

# Relationship of Competitiveness, Jealousy, Disgust and Envy among Medical Students

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## Abstract

*It has been observed that the career competitiveness has been increasing every passing year which leads towards the development of negative emotions like Jealousy, Envy and Disgust; particularly for medical students. The present study aims to explore the relationship among competitiveness, jealousy, envy, and disgust among medical students. For this purpose, N=200 undergraduate medical students currently enrolled in MBBS or BDS programs were approached through convenient purposive sampling. To attain this objective Competitiveness Orientation Measure (COM), Collective Jealousy Scale (CJS), Collective Disgust Scale (CDS), and Dispositional Envy Scale (DES) were administered along a self developed Demographic Information Form. The results of the current study show that overall competitiveness has a weak positive correlation with jealousy ( $r=0.16$ ), Disgust ( $r=0.22$ ) and Envy ( $r=0.18$ ). However, Jealousy has a moderate positive correlation with Disgust ( $r=0.45$ ). Disgust has a weak correlation with jealousy, competitiveness and envy. Furthermore, there was no significant differences were found across the variables of the current study based on their academic years but at the same time, significant differences were found on envy, disgust and jealousy based on age of student while, there was no significant difference was found based on their competitiveness. Hence, it can be concluded that the sense of competitiveness increase negative emotions among medical students and there is a high time that interventions should be planned and conducted with the students to control these negative emotions.*

**Keywords:** Competitiveness, Jealousy, Disgust, Envy, Medical Students

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## 1. Introduction

It has been observed that the career competitiveness has been increasing every passing year which leads towards the development of negative emotions like Jealousy, Envy and Disgust; particularly for medical students. Medical students, all over the world are quite often exposed to a competitive environment in their university (college) lives where survival of the fittest is the ultimate goal. Among all the factors impacting the health and well-being of a medical student, competition holds the utmost significance. Competition has been studied since ages, when Charles Darwin talked about humans competing in an environment for survival. It occurs naturally between all living organisms where they live in the same environment having the same resources. Competition is the constant struggle for rewards as assets and scarce resources (Horton & Hunt, 1964) among people living in the same environment having the same goal. The reward is achieved when all the others are transcended and left behind. However, the current trend in the society highlighted by many social psychologists, especially Johnson is *cut-throat competition*; who believe that in order to achieve an external reward people must eliminate others by using destructive and negative strategies (Johnson, 1997). Hence, it is evident that, there is a dire need in current era to understand the evolving underlying motive in academic settings reinforcing competitive behavior in students at all levels in college and universities.

Researches also indicates that the students in the current era while applying for the admission into a first-year university are already accustomed to the fact that the selection process is quite inflexible. Hence, it is already expected by the students that this process of getting enrolled to a university, especially medical school is quite competitive (Pascarella & Terenzini, 2005). The selection procedure is competitive because the number of students available are way more than the seats available in the medical school (Jameson & Smith, 2011). Once the students are through the admission process, they form the groups in their classes. The feelings of *in-group love* and *out-group*

*hate* automatically develops (Moscatelli & Rubini, 2017). These feelings tend to develop the negative feelings and emotions of jealousy, envies and disgust. However, out of all the factors, gender has been found to be the most effected under the circumstances of competition. There are various studies indicating that females are more competitive in general, but are less competitive in stereotypically male tasks; which later differentiated as gender differences in later education and career outcomes (Almås et al., 2016) and male students tend to lower their effort and performance as the competition increases (John, 2017). Hence, medical students majorly comprised of female students, which is why competitiveness needed to be studied among medical students.

Competition among students can lead to the emergence of negative emotions and behaviors. When students are placed in a position of competition where few students wins and others loss, this competition can be either intrinsic or extrinsic, students develop coping strategies such as using cognitive distortions, stealing, bullying, cheating and lying (Shields & Bredemeier, 2010). Moreover, the World Health Organization reports depression as the utmost common mental health issue along with passive aggressive tendencies such as self-harm (Gilbert, McEwan, Bellew, Mills, & Gale, 2009).

Competition can lead to other negative emotions such as jealousy, envy and feelings of disgust among students related to other students. These emotions occur in the groups that are similar in nature, striving for the same goal. This similarity can be seen as either the ability or performance when comparing both the groups (Festinger, 1954). Envy, however, is not that negative as it does not have a very sharp fringe. It seems to motivate the process of imitation in order to gain the possession to those resources. Since medical students belong to the same field, they will obviously have a competition and feelings of jealousy and envy towards another medical student. Although the conscious awareness of being jealous or envious of someone is there to some extent but the underlying causes are there in the unconscious and thus, we mask these feelings behind the defense mechanism

of rationalization. So, this envy and jealousy comes into realization through emotional and evaluative system long before we are consciously aware of it (Ramachandran & Jalal, 2017).

Doctors tend to be envious with their colleagues because of the same phenomena. Professional envy does not occur in situations where the comparison individuals have success and their success is irrelevant to our definition of success or even our goals. Envy occurs in situations where the success of another doctor is related to a success in the same department in relation to them. This usually happens because it threatens and challenges the self-assessment by another professional (Turliuc et al., 2016). However, this envy begins right from their academic years as they are raised and educated in such a way where the role of competition is induced or perceived. Envy arises for classmates for higher marks, feedback from supervisors, number of patients and a lot more such instances. There is an understanding that he has an important role to play in the society hence, exhibit the behavior of self-sufficiency and self-pride that nurtures the component of jealousy in them (Turliuc et al., 2016).

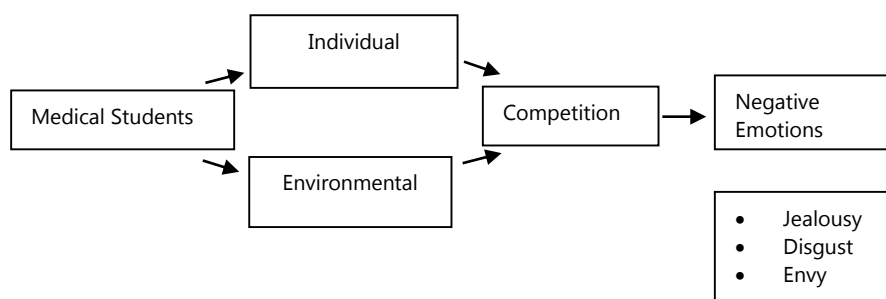
Competition however, also generates the feelings of jealousy. In the medical profession from the academic setting to a professional setting, competition is fiercer between students and practitioners due to similar resources and exposure to similar situations leading to the occurrence in a direct proportion to the component of jealousy (Dakin & Arowood, 1981). Jealousy and Envy can be damaging emotions in the academic environment and the workplace as these emotions undermine and damages relationships, disturbs teams and communication, and later on undermine organizational performance (Cleary, Walter, Halcomb, & Lopez, 2016).

Studies also suggest that people experiencing the emotion of jealousy also carry the feelings of sadness, disgust and rage (Brogaard, 2016). Disgust is a powerful emotion that needs to be recognized as an immense problem in people's lives (Curtis, 2011). Previous studies provide evidence for disgust being a facilitator in moral-judgement (Haidt, 2003) as disgust is a severe

judgment, which is made under the instances of immorality and discomfort (Olatunji, 2016). Students develop feelings of disgust after the feelings of jealousy, envy and competition overwhelms and then disgust takes over in the most of immorality (Olatunji, 2016).

The conceptual theoretical framework is based upon the findings from the above literature showing the relationship between competition leading to jealousy, disgust and envy among medical students who are driven by either individual factors or environmental constraints.

Figure 1: Relationship of competition contributing to jealousy, disgust and envy among medical students.



### 1.1 Significance of the study

The basic purpose of this research is to identify the trends that a student for all the fields experiences throughout the years without even knowing that they go through these emotions. So, this research could be used for an awareness purpose and individual level realization of the effects of competition, jealousy, envy and disgust. However, in Pakistan, more than a normal student, a student enrolled in a medical degree program faces such emotions. This is because of the fact that there is a lot of completion in such files where a medical student has to, in order to pass the course fill a certain quota of medical patients and diagnosis. Moreover, each medical university accepts approximately 1000 students each years, and approximately half the number of students graduates from the university at the end of five years. This

has also created the need for strong competition and hence, created jealousy, envy and disgust as a consequent. This new area of research will be beneficial in generating further scientific knowledge and ways of understanding the reasons behind these variables and its manifestations among students. Keeping in view all these factors and above mentioned queries, following hypothesis has been formulated:

1. There will be a positive correlation of competitiveness, jealousy, envy and disgust trends among medical students.
2. Gender, Age and Current year in college of the students will have a significant effect on competition, jealousy, envy and disgust.

## **1.2 Method**

### **1.3 Research Design**

The present study is based on Quantitative Correlation Survey Research Design. Survey is often used to describe and explore human behavior, surveys are therefore frequently used in social and psychological research (Singleton & Straits, 2009).

### **1.4 Participants**

Convenient Purposive sampling technique was used to reach the medical students from first till fourth year from semiprivate Medical University of Karachi, Pakistan. A total of  $N=200$  students currently enrolled in Bachelor of Medicine and Bachelor of Dentistry (MBBS) and Bachelor of Dental Surgery (BDS) were included in the study, where  $n=50$  students were approached from each year. From the total sample  $n=100$  students from MBBS and the rest  $n=100$  were from BDS. The students had the age range from 18 to 26 years from which  $n=125$  students were females whereas,  $n=75$  students were males. The inclusion criteria incorporate that the participants must be currently enrolled in a medical program from first to fourth year. Both the genders were included. Whereas, students from other fields of study and students who once

had been a part of four-year program in the past were not included. The demographic details of the sample of the study are given in Table.

**Table 1**

*Demographic Characteristics of the Participants (N=200)*

Demographic Variables	f	%
Gender		
Male	75	37.5
Female	125	62.5
Age (Years)		
18-20	75	37.5
21-23	112	56.0
24-26	13	6.5
College Year		
Freshman (1 <sup>st</sup> )	50	25
Sophomore (2 <sup>nd</sup> )	50	25
Junior (3 <sup>rd</sup> )	50	25
Senior (4 <sup>th</sup> )	50	25
Class Strength		
70-80	79	39.5
81-90	74	22.0
91-100	77	38.5
Class Groups		
1-5	43	21.5
6-10	85	42.5
11-15	28	14.0
16-20	36	18.0
21-25	8	4.0
Class Group Size		
1-5	72	36.0
6-10	85	42.5
11-15	13	6.5
16-20	8	4.0
21-25	22	11.0

Group Identification		
Yes	198	99.0
No	2	1.0
Individual Group Size		
1-5	128	64.0
6-10	46	23.0
11-15	12	6.0
16-20	8	4.0
21-25	6	3.0
Sense of Closeness		
Very Weak	2	1.0
Weak	6	3.0
Neutral	62	31.0
Strong	62	31.0
Very Strong	68	34.0
Group Identification		
1	33	16.5
2	26	13.0
3	58	29.0
More than 3	83	41.5
Activities performed in group	Never	
	<i>f</i>	%
	Sometimes	
	<i>f</i>	%
	Very Often	
	<i>f</i>	%
Studies	23	11.5
Assignments	33	16.5
Lunch	13	6.5
Sleepovers	134	67.0
Bunk Classes	54	27.0
Talk over phone	32	16.0
Share notes	17	8.5
Activities creating Competition		
	Yes	
	<i>f</i>	%
	No	
	<i>f</i>	%
Grades in exams	126	126
Monthly Test Marks	83	83
Histories and Diagnosis	45	45
Medical Practices	62	62
Teacher's favorite	51	51
Assisting Teacher	34	34



The above table (Table 1) indicates that most of the students were females, with the age range of 21-23. Almost all the students identified with a group in their class where the group size for most students ranged from 6-10 people maximum having a very strong to neutral sense of closeness towards their group members. Moreover, many students identified themselves as being a part of more than 3 groups in their classes. The activities performed very often by the students in their group were doing assignments together, lunching, bunking classes, talking over the phone and sharing notes. To add more, the only activity that made the students feel most competitive was their grades in exams.

### 1.5 Measures

Following measures were used in the current study:

**Consent form and demographic form.** Each participant was presented with the informed consent form which distinctly stated the willingness and agreement of being the part of the research. The demographic form was constructed by the researcher comprising of the basic information of the participants by taking into the consideration of the inclusion and exclusion criteria of the research study. The demographic form included their name, age, gender and their current year in college. The form also included some statements related to the characteristics of their class and groups they belong, strength of the class, group size, their identification to a group, the sense of closeness they feel towards their group members and the number of groups they identify to, in total. The list also included a number of activities that they perform together and the activities that make them feel competitions towards their own group members were also added.

**Competitiveness Orientation Measure (COM).** It was developed by Newby, and Klien, in 2014. The COM is a 37- item, 5-point Likert Scale which is a very good indicator of multi-dimensional competition ranging from strongly agree

by -2 to strongly agree by 2. COM has four subscales from General Competitiveness, Competitive Affectivity, Dominance Competitiveness and Personal-Enhancement Competitiveness. During the development, Inter-Item total correlations and factorial analysis process retrieved 37 final items having the reliability falling in the excellent category of .96 and split-half as .93. COM is a very comprehensive psychometrically valid questionnaire catering to the individual levels differences across the subscales. However, construct validity seemed to be high depicting competitor's success.

**Collective Jealousy Scale (CJS).** It was developed by Reysen and Branscombe (2007). The CJS is a 5-item, 7-point Likert Scale ranging from strongly disagree to strongly agree. The scale had an alpha of .88, accounted for 68.29% of the variance, and the mean response was 3.49 (SD = 1.55). However, Convergent validity had significant positive correlation with individual level trait measured of jealousy.

**Collective Disgust Scale (CDS).** It was developed by Reysen and Branscombe (2007). The CJS is a 5-item, 7-point Likert Scale ranging from strongly disagree to strongly agree. The 5 item measures two dimensions i.e. In-group towards Out-group (I/O) and Out-group towards In-group (O/I). I/O had an alpha of 0.89 whereas the O/I had an alpha reliability of 0.92 depicting an excellent reliability.

**Dispositional Envy Scale (DES).** It assesses tendencies to feel envy. DES is an eight-item self-report measure developed by Smith, Parrott, Diener, Hoyle, and Kim (1999). The DES was rated using a 5-point Likert-type scale that ranged from 1 (strongly disagree) to 5 (strongly agree). All DES items shows acceptable internal reliability, good homogeneity and a high construct validity (Smith et al., 1999).

## 2. Procedure

First of all the permission for all the instruments were obtained from the respective authors. The research carried out by taking permission from the institute. Survey based Research Design was used for the study. The authorities of the medical university were asked to provide permission for conducting the research in their respective institute. Using convenience purposive sampling, the sample was reached. For measures, the original authors were contacted through e-mail to provide the grant for using their questionnaire in the research. The participants were approached in the group setting through different teachers. Those who provided the consent were added in the study. Participants were informed about the nature, purpose and implication of the research in general was explained. Permission through consent form was granted before proceeding further. Each participant filled in the Basic Demographic Information Form and all the questions were answered. The participants gone through a series of above mentioned Self-Report Questionnaire. It took 20 minutes in total for the participants, to complete all the aforementioned scales and forms. Results were entered in the Statistical Package for Social Sciences (SPSS) software version of 21.

### 3. RESULTS

Reliability analysis, Correlation analysis, Independent sample T-test and One-way ANOVA were conducted in order to test the hypothesis.

**Table 2**

*Chronbach's Alpha of the Main Scales of the Study*

Main Scales	Chronbach's Alpha	Number of Items
Competitiveness Orientation Measure (COM)	0.92	37
General Competitiveness	0.77	12
Dominance Competitiveness	0.86	12
Competitive Affectivity	0.58	8
Personal-Enhancement Competitiveness	0.76	4
Collective Jealousy Scale (CJS)	0.81	5
Collective Disgust Scale (CDS)	0.83	5
Dispositional Envy Scale (DES)	0.86	8

The above table indicates that all the above main scales have excellent reliability while, the reliability of the subscales of COM had moderate to excellent reliability.

**Table 3**

*Descriptive Statistics of the Study Variables (N=200)*

Study Variables	Minimum	Maximum	Mean	SD	Skewness	Kurtosis
Competition	-71.00	61.00	9.35	28.45	-0.50	0.23
General Competitiveness	-24.00	20.00	3.19	9.13	-0.39	.028
Dominance Competitiveness	-15.00	16.00	2.63	6.03	-0.25	-0.42
Competitive Affectivity	-26.00	25.00	1.31	12.34	0.21	0.96
Personal-Enhancement	-8.00	8.00	2.21	4.27	-0.49	-0.48
Collective Jealousy	5.00	35.00	14.85	7.94	0.57	-0.56
Collective Disgust	6.00	42.00	22.17	10.24	0.22	-1.04
Dispositional Envy	8.00	58.00	17.87	8.40	0.70	-0.27

The values in the table 3 indicates the data is normally distributed.

**Table 4**

Pearson Correlation among Study Variables

	Competitiveness	Jealousy	Disgust	Envy
Competitiveness	-	.16*	.22**	.18**
Jealousy		-	.45**	.24**
Disgust			-	.10
Envy				-

Note. \*\* $p < .01$ , \* $p < .05$

The table above shows that Competition overall, has a weak positive correlation with the variable of jealousy ( $r=.161$ ), Disgust ( $r=.224$ ) and Envy ( $r=.184$ ). However, Jealousy has a moderate correlation with Disgust ( $r=.452$ ). Disgust has a very weak correlation with all the three variables i.e. Jealousy, Competition and Envy.

**Table 5**

Independent Sample t-test of Competition, Jealousy, Disgust and Envy based on Gender (Male  $n=75$  Female  $n=125$ )

Variables		Mean	SD	<i>t</i>	df	<i>p</i>	95% CI	
							Lower	Upper
Competition	Male	19.04	25.88	3.11	198	.00	3.86	17.16
	Female	3.12	28.40					
Jealousy	Male	15.72	8.42	1.79	198	.07	-.18	4.07
	Female	14.30	7.62					
Disgust	Male	22.06	10.11	1.28	198	.20	-.83	3.90
	Female	22.24	10.39					
Envy	Male	18.91	9.63	1.99	198	.04	.02	4.09
	Female	17.20	7.49					

The above table (Table 5) shows the effect of gender on competitiveness, jealousy, disgust and envy. It is inferred that competitiveness is significantly higher in female than male students while envy is high in male than female students whereas, there is no effect of gender on jealousy and disgust.

**Table 6**

One-Way Analysis Of Variance (ANOVA) for Envy, Disgust Jealousy and Competition based on College Year (n=50 each year).

	College Year	Mean	SD	F	Sig.
Envy	1 <sup>st</sup>	17.87	8.40	.77	.50
	2 <sup>nd</sup>	16.46	8.07		
	3 <sup>rd</sup>	19.06	9.48		
	4 <sup>th</sup>	17.56	7.53		
Disgust	1 <sup>st</sup>	22.17	10.24	2.09	.10
	2 <sup>nd</sup>	22.96	9.16		
	3 <sup>rd</sup>	20.90	10.82		
	4 <sup>th</sup>	22.88	10.34		
Jealousy	1 <sup>st</sup>	14.85	7.94	1.70	.16
	2 <sup>nd</sup>	12.84	6.16		
	3 <sup>rd</sup>	15.52	7.92		
	4 <sup>th</sup>	15.32	8.70		
Competitiveness	1 <sup>st</sup>	9.35	2.45	.22	.87
	2 <sup>nd</sup>	14.50	28.07		
	3 <sup>rd</sup>	5.61	30.18		
	4 <sup>th</sup>	9.98	27.17		

The table highlights the effect of college year on the competition, envy, disgust and jealousy of medical students and shows there is no effect of a student being in a particular college year on jealousy, competition, envy and disgust.

**Table 7**

*One-Way Analysis Of Variance (ANOVA) For Envy, Disgust Jealousy and Competition by Age.*

	Age (in Years)	Mean	SD	F	Sig.
Envy	18-20	16.40	7.44	3.19	.04
	21-23	19.14	9.31		
	24-26	20.16	8.37		
Disgust	18-20	21.60	10.31	4.22	.01
	21-23	21.18	10.30		
	24-26	29.00	7.39		
Jealousy	18-20	14.36	7.52	6.26	.00
	21-23	13.81	7.92		
	24-26	21.50	7.46		
Competitiveness	18-20	5.45	26.99	2.76	.06
	21-23	10.50	29.53		
	24-26	24.33	26.99		

Table 7 highlights the effect of age on competition, envy, disgust and jealousy of medical students. The variables of envy, disgust and jealousy clearly depicts a significant result inferring that age of a student has an effect on the aforementioned variables. Envy, disgust and jealousy all tend to be found increased among students ranging from 24-26 years. However, there is no effect of age on a person's competition level.

#### 4. Discussion

The present research intends to clarify the relationship among the feelings of competition, jealousy, envy and disgust among medical students. Moreover, we also aimed to understand the effects of a person's age, year of medical college and gender on the aforementioned feelings. The variables under consideration can cause direct stress in students and negatively affect the quality of education in general. As evident by the studies that there is a significant positive correlation between competition and stress among medical students where females (62.66%) faces more stress than male students (37.34%; Sreedevi et al., 2015).

However, the current study appeared to conclude the weak positive correlation with jealousy, envy and disgust with competition proposing the fact that with the feelings of competition, either induced as an environmental factor or individual factor, negative feelings of jealousy, envy and disgust comes in. As researches indicate that being in the same profession is solely sufficient to create the feelings of competition, jealousy and envy because similarity in professions create competition which in turn follows by the feelings of jealousy and envy (Ramachandran & Jalal, 2017) but these weak relationship can be attributed to the indigenous culture, where people still have positive feelings for others than negative. But this weak relationship is indicating that these trends are increasing and needs to be controlled.

Furthermore, our study found out a moderate correlation between jealousy and disgust where the studies also tend to find a significant link of jealousy with the feelings of sadness, disgust and rage as a covariate (Brogaard, 2016). The moderate correlation between jealousy and disgust also supports the abovementioned weak correlation as competitiveness can increase negative feelings when disgust is there.

It is also eminent in the study that gender has a significant effect on competition and envy where female students tends to feel more competitiveness and male students feel more envious as compare to opposite gender. Moreover, students' age effects jealousy, envy and disgust; suggesting



that students' age ranging from 24 to 26 have more jealousy, envy and disgust, which shows that these negative emotions are increasing with age. Studies support the idea that females are more competitive in general as compared to males and they choose career profession and education accordingly (Almås, Cappelen, Salvanes, Sørensen, & Tungodden, 2016). Moreover researches also suggest that jealousy and envy is a consistent emotion throughout lifetime where people in their 20's experiences more jealousy than people in their 30's, 40's and 50's, but the inclination of envy changes with lifespan suggesting that people in the 20's have more scholastic success and romantic envy however, people above 40's have more jealousy of money and wealth (Henniger & Harris, 2015). These findings basically provide the insight that a person's age and identification with a particular gender may have a role to play in terms of increasing the emotions of competition, jealousy, envy and disgust. Dr. Chandragupta Vedak, a psychiatrist at Advocate Good Shepherd Hospital in Barrington believes that jealousy commences from the need of people when people compete with the other people of the same age group, comparing their "haves" and "have-nots (Donofrio, 2018). Jealousy and envy are influenced by a person's low self-esteem and deprivation intolerance making them experience the feeling of not digesting the fact that others are getting what you want to have (Dryden, 2010).

To add more, when looking for the factors of competition, jealousy, envy and disgust; we evidently established in our study that there does not seem to be any effect of the aforementioned factors on a student's current year in college (Table 6). Contrastingly, researches indicate that competition, jealousy, envy and disgust may arise as the student's college year increases. In Pakistan, the medical academic system for MBBS is a 5 year program. With a few exceptions, first two years of medical school is based on general health sciences without any revelation towards any practical exposure. However, the next three years are amalgamated with clinical and practical rotations as internees in hospital wards. During these years, the competition and jealousy increases the most as the medical students have to fulfill a clinical patient

quota for each rotation in order to pass (Curriculum of MBBS, 2011). Research evidence also intends to create awareness about the importance of a medical student's undergraduate years and the effect of pervasive competition on its purpose. The significance this awareness holds is evident as a medical student's perceived competition in the undergraduate years can have counterproductive outcome when delivering a high care standard to keep a patient's safety in consideration (Klingenberg et al., 2011). Furthermore, a student's first year in university is the most important one as their average quality of university life during the rest of the years is highly influenced by the first year in terms of experience, exposure and adjustment they have in that year also impacting their self-efficacy (Mavis, 2001), well-being (Robotham & Julian, 2006) and performance (Boyle, Carter & Clarke, 2002) throughout.

Moreover, a third-year medical student in British Medical Journal (BMJ) talks about how a student's life changes as a medical student and how it continues to change year by year in the university. As a first-year student and a fresher, she reported to have said that she expected a competitive atmosphere in a medical school and to her astonishment people were very supportive rather than competitive. However, as she moved towards her clinical years, the competition reappeared and this time, the competition was not only academic it was clinical as well. Fellow students would compete for performas, logbooks, clinical evaluations and coming up earliest in the university to get hold of most of the patients. She further says that competition is something that should stop as it takes their focus away from patients and hence, put their focus on getting more and more hands on patients. (Sutton-Klein, 2015). However, the fourth year of medical school tends to be another level of competition where students compete for a whole new level of discoveries of what specialty to choose from, getting into residency and being good in the eyes of the supervisors (Sklar, 2014). The anecdotal evidence clearly paints the true picture of how year by year competition and jealousy takes its forms, sometimes as dormant and the rest of the times as active depicting its significant role in a medical school.

One of plausible factor for the findings of the currents study could be the religion followed by the people in Pakistan. Pakistan is an Islamic country where religious teachings are a very significant source of upbringing and holds a proper code of life for Muslims. The teachings of Islam highly disregards the feelings of Jealousy, Envy and Disgust and asserts the believers to abstain from such emotions. Abu Hurairah, one of the authentic Hadith writer, reported, that The Holy Prophet (peace be upon him) said, *"Beware of envy, for it consumes good deeds just as fire consumes wood or grass."* (Sunan Abi Dāwūd: 4903). The aforementioned hadith clearly explains the downside of envy and how the true believers should refrain from such a strong emotion because it overshadows a person's good deeds just like a fire consumes wood. Another reference that could be inserted over here is an authentic Hadith by Abu Hurairah, narrated by Sahih Al-Bukhari, Holy prophet (peace be upon him) said, *"Beware of suspicion, for suspicion is the worst of false tales; and do not look for the others' faults and do not spy, and do not be jealous of one another, and do not desert (cut your relation with) one another, and do not hate one another; and O Allah's worshipers! Be brothers (as Allah has ordered you!)"* (Sahih Al-Bukhari, 8.90). Beside the other teachings, it is also clear that Muslims are asked to refrain from jealousy as one of the orders of God. Furthermore, it is advised to Muslims to read the 113<sup>th</sup> and 114<sup>th</sup> Surah of the Holy Quran (that is Surah Falaq and Surah Naas) if they believe that someone has an evil eye of jealousy and envy upon them in order to protect themselves because it is thought to be that bad. Since, Muslims, in general undermine and refrain from such negative emotions, there is a strong chance of underreporting of these variables in the current research study.

In the end it is important to mention that there has been an overall situation of actively playing the game of a zero-sum outcome in the entire medical universities and among students. This your-loss-is-my-gain situation kind of enhanced the feelings of unnecessary competition among students because it leads to not just simple competitiveness but a bitter competition. The bitter competition occurs due to the limited resources available and increases

in order to gain good grades (Meegan, 2010) and meeting the patient's quota. This uncertain situation and that too in a profession build to maintain a community's health by providing their sincere medical services to people, is alarming to the point of its consideration as a serious issue prevailing in the society. Medical students later cum medical health professionals have a responsibility on their shoulders to be as sincere, objective and clear as possible and handle their patients without being influenced by their subjective feelings and that too having such negative emotions (Competition, jealousy, envy & disgust) because it is the most significant patient's right. These negative emotions should not be enhanced or promoted among the medical students so that as practitioners they become a part of providing sincere and objective services detaching themselves from such strong negative emotions.

## **5. Conclusion**

The above mentioned discussion shows a weal inter-play among variables but these negative emotions competition, envy and jealousy do exists in the medical students as their age increases. Hence, it is direly needed that these emotions should be dealt at earliest before their entrance to their practical life. Moreover, competitiveness is significantly higher in female than male students while envy is high in male students which highlights for extra attention for these variables. Future interventions should be developed with reference to the needs of students so that their negative emotions can be controlled at the right time.

## **6. Limitation and recommendation**

First of all the participants of the current study were limited to a small number as well as to an institute only. A larger and multi-institute sample is recommended for future researches. Moreover, further intervention based studies should be planned for those who found to have higher tendencies of these negative emotions. Lastly a qualitative in-depth study is recommended to find the detailed cultural inter-play among the variables.

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