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## RESEARCH ARTICLE

# PSYCHOLOGICAL RESILIENCE, ACADEMIC SELF-EFFICACY AND ACADEMIC BURNOUT OF MEDICAL STUDENTS IN A VOCATIONAL COLLEGE IN CHINA TOWARDS AN ENHANCED ACADEMIC PROGRAM

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### ABSTRACT

In recent years, China's medical and health industry is in a period of rapid development. With the continuous progress of technology and knowledge in the medical field, the requirements for medical education are becoming stricter. This descriptive study used an adopted questionnaire to survey 436 medical college students of Qilu College of Medicine in Zibo City, Shandong, China, about their mental toughness, academic self-efficacy and learning burnout of the status quo, and to explore the correlation between the three. It also utilized an interview of 10 instructors for supplementary data. Results revealed that burnout exists among the student-respondents, although it remains in an unalarming rate. Despite having minor observable issues in their practice, which limit their education under an optimum level, students were also seen as resilient and contented of themselves and their current education. Considering such findings, intervention strategies were proposed to further alleviate academic burnout and promote the finest learning among medical students.

## INTRODUCTION

In recent years, China's medical and health industry is in a period of rapid development. The continuous development in the medical field has led to steeper requirements for medical practitioners, including their relationship with patients, which has become more delicate due to the existence of potential medical incidents brought by newly discovered diseases. This situation has also forced a stricter and more rigorous training and medical education. The People's Republic of China, the world's most populous country, has long faced a shortage of doctors. According to the country's statistics for 2020, the patient-to-doctor ratio is only at 2.77 (Chian, 2020) -- far lower than other developed countries. Medical students are important talents that medical colleges and universities have reserved for the practice of modern medicine. They backbone in advancing the country's endeavors in "new medicine". Hence, the general perspective is that medical students' learning not only affects the quality of their own education per se, but also affects the future development of a country's medical and health undertakings. With such situation in mind, it is necessary to recognize that the effectiveness of medical students in both academic and practice is related to the health of each patient and the overall quality of medical care they provide to their community (Xu, 2021). Hence, medical students must not only have proficient knowledge and practical skills, but also adequate mental vigor.

However, the problem of academic burnout among college students is becoming more and more prominent (Zang, Li & Li, 2020). In the recent school years, colleges and universities have begun to implement strict closed management method of education (Zang, Li & Li, 2020), which adds to the burden of the implementation of online learning as the main learning method. Coupled with the impact of the COVID-19 pandemic, countless changes have already taken place in these students' academic and daily lifestyle, which, in turn, causes confusion, anxiety and even lead to cases of academic burnout.

**Background of the Study:** The training method of medical students requires them need to invest a lot of time and energy in academic endeavors and long-term standardized training. These tasks eventually lead to the emergence of cases of academic burnout among them. These practices prove the same in the case of Chinese medical students, putting them at high risk of learning burnout, which generally considered has symptoms of low mood, inappropriate behavior and low sense of achievement caused by long-term academic pressure (Mathias & Wentze, 2017). These also showed that such burnout leads to negative impacts on physical and mental health (Wang, Guan & Li, 2019). In addition, absentee rate in medical courses in China medical schools reached 37.2%, compared to 61%, on public courses and 58% on electives (Dou, Luo, & Du, 2018). Although the assessment and correlation analysis of the incidence of academic burnout among medical students in China are still scarce

and less comprehensive, it is worth noting that such situation phenomenon exists objectively, and it is necessary to discuss it in depth. Academic self-efficacy and mental toughness is an important factor in academic burnout. The study on self-efficacy and academic burnout among college students, individuals with high self-efficacy show greater stress-resistant ability and subjective well-being (Schonfeld, Brailovskaia, Zhang, & Margraf, 2019; Li, Chen & Liu, 2014). Meanwhile, a research by Zhang (2019) showed that students' mastery of mental health knowledge is positively correlated with learning burnout, and rational mental health education in colleges and universities can alleviate learning burnout. Few studies have directly explored the relationship between psychological resilience, self-efficacy and academic burnout among medical students. Therefore, this study aims to explore the relationship between these variables and provide intervention ideas for reducing the incidence of academic burnout among Chinese medical students.

**Statement of the Problem:** This study evaluates the psychological resilience, academic self-efficacy and mental health state of medical students to provide intervention strategies for reducing potential cases of academic burnout. Specifically, the study will seek insights from the following data:

- What is the profile of respondents?
  - Sex
  - Field of Specialization
  - Choice of Volunteer
- What are the factors affecting the respondents' psychological resilience?
  - goal focus
  - family support
  - emotional control
  - positive cognition
  - interpersonal assistance
- Is there a significant difference in the respondents' assessment of their psychological resilience when their profile is taken as test factors?
- What is the level of the respondents' academic efficacy based on the following variables?
  - Learning ability efficacy
  - Learning behavior efficacy
- Is there a significant difference in the respondents' assessment of their academic self-efficacy when their profile is taken as test factors?
- What is the level of respondents' academic burnout based on the following variables
  - Poor behavior
  - Weak sense of achievement
  - Low mood
- Is there a significant difference in the respondents' assessment of their academic burnout when their profile is taken as test factors?
- Is there a significant relationship among the psychological resilience, academic self-efficacy and academic burnout of medical students?
- What are the observations of their teachers on the medical students' psychological resilience and academic burnout?
- According to the research results, what intervention ideas can be provided to improve the psychological quality of Chinese medical students, reduce the incidence of academic burnout and improve the quality of medical higher education?

**Significance of the Study:** This study analyzes psychological vigor of medical students and looks into potential causes of academic burnout among medical students. This purpose makes it beneficial for the following groups:

**Medical students:** It is conducive to correcting learning attitudes, setting reasonable learning goals, cultivating good learning behavior habits, and reducing the occurrence of bad learning behaviors among

medical students. This will help them further improve learning efficiency, as well as physical and mental health.

**Teachers:** It can establish and increase the communication channels between teachers and students, strengthen humanistic care and cultivate teachers and students' relationship. This can also provide support and guidance for the improvement of students' professional learning and development.

**Administrators:** This study explores the relationship between psychological resilience, academic self-efficacy and academic burnout of medical students, which will help administrators to further understand the causes of academic burnout of medical students and adopt reforms that can improve policies.

**Future Researchers:** This study can be used as future reference for succeeding researchers in topics concerning students' psychology, specifically academic vigor and self-awareness.

**Scope and Delimitation of the Study:** The researcher conducted a survey of 400 medical students in two medical schools. To ensure the representativeness of the sampling, a combination of stratified sampling and cluster sampling was used in the survey, including undergraduate and junior college students, as well as clinical majors: Nursing, Imaging, Dental, Inspection, Prevention and Pharmacy as it will enable the researcher to collect a sample population that is most representative of the entire sub-cohort being studied. Ten (10) teachers, with representatives from each clinical majors, were also interviewed to supplement the numerical data.

The survey was mainly conducted in a vocational medical college in Zibo City, Shandong Province, China, with a limited sample size, owing to existing policies implemented because of the pandemic. Due to the particularity of medical colleges, the ratio of male and female is different and the representation may not be that significant.

## METHODOLOGY

This descriptive correlation study is designed to explore the characteristics of psychological resilience, academic self-efficacy and academic burnout on three demographic variables of Sex, Field of Specialization and choice of Volunteer. This concept was inspired from three existing ideas, namely the idea on the Psychological elastic (1999), Bandura's Self-efficacy Theory (1977; 1993) and Maslach's (1981) three-factor job burnout model. It also involves studying the correlation between the three earlier mentioned variables to explain whether there is a significant correlation. The research was conducted at Qilu College of Medicine in Zibo, Shandong, China. Qilu Medical College was founded in 1995 and was established with the approval of the Chinese Ministry of Education. It was upgraded to an undergraduate university in 2008. The school now has 11 secondary colleges, four provincial first-class undergraduate majors, and five provincial-level specialty constructions. The first tool of the questionnaire is the "Adolescent Mental Resilience Scale" (Hu, 2008) compiled by Hu Yueqin and Gan Yiqun, which consists of five factors: goal focus, emotional control, positive cognition, family support and interpersonal assistance. The second tool is the "College Student Academic Self-Efficacy Scale" compiled by Liang Yusong and Zhou Zongkui (Liang & Zhou) divided into two dimensions: Learning ability self-efficacy and Learning behavior self-efficacy, wherein the scale's Cronbach's alpha coefficient was at 0.970. The third tool is the "Academic Burnout Scale for College Students compiled" by Yang Lixian *et al.* (Yang, 2005), divided into three dimensions: Poor behavior, Weak Sense of Achievement and Low mood and having the scale's Cronbach's alpha coefficient at 0.760. This study adopted a stratified sampling for respondents. It analyzed their significant differences in the psychological resilience, academic self-efficacy, and academic burnout considering their profiles, and explain significant relationships between these three variables.

The data collected from the questionnaires approved and validated by the University were analyzed using quantitative survey tools using SPSS 2022, which measured the correlations between the said variables. Statements on the questionnaire were answered on a four-point Likert scale. There were also school-approved guide questions for the 10 teacher respondents. A Frequency Count and Percentage was used to analyze the personal profiles of survey respondents; T-test/ANOVA to determine whether there are significant differences in resilience, academic self-efficacy, and academic burnout when respondents' personal data is a factor. A Pearson correlation analysis was used to identify significant relationships among the same variables.

## RESULTS

In terms of sex, the profile of the respondents showed that the majority of them were female. This is consistent with the current scenario at Chinese medical colleges, in which there are more female than male students are, wherein female students make up the majority of the student body.

**Table 1. Profile of Respondents in terms of Sex**

Sex	Frequency	Percentage
Male	116	29.0
Female	281	71.0
Total	397	100.0

**Table 2. Profile of Respondents in terms of Choice of Volunteer**

Choice of Volunteer	Frequency	Percentage
Voluntary Personal Choice	280	71.0
Chosen by Another Person	117	29.0
Total	397	100.0

**Table 3. Profile of Respondents in terms of Field of Specialization**

Field of Specialization	Frequency	Percentage
Medical Clinical	100	25.0
Nursing	102	26.0
Medical Imaging	100	25.0
Public Health	95	24.0
Total	397	100.0

**Table 4. Overall Result on the Psychological Resilience of Respondents**

Variables	Composite		
	Mean	SD	Interpretation
Goal Focus	2.65	0.70	Somewhat Extent
Family Support	2.48	0.73	Very Little Extent
Emotional Control	2.31	0.80	Very Little Extent
Positive Cognition	3.07	0.62	Somewhat Extent
Interpersonal Assistance	2.48	0.77	Very Little Extent
Overall	2.60	0.72	Somewhat Extent

Scale: 4.00-3.51=Strongly Agree/To A Great Extent; 3.50-2.51=Agree/To Somewhat Extent; 2.50-1.51=Disagree/To A Very Little Extent; 1.50-1.00=Strongly Disagree/To Not All Extent

In terms of choosing their program voluntarily, the majority of respondents revealed that they were the ones who personally choose to volunteer. In terms of the field of specialization, the corresponding frequency of respondents was too close among the field of specialization. There were more respondents whose field of specialization was Nursing, followed by Medical Clinical and Medical Imaging. The lowest frequency was evident in public health. The overall result revealed that psychological resilience is mostly affected by positive cognition and goal focus, while not much by family support, interpersonal assistance and emotional control. The given results on this section of this study supports and challenges points from previous studies.

It agrees that adversity and challenges are necessary for adolescent development, and those with high mental resilience are more likely to learn from experiences (Weber, Pavlacic, Gawlik, Schulenberg, & Buchanan, 2020); that learning burnout is positively correlated with students' mastery of mental health knowledge, (Zhang, 2019). However, it somehow presents a challenge to a claim saying a good level of psychological resilience and supportive parenting practices can lessen learning burnout, according to Wang's (2018) study on psychological resilience and academic burnout. Using a T-Test of independent samples, the psychological resilience of the respondents according to sex only obtained a significant difference in terms of goal focus. This implied that there was a significant variation in the assessment between male and female respondents. The rest of the variables such as family support, emotional control, positive cognition and interpersonal assistance yielded no significant differences, thus, the assessment between male and female respondents remains the same. Using a T-Test of Independent Samples, the psychological resilience of the respondents according to choice of volunteer only obtained a significant difference in terms of emotional control. This implied that there was a significant variation in the assessment between the voluntary personal choice and chosen by another person as options of the respondents' volunteerism. The rest of the variables such as goal focus, family support, positive cognition and interpersonal assistance yielded no significant differences, thus, the assessment between the two choices of the respondents' volunteerism persists to be the same.

Using ANOVA or F-Test, the assessment of the psychological resilience of the respondents according to the field of specialization yielded significant differences in terms of goal focus and emotional control. The results further implied of the significant variations among the respondents' field of specialization. Other variables such as family support, positive cognition and interpersonal assistance did not obtain any significant differences. The overall result on the level of academic self-efficacy of the respondents revealed that learning ability yielded the higher composite mean score compared with the learning behavior. Using a T-Test of Independent Samples, the difference in the assessment of the academic self-efficacy yielded a significant result in learning ability according to sex. Using a T-Test of Independent Samples, the difference in the assessment of the academic self-efficacy yielded a significant result in learning ability according to choice of volunteer. Using ANOVA or F-Test, the difference in the assessment of the academic self-efficacy yielded a significant result in learning ability according to field of specialization. The overall result of academic burnout if the respondents seldom experienced a weak sense of achievement, poor behavior and low mood respectively. With such data, academic burnout appears to be rarely present among the respondents; hence, issues about such kind of burnout may be considered isolated cases, while others may be caused by different factors affecting the students' holistic well-being. Using a T-Test of Independent Samples, the assessment of academic burnout in terms of sex did not obtain any significant result across all its variables such as poor behavior, weak sense of achievement and low mood. The null hypothesis was accepted at a 5% level of significance. Using a T-Test of Independent Samples, the assessment of academic burnout in terms of the choice of volunteer yielded significant results across all its variables such as poor behavior, weak sense of achievement and low mood. The null hypothesis was rejected at a 5% level of significance. Using a Sheffe Test, the post hoc ANOVA test on the differences in the academic burnout of the respondents in terms of the field of specializations only yielded a significant result in the weak sense of achievement. The same results further implied that the respondents, with respect to their respective field of specialization, revealed significant differences in experiencing a weak sense of achievement. Using a Pearson r, the relationship between the assessment of psychological resilience and academic self-efficacy specifically yielded significant findings between the following variables such as: goal focus and learning behavior; family support and learning behavior; emotional control and learning ability; positive cognition and learning ability; positive cognition and learning behavior; and interpersonal assistance and learning behavior.

**Table 5. Difference in the Assessment of Psychological Resilience in terms of Sex**

Variables	Mean		t-value	sig	Decision Ho	Interpretation
	Voluntary Personal Choice	Chosen by Another Person				
Goal Focus	2.63	2.69	-1.723	.086	Accept	Not Significant
Family Support	2.49	2.46	1.208	.228	Accept	Not Significant
Emotional Control	2.29	2.38	-1.983	.049	Reject	Significant
Positive Cognition	3.08	3.05	.773	.441	Accept	Not Significant
Interpersonal Assistance	2.47	2.49	-.363	.717	Accept	Not Significant
Overall	2.59	2.61	-.418	.304	Accept	Not Significant

**Table 6. Difference in the Assessment of Psychological Resilience in terms of Choice of Volunteer**

Variables	Mean		t-value	sig	Decision Ho	Interpretation
	Male	Female				
Goal Focus	2.57	2.68	-2.885	.004	Reject	Significant
Family Support	2.49	2.48	.468	.640	Accept	Not Significant
Emotional Control	2.35	2.30	1.083	.279	Accept	Not Significant
Positive Cognition	3.08	3.07	.196	.845	Accept	Not Significant
Interpersonal Assistance	2.45	2.49	-1.031	.303	Accept	Not Significant
Overall	2.59	2.60	-0.434	.414	Accept	Not Significant

**Table 7. Difference in the Assessment of Psychological Resilience in terms of Field of Specialization**

Variable	F-value	sig	Decision Ho	Interpret
Goal Focus	3.806	.010	Reject	Significant
Family Support	2.172	.091	Accept	Not Significant
Emotional Control	2.945	.033	Reject	Significant
Positive Cognition	1.808	.145	Accept	Not Significant
Interpersonal Assistance	1.685	.170	Accept	Not Significant
Overall	2.483	.090	Accept	Not Significant

**Table 8. Overall Result on the Level of Academic Self-Efficacy**

Variables	Composite		
	Mean	SD	Interpretation
Learning Ability	2.84	0.65	Very Good
Learning Behavior	2.70	0.67	Very Good
Overall	2.77	0.66	Very Good

Scale: 4.00-3.51=Strongly Agree/Excellent; 3.50-2.51=Agree/Very Good; 2.50-1.51=Disagree/Good; 1.50-1.00=Strongly Disagree/Fair

**Table 9. Difference in the Assessment of Academic Self-Efficacy in terms of Sex**

Variables	Mean		t-value	sig	Decision Ho	Interpretation
	Male	Female				
Learning Ability	2.95	2.79	3.025	.003	Reject	Significant
Learning Behavior	2.75	2.88	1.613	.108	Accept	Not Significant
Overall	2.85	2.74	2.319	.056	Accept	Not Significant

**Table 10. Difference in the Assessment of Academic Self-Efficacy in terms of Choice of Volunteer**

Variables	Mean		t-value	sig	Decision Ho	Interpretation
	Voluntary Personal Choice	Chosen by Another Person				
Learning Ability	2.88	2.75	2.406	.017	Reject	Significant
Learning Behavior	2.70	2.69	.289	.773	Accept	Not Significant
Overall	2.79	2.72	1.35	.395	Accept	Not Significant

**Table 11. Difference in the Assessment of Academic Self-Efficacy in terms of Field of Specialization**

Variables	Mean		t-value	sig	Decision Ho	Interpretation
	Voluntary Personal Choice	Chosen by Another Person				
Poor Behavior	2.03	2.25	-3.391	.001	Reject	Significant
Weak Sense of Achievement	1.88	2.08	-3.577	.000	Reject	Significant
Low Mood	2.15	2.46	-4.629	.000	Reject	Significant
Overall	2.02	2.26	-3.866	.000	Reject	Significant

**Table 12. Overall Result on the Level of Academic Burnout**

Variables	Composite		
	Mean	SD	Interpretation
Poor Behavior	2.09	0.75	Seldom
Weak Sense of Achievement	1.94	0.72	Seldom
Low Mood	2.24	0.80	Seldom
Overall	2.09	0.76	Seldom

Table 14. Difference in the Assessment of Academic Burnout in terms of Choice of Volunteer

Variables	Mean		t-value	sig	Decision Ho	Interpretation
	Male	Female				
Poor Behavior	2.13	2.08	.792	.429	Accept	Not Significant
Weak Sense of Achievement	1.92	1.94	-.328	.743	Accept	Not Significant
Low Mood	2.19	2.26	-1.061	.290	Accept	Not Significant
<b>Overall</b>	2.08	2.09	-.199	.487	<b>Accept</b>	<b>Not Significant</b>

Table 15. Difference in the Assessment of Academic BurnOut in terms of Field of Specialization

Variable	F-value	sig	Decision Ho	Interpret
Learning Ability	3.794	.011	Reject	Significant
Learning Behavior	.320	.811	Accept	Not Significant
<b>Overall</b>	2.057	.411	Accept	Not Significant

Table 16. Relationship between Psychological Resilience and Academic Self-Efficacy

Assessment of Psychological Resilience	Statistical Treatment	Assessment of Academic Self-Efficacy	
		Learning Ability	Learning Behavior
Goal Focus	Pearson r	.061	.164**
	Sig	.223	.001
	Decision Ho	Accept	Reject
	Interpretation	Not Significant	Significant
Family Support	Pearson r	.096	.204**
	Sig	.057	.000
	Decision Ho	Accept	Reject
	Interpretation	Not Significant	Significant
Emotional Control	Pearson r	-.243**	.075
	Sig	.000	.134
	Decision Ho	Reject	Accept
	Interpretation	Significant	Not Significant
Positive Cognition	Pearson r	.551**	.293**
	Sig	.000	.000
	Decision Ho	Reject	Reject
	Interpretation	Significant	Significant
Interpersonal Assistance	Pearson r	.034	.158**
	Sig	.505	.002
	Decision Ho	Accept	Reject
	Interpretation	Not Significant	Significant

\*\* Correlation is significant at the 0.01 level (2-tailed). \* Correlation is significant at the 0.05 level (2-tailed).

Table 17. Relationship between Psychological Resilience and Academic Burnout

Assessment of Psychological Resilience	Statistical Treatment	Assessment of Academic Burnout		
		Poor Behavior	Weak Sense of Achievement	Low Mood
Goal Focus	Pearson r	-.139**	-.027	.015
	Sig	.006	.591	.759
	Decision Ho	Reject	Accept	Accept
	Interpretation	Significant	Not Significant	Not Significant
Family Support	Pearson r	.110*	.146**	.101*
	Sig	.028	.004	.044
	Decision Ho	Reject	Reject	Reject
	Interpretation	Significant	Significant	Significant
Emotional Control	Pearson r	.420**	.396**	.453**
	Sig	.000	.000	.000
	Decision Ho	Reject	Reject	Reject
	Interpretation	Significant	Significant	Significant
Positive Cognition	Pearson r	-.408**	-.392**	-.357**
	Sig	.000	.000	.000
	Decision Ho	Reject	Reject	Reject
	Interpretation	Significant	Significant	Significant
Interpersonal Assistance	Pearson r	.101	.105*	.164**
	Sig	.043	.037	.001
	Decision Ho	Reject	Reject	Reject
	Interpretation	Significant	Significant	Significant

\*\* Correlation is significant at the 0.01 level (2-tailed). \* Correlation is significant at the 0.05 level (2-tailed).

Using a Pearson r, the relationship between the assessment of psychological resilience and academic burnout specifically yielded significant findings between the following variables such as: goal focus and poor behavior; family support and poor behavior; family support and a weak sense of achievement; family support and low mood; emotional control and poor behavior; emotional control and a weak sense of achievement; emotional control and low mood; positive

cognition and poor behavior; positive cognition and a weak sense of achievement; positive cognition and low mood; interpersonal assistance and poor behavior; interpersonal assistance and a weak sense of achievement; and interpersonal assistance and low mood. Using a Pearson r, the relationship between the assessment of academic self-efficacy and academic burnout specifically yielded significant findings between the following variables such as: learning

**Table 18. Relationship between Academic Self-Efficacy and Academic Burnout**

Assessment of Academic Self-Efficacy	Statistical Treatment	Assessment of Academic Burnout		
		Poor Behavior	Weak Sense of Achievement	Low Mood
Learning Ability	<i>Pearson r</i>	-.473**	-.459**	-.530**
	<i>Sig</i>	.000	.000	.000
	<i>Decision Ho</i>	<i>Reject</i>	<i>Reject</i>	<i>Reject</i>
	<i>Interpretation</i>	<i>Significant</i>	<i>Significant</i>	<i>Significant</i>
Learning Behavior	<i>Pearson r</i>	-.085	-.076	-.130**
	<i>Sig</i>	.089	.133	.010
	<i>Decision Ho</i>	<i>Accept</i>	<i>Accept</i>	<i>Reject</i>
	<i>Interpretation</i>	<i>Not Significant</i>	<i>Not Significant</i>	<i>Significant</i>

\*\**. Correlation is significant at the 0.01 level (2-tailed).* \**. Correlation is significant at the 0.05 level (2-tailed).*

ability and poor behavior; learning ability and a weak sense of achievement; learning ability and low mood; and learning behavior and low mood.

## DISCUSSION

Following the respondents' profiles, women made up majority of the respondents in terms of sex. This is in line with the situation at Chinese medical colleges, where there are more male than female students. Meanwhile, the majority of respondents stated that they choose their program freely and that they are willing to put in the time to their chosen specialization. The matching frequency of respondents was too close among the fields of specialization. The findings from this study both confirm and refute several findings from other investigations. Zhang's (2019) assertion may be accepted, as it posits that learning burnout is positively correlated with students' mastery of mental health knowledge. Adversity and challenges are necessary for adolescent development, and those with high mental resilience are more likely to learn from these experiences, turning them into opportunities that promote growth (Weber, Pavlacic, Gawlik, Schulenberg, & Buchanan, 2020). As this research presented, respondents appear to be at a state where they can still manage to delve away from a potential burnout. However, according to Wang's (2018) study on psychological resilience and academic burnout, it raises a question about the assertion that supportive parenting practices and a high level of psychological resilience can reduce learning burnout.

Based on the findings, the respondents' profiles generally do not affect their outlook on psychological resilience, aside from gender and field of specialization, which have an impact on goal focus and choice of volunteer and field of specialization that affect emotional control. The results, however, remain in line with the assertions from Liu *et al.* (2018) but challenges a claim from Mingliang (2018) about claims that female students have lower levels of mental toughness than their male equivalent. Moreover, when evaluating students' decision to enroll in a medical program, there is a common view toward psychological resilience. This demonstrates that, regardless of individual student's motivation to work hard, most continue to be motivated with their academic pursuits. Medical students also have similar viewpoints and behaviors towards psychological resilience in their situations, procedures, and conditions except for emotional control, based on their field of specialization, which may stem from varied stress levels from each specialization's learning approach. In addition, the levels of goal focus may have varied for some, owing to a difference in practice of their field. The results also implied very good learning ability and learning behavior efficacy. This means that the respondents may still be able to keep up with their field and respective specializations. However, pushing this state to a maximum level may take more effort and time, acknowledging that responses in learning behavior remain at a satisfactory level but still leaves a lot of room for improvement. Furthermore, findings from this study revealed a disparity in the learning abilities based on gender, choice of going into medical school and field of specialization. However, such difference was not enough to yield a significant impact on the general outlook regarding respondents' self-efficacy. The respondents' learning behavior also had the same assessment.

Moreover, a further look on the field of specialization of the respondents showed a difference in Nursing and Public Health majors' perception on their respective learning abilities, suggesting that medical majors in general have similar learning habits. Academic burnout also appears to be uncommon among the respondents. As a result, problems with this type of burnout may be isolated occurrences, while others may be brought by other variables that have an impact on the students' overall well-being. Acknowledging the general trend of composites among the level of burnout caused by poor behavior, weak sense of achievement and low mood, it can be inferred that respondents seldom experience academic burnout. These are true to the claims of Cuevas and Ntoumanis's (2020) on poor behavior, Xie, Cao, and Sun (2019), Wang, Guan and Li (2019) and Evers, Chen and Rothmann, (2020). Based on the data, the null hypothesis of a difference in the evaluation of academic burnout based on gender was accepted at a 5% level of significance, indicating that whether male or female, respondents' assessments of academic burnout were the same. Meanwhile, at a 5% level of significance, the null hypothesis was rejected in the choice to enroll in a medical course. This indicates that the two options for respondents to volunteer resulted in varied assessments of their levels of academic burnout. Finally, results by field of expertise indicated that major variations translate to respondents having a low sense of success. This suggests that student self-satisfaction remains a gap in their academic growth and may play a role in any of them suffering burnout. Considering Relationship between Psychological Resilience and Academic Self-Efficacy, goal focus and learning behavior; family support and learning behavior; emotional control and learning ability; positive cognition and learning ability; positive cognition and learning behavior and; interpersonal assistance and learning behavior must be counted. Meanwhile, between Psychological Resilience and Academic Burnout, goal focus and poor behavior; family support and poor behavior; family support and a weak sense of achievement; family support and low mood; emotional control and poor behavior; emotional control and a weak sense of achievement; emotional control and low mood; positive cognition and poor behavior; positive cognition and a weak sense of achievement; positive cognition and low mood; interpersonal assistance and poor behavior; interpersonal assistance and a weak sense of achievement and; interpersonal assistance and low mood must be recognized. Lastly, learning ability and poor behavior; learning ability and a weak sense of achievement; learning ability and low mood and; learning behavior and low mood must be taken into account for Academic Self-Efficacy and Academic Burnout. Teacher observations on medical students' state of psychological resilience and academic burnout. One predominant comment is that medical students, generally, can still deal with academic burnout, also highlighting the difference between male and female students, in both psychological resilience and academic efficacy. However, the students also experience setbacks and issues in their respective areas of study and specialization. It is also observable that teachers are particular of the discrepancy in students' aptitude to acquire knowledge and their willingness and tendencies in studying. They also identified specific indicators of potential burnout among their students, such as mental and emotional fatigue, disinterest and physical worsening of general well-being. Hence, in response, the suggested numerous reforms in teaching methods, as well as improvements in logistical and personal support.

Burnout is, indeed, a threat to students' general well-being, as well as their studies, especially with medical students who are perceived to have heavier academic workloads. As the results of this study have asserted, the medical students who assumed the role of respondents remain unaffected, to a certain extent, of academic burnout. However, it must also be recognized that burnout is a result of accumulation of stress and other emotions suppressed by an individual. Although there may not be high cases of burnout, it does not negate the possibility of its existence within the community. Furthermore, the specific analyses conducted revealed that the students have remained resilient and contented of themselves and their current education. But at the same time, there are also minor observable issues based on students' survey results and teachers' observation. In addition, it may also be essential to note that the state of students' personal outlook on burnout and efforts to alleviate it is not at an optimum. Hence, these findings and their correlations and differences suggest that despite most of the respondents currently not experiencing academic burnout, there are students who face it, as also reflected in the quantitative and qualitative data. It must also be pointed out that burnout is cumulative; hence, it must be dealt with consistently and not only when it is evident. The results of this study showed that the status of psychological resilience, academic self-efficacy and academic burnout of medical students remain at a satisfactory level; however, there remain loopholes that need intervention strategies to further develop steps being taken in reducing the instances of academic burnout among medical students. The researcher, hence, suggests the following:

- Continuous evaluation and development of students' well-being – mental and physical - should constantly be practiced for medical students;
- Schools must acknowledge the possibility and impact of academic burnout in students, especially medical students;
- Learning methods must be regularly updated according to the demands of a course/program;
- Academic workload must be properly distributed so as not to put too much pressure to students;
- Sampling method can be more extensive to have a more accurate and inclusive results;
- Explore other factors that may affect academic burnout and the ensuing factors that may alter it; and
- Explore the root cause of factors that contribute to academic burnout.

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