

# Altruism as Perspective of Medical Students

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## Altruism as Perspective of Medical Students

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### INDEXING

#### Keywords:

Altruism;  
Perception;  
Professional Behavior;  
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#### Kata Kunci:

Altruisme;  
Persepsi;  
Perilaku Profesional;  
Mahasiswa kedokteran;  
Profesi medis;

### ABSTRACT

Altruism is the important attribute for medical doctor and other health professionals. The behavior of altruism must be understood and trained in the early stage of medical education. The aim of this study was to know the medical students' perception on altruism. This was a qualitative study and the participants were 24 medical students who were chosen by purposive sampling with criterion reference. The data were collected using in depth interview and focus group discussion. The data then were transcribed into verbatim and analyzed using constant comparative method. This study revealed 90 codes, 16 themes, and five final themes. The final theme consisted of: 1) altruism and attribute of medical professions, 2) altruism and influential factors, 3) altruism of medical students, 4) medical profession from a student perspective, and 5) altruism and malpractice. Altruism and medical professionalism is important attribute of medical profession. There are many factors that can influence medical student's altruism, it can be internal or external factors. Medical students have various level of altruism and we can assess the degree of altruism of medical students through their understanding on medical profession. A low degree of altruism of doctor may cause unexpected things such as malpractice.

*Altruisme adalah atribut penting bagi dokter dan profesional kesehatan lainnya. Perilaku altruisme harus dipahami dan dilatih pada tahap awal pendidikan kedokteran. Tujuan dari penelitian ini adalah untuk mengetahui persepsi mahasiswa kedokteran tentang altruisme. Ini adalah penelitian kualitatif dan pesertanya adalah 24 mahasiswa kedokteran yang dipilih secara purposive sampling dengan referensi kriteria. Data dikumpulkan menggunakan wawancara mendalam dan diskusi kelompok terarah. Data kemudian ditranskripsi menjadi kata demi kata dan dianalisis menggunakan metode komparatif konstan. Penelitian ini mengungkapkan 90 kode, 16 tema, dan lima tema akhir. Tema terakhir terdiri dari: 1) altruisme dan atribut profesi kedokteran, 2) altruisme dan faktor-faktor yang berpengaruh, 3) altruisme mahasiswa kedokteran, 4) profesi kedokteran dari sudut pandang mahasiswa, dan 5) altruisme dan malpraktik. Altruisme dan profesionalisme medis adalah atribut penting dari profesi medis. Ada banyak faktor yang dapat mempengaruhi altruisme mahasiswa kedokteran, bisa juga faktor internal atau eksternal. Mahasiswa kedokteran memiliki berbagai tingkat altruisme dan kita dapat menilai tingkat altruisme mahasiswa kedokteran melalui pemahaman mereka tentang profesi kedokteran. Tingkat altruisme dokter yang rendah dapat menyebabkan hal-hal yang tidak terduga seperti malpraktek.*

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### INTRODUCTION

Doctor's profession is a profession whose work is directly related to patients or humans. It is very necessary for a prospective doctor since entering the world of education, doctors are given learning about professionalism in handling their patients holistically.<sup>1</sup> One of the attributes of medical professionalism is altruism. Altruism behavior must be possessed by a doctor to be able to establish relationships with patients, provide good service, and build patient trust.

According to the Indonesian Medical Council (KKI), that in the past two years, KKI has received 126 public complaints related to allegations of malpractice and medical discipline in all regions.<sup>2</sup> The results of a study of 21 general practitioners who were correspondents in the study, 21 people belonging to the category of reflection of the medical code of ethics (KODEKI) were lacking, altruism was the lowest value.<sup>3</sup>

The low altruism of a doctor nowadays should be an evaluation material for medical education institutions.

Altruism behavior must begin to be improved from the world of education when at university, namely when students are students of the doctor's education program. This research was conducted to find out the perspective of medical students on altruism with a qualitative approach. By knowing the extent to which students' thoughts or perspectives have on altruism, this can be useful for conducting appropriate altruism learning interventions for them.

Perception is one of the important psychological aspects for humans in responding to the presence of various aspects and symptoms around it. Perception is an English term that is "perception" which means vision, belief can see or understand. Desiderato said that perception is an observation of objects, events or relationships obtained by deducing information and interpreting messages. Perception is giving meaning to sensory stimulus (sensory stimuli). Everyone has a tendency to see the same thing in different ways. This difference can be influenced by many factors, including knowledge, experience and point of view.

From the above explanations, it can be drawn a similarity of opinion that basically perception is an individual observation or process of giving meaning as a result of observing an object, event, and so on through its five senses, which is obtained by concluding information and interpreting messages so that one can respond to either the bad or the positive on that. There are many factors that will cause a stimulus to enter one's attention span. These factors are divided into two major parts, namely external factors and internal factors. External factors are factors that are attached to the object, while internal factors are factors found in the person who perceives the stimulus.

According to Mandeville et al., Altruism that has motivation with the final goal of improving the welfare of others is impossible (only imaginary).<sup>4</sup> According to them, motivation for all things is based on egoism. The ultimate goal is always to improve personal well-being or just for personal gain. But this is disputed by research that states that altruism exists and can be developed with empathy.<sup>4</sup>

From some of the descriptions above, it can be concluded that the definition of altruism is the act of helping others without expecting any reward from the person they help with the final goal of improving the welfare of the person being helped.

The three theories that can explain a person's motivation in altruistic behavior are as follows:<sup>5</sup>

#### **Social - exchange**

In this theory, helpful actions can be explained by social exchange or reward. Altruism explains that motivating rewards are inner rewards (distress). An example is satisfaction to help or a difficult situation (guilt) to help.

#### **Social Norms**

One reason to help others is because it is based on "something" that tells us to "have to" help. "Something" is a social norm. In altruism, these social norms can be explained by the existence of social responsibility. The existence of social responsibility, can cause a person to take action to help because it is needed and without expecting rewards in the future.

#### **Evolutionary Psychology**

In this theory, it is explained that the point of life is to maintain offspring. Altruism behavior can arise easily if "other people" who will be prospered are people who have the same characteristics.

There are five aspects of altruism according to Mussen, namely:<sup>6</sup>

- 1) Cooperation, which is doing work or activities together.
- 2) Sharing, which is the willingness to share what others feel.
- 3) Helping, which is helping other people by lightening the person's physical or psychological burden.
- 4) Generosity (charity), which is the willingness to give his belongings to other people in need voluntarily.
- 5) Honesty, which is the willingness to do something as it is by prioritizing the value of honesty without cheating.

According to Baron and Byrne, there are two factors that influence altruistic behavior, namely situational factors and personal factors.<sup>7</sup> Situational factors are influenced by the number of Bystanders, models, insistence on time and abilities possessed. Based on the research data, revealed if the more other people, the smaller the tendency of people to help. The effect of the audience can also cause fear to be judged. Someone who knows their behavior is considered by others will try to do what is expected by others so that it can give a good impression. Models, there are others as models that will increase the occurrence of altruistic behavior in other individuals who observe the model. This model becomes a guide for other individuals to participate in altruistic behavior. The pressure of time, usually people who are

busy and in a hurry tend to try not to help. They don't take the time to try to see the needs of others. While people who are relaxed are more likely to provide help to those in need. The ability possessed, if people feel capable, they will tend to help, whereas if they feel unable, they will not help.

Personal factors are influenced by feelings, traits, religion, sexual orientation and gender. Personal Feelings can influence helping behavior. Although there is less consistency in the influence of negative feelings (sad, depressed, disappointed, etc.) on helping behavior. People character who sensitive and empathize high will naturally think more about others. Likewise, people who have high self-monitoring will tend to be more helpful because behavior helps them tend to get higher social rewards. Religion, the belief in religious norms that must help weak people so that someone wants to give help to others. Sexual orientation, there is a tendency for people

to give help to other individuals who have the same sexual orientation. Gender, research shows that women are more helped than men. More specifically, if the helper is male, the woman is helped more, but if the helper is a woman, men and women will get much help.

Personal factor will interact with the environment to built behavior. Bandura views individual behavior not merely as an automatic reflex of the stimulus but also as a result of reactions that arise as a result of the interaction between the environment and the individual's cognitive scheme. The basic principle of learning according to this theory, that which is learned by individuals, especially in social and moral learning, occurs through imitation and the presentation of modeling.<sup>8</sup> The reciprocal relationship between environment, behavior, and individuals is explained by Bandura in the concept of triadic reciprocal causation.

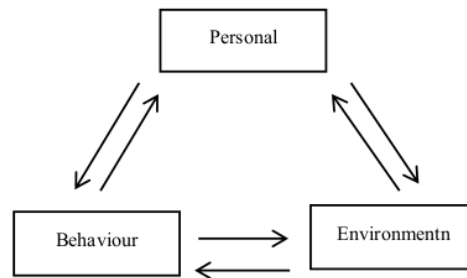


Figure 1. The concept of Bandura Triadic Reciprocal Causation<sup>8</sup>

Andura uses the term reciprocal to indicate the interaction of drives, not just the same or different actions. The three factors related to reciprocity do not need to have the same strength or make an equal contribution. The relative potential of the three can vary for each individual and situation. The relative influence of behavior, environment, and individuals depends on the strongest triadic factor in one moment.<sup>8</sup>

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#### RESEARCH METHOD

This research is a descriptive analytic study with a qualitative approach. This research focuses on the perceptions of the students of the Medical Education Study Program (PSPD) of Universitas Muhammadiyah Yogyakarta (UMY) on altruism. Data were obtained using interview methods consisting of in-depth interview and Focus Group Discussion (FGD). Respondents in this study were students of the FKIK UMY Medical Education Study Program class of 2013 to 2016 with 24 students selected purposively with criteria, namely active students, active in organizations both on and off campus.

Twenty-four respondents were divided into 2 groups, namely the independent interview group of 8 students as resource persons and FGD groups of 2 groups, each consisting of 8 students. The location of the interview was determined based on agreement with the respondent, namely in several places in the Faculty of Medicine and Health Sciences of UMY.

The in-depth interview and FGD data were then made verbatim transcripts. The analysis used by researchers is based on De in 9, namely the constant comparative method. Stages of analysis, namely: describing, unitizing of meaning units, categorization, constant comparative method, connecting between categories (connecting categories).

## RESULTS AND DISCUSSION

## Characteristics of respondents

**Table 1. Characteristics of respondents in-depth interview**

Variable	Frequency	Percentage (%)
Age		
18	2	25
19	1	12,5
20	2	25
21	1	12,5
22	2	25
Gender		
Male	4	50
Female	4	50
Years		
2013	2	25
2014	2	25
2015	2	25
2016	2	25

Based on table 1 the age range of Medical Education Study Program (PSPD) students who were respondents of in-depth interviews were 18 years to 22 years and they were divided into four men and four women. Each class consists of two respondents.

**Table 2. Characteristics of respondents focus group discussion 1**

Variable	Frequency	Percentage (%)
Age		
20	2	25
21	4	50
22	2	25
Gender		
Female	8	100
Years		
2013	8	100

Based on table 2, the age range of Medical Education Study Program (PSPD) students in FGD 1 were 20 years to 22 years. The selection of respondents for FGD was made homogeneously. In FGD 1 all respondents were female students of 2013 class.

Based on table 3, the age range of Medical Education Study Program (PSPD) students in FGD 2 is 20 years to 22 years. The selection of respondents for FGD was made homogeneously. In FGD 2, all respondents were male students of the 2014 class.

**Table 3. Characteristics of respondents focus group discussion 2**

Variable	Frequency	Percentage (%)
Age		
20	2	25
21	4	50
22	2	25
Gender		
Male	8	100
Years		
2014	8	100

**Qualitative analysis**

Interviews and FGDs data were made verbatim transcripts, and then analyzed qualitatively using the constant comparative method. The results of the qualitative analysis obtained 90 coding meanings, 16 categories of meaning, and five final themes, i.e.: 1) altruism and attribute of medical professions, 2) altruism and influential factors, 3) altruism of medical students, 4) medical profession from a student perspective, and 5) altruism and malpractice.

**Altruism and attributes of medical profession**

Respondents stated that altruism is a helping behavior without being based on any motive from the helper, like the following respondent's statement.

*"Altruism is how someone helps others without receiving compensation from that person and also there is no pressure or ee ... coercion from other people, so that the person is sincere without having to ee ... like if he wants to help others and suddenly there must be feedback ... "(I3, F, 18 years)*

Another opinion states that basically a person commits an act based on a motive, like the following respondent's statement.

*"I want to argue, but maybe this is a bit different, but in my opinion true altruism does not exists, because we are definitely looking for profits, even like getting happier with helping others, and feeling like having done a good deed, there must be such a reward ... "(FGD2.5, M, 21 years)*

According to respondents, altruism behavior can occur if there is empathy in someone, like the following respondent's statement.

*"Basically, every person has empathy, he feels what the person feels and finally moves away, well ... that empathy is to be used or not. From someone's empathy, someone's altruism can emerge." (18, M, 22th)*

Some respondents stated that a doctor must be prepared to be willing to sacrifice time to help patients whenever and wherever, like the following respondent's statement.

*"Ee ... a doctor altruism, maybe later, for example, if we ee ... practice, for example or on night duty ... we have to ee ... what is it called, sacrifices our time with our family ..." (11, F, 20th)*

Other professional behaviors obtained from FGD group 2 are responsible, honest and moral, like the following respondent's statement.

*"A doctor must have professional behavior, right, and to be a professional doctor we must have behaviors such as altruism, responsibility, and morality is also necessary." (FGD. 2.8, M, 21 years)*

#### **Altruism and influential factors**

The factor of personality itself will greatly influence altruistic behavior, like the following respondent's statement.

*"Personality is influential, for example, there are people with extrovert and introvert personality. Well, if the person is extrovert, he will easily interact and did not hesitate to help. If the person is introvert, then maybe he is rather shy to act and help." (18, M, 22 years)*

Apart from the personal factor itself, factors from outside or the environment in which the person is in will also be very influential, like the following respondent's statement.

*"Maybe from the surrounding environment and family environment perhaps, well the surrounding environment is already obvious. For example, if the environment is good, then we will be good too, but if our environment is full of thieves, maybe we will be thief too. So, if the parent can instill altruism value to their children, insya Allah, they might be able to follow the altruism ..." (FGD. 2.7, M, 22 years).*

Some respondents argue that the role of educational institution is very important to teach altruism behavior, like the following respondent's statement.

*"Actually, if you want to trace it, there is already lesson about altruism, but it is only explicit and the portions are still very small, yes, every time the lecturer teaches, it will always convey about altruism whatever it is. But in my opinion it should more on practical side only, because too much theory just give headache." (FGD. 2.6, M, 21 years)*

Another factor that can influence altruism is that there is a role model which can be an example for others to be moved to help, like the following respondent's statement.

*"Joining the communities or organizations that help poor people on the street or something like that. Because from there we will really get a role model that motivates us to help others." (17, M, 22 years)*

Egoism can also influence altruism behavior. This is like the following respondent's statement.

*"What is it ... For me, maybe sometimes my ego makes me still don't want to lose or relent. Sometimes when i am busy and already have my own problem, and somebody ask for help, i rejected, because I think if my work is unfinished, it will be complicated for me, so. I think if you really are busy, your ego will win over when someone asks for help." (FGD. 1.8, F, 21 years)*

#### **Altruism of medical and students**

Basically humans are social beings who need each other, like the following respondent's statement.

*"Because we are social beings, because we couldn't fulfill our needs alone, surely we need other people, even though we have a lot of money but people don't necessarily want to be paid money." (FGD. 2.8, M, 21 years)*

Based on the statements of several respondents, some medical students at the UMY PSPD already have altruism behavior, but some others do not have this behavior or rather the behavior has not yet emerged, like the following respondent's statement.

*"There are some who I've seen really sensitive, having that, some don't, well couldn't say don't, maybe it just hasn't*

appeared yet. This, everyone must have it, only they choose to care about their surrounding or not." (12, M, 20 years)

A respondent said that there was a decrease in altruism behavior from previous levels of education, namely High School (SMA), like the following respondent's statement.

"In my opinion, from high school, it's a bit downhill, now in college we are more individualistic, so we are often like, for example, prioritize only friend from the same group, I feel like that. And we also want to succeed alone especially if it is about score." (FGD.2.5, M, 21 years)

#### Medical profession from a student perspective

The behavior that must be applied by a doctor is to provide services holistically to his patients. This is based on the following quote from the respondent's statement.

"... patients have two side, physically and mentally we have to handle it holistically, so when a patient comes, we examine, for example, in any way and with any condition they come to us, we try to cure them to cure what they are complaining ... " (12, M, 20 years)

Based on the research results, the main motivation of some respondents to become a doctor is to be able to care for their own family. This is based on the following respondent's statement.

"I take medical education because there is no doctor in the family, so my parents told me to take medical education. In addition, in my family there are a lot of hereditary diseases, such as diabetes, cancer, there are also some relatives who are affected. So, from that I start thinking about becoming a doctor, so I can take care of my family." (18, M, 22 years)

Motivation to do a good deed as form of praying was also expressed by many respondents. This is based on the following quote from the respondent.

"The main goal is to help, there must be a reward from God meaning that even though we are sincere, it must be first based on intention to pray ... " (FGD. 1.1, F, 21 years)

Based on the results of the study, when asked to choose an internship area, they chose to develop health services in their home regions or rural areas. This is like the following respondent's statement.

"I want to serve in remote areas, like this, if here it's full, why are we here to add more when it's already full, just look for those who still lack medical staff, they will need our energy more ... " (12, M, 20 years old)

However, this is hampered by the blessing of parents or due to lack of health insurance for doctors. This is based on the following respondents' quotes.

"For me, actually I am interested in going out of Java, like in remote areas, but what I am afraid of is that there is no guarantee from the government to... well as you know like the cases recently, the doctors couldn't have their rights, for example like health insurance there, the doctor dies while still in internship ... " (11, F, 20 years)

"... but it's back again with the approval of parents, if for example the parents don't allow, to argue is also rather too ... " (FGD. 2.4, M, 21 years)

#### Altruism and malpractice

The results showed that one of the causes of malpractice in the medical profession was a lack of a doctor's sense of responsibility towards his patient. This is based on the following quote from the respondent.

"... so how much a doctor cares about the patient will affect the possibility of a negligence, the doctor who has a sense of responsibility for the patient will strive to the maximum of his abilities." (12, M, 20 years)

Data from FGD 2 results show that one of the causes of malpractice is doctors who are always concerned with money. This is based on the following quote from the respondent.

"... if you meet a patient, you might see this patient has money or not to pay us later, so in providing health care we will not be wholehearted, and then there is also if for example we want to help someone not based on an emergency but instead see the benefits like that, that's what I think." (FGD. 2.6, M, 21 years)

Another cause that was obtained from the FGD group 1 was the failure of the doctor's communication with the patient. This is based on the following quote from the respondent.

"Actually, in my opinion, not all malpractice events are intentional, maybe there are misperceptions between doctors and patients as well. For example, there are

*patients, doctors do anamnesis until diagnosis, but when giving therapy the doctor is lacking in giving education, patients take the prescription wrongly, and then side effects or allergies occur, so it is back again to the communication of doctors and patients ... "(FGD. 1.8, F, 21 years)*

Several other respondents said that other causes of malpractice were due to a doctor who had minimal medical skills. This is based on the following quote from the respondent.

*"... it can be due to a doctor's lack of medical ability, so maybe it's just because he's still a newbie so he's still not thorough diagnosing or giving prescriptions. So that goes back to the doctor to keep learning and not forget to refer patients if indeed it's not his competency ... "(17, M, 22 years)*

The perception of altruism in students of the Medical Education Study Program (PSPD) of UMY is very varied, generally students reveal that altruism behavior is a behavior of helping. Several other students also mentioned that altruism behavior in addition to helping is cooperation, charity, sharing and honesty. According to Mussen and Eisenberg, altruism behavior has seven components, namely sharing, cooperative, donating, helping, honesty, generosity and considering the rights and welfare of others.<sup>10</sup>

Altruism behavior is the act of helping others without expecting anything in return from the person being helped. Batson considers important the motives behind prosocially behavior, helpers should straighten their intentions when helping someone.<sup>4</sup> straightening the intention is known as the word sincere in Islam.

Another opinion from several respondents stated that basically a person commits an act based on a motive. According to Jangkung positive feelings that arise after someone gives help can provide encouragement to help and positive feedback from what is given will make the feeling happier.<sup>11</sup>

Altruism behavior is influenced by a person's level of empathy. Someone who has high empathy is easily moved to help others in need. Based on the results of Fatimah's research there is a positive relationship between altruism behavior and empathy. The higher a person's empathy, the higher the altruism behavior of the person, and conversely the lower one's empathy, the lower the altruistic behavior.<sup>12</sup>

In addition to altruism, other professional behavior that must be possessed by a doctor according to the

respondent is willing to sacrifice, responsible, honest, and having moral. According to some experts, there are behaviors that are expected to be possessed by health workers, including the ability to perform tasks well in accordance with science, communication skills, responsibility, altruism, autonomy, integrity, and mutual respect.<sup>13,14</sup>

According to respondents, basically humans are social beings who need each other. There is reciprocity between humans to be able to meet their individual needs. This is supported by Neumann's study of the norms of reciprocity, that the norms of reciprocity found in a person will influence his motivation to help each other between individuals.<sup>15</sup>

Based on the results of the study, almost all respondents revealed that some of UMY's PSPD students already had altruism behavior, but some of their altruistic behavior had not yet emerged. Based on research by Nursanti et al., basically students who have not shown altruistic behavior still have an understanding of helping behavior and empathy, but this is not applied in the form of direct action.<sup>16</sup>

According to one respondent, altruism behavior in students is currently decreasing when compared to previous levels of education, namely High School (SMA). According to research by Edwina using the big five trait factors by Pervin in high school adolescents aged 15-18 years, based on frequency distribution, it is found that adolescents have a higher degree of extraversion trait compared to the other four traits.<sup>17</sup> This shows that adolescents tend to show warmth when interacting, love to live in a group, love to look for activities that cause pleasure, love to build relationships with peers, and have positive emotions.

The personality of each individual will determine the behavior and mindset that is unique to each individual. Based on research by Howe, each individual has different experiences, different situations, and different personalities.<sup>18</sup> This will produce different degrees of empathy for each individual. As explained above, empathy has a close relationship with one's altruism behavior.

A person's personality is also influenced by parenting. According to research by Zahra, permissive parenting which refers to the attitude of parents who value expression and self-regulation, rarely give punishment, do not control and do not easily give punishment will have a significant influence on altruism behavior.<sup>19</sup>

Environmental factors become other factors that can affect one's altruism behavior. Social environment is a place where an individual interacts with other individuals. Based



on research by Hoom et al., peers can influence the development of positive behavior of an individual as a form of adjustment to the social environment.<sup>20</sup>

Before getting to know the social environment, an individual first knows the family environment. This is supported by the results of Wahib's research which revealed that the family acts as the main and first foundation in educating a child.<sup>21</sup>

The role of educational institution in introducing one's altruism behavior is also very important. This is supported by the results of a study by Zaini which states that the highest goal of education is the development of students' personalities by changing negative behaviors and attitudes to be positive, turning bad character to be good, and maintaining good behavior that they already have.<sup>22</sup>

Other factors that can influence a person's altruism behavior are role models. In Sprafkin's opinion, observational learning or seeing a model directly will have more effects on improving altruism behavior, both real life models and symbolic models in learning.<sup>23</sup>

The behavior of one's altruism can decrease with the existence of selfishness. Explained that, altruism is the opposite of selfishness. An altruist person does not care about the benefits that will be obtained after giving help.<sup>5</sup> A doctor must always provide services holistically to patients. Holistic health services are regulated in the Indonesian Medical Ethics Code (KODEKI) article 12.<sup>24</sup>

*"In carrying out his work, a doctor must pay attention to all aspects of health services (promotive, preventive, curative, rehabilitative, and palliative), both physical and psychosocial-cultural of his patients, and try to be a true educator and devotee of society."*

The motivation expressed by some respondents to become a doctor is to care for their family. According to Sharma, family is an interpersonal social system that is held by strong bonds of attachment, affection, and mutual care between family members.<sup>25</sup>

Another motivation for becoming a doctor is to do a good deed as form of praying. In the opinion of most religions such as Islam, Hinduism and Buddhism encourage altruistic behavior.<sup>26</sup> Helpful to others is a demand for everyone. According to GyÖrffy et al. research, the main motivation of a medical student in choosing a career is the motivation to become someone who is altruistic.<sup>27</sup>

When given the choice to choose an internship area, the majority of respondents chose to return to their area of origin or choose areas that still lacked health services. This is based on not yet achieving health equity in Indonesia.

Based on data from the Ministry of Health of the Republic of Indonesia, the number and distribution of doctors still experience obstacles.<sup>28</sup>

Furthermore, students revealed that the selection of internships location would be influenced by the role of parents in making choices. This data is supported by Wayne and Slocum's research, that generally an individual in making career decisions will be based on available information from parents and the social environment.<sup>29</sup>

In addition to consideration of the decisions of parents, lack of health insurance for a doctor when serving in a remote area will also affect the selection of an internship. The findings of this study are in accordance with the opinion of Ginzberg, that career choice decision making will be influenced by the suitability between career goals and reality in the work field.<sup>30</sup>

Unprofessionalism of a doctor in managing patients is one of the factors causing malpractice revealed by respondents. This is supported by the research of Renkema et al., which revealed that one of the factors that can influence the occurrence of malpractice is how much a doctor feels responsibility towards his patient.<sup>31</sup> According to Rogers and Ballantyne, that the success of health care efforts is inseparable from the professional behavior of the health workers.<sup>32</sup>

Another factor expressed by respondents was doctors who were more concerned with money. When a doctor only pursues financial benefits rather than service, there will be a problem of depersonalization. Depersonalization is the loss of familiarity in interactions between humans. This data is supported by the research of Widiyawati that doctors' skills are not only determined by their medical abilities, but are also supported by a warm relationship between doctors and patients.<sup>33</sup>

The failure of doctor communication with patients is a factor that can cause malpractice. States that effective communication is the basis of patient-centered treatment, this contributes to positive therapeutic effects, good therapeutic results, and patient satisfaction.<sup>34</sup> The last factor that causes malpractice according to respondents is the lack of medical skills possessed by a doctor. One of the characteristics of a good doctor is a doctor who is competent or capable in terms of academic and clinical abilities.<sup>35</sup>

## CONCLUSION

The results of this study obtained five final themes, namely: 1) altruism and attribute of medical professions, 2) altruism and influential factors, 3) altruism of medical students, 4) medical profession from a student perspective,

and 5) altruism and malpractice. Altruism is one of the attributes of professional behavior that must be possessed by a doctor. This behavior should be corrected since the beginning of the doctor's education. Many factors influence altruism, both internal and external factors. The level of altruism of medical students can be assessed by first understanding the student's own perspective on the doctor's profession. A doctor's low altruism can cause unexpected things like malpractice. The suggestion for further research is to explore the factors that can improve altruism behavior in more detail, so that it can be used as a reference to improve altruism behavior and support the improvement of services for patients

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