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# Social Skills, Quality of Life, Mental Health, and Related Factors of First-Year Undergraduate Students at Chulalongkorn University During the Current New Normal

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Email: [jirada.pr@chula.ac.th](mailto:jirada.pr@chula.ac.th)**Keywords:**

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**How to Cite:**Pinradub, K. & Prasartpornsirichoke, S. (2024). Social Skills, Quality of Life, Mental Health, and Related Factors of First-Year Undergraduate Students at Chulalongkorn University During the Current New Normal. *Journal Dhamma for Life*, 30(3), 513-525.**ABSTRACT**

**Objectives:** Investigate the social skills, quality of life, and mental health, of first-year undergraduate students at Chulalongkorn University after the COVID-19 pandemic was resolved in 2022

**Methods:** This cross-sectional study included 411 first-year undergraduate students from 18 faculties studying in academic year 2023 at Chulalongkorn University. The presence social skills, quality of life and mental health state including depression anxiety and stress were assessed using the Social Behavior Scale, World Health Organization Quality of Life Brief – Thai (WHOQOL-BREF-THAI) and Depression Anxiety Stress Scales 21 (DASS21).

**Results:** There were no significant differences in gender, hometown, several sources of income, and accommodation differences in social skills, quality of life and mental health. There was no significant linear correlation between revenue, and expenses in the social skills, quality of life and mental health.

**Conclusion:** Most of the participants not only had an average level of social skills and quality of life, but also had normal depression, anxiety, and stress. The author suggests that a further study of the other effects of living in the current new normal should be conducted, to gain a deeper insight of how living in the current new normal affects a college student.

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## **Introduction**

It has been several years since the beginning of Coronavirus disease 2019 or the COVID-19 outbreak at the end of 2019. In Thailand, the Ministry of Public Health announced an Emergency Decree on Public Administration in an Emergency Situation in all areas of the Kingdom of Thailand from 26 March 2020 in order to prevent the spreading of COVID-19 disease. This emergency decree issued a regulation for general public and guideline for government agencies to follow. such as wearing a face mask while in public, working or studying from home and social distancing etc. Disease prevention measures changed the way of life and turned it into the new way of life, called 'New Normal' (Parichat Phumkhachorn & Pongsak Rattanachaikunsopon, 2020).

The effects of the new normal on college students have been studied several times. Ramirez-Contreras, Zerón-Rugério and Izquierdo-Pulido studied the impact of the 'new normal' on daily sleep and eating routines in undergraduate students from the University of Barcelona (Barcelona, Spain); the results indicated that the 'new normal' had a positive impact on daily sleep and eating routines (Ramírez-Contreras, Zerón-Rugério, & Izquierdo-Pulido, 2022). The next study, Distor, Cabello, and Tus studied the relationship between social media usage and sleep quality in the 'new normal' among new college students from higher educational institutions in the Philippines, the findings revealed that in the 'new normal', social media usage affects the quality of the freshman college students (Distor, Cabello, & Tus, 2022). Furthermore, VanRoo, Norvilitis, Reid and O'Quin investigated motivation, sense of purpose, academic adjustment, grit and responses to COVID 19 related stress among college students from Buffalo State University, United States of America under the 'new normal' during the COVID-19 pandemic, Results suggested that the motivation of college stayed steady throughout the pandemic, while sense of purpose, academic adjustment and grit fluctuate during the pandemic, and responses to COVID 19 related-stress have differed overtime due to the high level of stress and anxiety related to COVID-19 (VanRoo, et al., 2023). And Nawin Promjisa and Tongrak Jitbantao studied the well-being of college students at dormitories in Chiang Rai Rajabhat University under the 'new normal' during COVID-19 era, results indicated that during COVID-19 pandemic, college students' well-being were in normal high levels in all dimensions which cognitive well-being has the highest score (Nawin Promjisa & Tongrak Jitbantao, 2022).

According to previous studies, the study on social skills, quality of life, mental health and the associated factors of social skills, quality of life, and mental health of first-year undergraduate students at Thai university after passing the COVID-19 pandemic is still limited in the literature. Therefore, this study aims to investigate social skills, quality of life, mental health status, and associated factors of social skills, quality, and mental of first-year undergraduate students at Chulalongkorn University after passing the COVID-19 pandemic or in the new normal stage. The results may provide a better understanding of social skills, quality of life, mental health, and how living in the current new normal affects undergraduate students at Chulalongkorn University.

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## Literature Review and Theoretical Framework

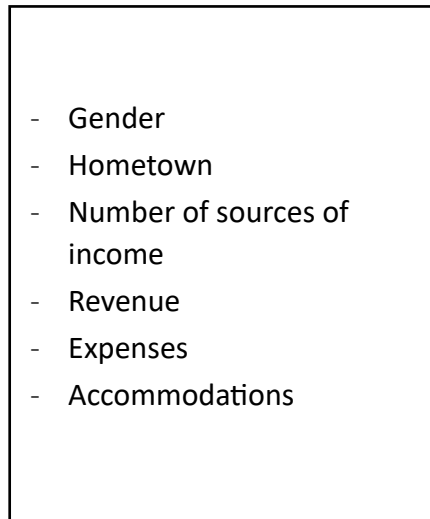
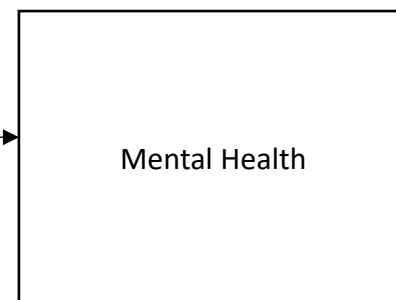
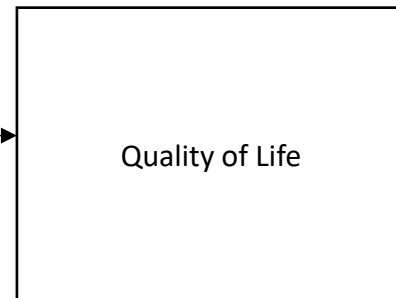
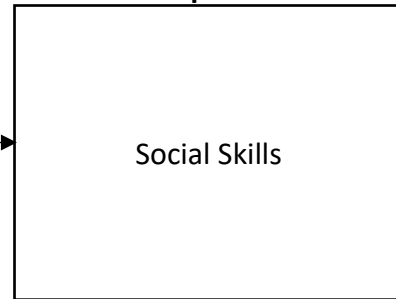
### Literature Review

Department of Mental Health has defined the definition of ‘New Normal’ as an era of changes in society, environment, family, and personal behavior due to an emerging of COVID-19 pandemic in order to be able to live under the COVID-19 outbreak which can be divided into 4 aspects: 1. Technology and Internet aspect, individuals will use technology and internet in daily life more than before both for work and education, such as working from home, online learning, and purchasing products online or conducting an online transaction. 2. Social distancing aspect, individuals will pay more attention to reducing interpersonal interactions with others, such as avoiding going to public places, doing their activities at home more often and using technology as an instrument for communication. 3. Health caring aspect, individuals will take care of their health and hygiene, such as wearing a face mask and using an alcohol gel to wash their hands more often. And 4. Life balancing aspect, individuals will adjust their life balance, such as personal life, work, study, and reducing interactions with others in society (Department of Mental Health, 2020).

Kriengsak Chareonwongsak has defined the definition of ‘Social skill’ as a set of skills that aim to create positive relationships between individuals in society, including communication skills, speaking, listening, working with others, and understating social situations or the rules and regulations in society. (Kriengsak Chareonwongsak, 2008).

World Health Organization has defined the definition of ‘Quality of life’ as individual’s perceiving their quality of life or their living conditions which each individual has their own unique quality of life due to their social context such as culture, social norms, and personal standards. And quality of life can be divided into 4 dimensions; 1. physical health dimension, 2. mental health dimension, 3. social relationship dimension, and 4. environmental dimension (World Health Organization, 2012).

Department of Psychiatry, Faculty of Medicine Ramathibodi Hospital, Mahidol University has defined the definition of ‘Mental Health’ as a mental state of individual which can be changed all the time due to their environment, such as economics, society, science, and technology. Person with a healthy mental health is someone who can happily adapt to society and environment, and be able to reasonably and flexibly adapt to the situation (Department of Psychiatry, Faculty of Medicine Ramathibodi Hospital, Mahidol University, 2014).

**Theoretical Framework****Independent variables****Dependent variables****Objectives**

Investigate the social skills, quality of life, and mental health, of first-year undergraduate students at Chulalongkorn University after the COVID-19 pandemic was resolved in 2022

**Research Methodology****Population**

This cross-sectional study included first-year undergraduate students at Chulalongkorn University from these 18 faculties (engineering, arts, science, political science, architecture, commerce and accountancy, education, communication arts, economics, medicine, veterinary medicine, dentistry, pharmacy, law, allied health science, psychology, sports science, and

school of agricultural resources). Students who met all of the following criteria were included: (1) having the Thai nationality; (2) having status of first-year undergraduate student at Chulalongkorn University; and, (3) currently living in the current new normal during the study period. Students who met these following criteria were excluded: (1) unwilling to participate in the study; and (2) Cannot communicate in Thai language, such as cannot read, write and / or understand the Thai language.

### **Measurement**

The presence of social skills were assessed using the Social Behavior Scale, created by Kullaphat Yingdumnoon There are 36 items, and each item is scored using a five Likert scale, with a 1 indicating the lowest level of agreement and a 5 indicating the highest level of agreement. The highest achievable number of points is 180. Persons scoring 77 to 122 are regarded as having low social skills, 123 to 154 are regarded as having average social skills, and 155 to 180 are regarded as having high social skills. The reliability and validity of Social Behavior Scale are 0.96, and 1.00 (Kullaphat Yingdumnoon, 2018).

The presence of quality of life were assessed using the World Health Organization Quality of Life Brief – Thai (WHOQOL-BREF-THAI), developed from the World Health Organization Quality of Life Brief by Suwat Mahatnirankul et al. There are 26 items, and the items were separated into two groups, the group of questions with positive meaning (23 items) and the group of questions with negative meaning (3 items). Each item of the group of questions with positive meaning is scored using a five Likert scale, with a 5 indicating the lowest level of agreement and a 1 indicating the highest level of agreement, and each item of group of questions with negative meaning is scored using a five Likert scale, with a 1 indicating the lowest level of agreement and a 5 indicating the highest level of agreement. The highest achievable number of points is 130. Persons scoring 26 to 60 are considered to have a poor quality of life, 61 to 95 are considered to have an average quality of life, and 96 to 130 are considered to have an excellent quality of life. The reliability and validity of WHOQOL-BREF-THAI are 0.65, and 0.84 (Department of Mental Health, 2016).

Mental health was divided into three aspects, depression, anxiety, and stress. The presence and level of depression, anxiety, and stress were assessed using the Depression Anxiety Stress Scales 21 (DASS21), translated by Sukanlaya Sawang et al. and modified by Nuttorn Pityaratstian, and Napakkawat Buathong. There are 21 items total, and there are 7 items for each of the three aspects. Each item of each aspect is scored using a 4 point Likert scale (0 – 3). The highest achievable number of points is 21 for depression, anxiety, and stress. For the depression aspect, persons scoring 0 to 4 are considered to have normal depression, 5 to 6 are considered to have mild depression, 7 to 10 are considered to have moderate depression, 11 to 13 are considered to have severe depression, and 14+ are considered to have extremely severe depression. For the anxiety aspect, persons scoring 0 to 3 are considered to have normal anxiety, 4 to 5 are considered to have mild anxiety, 6 to 7 are considered to have moderate anxiety, 8 to 9 are considered to have severe anxiety, and 10+ are considered to have extremely severe anxiety. For the stress aspect, persons scoring 0 to 7 are considered to have normal stress, 8 to 9 are considered to have mild stress, 10 to 12 are considered to have moderate stress, 13 to 16 are considered to have severe stress, and 17+ are considered to have extremely severe stress. The reliability of each aspect of DASS21

(depression, anxiety, and stress) are 0.82, 0.78, and 0.69 (Master of Science Program in Mental Health Faculty of Medicine Chulalongkorn University, 2011).

### **Procedure**

After receiving the certificate of approval from the Institutional Review Board, Faculty of Medicine, Chulalongkorn; (IRB no. 0273/66), written informed consent was obtained from all participants. Participants were asked to complete a self-assessment questionnaire which complied with (1) personal data questionnaire; (2) Social behavior scale; (3) World Health Organization Quality of Life Brief – Thai (WHOQOL-BREF-THAI); and (4) Depression Anxiety Stress Scales 21 (DASS21). The samples in this study were sampling from 18 faculties of Chulalongkorn University using stratified sampling technique.

### **Statistical analysis**

Descriptive analysis of all data was performed and reported as number, percentage, means, and standard deviation (SD). The independent T-test was used to compare two sample means of Gender, Hometown, and a number of income sources, to determine if the samples are different from each other in terms of social skills, quality of life, and mental health, while Pearson correlation was used to measure linear correlation between the revenue, and expenses with social skills, quality of life, and mental health, and one-way ANOVA was used to analyze the different between the means of the accommodations of three different participants in social skills, quality of life, and mental health. The author conducted all analyzes using IBM SPSS Statistic version 29.0 and considered that  $P < 0.05$  to be statistically significant. All data generated or analyzed during this study are included in this published.

### **Results**

The study was conducted between January 2023 to January 2024, and in total, there were 411 individuals participated subjects enrolled in this study. Most participants were female (63.5%) (male, 36.5%). The age of participants varied from 17 to 23 years old, and most of participants lived in Bangkok Metropolitan Region (51.2%), while others lived in the province (48.8%). Among the participants, their revenue varied from 0฿ to 50,000฿, with a mean of 9,337.9฿ and a standard deviation (SD) of 5,492.4฿, and their expenses varied from 600฿ to 40,000฿, with a mean of 7,899.9฿ and a SD of 4,841.8฿. Most participants have only one source of income (81.3%), and others have more than one source of income (18.7%). Most participants lived with their parents/family (46.7%), while others lived alone (27%), or lived with their colleagues (26.3%).

For participants' living in the current new normal, most of the participants took an online learning 1 or 2 days a week (72.0%), watched movies or listen to the music via an online platforms more than 3 days a week (81.3%), shopped or made financial transactions via an online platforms more than 3 days a week (50.4%), made social distancing 1 or 2 days a week (65.0%), and wore medical mask in public 1 or 2 days a week (42.3%)



The study reported that most of the participants have an average level of Social skills (49.6%) with a mean of 150.79 and a SD of 16.27, while having a high social skills was reported to be the second highest percentage of level of social skills (45.0%), and having low social skills was reported to be the lowest percentage of level of social skills (5.4%). In terms of Quality of life, most of participants have an average quality of life (54.5%) with a mean of 93.64 and a SD of 12.39, while having a good quality of life was reported to be the second highest percentage of level of quality of life (45.3%), and having a low quality of life was reported to be the lowest percentage of level of quality of life (0.2%). And in terms of Mental health, for Depression aspect, most of participants have a normal depression (52.3%) with a mean of 5.35 and a SD of 4.43, while the second highest percentage of level of is moderate depression (20.2%), the third highest percentage of level of depression is mild depression (15.3%), the fourth highest percentage of level of depression is severe depression (7.1%), and the lowest percentage of level of depression is extremely severe depression (5.1%). For Anxiety aspect, most of participants have a normal anxiety (26.5%) with a mean of 6.45 and a SD of 4.08, the second highest percentage of level of anxiety is extremely severe anxiety (20.9%), the third highest percentage of level of anxiety is moderate anxiety (20.2), the fourth highest percentage of level of anxiety is mild anxiety (18.7%), and the lowest percentage of level of anxiety is severe anxiety (13.6%), and for Stress aspect, most of the participants have a normal stress (59.9%) with a mean of 6.68 and a SD of 4.32, the second highest percentage of level of stress is mild anxiety (19.2%), the third highest percentage of level of stress is moderate anxiety (11.4%), the fourth highest percentage of level of stress is severe stress (6.6%), and the lowest percentage of level of stress is extremely severe stress (2.9%).

**Table 1 and Table 2** present the results of the analysis of the differences between the means of gender, hometown, and a number of sources of income in terms of social skills, quality of life, and mental health. There were no significant differences in gender, hometown, and several sources of income differences in social skills, quality of life, and mental health. **Table 3** presents the result of the analysis of the linear relationship between participants' income and expenses with social skills, quality of life, and mental health. There was no significant linear correlation between revenue and expenses in the social skills, quality of life, and mental health. **Table 4 and Table 5** present the results of the analysis of the differences between the means of accommodations on social skills, quality of life, and mental health. There were no significant differences in accommodation differences in social skills, quality of life, and mental health.

**Table 1** The differences between the means of gender, hometown, and a number of sources of income in terms of social skills and quality of life analysis.

	N	Social Skills			Quality of Life		
		Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>p</i> value
<b>Gender</b>							
Male	150	149.02	17.41	.094	94.47	12.16	.309
Female	261	151.81	15.52		93.17	12.52	
<b>Hometown</b>							
Bangkok Metropolitan	210	149.80	17.27	.201	93.48	12.34	.776
Region Province	200	151.86	15.16		93.82	12.51	

	N	Social Skills			Quality of Life		
		Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>p</i> value
<b>Number of sources of income</b>							
One source of income	334	150.45	16.55	.377	94.01	12.53	.215
More than one source of income	77	152.27	15.05		92.06	11.72	

Data were reported with a 95% confidence interval.

**Table 2** The differences between the means of gender, hometown, and a number of sources of income in terms of mental health analysis.

	N	Depression			Anxiety			Stress		
		Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>p</i> value
<b>Gender</b>										
Male	150	5.59	4.75	.413	6.21	4.30	.379	6.59	4.45	.737
Female	261	5.21	4.24		6.58	3.96		6.74	4.25	
<b>Hometown</b>										
Bangkok, Thailand	210	5.45	4.65	.604	6.51	4.06	.740	6.70	4.38	.898
Region Province	200	5.22	4.21		6.38	4.13		6.64	4.27	
<b>Number of sources of income</b>										
One source of income	334	5.39	4.50	.691	6.40	4.10	.588	6.63	4.36	.629
More than one source of income	77	5.17	4.15		6.68	4.34		6.90	4.19	

Data were reported with a 95% confidence interval.

**Table 3** The linear relationship between participant revenue, and expenses with social skills, quality of life, and mental health.

	The correlation coefficient ( <i>r</i> )				
	Social Skills	Quality of Life	Depression	Anxiety	Stress
Revenue	.060	.054	-.058	-.064	-.039
Expenses	.086	.048	-.090	-.018	-.027
	<i>p</i> value				
	Social Skills	Quality of Life	Depression	Anxiety	Stress
Revenue	.228	.277	.245	.200	.438
Expenses	.084	.339	.071	.717	.594

Data were reported with a 95% confidence interval.



**Table 4** Differences between the means of accommodations of participants in social skills and quality of life analysis.

	N	Social Skills			Quality of Life		
		Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>p</i> value
<b>Accommodations</b>							
Lived alone	111	151.02	17.46	.643	95.26	12.13	.215
Lived with their parents/family	192	150.06	16.24		93.42	12.20	
Lived with their colleagues	108	151.87	15.11		92.38	12.93	

Data were reported with a 95% confidence interval.

**Table 5** Differences between the means of accommodations of participants in mental health analysis.

	N	Depression			Anxiety			Stress		
		Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>p</i> value	Mean	S.D.	<i>P</i> value
<b>Accommodations</b>										
Lived alone	111	5.26	4.38	.906	6.28	4.15	.753	6.34	4.21	.609
Lived with their parents/family	192	5.31	4.62		6.41	4.01		6.76	4.41	
Lived with their colleagues	108	5.51	4.17		6.69	4.17		6.89	4.30	

Data were reported with a 95% confidence interval

## Discussion of Results

This study represented the current mental health of first-year undergraduate students at Chulalongkorn University, and showed that most of the participants had an average level of depression, anxiety, and stress, the author hypothesized that living in the current new normal would affect their social skills, quality of life, and mental health. But the results revealed that there were no significant relationships between living in the current new normal, social skills, quality of life, and mental health of first-year undergraduate students at Chulalongkorn University.

According to the findings of this study, living in the current new normal does not have a significant relationship with their social skills which corresponds to the findings of Mahamid and Bdier, they examined the relationship between social skills, resilience, and grief among the college students from Palestinian university in Palestine, the results revealed that most of the participants had average social skills and social skills were positively correlated with resilience, and negatively correlated with grief (Mahamid & Bdier, 2020). And the results in this study correspond to the finding of Elfajri and Tiarina, they studied one of the social skills such as speaking ability among grade 8 students using a role-play technique in 'new normal' era, the results revealed that the participants had an average speaking ability (Elfajri & Tiarina, 2022).

For aspects of quality of life, the results revealed that living in the current new normal has no significant relationship with their quality of life, which corresponds to the findings of

Pathavee Waewwab, Wirichada Pan-ngum, Sukhontha Siri, Bhophkrit Bhopdhornangkul & Wiriya Mahikul, they assessed the knowledge, attitudes, and practices regarding 'new normal' guidelines and quality of life among Thai people during the COVID-19 outbreak, the results revealed that most participants had a high QOL score (with a mean of 96.97 and a SD of 14.18) and the factors with QOL are attitudes and practices regarding 'new normal' guidelines during the COVID-19 outbreak (Pathavee Waewwab, et al., 2022). And the results in this study correspond to the findings of Krueakaew Tiaprapong et al., they studied the impact of COVID-19 awareness on the wellness of Thai health professionals, the results revealed that most of the participants had an average quality of life and the quality of life were affected by the attitude and knowledge of COVID-19 awareness during the 'new normal' (Krueakaew Tiaprapong, et al., 2021).

For mental health divided into three aspects (depression, anxiety, and stress), depression aspects, living in the current new normal does not have a significant relationship with their depression which corresponds to the findings of Yu et al., they investigated the prevalence of depressive symptoms and associated factors in college students in Wuhan, China after a long quarantine time and online learning at home, the results revealed that a total of 1,486 participants (15.8%) had moderate to severe depressive symptoms and the factors that independently associated with the higher risk of depressive symptoms are the experience of being quarantined for observation or treatment, family members or friends dying of COVID-19, rarely or never seeking help from others, fewer supportive relatives or friends, less support from family in the past month, a worse relationship with parents at home, a longer time spent daily on electronic devices except for online learning, and feeling anxious in the face of returning to school (Yu, et al., 2021). And the results in this study correspond to Jhoselle Tus's findings, he evaluated a mental health included depression, anxiety, and stress among high school students from the public and private schools in Bulacan, Philippines, midst the new normal of education employed, the results revealed that most of the participants had moderate to extremely severe levels of depression, anxiety, and stress, and there was no significant relationship between high negative mental health symptoms and academic performance (Tus, 2021).

For anxiety aspects, living in the current new normal does not have a significant relationship with their anxiety and there were no significant differences in gender in the anxiety aspect, which inconsistent with the findings of Ekasari et al., they studied level of anxiety among university students from UIN Alauddin Makassar, the results revealed that the gender variable has a significant correlation with the level of anxiety (Ekasari, et al., 2021). And the results in this study are also inconsistent with the findings of Puswiartika, Ratu, Misnah, Munifah and Silalahi, they studied the anxiety profile of students of Tadulako University, Indonesia, the results revealed that students had high anxiety during the COVID-19 pandemic (Puswiartika, et al., 2021).

And in term of stress aspects, living in the new normal has no significant relationship with stress which corresponds to the findings of Singh, Pandey, Datta and Batra, they compared the stress, internet use, substance use, and coping among adolescents, young adults, and middle-aged adults amid India's 'new normal' era, the results revealed that most of the participants had low to moderate stress (Singh, et al., 2021). And the results in this study correspond to the findings of Widyanita, Rosyad and Iskamto, they studied the correlation between sex, age, education level and the anxiety level, stress, and spirituality during the new

normal of the COVID-19 pandemic. The results revealed that there was no correlation between gender and stress (Widyanita, et al., 2022).

Limitations of this study be mentioned. First, the data from the faculty of fine and applied arts at Chulalongkorn University were not collected in this study due to the inappropriate environment of the faculty to collecting data with their first-year undergraduate students, therefore, the results of this study can't completely represent all first-year undergraduate students at Chulalongkorn University. Second, this study used a limited sample size from each of the faculty and only collected data from first-year undergraduate students at Chulalongkorn University, so the results from this study cannot represent all the first-year undergraduate students from other universities in Thailand. Furthermore, the information about living in the current new normal of participants was not used as an independent variable to measure the relationship between living in the current new normal, social skills, quality of life, and mental health because it was used as an including criteria in this study, which might provide a better insights to comprehend the relationship between living in the current new normal, social skills, quality of life, and mental health of first-year undergraduate students at Chulalongkorn University.

## **Conclusions**

This study investigated social skills, quality of life, mental health, and the relationship between living in the current new normal, social skills, quality of life, and mental health of first-year undergraduate students at Chulalongkorn University. The results revealed that most of the participants had an average level of social skills, an average quality of life, a normal depression, anxiety, and stress. For the relationship between living in the current new normal, social skills, quality of life, and mental health, there were no significant differences in sex, hometown, number of sources of income and accommodation differences in social skills, quality of life and mental health, and there was no significant linear correlation between revenue, and expenses in the social skills, quality of life, and mental health.

## **Recommendations**

This study recommends a further study on the new effects of living in the current new normal, besides how it affected social skills, quality of life, and mental health of first-year undergraduate students at Chulalongkorn University. Futures studies can provide a deeper insight into the other effects of living in the current new normal.

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