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Medical exempts from physical effort: An alarm signal for health or a low self-esteem?!

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Abstract

The research undertaken completes other studies performed until present days, both theoretically and practically, regarding the existence of the medical exempt from physical effort, and aims to be an alarm signal, because the medical exempt is useful when it is given for real causes and an alarm system which endangers health, when a low self-esteem is hidden. As a consequence of the study, it is a necessity in educational research for motion, of the manner in which students with medical exempts for physical effort regard and understand this aspect. In our research, we started from the hypothesis according to which medical exempts can be a social benchmark, regarding the state of health, but also an indicator that a lot of subjects use a medical exempt (M.E.) as a reason to hide a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders. The research was undertaken on a group of students involved in the didactic process from the Petroleum Gas University Ploiești, in a number of 97 students (68-girls; 29 boys), all of them with medical exempts, randomly chosen from the two years of study (year I and year II) who have Physical Education lessons in their syllabus and who were allocated to me in the didactic norm. Bibliographic study method; observation method; investigation method (conversation, questionnaire entitled – “Me”, the medical exempt and the Physical Education lesson); pedagogical experiment method; statistical-mathematic method; graphical method were employed as methodology. Medical exempt (M.E.) is just an instrument – cover, through which people attempt to hide; certain negative and intense emotional experiences; a low self-esteem, a precarious affective disposition; an unease psyche with serious personality disorders. Concluding all these aspects, I felt obliged to signal the alarm towards specialists in the field and to launch the proposed subject, considering that it is timely and it opens new research perspectives. We state that, without a doubt, motric activities stimulate and value individuals, and for this reason we recommend the presence of Physical Education lessons in the students' syllabus and as many discussions with them as possible, regarding the use of medical exempts as a cover or as a necessity imposed by the state of health.

Keywords: Students, medical exempt, motric activities, self-esteem

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1. Introduction

It is known that “personality is a dynamic organization within the individual...” (Druta et al., 2015,) of all that represents psycho-physical systems and behaviors, because personality is the one that individualizes us and makes us unique. The study undertaken completes other studies made until nowadays, both in a theoretical and practical plan, regarding personality, its link with the constitutional theory, with its dimensions, introversion/extroversion, stable/unstable, with the three conscious resort, subconscious, unconsciousness all reflected in the self-esteem, their link with the existence of the medical exempt for physical effort. The entire scientific process undertaken aims to be a signal, because a medical exempt is useful when it is given for real causes, and it represents an alarm system which endangers the personality and the psycho-emotional health, when it becomes an colorless screen, a hiding place, and hides a low self-esteem. As a consequence of the research undertaken, it is a necessity for the research of motion education of the manner in which students who have medical exempts for physical effort regard and understand this aspect.

2. Hypothesis

In our research, we started from the hypothesis according to which medical exempts can be a social benchmark, regarding the state of health, but also an indicator that a lot of subjects use a medical exempt (M.E.) as a reason to hide a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders.

3. Methods

3.1. Subjects

The research was undertaken on a group of students involved in the didactic process from the Petroleum Gas University Ploiești, in a number of 97 students (68-girls; 29 boys), all of them with medical exempts, randomly chosen from the two years of study (year I and year II) who have Physical Education lessons in their syllabus and who were allocated to me in the didactic norm.

3.2. Research methods

The bibliographic study method; the observation method; the investigation method (conversation, questionnaire entitled – “Me, the medical exempt and the Physical Education lesson”); the pedagogical experiment method; the statistical-mathematic method; the graphical method.

3.3. Research purpose

The purpose of our research was to emphasize that a medical exempt is just an instrument-cover, through which individuals attempted to hide: negative and intense emotional experiences, a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders.

4. Research content

“Of all the personality features, self-esteem is one of the most precious...” (Novacovici, 2006, p. 77), and is crowned by what we call self-esteem. The opinion of Stanculescu (2008, p. 308) regarding the self-esteem is described with precision and fineness in *The Psychology of Education* “self esteem is an affective component of the cognitive pattern” when we refer to the first person and it includes “...the affective reflection to the perception of the own image”, and “Emotions play an important role in attitude change. Emotions work interrelated with the cognitive process.”(Vasile, 2011, p. 80) and influence the self-esteem, taking into consideration that “Training in sports is a practical activity that

requires a certain level of effort.”(Sabau, Niculescu & Gevat, 2014, p. 498), at which we add the above mentioned, and especially the research hypothesis laying at the basis of our paper, namely that medical exempts can be a social benchmark, regarding the state of health, but also an indicator that a lot of subjects use a medical exempt (M.E.) as a reason to hide a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders. I applied the research on a group of 97 students (68 girls; 29 boys), enrolled in the Petroleum-Gas University from Ploiesti, the questionnaire entitled – “Me, the medical exempt and the Physical Education lesson”, composed of 19 items, with answers as following:

- **Closed answer – questions from 1-8** – questions which give us information regarding the residence environment, somatic indices, family, social factors involved in the up-bringing and education of the subject;
- **Open answer – questions number 8 and 19** – which give us information regarding the communication capacity of the subject and the real reason for the existence of the medical exempt (M.E.) from physical effort;
- **Multiple choice answer – questions from number 10 to number 18 and 19** – these were questions which gave us indications, through the answers given, regarding the self-esteem.

Important – We mention that questions number 11 and 12 are determining questions, trap questions, through which we aim to surprise and test the statement from the hypothesis according to which medical exempts (M.E.) are a reason to hide a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders. Question number 13 comes to strengthen and to confirm the statement from the hypothesis.

The respective questionnaire is based on the “Scale of measuring self-esteem” of Morriss Rosenberg (1965) rendered by Stanculescu (2008, p. 310), which I transformed according to the requirements of our domain – Physical Education – and I added new questions useful for the identification of the researched issue. Despite of this, I kept the score of items and their interpretation, identical with the scale described by Morriss Rosenberg and quoted by Stanculescu E., in her book (2008, p. 310), as following:

- A score registered from 1-10 = defines a very low level of self-esteem;
- A score registered from 11-20 = defines a low level of self-esteem;
- A score registered from 21-30 = defines a medium level of the self-esteem;
- A score registered from 31-40 = defines a high level of self-esteem;
- A score registered from 41-50 = defines a very high level of self-esteem.

Taking into consideration all the above information, we have to mention that the questions from the questionnaire emphasize two extremely important aspects regarding the theme, which allow us to know details regarding the group involved in the research. The questionnaire had three sections marked with I, II, and III, as following:

- **Section I.** Contains questions from 1 to 8 – are questions which give us information regarding the residence environment, somatic indices, family, social factors involved in the up-bringing and education of the researched subjects, through the questionnaire entitled – “Me, the medical exempt and the Physical Education lesson”. These questions were: 1. Since when do you have a medical exempt? (I always had one; general school, high school; university); 2. What is the residence environment? (city, village); 3. What is your height?; 4. What is your weight?; 5. What type of house do you own? (block – apartment; land house); 6. Who has been responsible for your up-bringing? (mother, father, both parents, grandparents, aunts/uncles); 6. Did you use to practice any type of sports game in the first school years? (yes, no); 7. Do you have a computer at home? (yes, no); 8. Did

you use to have peers in your childhood to play with? (yes, no); Registered indicators were expressed in percentage in the Tables number 1 to number 3 (see tables to be commented upon below)

- **Section II.** Contains questions from 9 to 18 – are questions which offered us information regarding the level of self-esteem of the subjects involved in the research: 9. I do not quit if I have a difficult situation to solve; 10. When I come across a problem I always find multiple solutions to work; 11. I panic when I have a difficult situation to solve at Physical Education and in everyday life; 12. I am scared of the unknown, and this is the reason for which I prefer a medical exempt (M.E.) from physical effort; 13. Due to my skills I can solve an unpredicted situation; 14. I am not bothered by people who oppose me when I have a task to fulfill; 15. I always find arguments to obtain what I want; 17. I am prepared to react positively in critical situations; 18. I am tenacious when I have to fulfill personal goals. The indicators recorded for this section are given in percentage in Tables no. 4 and 5.

- **Section III.** Contains just one question, number 19: 19. What is the true reason of the medical exempt (M.E.)? With the help of this question students can speak freely about the true reason of the medical exempt, excepting for the reason of a real disease, and where pain affects their being, self and personality.

Section I – Details of questions recorded at the implementation of the questionnaire for questions from 1 to 8 – they can be observed in Tables numbers 1, 2, and 3, and are being analyzed in detail below.

Table 1. Statistical indicators for somatic aspects, the residence environment, educational factors, P.C. and motric activities for – 68 girls (G)

Since when do I have a medical exempt (M.E.)?				Residence environment		Type of home		Somatic aspects 68 (G) 100%		Motric activities in childhood			P.C.		Socializing with peers		Socializing – preferred activity	
Always %	In General School %	In High school %	At the university %	City %	Village %	House %	Apartment %	H/m %	KG %	Yes %	No %	Yes %	No %	Yes %	No %	P.C. %	Child game %	
								150	40-65									
15	10	20	23	58	10	25	43	165	79-98 47-50	20	48	53	15	26	42	41	27	
22.05	14.75	22.42	38.82	85.30	14.70	36.7	63.23	15	22.05	29.4	78.5	7.7	22.05	38.24	61.76	60.29	39.70	
%	%	%	%	%	%	%	%	43	63.24	2	8	9.5	%	%	%	%	%	
	68 (G) 100%			68 (G) 100%		68 (G) 100%		10	14.71	68 (G) 100%		68 (G) 100%		68 (G) 100%		68 (G) 100%		

Table 2. Statistical indicators for somatic aspects, the residence environment, educational factors, P.C. and motric activities for – 29 boys (B)

Since when do I have a medical exempt (M.E.)?				Residence environment		Type of home		Somatic aspects 68 (G) 100%		Motric activities in childhood		P.C.		Socializing with peers		Socializing – preferred activity	
Always %	In General School %	In High school %	At the university %	City %	Village %	House %	Apartment %	H/m %	KG %	Yes %	No %	No %	No %	Yes %	No %	P.C. %	Child game %
10	4	5	10	20	9	9	20	16	40-65	5	24	24	5	10	19	20	9
34.48 %	13.80 %	17.24 %	34.48 %	68.96 %	31.04 %	31.04 %	68.96 %	10	34.48	17.24 %	82.76 %	82.76 %	17.24 %	34.48 %	65.52 %	68.96 %	31.04 %
29 (B) 100%				29 (B) 100%		29 (B) 100%		4	13.80	29 (B) 100%		29 (B) 100%		29 (B) 100%		29 (B) 100%	

Table 3. Statistical indicators for somatic aspects, the residence environment, educational factors, P.C. and motric activities for the entire group – total 97 students (S) – 68 girls (G) and 29 boys (B)

Since when do I have a medical exempt (M.E.)?				Residence environment		Type of home		Somatic aspects 68 (G) 100%		Motric activities in childhood		P.C.		Socializing with peers		Socializing – preferred activity	
Always %	In General School %	In High school %	At the university %	City %	Village %	House %	Apartment %	Always %	In General School %	In High school %	At the university %	City %	Village %	House %	Apartment %	Always %	In General School %
25	14	25	33	78	19	34	63	160	40-65	25	72	77	20	36	61	61	36
25.77 %	14.44 %	25.77 %	34.02 %	80.42 %	19.58 %	35.05 %	64.95 %	25	25.77	25.77 %	74.23 %	79.39 %	20.61 %	37.11 %	62.89 %	62.89 %	37.11 %
97 (S) 100%				97 (S) 100%		97 (S) 100%		14	14.44	97 (S) 100%		97 (S) 100%		97 (S) 100%		97 (S) 100%	

The data were presented both on sexes and for the entire group. As a result of the research and of the comparison of the three tables, I observed an extremely interesting aspect regarding the group, namely that there are four distinctive types of individuals in the structure of the researched group of

the students with medical exempts (M.E.), according to the enumeration below (see also Graph no. 1 with data and percentage):

- Subjects with permanent medical exempts (**P.M.E.**);
- Subjects with medical exempts from the second grade school (**M.E.S.G.**);
- Subjects with medical exempts from high school (**M.E.H.S.**);
- Subjects with medical exempts from the university (**M.E.U.**).

Taking into consideration the type recorded within the studied group, I went forward with the observation and realized that a series of important data occurred, which may be useful for the research of self-esteem and which we should follow. These data make reference to the medium in which the following represent an influence: the residence environment, the existence of the computer, physical exercises and the type of house, socialization, communication and the personality of the subjects involved in our study. For this reason, after the implementation of the questionnaire we recorded and written into tables the data obtained, as well as the points registered for each group for questions from number 9 to number 18, and I mention that these questions are part from Section II – self-esteem. I conceived table number 4 with points registered and significant grades obtained for the self-esteem (see Table number 4), and then I analyzed and interpreted them below.

Table no. 4 – Statistical indicators regarding the points registered by each group after implementing the questionnaire for questions from Section II – Self Esteem

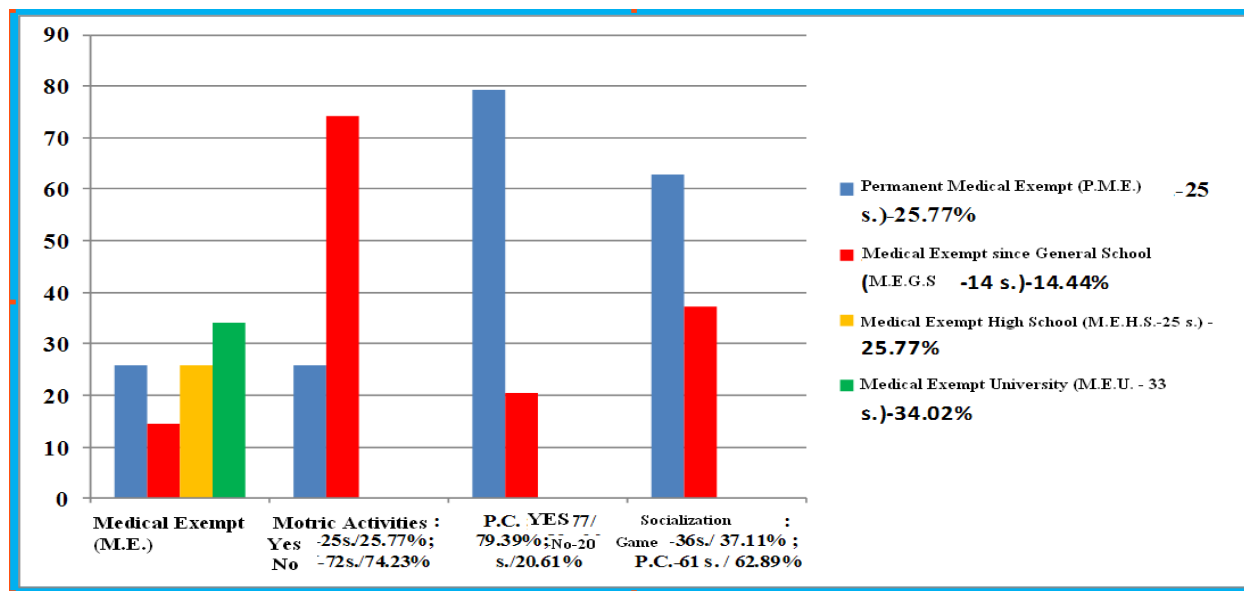
Points registered	The type of registered grade	The type of medical exempt	The number of students who recorded the grade (97 students)	Percentage %	Somatic aspect	Play-friends in childhood
1-10	A very low level of self esteem	In general school	14	14.43%	Around 1.74 m/ 55-60 kg	No
11-20	A low level of self esteem	From the first year of school (always)	25	25.77%	Around 1.60 m/ 40- 104 kg	No
21-30	A medium level of self esteem	In high school/university	58	59.80%	1.68m/ Around 65 kg	No

As a consequence, I have to mention that for its analysis and interpretation, our questionnaire is based on “The Scale of Measuring Self-Esteem”, by Morris Rosenberg (1965) rendered by Stanculescu E., (2008, p. 310), which I modestly transformed and reinterpreted according to the requirements of our domain – Physical Education – and I added new questions useful for the identification of the researched issue. According to “The Scale of Measuring Self-Esteem”, by Morris Rosenberg (1965), the subjects should have recorded a score between 1 point and a maximum of 50 points. The score obtained offers us data regarding the self-esteem. The addition of the score was realized to show us the grade obtained by each group regarding the self-esteem. As a consequence of this aspect I concluded that the researched group scored between 1 and 30 points. I mention that the maximum score on Morris Rosenberg’s scale (1965) is of 50 points. Our students scored a maximum of 30 point, namely the equivalent of the grade – **average level of self esteem** – as following:

- Individuals who had a medical exempt in the second grade school (**M.E.S.G.**) recorded a score of **1-10** points, namely a very low level of self-esteem;

- Individuals who had a medical exempt permanently (**P.M.E.**) recorded a score of **11-20 points**, namely a low level of self-esteem;
- Individuals who had a medical exempt from high school (**M.E.H.S.**) and from the university (**M.E.U.**) recorded a score of **21-30 points**, namely an average level of self-esteem;

This aspect leads to the hypothesis according to which medical exempts can be a social benchmark, regarding the state of health, but also an indicator that a lot of subjects use a medical exempt (M.E.) as a reason to hide a low level of self-esteem (see Graph number 1, a mirror of Table number 3).



Graph 1. A graphical representation of the recorded indicators regarding the medical exempts, educational factors, P.C., motric activities, socialization through games or P.C. for the entire group – a total of 97 students (S): 68 girls (G) and 29 boys (B)

We continue with Section II – (Table 5) – which is composed of questions from 9 to 18 – this process is based on the eight questions from Section I, and also on the final question, namely question number 19 from the questionnaire, as all together offered complex information regarding the group and emphasized details and reasons which led to the acceptance of the M.E. as a cover or refuge behind which subjects chose to hide themselves and their low level of self-esteem.

The manner in which students evolved or developed was observed from the answers given for each question, proved us that there is a fracture in the subjects’ personality at a certain point, and this fissure is due to the fact that they do not believe in themselves, thus leading to a low level of self-esteem (see data from Table number 5).

In order to prove the statement above, we analyzed answers for questions number 11 and 12. These two questions were “trap” question, we may say determinant for our research, through which we aimed to surprise and to prove the statement from the hypothesis, according to which medical exempts is a cover to hide a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders, and a lot of commodity (according to answers given for question number 19). Question number 13 came as a confirmation, to strengthen and sustain the statement, and to prove it.

To these data, we added the marked answers given at question number 12: “I am scared of the unknown, and this is the reason for which I prefer a medical exempt (M.E.) from physical effort”, and

here we also have a high enough percentage of 59.80 %, namely 58 students who answered “A lot of truth”, and 39 students, a percentage of 40.20 % chose “Very much truth”. To all these data, we added all answers given for question number 13: “Due to my skills I can solve an unpredicted situation.” The majority of students from the group, namely 72 students (74.23%) answered: “Very little true” or “A little true” (25 students – a percentage of 25.77%).

Table 5. Indicators registered for answers given for questions 9-18 informing about self esteem

No. of question Check the answer that suits you personally	Very little true/ 1 point		A little true 2 points		Relatively true 3 points		A lot of truth 4 points		Very much truth 5 points		Total No. %
	No. of Students	%	No. of Students	%	No. of Students	%	No. of Students	%	No. of Students	%	
9.	33	34.03 %	25	25.77 %			14	14.44 %	25	25.77 %	97 %
10.			19	19.58 %	78	80.4 %					97 %
11.			25	25.7 %					72	74.23 %	97 %
12.							58	59.80 %	39	40.20 %	97 %
13.	72	74.23 %	25	25.77 %							97 %
14.					20	20.6 %			77	78.58 %	97 %
15.	61	62.89 %							36	37.11 %	97 %
16.			39	40.20 %	58	59.8 %					97 %
17.	61	62.89 %					36	37.11 %			97 %
18.			63	64.95 %					34	35.05 %	97 %

All percentages recorded for questions number 11, 12, and 13 denoted a low self-esteem. Observing these data, I re-analyzed Tables number 1, 2, and 3 and I revised the percentages obtained for self-esteem from Table No. 5, and compared them, thus observing that the 25 students are also in Table number 3, and it is possible that these are part of the group of subjects with medical exempts since high school (M.E.H.S.). I revised the questionnaires and concluded that it is true, that those with medical exempts since high school (M.E.H.S.) are those who answered “A little true”, and answered “Yes” for question number 6: “Did you use to practice any type of sports game in the first school years?” In fact, if we were to guide ourselves by these answers, we could observe that they have a “cover medical exempt”, because they do not fit in the type of the group through answers recorded at “trap questions”. To prove question number 12: “I am scared of the unknown, and this is the reason for which I prefer a medical exempt (M.E.) from physical effort”, if we analyze Table number 3 in the part where we have questions recorded for question number 1 from the questionnaire: “Since when do you have a medical exempt?” – I concluded, after calculating the number of students who

answered “A lot of truth”, that these are in number of 58 students, namely 25 with medical exempts since high school and 33 students with medical exempts from the university, thus making an exact number of 58 students. They were discovered in this manner due to the fact that they used the “cover medical exempt”, in order to hide a low self-esteem, a precarious affective disposition, an unease psyche with strong personality disorders, and a lot of commodity (according to the recordings for question number 19), thus confirming the research hypothesis. As a consequence of this aspect, we could consider that **“the medical exempt could be a social arrest... in the way... of people wanting to become... stronger... and independent, regardless if they are... men or women,... they have to have a high status within their social group or in society in general, fame, etc.”** states Pera Novacovici in her book ... (Novacovici, p. 387), which they do not obtain if they hide behind a medical exempt not letting them to evolve spiritually, thus blocking their psyche and bringing a mental involution. Moreover, it does not allow them to pass through the three stages of the self, ego and supra-ego, which lead to a mature personality. All these results confirm the hypothesis according to which motric activities are a manner of personality development, and of self-esteem development all along the life, and their lack leads to a low level of self-esteem. The fact that a number of 72 students from the total of 97 students, namely a percentage of 74.23 % chose “Very much truth” for question number 11, and 25 students – a percentage of 25.7 % answered “A little true” – they panic when they have a difficult situation to solve at Physical Education and in everyday life in general – we considered that these are relevant data confirming the research hypothesis. This aspect revealed another one which determined us to believe that the number of students who require a medical exempt, being sick, is smaller than the 97 students recorded by us at the beginning of the study, the real number being of only 25 students, namely those recorded in Table number 3 at permanent medical exempts (P.M.E.). This means that the rest of subjects, 72 students, are possible to use the medical exempt as a “cover”, to hide: commodity, angst; anxieties; fears connected with a precarious affective disposition, an unease psyche with strong personality disorders, thus leading to a low level of self-esteem. Through the points obtained, around 30 (from the maximum of 50 points), and the grade – an average level of self-esteem – we may say that these young people would be pushed towards the margins of society, thus dramatically reducing their chances of success in life, career, hence being the reason which determines us to give an alarm signal, and to leave the theme open for field specialists, in order for them to complete it or to collaborate to it.

5. Conclusions

- As a consequence of this aspect, we could consider that “the medical exempt could be a social arrest... in the way... of people wanting to become... stronger... and independent, regardless if they are... men or women,...”
- Medical exempt (M.E.) is just a instrument – cover, through which people attempt to hide; certain negative and intense emotional experiences; a low self-esteem, a precarious affective disposition; an unease psyche with seirous personality disorders.
- The manner in which students evolved or developed was observed from the answers given for each question, proved us that there is a fracture in the subjects’ personality at a certain point, and this fissure is due to the fact that they do not believe in themselves, thus leading to a low level of self-esteem (see data from Table 5);
- The number of students who require a medical exempt, being sick, is smaller than the 97 students recorded by us at the beginning of the study (see Tables 1, 2, and 3);
- Through the elimination of doubt, fear, nervousness and fright, which are states that destroy the possibility of truly being “yourself”, students may gain confidence in the “self” and the power of changing something in their own life; this thing may be started by giving up the commodity and, of course, the medical exempt (M.E.), where it is not needed, thus improving the level of self-esteem;

- All percentages recorded for questions number 11, 12, and 13 denoted a low self-esteem, these results confirming the research hypothesis according to which motric activities are a manner of personality development, and their absence, due to medical exempts, lead to a low level of self-esteem;

Concluding all these aspects, I felt obliged to give an alarm signal for the field specialists and to launch the proposed theme, considering it a novelty that opens new perspectives for research. I state now without a doubt that motric activities stimulate and value individuals, reason for which we recommend the presence of Physical Education in the students' syllabus, and as many discussions with students as possible regarding the use of a medical exempt as a cover or as a necessity imposed by their health status.

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