

Prevalence and Predictors of Resumption Anxiety in Undergraduates: A Preliminary Survey

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ABSTRACT

There exists an enormous amount of literature on anxiety among undergraduates. This study sought to determine the prevalence of resumption anxiety (RANX) among undergraduates. Participants consisted of 400 (186 male and 210 female) undergraduates selected from two Nigerian universities, one privately-owned, and one publicly owned. They ranged between 16 and 25 years in age, $X = 19.5$, $SD = 1.85$. To measure resumption anxiety, the authors developed the Resumption Anxiety Inventory (RAIN), a 46-item, 5-point Likert-Type questionnaire. The BFI-2 (Soto & John, 2017) was used to measure personality. Data analysis, using the SPSS-XXIII, indicated that 42 per cent of the participants reported high resumption anxiety. RAIN score was higher for private university students, but the difference was not statistically significant. Furthermore, Negative emotionality correlated positively with RAIN score, but Openness and Agreeableness correlated negatively with RAIN. Our data show a high prevalence of resumption anxiety among undergraduates, and that personality is an important determinant of resumption anxiety. Preventive measures for anxiety problems in school, deterioration in mental well-being, and related problems should include regular screening of students for resumption anxiety.

Keywords: Anxiety, Agreeableness, Negative emotionality, Open-mindedness, Personality, Resumption anxiety, University.

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Highlights of this paper

- Resumption anxiety exists among University students.
- Personality domains; Negative emotionality, open-mindedness, and agreeableness are significant predictors of resumption anxiety.
- Resumption anxiety in undergraduate students is not peculiar to just one type of school environment.
- To measure resumption anxiety, the authors developed the Resumption Anxiety Inventory (RAIN), a 46-item self-report questionnaire.

1. INTRODUCTION

Anxiety is a mental state characterized by a strong sense of dread, worry or apprehension about something unfavourable that could happen in the future (Saviola et al., 2020). It is the irrational anticipation of future threats that may be accompanied by psychophysiological, cognitive, and behavioural reactions. The experience of anxiety is usually related to specific situations, events, and objects, and may vary from one person to another. As such, anxiety diagnoses are tied to the circumstances and conditions which elicit them. Examples of these in the University include statistics anxiety (Igbokwe, Oyewole, Prekake, Agoha, & Agbu, 2017), math anxiety (Bjälkebring, 2019), test anxiety (Duraku, 2017), and anxiety related to clinical training in medical students (Dennis, Warren, Neville, Laidlaw, & Ozakinci, 2012).

People typically exhibit anxiety in response to upsetting and threat-provoking stressors. But a pattern of anxiety indicators may become persistent, disproportional to the stressor, overly distressful in some people, and accompanied by impairment in adaptive function. At this point, a diagnosis of anxiety disorder might be made (Wagner, 2005). These disorders tend to affect a vast area of an individual's functioning and have a bidirectional interaction with academic distress. While anxiety may be desirable to some degree for optimum academic achievements, an excess of it may as well hamper academic success (Spielberger, 1966).

Although school-related anxiety is commonly observed in children as school avoidance, it is often thought that University students have outgrown the stress and anxiety that comes with school (LaGrand, 1985). But as pointed out by Greenberg (2014), each new school year brings with it a fear of the unknown which individuals are generally uncomfortable with. Moreover, the challenge of adjustment is not restricted to the first year in university but changes continually from one year of schooling to another (Tett, Cree, & Christie, 2017).

Research has shown anxiety to be one of the leading causes of distress in children and young people (2008) and one of the common reasons that university students seek mental health services with year-over-year increases (Center for Collegiate Mental Health, 2018). It could lead to test failure (Birjandi & Alemi, 2010), physical diseases like hypertension (Agoha, Ogiri, Akindele, & Ogiri, 2020; Clarke & Currie, 2009; Rawson, Bloomer, & Kendall, 1994), compromise in personal well-being and student quality of life (Gültekin & Dereboy, 2011).

1.1. Gender and Anxiety

The onset of anxiety and depressive disorders peaks during adolescence and early adulthood, which coincide with the period at which most young people enter university. The female gender has been known to portend higher risks for college students' anxiety than the male (Wafaa & Safaa, 2017). This difference may be due to the large gender differences in brain structure and function that fluctuate across development (Courchesne et al., 2000), and sociocultural demands which make women more negatively affected (Altemus, Sarvaiya, & Epperson, 2014; Enefazu-Ossai, Agoha, Adekeye, Igbokwe, & Ologun, 2017) by symptoms of anxiety disorders. But Christiansen (2015) has pointed out that despite their widespread presence, gender differences in symptoms of anxiety are often insignificant in University students, thus making anxiety context-specific.

1.2. Anxiety and the Campus Environment

The transactional stress model (Lazarus & Folkman, 2013) provides a broad perspective for articulating the aetiology of anxiety and applying this model, self-appraisal of one's capability to cope with a given social or physical environment. Enefazu-Ossai et al. (2017) found that first-year students from more cohesive and healthy families had poorer school adjustment. And people whose families lived in self-owned, and more comfortable apartments reported poorer adjustment, compared to those whose families lived in rented, less comfortable flats.

The study also indicated that male students adjusted better than female students. The authors reasoned that the divergence between the home and school environment were critical issues with which students ought to cope. Social support (Agoha, Ogwa, Evbuoma, Igbokwe, & Idoko, 2015) and personal qualities (Conley, Shapiro, Huguenel, & Kirsch, 2018) are essential to resumption anxiety (RANX). Therefore, to understand resumption anxiety, it is pertinent that the school environment is taken into consideration.

1.3. Neuropsychological Perspectives

Neuropsychological theories link anxiety to brain structures. Eysenck (1967) identified two such pathways- the cortico-reticular loop, which includes the cortex, the Ascending Reticular Activating System (ARAS), and the thalamus. He posited that this system is more active in introverts than in extraverts (Eysenck, 1994). He associated a second pathway, the viscerocortical pathway, which includes midbrain structures like the amygdala involved in processing emotional aspects of a stimulus, with neuroticism (N). Anxiety-proneness may result from a combination of Low Extraversion (E) and high Neuroticism (N), and impulsivity may result from a combination of high E and high N (Gray & McNaughton, 2000).

1.4. Personality and Anxiety

Zuckerman (2005) produced a neuropsychological model that linked the surface Big-Five traits to transporter genes. The systems generally consist of interconnections between lower substrates and frontal cortices involved in thinking and decision-making. The involvement of frontal lobe areas allows for the involvement of cognition in anxiety. They allow for stimulus interpretation and control of lower inputs, as well as anticipatory coping through feedforward processes in line with Lazarus and Folkman (2013) transactional theory of stress. The neuropsychological perspectives are supported by empirical research (Chew & Dillon, 2014; Lyon, Juhasz, Brown, & Elliott, 2020; Zinbarg et al., 2016). And Savitsky, Findling, Erel, and Hendel (2020) reported an association between resilience and humour with lower anxiety levels in nursing students during the covid-19 pandemic.

1.5. The Problem

Our review indicates different factors contribute to anxiety in students. These may include neurological, environmental, gender, and personality. And although these have been studied in relation to different types of anxiety in students, the literature is mute on the construct of resumption anxiety, if not resolved in time, may become the bases for further deterioration in psychological functioning, cognitive-affective strategies, and social adjustment of undergraduates (Conley et al., 2018; Saviola et al., 2020), other mental and behavioural disorders, academic failure, and school dropout.

This study aimed to determine the prevalence of resumption anxiety among undergraduates. Furthermore, we searched for the association of personality (five-factor model), gender (the biological quality of either being male or female), and type of school (Privately or publicly owned universities) with resumption anxiety. The hypotheses

were that personality would predict resumption anxiety; and that the effect of gender and type of institutions on resumption anxiety would be statistically significant.

2. METHOD

2.1. Participants

An initial sample of 400 undergraduates who had resumed a new school year was selected for the study. Fifty per cent of these were from a privately-owned university, and the other fifty per cent were attending a publicly-owned university. One hundred eighty-six participants (or 53%186) were male, and 210 were female. They ranged between 16 and 25 years in age, $\bar{X} = 19.5 \pm 1.85$.

2.2. Measures

Resumption Anxiety. To measure resumption anxiety, the authors developed the Resumption Anxiety Inventory (RAIN), a 46-item self-report questionnaire. Participants were asked to indicate how well they relate to the statements on the questionnaire, based on their experience at the start of the school year. The development of the RAIN followed a two-step process. First, 30 undergraduate students were asked to state how they felt upon resuming for a New Semester. Item analysis retained forty-six out of the sixty items generated from these responses.

Secondly, the 46 items were formulated into a 5-point Likert scale with scores ranging from 1, "Not at all," to 5, "Very much". The questionnaire was administered together with the State-Trait Anxiety Inventory and the Pittsburgh Sleep Quality Index (PSQI) to another sixty students from one private and one public university. The RAIN yielded a Cronbach's α of .96, split-half reliability $r = 0.93$, and correlated with State Anxiety ($r = 0.42$), Trait anxiety ($r = 0.21$), and the PSQI ($r = 0.04$), thus establishing reliability and validity.

Personality. The Big five inventory (BFI-2) developed by Soto and John (2017) was used to measure personality. It is a 60-item self-report inventory of 5-point ratings ranging from 'disagree strongly' (1), to 5, 'Agree strongly'. It measures the broad dimension of constructs vis-a-vis conscientiousness, agreeableness, open-mindedness, negative emotionality, and extraversion. The BFI-2 is valid and reliable and has been widely used in Nigeria.

2.3. Data and Analysis

Four outliers were expunged, leaving us with 396 data points, which were analysed. A hierarchical multiple regression (forward selection method) was conducted, using the Statistical Package for the Social Sciences (SPSS 23.0). The variances were unequal for the two sample groups; so the Mann-Whitney U test was used to compare both means. Gender differences were tested using the one-way analysis of variance.

3. RESULT

The result of the data analysis is presented in the tables. The demographics of the participants are displayed in Table 1. This is followed by hypotheses testing.

Table 1 holds information on the means, standard deviations, and correlations of the variables of the study. 41.9% of the participants obtained RAIN scores above the sample mean, indicating a high prevalence of resumption anxiety among university undergraduates.

Table 1. Means, standard deviations, and correlations of the study variables.

| Variable | Gender | Age | RAIN | Extraversion | Agreeableness | Conscientiousness | Neuroticism | Openness |
|------------------------------------|--------|-------|---------|--------------|---------------|-------------------|-------------|----------|
| Gender (Female=53%) | 1 | | | | | | | |
| Age (19.5, 1.85) | -0.12* | 1 | | | | | | |
| Rain (91.14, 33.) | 0.07 | 0.02 | 1 | | | | | |
| Extraversion (37.49, 6.82) | 0.05 | 0.07 | -0.14** | 1 | | | | |
| Agreeableness (43.76, 6.34) | 0.09 | -0.02 | -0.24** | 0.09 | 1 | | | |
| Conscientiousness (41.73, 7.07) | 0.07 | 0.11* | -0.19** | 0.21** | 0.45** | 1 | | |
| Neuroticism (34.15, 7.03) | 0.17** | 0.05 | 0.25** | -0.17** | -0.28** | -0.19** | 1 | |
| Open-mindedness (43.01, 5.91) | -0.00 | 0.09 | -0.21** | 0.11* | 0.33** | 0.39** | -0.03 | 1 |
| | N | 396 | 396 | 396 | 396 | 396 | 396 | 396 |

Note: Gender is coded as 1 = Male, 2 =Female, *P<0.05, **P<0.001.

Table 2. Summary of hierarchical Regression for Big-Five factors predicting resumption anxiety (N = 396).

| Variable | Model 1 | | | Model 2 | | | Model 3 | | |
|-----------------------------|---------|-------|---------|---------|-------|---------|---------|-------|---------|
| | B | SeB | β | B | SeB | β | B | SeB | β |
| Neg. emotionality | 0.006 | 0.001 | 0.27** | 0.006 | 0.001 | 0.26** | 0.006 | 0.001 | 0.23** |
| Open mindedness | | | | -0.005 | 0.001 | -0.20** | -0.004 | 0.001 | -0.16* |
| Agreeableness | | | | | | | -0.003 | 0.001 | -0.13* |
| R ² | | 0.07 | | | 0.11 | | | 0.12 | |
| F-Change for R ² | | 29.72 | | | 16.87 | | | 5.74 | |

Note: **p < .01, *p < .05.

The result on Table 2 provides support for Hypothesis 1. Negative emotionality, open-mindedness, and agreeableness explained over 30 percent of the variance in Resumption Anxiety. Only negative emotionality correlated positively with Resumption Anxiety ($\beta = 0.27$, $F(1, 394) = 29.72$, $p < .01$). The other predictors were Open-mindedness ($\beta = -0.16$, $F(2, 393) = 16.87$, $p < .01$) and Agreeableness ($\beta = -0.13$, $F(3, 392) = 18.03$, $p < 0.05$). Extraversion, and conscientiousness correlated negatively with Resumption Anxiety, although their effects were not significant. Beta in conscientiousness in model 1 was -0.15 , $t = -2.98$, $p < .01$.

Table 3. Comparison of Means RAIN scores of private and public University students.

| University students | N | Mean | Std. Dev | Std. Error | Min. | Max. |
|---------------------|-----|-------|----------|------------|------|------|
| Private | 196 | 93.72 | 37.40 | 2.67 | 46 | 220 |
| Public | 200 | 88.62 | 28.72 | 2.03 | 46 | 166 |
| Total | 396 | 91.14 | 33.35 | 1.68 | 46 | 220 |

Table 3 displays the RAIN score of participants from a private university compared to participants from a public university. The private university group obtained a higher mean resumption anxiety score compared to the public university. Their score also showed a wider spread. However, the observed difference between means did not reach statistical significance ($U = 18873$, $N_1 = 196$, $N_2 = 200$, $p > 0.05$, two-tailed). In the same vein, male and female participants did not differ significantly in their resumption anxiety scores, $F(1, 394) = 1.33$, $p > 0.05$. Hypotheses 2 and 3 were thus rejected.

4. DISCUSSION

Forty-two per cent of the study participants reported high resumption anxiety, implying a high prevalence of resumption anxiety: gender and university type notwithstanding. RANX correlated positively with Negative emotionality, and negatively with the other dimensions. The effects of open mindedness and agreeableness were significant.

Our findings agree with theory (Gray & McNaughton, 2000) and earlier results that found an association between personality and anxiety in college students (Al-Turkait & Ohaeri, 2016; Savitsky et al., 2020).

5. CONCLUSION

This study described and explored the prevalence of resumption anxiety in undergraduate students. There were strong indications of a high prevalence of resumption anxiety. Further findings showed that the big five personality domains negative emotionality, open-mindedness, and agreeableness significantly predicted resumption anxiety, with negative emotionality varying in the same direction. We recommend regular assessment of students for resumption anxiety by academic institutions, and where necessary, carry out psychological intervention should be deployed to forestall further deterioration in mental well-being and academic failure.

5.1. Future Directions

This study focused on determining the existence and magnitude of RANX. As such, only a few predictors were included. A better understanding of resumption anxiety will require the including, or controlling for the effects of so many other variables. Moreover, determining the practical implications of resumption anxiety for students is another area that requires further research.

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