Wishful thinking, Distancing, Seeking social support, Emphasizing the positive, self blame, Tension reduction, Self isolation. [5] And in order to assess the correlations among the scales obtained at the two occasions, Wilcoxon signed-rank test was used. It was used to conduct a paired difference test on the repeated coping mechanism scale, to assess whether the populations mean ranks differ. Medical training can be highly stressful for students and negatively impact their mental health. Important to this matter are the types of coping strategies (and their antecedents) medical students use, which are only characterized to a limited extent. A better understanding of these phenomena can shed additional light on ways to support the health and well-being of medical students [6]. The participants of our study were ages in between 21–29 years with a mean age of 24 years, of which 50 % were male and 50 % female. In previous studies, several authors have studied and suggested the factors such as age, sex seem to be essential elements to be considered [2, 6].

In our study, with the differences in strategies used for each scale, the highest standardized test statistics (-4.615) showed up in scale 5: Emphasizing the positive with the lowest number of negative differences, which shows that scale 5, which can be considered a healthy way of coping is used more by students when not in a stressful situation.

This study is among the first to assess how a subset of foreign students in a medical school cope in response to various stressors in medical school. As was speculated, we found significant statistical difference in coping by students at different time periods with different amounts of stressors. The efficiency of coping strategies used by medical students remains unhealthy. Moreover, In contrast to many previous studies carried out, we found that no statistically significant differences prevailed among the genders, potentially opening up a discussion about development of a certain level of empathy similarly in both genders resulting from the field of study they are in.

Furthermore, the associations and effects of coping strategies on the prevalence of personality and mood-related disorders remain unclear. They were only found significant on an evaluative level.

### **Conclusions**

Our results suggest that coping strategies are gender-neutral and coping strategies used by medical students depend on the level of stress they are experiencing at the moment. The level of stress a student experiences directly affects the coping mechanisms they use, and therefore, medical students need to be taught healthy ways to deal with stress.

Further research is needed to provide a perspective analysis of the difficulties medical students face in trying to cope with these excessive stressors, and we hope this research will serve as a stimulus to intervene and create a learning environment for medical students to learn how to manage stress in healthier ways for their mental and physical well-being.

### **LITERATURE**

1. Fares J, Al Tabosh H, Saadeddin Z, El Mouhayyar C, Aridi H. "Stress, Burnout and Coping Strategies in Preclinical Medical Students." *N Am J Med Sci*, vol8 (2), pp.75-81, Feb.2016 doi: 10.4103/1947-2714.177299. PMID: 27042604; PMCID: PMC4791902.
2. Esraa Ahmed Ragab, Mumen Abdalazim Dafallah, Mahmoud Hussien Salih, et al, "Stress and its correlates among medical students in six medical colleges: an attempt to understand the current situation" *Middle East Current Psychiatry*, (2021)28; 75. <https://doi.org/10.1186/s43045-021-00158-w>
3. Paul D. Welle, Helen M. Graf. "Effective Lifestyle Habits And Coping strategies for stress tolerance among college students". *American Journal of Health Education*, vol42, No.2, Mar/Apr.2011
4. Tyssen R, Hem E, Vaglum P, Gronvold NT, Ekeberg O. "The process of suicidal planning among medical doctors: predictors in a longitudinal Norwegian sample." *Journal of Affective Disorders*, vol80, pp.191–198, 2004

5. Folkman, S. & Lazarus, R. S. "If it changes it must be a process: Study of emotion and coping during three stages of a college examination." *Journal of Personality and Social Psychology*, vol. 48, pp. 150-170, 1985

6. Neufeld, A., Malin, G. "How medical students cope with stress: a cross-sectional look at strategies and their sociodemographic antecedents." *BMC Med Educ* vol21, pp. 299, 2021. <https://doi.org/10.1186/s12909-021-02734-4>

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## **RELATIONSHIP BETWEEN SOCIAL MEDIA AND EATING DISORDERS IN YOUNG ADULTS**

### ***Introduction***

Eating disorders are conditions defined by abnormal eating habits, include extreme emotions, attitude and behavior surrounding weight and food issues, they are serious emotional and physical problems.

There are 3 main eating disorders which are highly concerned in the society: Bulimia nervosa, Anorexia nervosa, and Binge eating disorder.

People with bulimia nervosa eat large amounts of food in a relatively short period of time. They feel that they have no control over the amount of food they consume, or the ability to stop.

Anorexia nervosa is a life threatening eating disorder and a serious mental illness. It causes severe weight loss. People with anorexia nervosa commonly have an unhealthy focus on food, weight or body shape. They have an intense fear of gaining weight, even though they are significantly underweight.

People with binge eating disorders regularly (at least once a week) eat large quantities of food, rapidly in a short period of time. They feel out of control and unable to stop themselves from eating. This is often linked with high levels of distress. They don't typically try to 'compensate' for their eating with behaviors such as vomiting or excessive exercise.

Due to the age and modern thinking patterns of young adults, they are mostly vulnerable to acquire the eating disorders. With the increasing trend of social media use, the age group of 'young adults' tend to change their physical and mental behavior to meet the social demands including the body figure.

Because the upcoming so called social standards on the body figure, people are undergoing the body shaming process more and more where the females are far more subjected to this.

### ***Goals***

To evaluate the relationship between the social media and tendency to appear eating disorders in young adults.

### ***Materials and methods of research***

A detailed questionnaire was distributed among 76 people in the age range of young adults. The questionnaire consisted of general questions such as age, gender, profession and direct questions including whether they use social media or not, number of hours they use it per day, whether they are satisfied with their figure and diet, whether they have a need of being better on the aspects such as body figure.

### ***Results of the research and their discussion***

Out of the 76 young adults who underwent the survey, 32.9 % were in the age group of 18–24 and the other 67.1 % were in the age group of 25–35 while 55.3 % were female and 44.7 % were male.