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Research Article

Self-Efficacy, Quality of Life and Academic Achievement of Residential and Non-Residential University Students

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Abstract

The present study aimed to investigate self-efficacy, quality of life, and academic achievement of residential and non-residential university students.60 residential students (30 males and 30 females) and 60 non-residential students (30 males and 30 females) were selected purposively from several departments of Dhaka University. The instruments used in the study were- (1) Demographic and Personal Information Questionnaire, (2) The Bangla version of Sherer's general Self-efficacy scale, and (3) The Bangla version of WHO-Quality of life scale. The data were analyzed by using F-test (2 x 2 analysis of variance) and Pearson correlation. The study revealed a significant difference in self-efficacy, quality of life, and academic achievement between residential and non-residential students. The study also showed a significant difference in self- efficacy and quality of life between males and females. Significant correlation between self- efficacy and quality of life (domain = physical; r = .496, p < 0.01, domain = psychological; r =.592, p < 0.01, domain = environmental; r = .203, p < 0.01 and domain = social; r = .424, p < 0.01) was found. Academic achievement was found significantly correlated (r = .185, p < 0.05) with environmental domain of quality of life.

Keywords: *Self-Efficacy; Quality Of Life; Academic Achievement; Residential Students; Non- Residential Students*

Introduction

The sense of personal efficacy of an individual is considered the most influential element of self-knowledge in social cognitive theory. It helps to exercise some control over occurrences that affect their life. Perceived self-efficacy refers to a people's evaluation of their coordinating capability and the strategic action plans needed to achieve the expected performance levels [2]. People with a higher degree of self-efficacy believe in their capacity and desire, level of effort, anxiety encountered, the persistence of difficulties, and believe that failure should bear the brunt of self-efficacy [2]. In contrast, people with a weaker self-efficacy level take the task harder than they indeed are, which causes illness, depression, and imprudence [27].

People high in self-efficacy can initiate behavior. They know that they can successfully manage the incidents and situations, conquer difficulties, and always maintain a high standard [32]. These individuals have more faith in their ability than those with low self-efficacy and express little self-doubt. Self-efficacy changes with the coming of age. It grows in infancy and puberty, peaks in medium ages, and decreases after 60 years of age [15].

Data reveals that self-efficacy and academic accomplishments have a significant positive association [25]. Students with a high level of self-efficacy have a favorable connection to motivation, effort, and persistence in the classroom. Students high in self-efficacy for school-related activities expect to do well, actually perform better than they expect, and evaluate themselves positively [34]. College professors in research fields also are more successful if they are high in feelings of efficacy [33]. A writing task given to college students showed that higher self- efficacy individuals rated as better than the lower self-efficacy individuals [34].

Higher self-efficacy leads to more successful academic performance outcomes [31]. Among college professors, academic success (defined by rank and salary) is predicted in part by self- efficacy [32]. The higher the professor's self-efficacy, the more they engaged in many projects simultaneously and set goals for completing articles and books. These behaviors resulted in their producing more publications and having these publications cited by others in their field. A meta- analysis of 13 studies was conducted relating self-efficacy to academic performance in laboratory and field settings where mean correlation was found as high as 0.74 [22].

It is said that self-efficacy is associated with self-regulated learning. Self-efficacy cannot be claimed to be the exact reason for academic achievement, self-regulation would be the source of academic achievement. Self-efficacy will lead to the use of self-regulation, and self-regulation will contribute to enhanced academic achievement Self-efficacy in self-regulatory learning refers to an individual's trust in the use of self-regulatory mechanisms, such as goal-setting, self- monitoring, use of strategies, self-assessment, and self-reaction [3,4]. Several studies have demonstrated a positive association between self-efficacy, self-regulation and academic achievement [11]. Self-efficacy to be a born potential that should be coordinated in behavioral, emotional, social, and learning sub-skills. It includes self-belief (self-confidence, problem-solving, constructive thought), self-control, mind-and behavior-regulation to achieve the aim, self- assessment, self-monitoring, optimism, step-by-step behavior-control, and self-simulation to resolve failure [4].

The definition of quality of life broadly includes how people assess the 'goodness' of various facets of life, which include individual's emotional responses to life-related events, attributes, sense of accomplishment, career satisfaction, and personal relationships [12]. In literature, the word 'quality of life' is quite frequently referred to as "wellbeing". It refers to objective life conditions that extend to the overall population, while the standard of life should be more properly restricted to the subjective appraisal of their lives by individuals [30]. The World Health Organization defines the quality of life as an individual's perception of their role in life in the sense and importance of the society in which they live and of their goals, expectations, standards, and interests [(16)]. It is a broad concept that is intricately shaped by physical wellbeing, psychological condition, personal beliefs, social relationships, and their association with the basic elements of the individual's environment [26].

Quality of life is a dynamic set of objective and subjective experiences [19]. It consists of physical, psychological, social, and environmental factors of life and living conditions of students implicating all the areas of life starting from physical to psychological such as sleep patterns, relationships, mind activities, thinking, and body. Furthermore, hence it is essential to focus on their lifestyle and living patterns [10].

The lack of discrepancy can partially be attributed to the various concepts of quality of life that have developed over the years [5], beginning with common economic methods in the late 1960s and 1970s, when quality of life was measured by quantitative indicators and unemployment rates [21]. In addition to this regimented quantitative approach to the issue, researchers started to examine the subjective perceptions of people in their lives in the assumption that statistical measurements alone were insufficient 'quality of life' measures [6].

A cross-sectional study was conducted using the World Health Organization Quality of Life, WHOQOLBREF, a survey among medical students of first to the third year at Alfaisal University. High academic success with higher QOL reveals that higher academic achievement offers greater happiness, and low achievement demands extra care to enhance their quality of life [28]. In a study on University students

regarding quality of life and academic achievement, it was found that the development of exerting an individual's power, feeling of success, and health condition of the body is positively correlated with college students' life quality [29].

Academic achievement generally refers to the degree of success of the accomplishments of a student in a given subject at the end of the educational program. Academic achievement or performance is the outcome of formal and informal learning. It is usually assessed by tests or ongoing measurement, although there is no universal consensus about how it is best evaluated or which aspects are most significant. It is generally held that academic performance is a significant predictor of future achievement, but the research studies were not conclusive. Even though many people are academically or artistically talented, they are unsuccessful in life. School is a significant source of physical, environmental, cognitive, and emotional development for the students [17]. Academic achievement is determined by physical factors, environmental factors, and psychosocial factors.

Rationale of the study

There are some clear explanations for undertaking this research. It is a purely scientific curiosity to see the effect of self-efficacy and quality of life on residential and non-residential university students' academic achievement. A large number of University students come from outside of Dhaka city, leaving their comfort zone. Precisely, they have to stay at university halls where they face many sorts of difficulties like accommodation, dietary, and environmental problems. However, the students living in their places need not fight these difficulties. However, a residential student can quickly get help, whereas it is challenging and time-consuming for non- residential students. Review of literature revealed very few studies in Bangladesh focusing on this area. Few findings, however, revealed a strong association between self-efficacy and academic achievement, although only a couple of studies illustrated the relationship between quality of life and academic achievement. It will be theoretically and practically relevant to investigate if their self-efficacy and quality of life affect their academic achievement.

The objectives of the study were

1. Whether residential students differ in self-efficacy from non-residential students.
2. Whether residential students differ in quality of life from non-residential students.
3. Whether residential students differ in academic achievement from non-residential students.
4. Whether self-efficacy, quality of life and academic achievement varies with the gender of the respondents.
5. To see whether there is any relationship between self-efficacy, quality of life, and academic achievement.

Materials and Methods

Participants

The study included 120 students who studied in various departments of Dhaka University from 2nd year to Masters. The present study included 60 residential students (30 males and 30 females) who were purposively selected from different halls of Dhaka University as a sample. On the other hand, 60 non-residential students (30 males and 30 females) from various departments of Dhaka University were purposively chosen as samples.

Materials

Demographic and personal information questionnaire

A demographic and personal information questionnaire was used to obtain data on age, sex, residency, socio-economic status, monthly salary, CGPA.

The bangla version [18] of Sherer's General self-efficacy scale)

The general self-efficacy scale was originally developed to measure the general level of beliefs in one's competence. It is a 17 item Likert type. The scoring was easy and simple. For item number 1, 3, 6, 8, 9, 13, and 15, respondents got 1 (strongly disagree) to 5 (strongly agree) responses. And for item number 2, 4, 5, 7, 10, 11, 12, 14, 16 and 17 respondents got 5 (strongly disagree) to 1 (strongly agree) responses. The sum of the items' scores reflects self-efficacy. The higher the test score, the more self-efficacious the participant is. Seventeen items of the English version were translated into Bangla. The English and Bangla versions were administered to 100 participants with a 7-day interval. The translation efficiency of the scale was demonstrated by a high correlation [r (98) = 0.89, < 0.010] between the English and Bangla ratings. High Cronbach's alpha (α= 0.69) of the Bangla version further indicated the scale's internal consistency.

The bangla version [24] of who-quality of life

The Bangla version of the WHO-Quality of life was used. The scale consists of 26 items, including one item (G1) for general quality of life, one item (G2) for health-related quality of life, and 24 items belonged to four domains (physical, psychological, social, and environment). There are seven items in the physical domain, six items in the psychological domain, three items in the social domain, and eight items in the environment domain. The application method, reference time point, and items' scoring were performed as described for the original WHO-Quality of life. In brief, the questionnaire was self-administrated. The participants were required to evaluate their quality of life in the last two weeks. Item ratings varied from 1 to 5, with a higher score suggesting a higher quality of life for the associated item. The WHOQOL-BREF Domain Scores can be determined in three ways. The first is a sum of the raw scores of the constituent items. The second and third approaches are to convert raw ratings. In a second way, the raw scores are converted into scores that vary from 4 to 20, following the WHOQL-100 Instrument. The third approach is to transform 4-20 ratings to a 0-100 percent range.

Procedure

In the current research, standard data collection procedures were adopted to collect data. The scales were administered individually to the participant. Along with the written instruction within the questionnaire, the participants were instructed verbally to make sure they understood the task. Then they were requested to answer the questions sincerely and honestly. They were ensured that their responses would be highly confidential and would be used for research purposes. The respondents had no time limit to finish all items of the scale. Once they completed their task, the answered questionnaires were collected, and the respondents were thanked for their kind co- operation.

Data analysis

Each participant's responses to the scale/test items were scored according to the scoring principle of the self-efficacy and WHO-Quality of life scale. Obtained data were analyzed by using *F*-test (2 X 2 analysis of variance) and Pearson correlation.

Results and Discussion

To compute the study result, the data were examined and coded extended to compute and analyzed with SPSS. The study's main objectivity was to see whether residential and non- residential students differ in self-efficacy, quality of life, and academic achievement. The Mean, SD, and *F*-values are shown in the following tables:

Table 1 shows that the mean score of self-efficacy scores of residential students (M = 59.33) is higher than non-residential students (M = 57.67).

Living Condition	Mean	SD	N
Residential	59.33	8.60	60
Non-Residential	57.67	10.23	60

Table 1: *Mean and SD of self-efficacy scores of residential and non-residential students.*

As shown in table 2, there is a significant difference (F = .925, p < 0.01) regarding self- efficacy scores between residential and non-residential students. Gender also has a significant effect (F = 1.039, p < 0.01) on self-efficacy of students. Results also indicate that there is a significant interaction effect between living conditions and gender on self-efficacy.

Source Of Variance	Sum Of Squares	Df	Mean Square	F	P
Living condition	83.333	1	83.333	.925	.008
Gender	93.633	1	93.633	1.039	.009
Living condition X Gender	7.500	1	7.500	.083	.001

Table 2: *Summary of the analysis of variance for self-efficacy scores as a function of living condition and gender. R Squared = .107 (Adjusted R Squared = .084).*

As shown in table 3, the mean scores of WHO-Quality of Life (domain = physical) scale scores of residential students (M = 69.42) are higher than non-residential students (M = 66.77). And the mean scores of WHO-Quality of Life (domain = psychological) scale scores of residential students (M = 60.57) is higher than non-residential students (M = 55.18).

Domain	Living Condition	Mean	SD	N
Physical	Residential	69.42	13.854	60
	Non-Residential	66.77	15.880	60
Psychological	Residential	60.57	17.488	60
Non-Residential		55.18	19.379	60

Table 3: *Mean and SD of WHO-Quality of Life (domain = physical & psychological) scale scores of residential and non-residential students.*

As shown in table 4, there is a significant difference ($F = .334$, $p < 0.01$) regarding WHO- Quality of Life (domain = physical) scale scores between residential and non-residential students. Gender also has a significant effect ($F = .440$, $p < 0.01$) on Quality of life. Results also indicate a significant interaction effect between living conditions and gender on quality of life. There is a significant difference ($F = 2.562$, $p < 0.05$) regarding WHO-Quality of Life (domain = psychological) scale scores between residential and non-residential students. Gender also has a significant effect ($F = 2.166$, $p < 0.05$) on Quality of life. Results also indicate a significant interaction effect between living conditions and gender on quality of life.

Domain	Source of variance	Sum of Squares	df	Mean Square	F	p
	Living Condition	210.675	1	210.675	.334	.008
Physical	Gender	134.408	1	134.408	.440	.005
	Living Condition X Gender	69.008	1	69.008	.580	.003
	Living Condition	869.408	1	869.408	2.562	.022
Psychological	Gender	735.075	1	735.075	2.166	.018
	Living Condition X Gender	102.675	1	102.675	.303	.003
a. R Squared (*physical)* = .016 (Adjusted R Squared = -.010)						

Table 4: *Summary of the analysis of variance for WHO-Quality of Life (domain = physical & psychological) scale scores as a function of living condition and gender.*

a. *R Squared (psychological) = .042 (Adjusted R Squared = .017).*

As shown in table 5, the mean scores of WHO-Quality of Life (domain = environmental) scale scores of residential students ($M = 52.43$) is lower than non-residential students ($M = 58.03$). And the mean scores of WHO-Quality of Life (domain = social) scale scores of residential students (M = 60.85) is higher than non-residential students (M = 56.37).

Domain	Living Condition	Mean	SD	N
Environmental	Residential	52.43	14.009	60
	Non-Residential	58.03	18.384	60
Social	Residential	60.85	16.494	60
	Non-Residential	56.37	19.658	60

Table 5: *Mean and SD of WHO-Quality of Life (domain = environmental and social) scale scores of residential and non-residential students.*

As shown in table 6, there is a significant difference ($F = 3.513$, $p < 0.05$) regarding WHO- Quality of Life (domain = environmental) scale scores between residential and non-residential students. Gender also has a significant effect ($F = .628$, $p < 0.05$) on Quality of life. Results also indicate a significant interaction effect between living conditions and gender on quality of life. There is a significant difference ($F = 1.815$, $p < 0.05$) regarding WHO-Quality of Life (domain = social) scale scores between residential and non-residential students. Gender also has a significant effect ($F = .822$, $p < 0.05$) on Quality of life. Results also indicate a significant interaction effect between living conditions and gender on quality of life.

Domain	Source of variance	Sum of Squares	df	Mean Square	F	p
Living Condition		940.800	1	940.800	3.513	.029
Environmental	Gender	168.033	1	168.003	.628	.005
Living Condition X Gender		288.300	1	288.300	1.077	.009
Living Condition		603.008	1	603.008	1.815	.015
Social	Gender	273.008	1	273.008	.822	.007
Living Condition X Gender		44.408	1	44.408	.134	.001

Table 6: *Summary of the analysis of variance for WHO-Quality of Life (domain = environmental & social) scale scores as a function of living condition and gender.*

a. *R Squared (env.) = .043 (Adjusted R Squared = .018)*

b. *R Squared (soc.) = .023 (Adjusted R Squared = -.002).*

As shown in table 7, the mean academic achievement of residential students (M = 3.36) is lower than non-residential students (M = 3.46).

Living Condition	Mean	SD	N
Residential	3.36	.233	60
Non-Residential	3.46	.296	60

Table 7: *Mean and SD of academic achievement of residential and non-residential students.*

Table 8 shows a significant difference (F = 5.413, p < 0.05) regarding academic achievement between residential and non-residential students. Gender has no significant effect on the academic achievement of students. Results also indicate that there is no significant interaction effect between living conditions and gender on academic achievement.

Source Of Variance	Sum Of Squares	Df	Mean Square	F	P
Living condition	.329	1	.329	5.413	.045
Gender	.791	1	.791	13.021	.101
Living condition X Gender	.536	1	.536	8.828	.071

Table 8: *Summary of the analysis of variance for academic achievement as a function of living condition and gender.*

a. R Squared = .190 (Adjusted R Squared = .169).

As shown in table 9, there is a significant correlation between self-efficacy and the physical, psychological, environmental and social domains of WHO-Quality of life. That means, self-efficacy is significantly and positively correlated with physical (r = .496**, p < 0.01), psychological (r = .592**, p < 0.01), environmental (r = .203**, p < 0.01) and social (r = .424, p < 0.01) domains of WHO-Quality of Life. Academic achievement has no significant relation with physical, psychological, and social domains of WHO-Quality of Life. Academic achievement is significantly and positively correlated with the environmental (r = .185*, p < 0.05) domain of WHO-Quality of Life.

Variables	Physical	Psychological	Environmental	Social
Self-efficacy	.496**	.592**	.203**	.424**
Academic achievement	-.031	-.042	.185*	-.134

Table 9: *Correlation between Self-Efficacy, Quality of Life, and Academic Achievement.*

**Correlation is significant at the 0.05 level (2-tailed).*

*** Correlation is significant at the 0.01 level (2-tailed).*

The objectives of the present study were to investigate whether self-efficacy, quality of life, and academic achievement vary between residential and non-residential students of University and to investigate whether self-efficacy, quality of life, and academic achievement vary with the gender of the respondents. To achieve this end, the study was conducted on 120 students (Residential = 60, non-residential = 60). In this study, there were used the Bangla Version of Sherer's General self-efficacy scale to measure self-efficacy, the Bangla Version of WHO-Quality of life to measure the quality of life, and the data obtained in the present study were analyzed by using F-test (2 X 2 analysis of variance) and Pearson correlation. Following is a consistent discussion of the important aspects of the results.

The independent samples F-test revealed that the difference between the residential and non-residential students regarding self-efficacy had found to be significant (F = 5.983, p < 0.05). That is, self-efficacy varies with the function of living conditions (home and hall). The present study found that residential students (M = 59.33) had significantly higher self-efficacy than non- residential students (M = 57.67). Resident halls typically allow students to learn from peers and interact with the learning world. They create and expand opportunities and experiences for student involvement and make them independent. Residential students are needed to be adaptive and adjust themselves in a challenging environment.

On the other hand, the students who live under parental guidance at their homes are likely to be financially and emotionally dependent on their parents and family members. As a result, they face few difficulties and get few opportunities to learn from peers and life experiences. In a study, it was found that residential students demonstrated a much greater sense of efficacy in their possible ability to accomplish their goals and aspirations, to attain them in the future [13]. Self- efficacy has a significant and positive correlation with adjustment to college, and social supports from peers, more than any other group, was essential to this adjustment [8]. It was the most potent and effective way in students' adaptation and adjustment [7].

This study results revealed that males' and females' self-efficacy differs significantly (F = 1.039, p < 0.05). A study on the self-efficacy of physics students showed a significant effect on self- efficacy regarding gender. Females frequently recorded lower self-efficacy than males, and males with no previous organized physical activity displayed the highest self-efficacy [20].

In this study, the interaction effect of living conditions and gender had found to be significant (F = .083, p < .01). There is supporting study which argued that living in a residential building positively impacts adjustment, and gender mediates this effect [23].

The independent samples *F*-test revealed that the difference between the residential and non-residential students regarding quality of life had found significant for all the domains (domain = physical; $F = .334$, $p < 0.01$), (domain = psychological; $F = 2.562$, $p < 0.05$), (domain = environmental; $F = 3.513$, $p < 0.05$) and (domain = social; $F = 1.815$, $p < 0.05$). That is, quality of life varies with the function of living conditions (home and hall). In the present study, it was found that residential students had significantly higher scores in domain = physical ($M = 69.42$), domain = psychological (M = 60.57) and domain = social (M = 60.85) than non-residential students in domain = physical ($M = 66.77$), domain = psychological (M = 55.18) and domain = social (M = 56.37). The exception was seen in domain = environmental, where residential students had a significantly lower score ($M = 52.43$) than non-residential students ($M = 58.03$). Students living in University halls live a routine life. They maintain a timetable where they have to take their food, shower, and do other activities on time. University has its medical center. So, whenever they are sick, it is easy for them to take medical treatment. These can be possible reasons to have a higher score in the physical domain of quality of life. Residential students are surrounded by their friends and academic personnel. They get peer support for their academic and psychological issues and also at convenience to get expert advice from teachers than those of non-residential students.

Moreover, University halls appoint counselors to provide professional help to students. So, there are clear reasons to acquire higher scores in the psychological domain by residential students. In University halls, students come from several areas of the country. They have different cultures, different personality patterns. Students need to adapt to and adjust to the new environment. As they leave their comfort zone, their coping strategy is improved. They are likely to build social relationships and provide as well as get social support from their surroundings. Students living in their places need not face these difficulties, so they are less likely to build social relationships than residential students. Residential students thus achieved increasing levels of quality of life in the social domain. Although residential students lead quality of life scores in three domains, they lag in the environmental domain. It shows the environmental problems of the University of Dhaka. At Dhaka University, accommodation is a big issue. They are compelled to huddle in a small room. There is a lack of financial resources for residential students, as many of them come from needy families. Many of them cannot guarantee their security. There is a lack of fire safety, building security, efficient water management, climate control, and many pollutions. Not all residence halls are ideally built to optimize learning opportunities for students. At the same time, home environments ensure most of the amenities.

The result of the study revealed that the quality of life between males and females differs significantly from each other in all four domains (domain = physical; $F = .440$, $p < 0.01$, domain = psychological; $F = 2.166$, $p < 0.05$, domain = environmental; $F = .628$, $p < 0.01$, domain = social; $F = .822$, $p < 0.01$). In this research, male students were documented to have higher scores than female students in physical, psychological, and social domains. On the other hand, female students were reported to have higher environmental domain scores than males. The interaction effect between gender and living conditions had also be found significant in all four domains. In the physical, psychological, and social domains, residential male students were found to achieve higher scores.

In the environmental domain, residential female students were reported to have a higher score. Contradictory findings were also reported. Supporting studies found that non-residential females had a better quality of life than residential males [14]. It was also found in their research that residential females were more vulnerable to psychological health problems.

The independent samples *F*-test revealed that the difference between the residential and non-residential students regarding academic achievement had found to be significant ($F = 5.413$, $p < 0.05$). That is, academic achievement varies with the function of living conditions (hall and home). The present study found that residential students ($M = 3.36$) had significantly lower academic achievement (CGPA) than non-residential students ($M = 3.46$). The possible reason can be the environmental problem of resident halls. From the environmental domain of quality of life, it was reported that residential students scored lower than non-residential students. Students' academic achievement is positively associated with their perception of their learning environment [1]. The higher academic achievement of non-residential students proves that the learning environment of their places is better than the hall environment.

The study results revealed that the academic achievement between males and females was not significantly different. There is evidence supporting this findings, which suggests that female's GPA does not differ from male's, though fameless predicted to have lower GPA than males predicted [9].

The result indicated that there had a significant and positive correlation (domain = physical; $r = .496$, $p < 0.01$, domain = psychological; $r = .592$, $p < 0.01$, domain = environmental; $r = .203$, $p < 0.01$ and domain = social; $r = .424$, $p < 0.01$) between self-efficacy and quality of life. That means students who were better in self-efficacy were better in quality of life and vice versa. The result also indicated that academic achievement is significantly and positively correlated ($r = .185$, $p < 0.05$) with the environmental domain of quality of life. No significant correlation was identified between academic achievement and the other three aspects of quality of life (physical, psychological, and social).

There is a heightened concern that students require adequate physical, psychological, environmental, and social assistance to obtain high academic success and self-efficacy. Many students, both male, and female, come to Dhaka city to get admitted to University. They live in University halls. Nevertheless, they do not get enough amenities from the hall environment as they deserve. The environmental issues should be solved, and facilities should be improved for the betterment of students.

The study has some limitations. The sample was taken from Dhaka University only. Furthermore, the sample size of this research was not adequate to come to a conclusion. Though samples were selected purposively, using the randomization sampling technique, generalization power would be increased, and the study would be more representative.

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