Academic Stress, Coping Mechanisms, and Outcome Measures amongst College Students of

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TABLE OF CONTENTS **1**

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Abstract

The aim of this study was to explore the predictive ability of sources of stress and a range of coping behaviours and outcome measures on student satisfaction and motivation. Most research exploring sources of stress and coping in students defines stress as psychological distress, with little attempt to consider positive experiences of stress.

A questionnaire was administered to 140 students from two universities. Questions were asked which measured sources of stress when rated as likely to contribute to distress and likely to help one achieve.

Support, control, self esteem, self-efficacy, academic results, general health and coping style were also measured, along with their potential affect on course satisfaction, motivation and feeling part of a learning society. Teaching quality, effective support and work-life balance are essential to student satisfaction and motivation. How educators interact with their students and the opportunities they create in and outside the class to promote peer support are likely to enhance satisfaction and motivation.

Analysis of the data showed that self-efficacy, dispositional control and general support were the strongest predictors, and time management as a hassle, and teaching quality as an uplift were important predictors in general health, academic results, and self esteem.

Introduction

Stress is a natural feeling, designed to help you cope in challenging situations. It is a person's perception of the event that determines their response. Lazarus and Cohen (1977) described stressors as demands made by the internal or external environment that upset balance, therefore affecting physical and psychological well-being and requiring action to reinstate balance. In small amounts it is good because it pushes you to work hard and do your best. But sometimes stress can produce anger and aggression in some people, apathy and depression in others. So far, research has not positively identified why individuals of the same species may produce opposite responses to the same stimulus; differences may be due partly to personality, and partly to the environment.

Theories of Stress

Stimulus Based Model on Stress

Stress often helps people to confront or escape threatening situations (Linsky et al., 1995). Stress has a positive impact when a person feels stimulated and able to manage the situation. This positive response excites and activates the higher thinking centres of the brain. A positive response to stress can provide the energy to meet challenges, and excel. Stress has a negative impact when a person feels threatened and not in control of the situation. These feelings trigger a powerful reaction affecting both the brain and body in ways that can be harmful to physical and mental health.

Holmes & Rahe (1967) studied the relationship between specific life changing events; the objective was to focus on any positive or negative events within the environment that led to change. Holmes & Rahe (1967) examined the strengths of a number of life events and created a rating scale, known as the Social Readjustment Rating Scale (SRSS), comparing

numerical values with a range of life events, from the most severe to lesser events. The Social Readjustment Rating Scale measures the amount of stress experienced by a person over a period of time and then is totalled. In a study using the SRSS scale by Holmes et al., (1998); it was found that there was a modest but positive correlation between academic achievement and school reinforcement. Through the use of this scale, Rahe & Arthur (1977) found that a score of high life change was followed by physical illness and psychological problems a year or two later.

Although the Holmes & Rahe model is well known for measuring stress, there have been some criticisms of it over the years. It has been suggested that the slow breakdown in health may be the cause rather than the effect of the life events; poor health may cause inefficiency in a person. In addition, the scale does not allow for individual differences. What may be a traumatic event for one person may be a release for another.

Biological Aspects of Stress

Selye (1956) observed the body's reaction to stress in laboratory animals and in human patients. A common response to stress is said to be flight or fight. This is when the body nervous system is aroused; hormones are released to sharpen the senses, quicken the pulses, increase respiration and tense the muscle. All of those help to defend against threatening situations. Biologically, the two sexes respond differently to stress. Men are inclined to be 'problem-focused' – this being the fight or flight response, where as women are more emotion focused – that is, that they seek the company of other's when they are under pressure. The flight or fight response was only one in a series of reactions, which he later caller the General Adaption Syndrome (GAS). Selye (1956) found that continuous exposure to serious stressors produced a series of three physiological stages: (a) alarm; (b) resistance; and (c) exhaustion.

The alarm reaction involves the arousal of the autonomic nervous system and appears when a person is confronted with a stressor. During this stage, a person's resistance to the stressor temporarily drops below normal, and the person may experience deterioration of normal physiological functioning. With continuous exposure to the stressor, the person enters the stage of resistance.

The stage of resistance is when a person adapts to the environmental stressor. Yet, if there is continuous exposure to the stressor, a person enters the stage of exhaustion.

During the stage of exhaustion, a person loses their ability to adapt and resistance decreases to below normal levels; leaving a person exposed to illness and even death.

A problem for the GAS theory is that it does not take account of psychosocial processes. Also, Selye's (1956) tests that were carried out do not necessarily have the same outcomes in pattern for all people as people have individual differences. The way one person may react to a certain situation may be different to another person's reaction. Different levels of hormones may be produced and the patterns may be different for each individual, due to how they perceive the stressor and cope with it. In a study by Katherine Tennes and Maria Kreye (1985) found that intelligent schoolchildren felt more stress on the day of an exam than unintelligent schoolchildren. Cortisol levels were measured in urine samples taken on normal school days and on days when tests were given. Intelligence test scores were collected from school records. The results showed that more intelligent children are more concerned about academic achievement. Therefore, Selye does not take into account coping mechanisms as important agents of the stress outcome relationship. Both topics are central to psychological stress theories as discussed by the Lazarus and Folkman's (1986) transactional model theory.

Cognitive Appraisal and stress

According to Lazarus and Folkman, (1986), stress is a relationship between individuals and their environment. Psychological stress refers to a relationship with the environment that the person assesses as significant for their well being and in which the demands burden or better available coping resources (Lazarus and Folkman 1986, p. 63). Lazarus (1991) developed a comprehensive emotion theory that also includes a stress theory (Lazarus, 1993). This transactional model theory distinguishes two basic forms of appraisal, primary and secondary appraisal. Primary appraisal is the establishment of the significance of an event to a person.

Secondary appraisal is the assessment of the ability of a person to cope with the consequences of the event. When students appraise their education as a challenge, stress can bring them a sense of competence and an increased capacity to learn. This is a far more cognitive approach rather than a physiological one. It provides for individual differences and acknowledges that we can change and reappraise the stressor and therefore manage our coping skills.

Lazarus and Folkman (1984) suggested that coping effectiveness plays a key role in the impact of perceived stress on psychological outcomes. There are two core strategies for coping found in literature, the first being by Lazarus and Folkman, (1991).

The first being identified with two types of coping: (a) Problem-focused coping represents any attempt to reduce stress by attempting to change the event or situation producing the stress, (b) Emotion-focusing coping centres on changing one's personal reaction to the stressful event or situation. Emotion-focused coping may involve activities such as exercise, cognitive reappraisal, and relaxation training. Relaxation seems a key technique to be taught as it can lower blood pressure, decrease heart rate and strengthen the immune system and

counteracts the effects of stress giving the body time to recover. Self-compassionate people tend to rely heavily on positive cognitive restructuring and less so on avoidance and escape but do not appear to differ from less self-compassionate people in the degree to which they cope through problem-solving or distraction. Existing evidence does not show clear differences in the degree to which people who are low versus high in self-compassion seek support as a coping strategy, but more research is needed. Endler and Parker (1990), did 13 studies focusing on Lazarus & Folkman (1984) two meta-strategies of coping; and out of these studies, 9 identified these two dimensions as being distinct components of coping.

The second core strategy is distinguished between the approach and avoidance coping strategy (Moos & Schaeffer, 1993). Approach coping is a person's diligent attempts at resolving and managing a stressor (Bahramizade & Besharat, 2010). It is one's vigilance, attention, and monitoring; and it also refers to the cognitive efforts to analyse or change one's thinking about a problem and how to directly deal with the problem (Elliot et al., 2011). Avoidance strategies tend to reduce stress over short periods of time by moving away from the source of the threat. It displays cognitive and behavioural efforts to refuse, minimise, or escape from a difficult situation and/or associated emotions or thoughts (Dickson, 2012). According to Roth and Cohen (1986) avoidance strategies have little or no effectiveness over a long period of time. The aspects of avoidant coping are: (a) mental disengagement, (b) focusing on and venting emotions, and (c) behavioural disengagement (Carver et al., 1989). It has been seen throughout several studies that in addition to using social support in order to manage stress, that people tend to relay on avoidant coping (Ben-Zur, 2009; Brown et al., 1987; Lopez et al., 2001). Moreover, Carver et al., 1989 suggested that avoidant coping plays a key role in shaping how one perceives their environment and then interprets this information into the association between stress and well being.

Perceived Sources of Stress in College Students

College is a period of responsibility for choices and lifestyle practices, where students are exposed to the challenges of young adulthood and also tackle the mental and social issues of students' life. There is a growing body of evidence that has looked at stress among university students and its effect on well-being (Leicester University, 2002; Robotham & Claire, 2006). College students are vulnerable to several stress factors, including academic and social pressures long with the challenges of being in a new environment.

When education is seen as a threat, however, stress has the potential to interfere with academic performance and may affect as many as millions of students per year (Barker 1987). Whitman (1985) suggests that stress is difficult to define because of its variable effect on individuals. There are numerous theories to explain the effects of stress, especially its effect on academic performance (Spence and Spence, 1966, Carver and Sheier, 1990, Travis and Wade, 1993). A study carried out by UCLA in 2003 showed that academic performance was the highest source of expected or experienced stress at all academic levels, regardless of gender, race/ethnicity, or parents' educational level. Sources of academic stress include examinations and assessments (Robotham and Claire, 2006). The National College Health Assessment (2013), where the average age of those survey was 21 years, reported that almost half (46.3%) of all undergraduate students surveyed felt trauma or overwhelmed in regard to their academic responsibilities.

Fear of failure and the teacher response to student need, also lack of timely feedback on assessments, have been reported by students as typical stressors (Gibbons, 2008, 2010). According to self worth theory (Beery, 1975; Covington, 1992; Covington & Beery, 1976), in an academic setting, where one's worth is largely measured by their ability to achieve, self-perceptions of incompetence can trigger feelings of shame and humiliation. In this setting,

efforts to regulate one's feelings and protect one's sense of self worth sometimes lead

students to avoidance strategies designed to alter the meaning of failure by minimising

information about their real level of ability. Two main strategies are: (a) Defensive pessimism

– This protects students who are afraid of failing by cocooning them against anxiety prior to

the stress afflicting task (Cantor & Norem, 1989, p. 93), (b) Self-Handicapping – changes the

meaning of failure by avoiding the cause of failure away from the students' ability onto

premeditated excuses (Midgley & Urdan, 2001).

Compared to defensive pessimism, self handicapping is typically less common, with

approximately 6 – 10% of college students reporting that they use this strategy (Martin, 1998;

Martin & Marsh, 2003); and it is typically prevalent among boys (Midgley & Urden 1995,

2001; Rhodewalt & Hill, 1995; Smith, Sinclair, & Chapman, 2002). Academic self-

handicapping in particular has been found to predict lower self-esteem and more negative

affect over time (Zuckerman & Tsai, 2005), as well as poor self- regulation, lower academic

achievement and increased likelihood of later withdrawal from studies (Martin et al., 2001b).

Positive teacher-student interaction have been shown to support students' adjustment to

college, contribute to their social skills, promote academic performance, and foster students'

resiliency in academic performance (Battistich, Schaps, & Wilson, 2004; Birch & Ladd,

1997; Hamre & Pianta, 2001).

Personal sources of stress include financial concerns, a lack of difficulties in

managing one's apparent free time and a concern about career direction (Leicestor

University, 2002). Trombitas (2012) found that through recent studies by Inceptia (2012),

National Survey of College Students (2011) and recent college graduates that one third of

students said financial stressors have had a negative impact on their academic performance;

seventy-four percent of students are working during the academic year, and 15 percent of

students are working full-time. Students who work more than 20 hours per week during the

academic year are significantly more likely to report that financial stress has had a negative impact on their academic progress or performance and that they reduced their academic course load due to this stress. Frazier and Schauben (1994) used the Psychological Distress Inventory to obtain information regarding stress experienced by a group of female college students. The researchers found that female college students experienced stress related to financial problems, test pressure, failing a test, rejection from someone, dissolution of relationships, depression and feelings of low self-esteem. On the contrary, Ross et al. (1999) conducted a study on college students of both genders and found a different set of stressors that were common among all college students; those experiences associated with stress included a change in eating and sleeping habits, new responsibilities, heavier workloads and breaks. Similarly, Phinney and Haas (2003) reported a unique set of stressful experiences among ethnic minority, first generation 'college freshmen'. More specifically, sources of stress included difficult financial challenges, domestic responsibilities, responsibilities related to holding a job while in school, and a heavy academic load. Also, the ethnic minority 'college freshmen' experienced stressors such as conflicts in time management, pressure associated with their academic workload and problems within their family (Phinney & Haas, 2003).

Managing one's time ineffectively can often be a source of stress. Individuals can be taught to look at what has to be accomplished in a day, or a week, and find efficient ways of working so that they are not constantly backpedalling and thereby wasting time. Establishing priorities and working to these is an effective way of managing one's time. According to Rogers and Yassin (2003), it is important for students to develop different coping strategies in order to encounter and manage stressful conditions. If not handled well, the stressors that originated from financial problems, sleep deprivation, societal activities and many more can affect student's ability to perform.

Stress is necessary to challenge students to learn. Approaches are needed that reduce the negative aspects of stress which lessen students' learning and performance. The key to reducing distress is providing students with a feeling of control over their education, information about what to expect, and feedback regarding what can be done to improve their performance. Basic needs must be met by providing a safe environment, structure, consistency and positive relationships and help to manage the stressful moments that arise for students (Tennant, 2005). Students who do not feel helpless will adopt their own coping strategies.

Coping Strategies & Outcome Measures of College Students

It is considered that student stress is a transactional process between the new and stressful situation they have to face and their personal and social resources. College is considered to be the last period of transition before adulthood (Towbes & Cohen, 1996), and their psychological, behavioural and physical discomfort can manifest itself in many ways, including mood, sleep, and eating disorders. Although there has been a large number of reports of symptoms including somatic, psychological, and behavioural disorders among college students, there has been very few studies focusing on health and coping (Boujut et al., 2004).

Self Esteem

Stanton (2006) found that high stress levels negatively impacted on the health and well-being of the individual. Individuals experiencing high levels of stress suffer psychological symptoms such as low self esteem, reduced motivation, anxiety, depression and decreased organisational commitment (Kaluzniacky, 1998; Sun & Doong, 1999). These symptoms inhibit the affected individual from learning and developing new skills and knowledge. This situation is made worse when individuals experience total exhaustion, due to

chronic stress, as they could suffer high levels of emotional exhaustion, depression, listlessness and sleeping problems (Chan & Chau, 2001).

According to Spence and Spence (1966) drive theory, when a person is stressed a physiological arousal occurs which leads to panic and interferes with an individual's performance. Carver and Sheier (1990) believe that people with confidence deal with stress by being continually task-focused while those with less confidence are usually preoccupied by feelings of distress and use self distraction techniques, such as off-task thinking.

Self-esteem is a person's overall emotional interpretation of his or her own worth. Very high levels of self-esteem may mean that the individual is over confident and possibly unrealistic in expectations of self-efficacy. Self-efficacy is an individual's belief of their own abilities to complete tasks and reach their objective. Low levels of self-esteem may display feelings of worthlessness, possibly resulting in depression and anxiety. A reasonably high level of self-esteem has been shown to be associated with good mental health (Coopersmith, 1968). A study by Leary (1999) showed that participants self esteem dissipated after they imagined themselves carrying out behaviours in which they felt they could be excluded or rejected by others, such as cheating on an exam, or yelling at someone. Additional studies have also shown that simply imaging rejections are sufficient to impair self-esteem (Moss, 2008). In the survey of American Freshman by the New York Times (2011), explained that the "National Norms Fall 2010," which involved more than 200,000 new full-time students at four-year colleges, the percentage of student's categorising themselves as "below average" in emotional health rose. Meanwhile, the amount of students who said their emotional health was above average fell to 52 percent; compared to 64 percent in 1985. Currently more students are arriving to college with problems, needing support, and the economic factors of today are putting a lot more stress on college students, as they look at their finances and wonder what their future will hold.

Thus, when people behave in ways to protect or improve their self esteem, they usually behave in ways that they believe other's will find to be acceptable. Therefore, improving their chances of social acceptance, and improving their level of self esteem (Leary, 1999).

Academic Results and Support

Dunkley et al., (2003) found that problem-centred coping, emotional coping, avoidance, and neglecting to look for social support, predicts more negative mental health in students. This report showed that the absence of active coping and interference, increase the somatic symptoms in students. Furthermore, Brown et al., (1987) highlight that satisfaction with social support is a capacity of the consistency between the strength of one's interpersonal needs and the social resources that are provided to fulfil those needs. If one is dissatisfied interpersonally with their environment, it could cause strain. When people perceive insufficient social support, they lack a defence against life stress that decreases one's well being (Hefner & Einsenberg, 2009).

The personal attention of teachers in the familiarity of school can change to a big impersonal campus that students have to find their way around. Dealing with one's own thoughts and feelings, can be facilitated by accessible professional and peer counselling, student support groups, and adequate faculty advising. An intervention the university could provide is group counselling as research (Raphael and Majeed, 2013) done on students categorised on the Stress Scale as High or Severe found a significant reduction of stress level and also a greater control over stress. Dealing with the actual stressful situations or events, can be strengthened by providing students with early success. Good teaching cannot be overestimated as a key to preventing and minimising distress among students. Of course, faculty may not be good teachers if they are themselves stressed and if they feel unrewarded

for good teaching. How to reduce stress among faculty and reward good teaching are questions for further study.

Payne (2001) explored stress and coping in nursing students; and found that it was the support available more than the type of coping used that was the strongest predictor of their well being. Lucas et al. (1993) accredits the low psychological distress and high job satisfaction among nurses working on intensive and critical care units to the level of support available. Several studies have found a relationship between stress and poor academic performance (Clark & Ricker, 1986; Linn & Zeppa, 1984; Struthers, Perry & Menec, 2000). Blumberg and Flaherty (1985) found an inverse relationship between academic performance and self reported stress level. In a similar study, Struthers et al., (2000) found that a high level of academic stress was associated with lower academic results. Students experience high levels of stress due to assignments, time pressure, exam pressure and result pressure. This shows stress has a negative effect on students' academic performance.

The beliefs that students develop about their academic capabilities help determine what they do with the knowledge and skills they have learned. Consequently, their academic performances are in part the result of what they come to believe that they have accomplished and can accomplish. This helps explain why students' academic performances may differ markedly when they have similar ability. Researchers have suggested that these self-beliefs may play a key role in relation to cognitive engagement and that enhancing them might lead to increased use of cognitive strategies that, in turn, lead to improve performance (Pintrich & De Groot, 1990). There's a lot of research on patterns of non-completion amongst first-year students and how psychological distress and depression can creep in unawares. Lack of psychological preparation is high on the list of why people don't cope because no matter how happy students are to get out of school, going to college brings challenging change. With the

loss of the school structure students have to take personal responsibility for attendance at lectures, study schedules, assignments, time-management and the stress of exams.

General Health

According to Asberg, Bowers, Renk, & McKinney (2008), satisfaction with social support is linked to problem-focused coping. Individuals with low social support were found to be more likely to engage in unhealthy activity (Thornsteinsson & Brown, 2008). Many struggle with their weight; partially because of stress and partially because of other social and practical issues faced by college students. Many gain weight and others lose weight unintentionally, or struggle with eating disorders. When students fail to adequately adapt to the college environment, this can lead to negative consequences towards their health behaviours and weight status (Von et al., 2004). According to studies conducted in the US, university students were not eating the necessary amount of fruit and vegetables, and instead were consuming large amounts of high-fat foods (Silliman et al., 2004; Butler et al., 2004; Debate et al., 2001). In a Greek study by Chourdakis et al (2011) university students showed to have a significantly high intake of total and saturated fats over any other food group. Unhealthy eating and alcohol consumption have a significant impact to energy intake and therefore may facilitate weight gain (Lloyd – Richardson et al., 2008).

The consumption of alcohol and psychoactive substances has become an integral part of medical visits to first year students (Wauquiez, 2006). Vollrath (1998), in a study of the transactional model of addiction, showed that students who smoke use more ineffective coping strategies than non smokers. It has been explained that smokers use smoking to regulate their negative emotions, rather than using functional strategies. This strategy often leads to an increase in the number of unresolved problems a student faces, therefore adding to

their stress. This circumstance has also been seen in other studies of populations of smokers (Wills, 1986; Wills & Shiffman, 1985).

In addition to this, people that were linked to serious dissatisfaction levels correlated with tendencies of suicidal behaviour (Allgower et al., 2001). Lafay et al., (2003) conducted a study showing that 15% of students admitted to having suicidal thoughts, (this being the second most common cause of mortality among individuals aged 18 – 24years), and 30% of students demonstrated to have depressive symptoms during a 12 month period (Lafay, Manzanera, Papet, Marcelli, & Senon, 2003). In interviews with 1,247 college students, 6% reported having suicidal thoughts (Arria et al., 2009). Crombie et al., (2009) hypothesized that these unhealthy behaviours during the years at university will remain through adulthood as well. Therefore, it has been suggested that the introduction of programs about unhealthy habits should be available to all universities, in order to prevent an increase in these habits.

According to Lazarus and Folkman (1984), an imbalance between assessment of available support and perceived stress can result in negative outcomes, while the assessment of adequate social support can serve as a defence against perceived stress on well-being. Sarid et al., (2004) found a positive relationship between the use of problem-focused coping and well-being. Furthermore, students who use problem focused coping, are likely to be more optimistic and persistent (Sarid et al., 2004). According to Whitman (1985) the most helpful method of dealing with stress is learning how to manage the stress that comes along with any new challenge, good or bad. The key to success is to think positively and take control of stress and anxiety by learning effective techniques to combat it. Therefore, sufficient problem-focused coping and social support will strengthen and protect one's well-being.

College students are expanding their social world and developing competencies and control. The college environment will have a significant impact among people and will affect

their behaviours whether positive or negative. The solution to reduce a student stress is providing students with a sense of control over their education, information about what to expect, and feedback regarding what can be done to improve their performance. Students who do not feel powerless will adopt their own coping strategies (Whitman, 1985).

Present Study

Therefore the aim of this study was to examine the relationship between the college environment; and its effect on a person's stress levels, coping strategies and overall outcome measures. Do students find the course motivating? Do students feel that they are receiving sufficient advice and support from the college? Do college students find it difficult to accomplish goals? Does the work load of the course cause stress? How does working and going to school contribute to stress among college students? Do students feel they have control over their decisions? And are they able to manage problems?

It is hypothesized that there will be a significant correlations between the student experience rated as sources of potential uplifts and distress and satisfaction, motivation, support, control, self esteem, self-efficacy, academic results, general health and feeling part of a learning society.

Method

Participants

Convenience sampling method was employed to gather surveys from a total of 140 participants. Convenience sampling was achieved by sending the online survey link to friends, family, work colleagues and associates. Random sampling was achieved through a post on a webpage dedicated to surveys (http://www.reddit.com/r/SampleSize/). One participant was excluded because they had listed themselves as 16, and the required age for acceptance was 18. The aim was to create as diverse a population as possible. The final sample was made up of 96 males and 44 females aged from 18 to 66.

In order for each sample to be used the participant had to be over the age of 18 and have given their consent on the survey to participate. There was no reward or incentive given for participating. The study was given approval by the Dublin Business School Psychology Research Ethics Committee and all ethical principles in the Code of Professional Ethics were adhered to.

Design

A questionnaire-based study, employing a quantitative, between sample design which investigated the relationship between the predictor variables: The college environment, and the criterion variables: Stress, Coping and Outcome Measures. In the college environment, we looked at several factors, such as, academic performance, fear of failure, teaching, assessment & feedback, workload and personal sources of stress, such as time management, financial strain and career direction. Coping strategies were divided into three main subgroups: self esteem, academic support and results, and general health. Data collection was carried out in 2014.

Materials

The survey given to participants was comprised of a small demographics section and several surveys were used.

The first 63 items of the questionnaire contained items from the National Student Survey (NSS) in 2010, together with questions from earlier questionnaires; which consisted of intellectual motivation, course satisfaction and being part of a learning society. This rating scale showed sources likely to cause "eustress" as well as distress. Each item was rated twice – once from its perceived distress, know as a 'hassle', and once from its perceived "eustress", called 'uplift'. A rating scale from 0 – 5 was used, 0 indicating that it was no source and 5 indicating a severe source of distress or "eustress".

Goldberg's (1978) General Health Questionnaire (GHQ 12 item version) is used for the detection of psychiatric distress related to general medical illness (Lykouras et al., 1998). It focuses on the negative effects of distress on an individual's well being; and focuses on identifying distress and "eustress" in a person. On a scoring scale of 0, 0, 1, 1 was used with a mean score of 3 or above, indicating a case and significant distress.

The Generalised Self-Efficacy Scale (Schwarzer, 1992) consists of 10 items and respondents answer on a four point scale from 'not at all true' to 'exactly true'. It is a context free measure of self efficacy.

The Marlow-Crowne Social desirability scale (10 item version) (Strahan & Gerbasi, 1972) illustrate both acceptable but rare behaviours, as well as those considered unacceptable but possible. It measures requires the student to choose whether an array of statements is true or false for them. A score of 1 was given for each answer in agreement with the scoring of the design. It measures a response trend and was used to form a possible social desirability bias across the instrument.

The Brief COPE by Carver (1997) is a 28 item scale which measures a wide range of coping responses. The items are context free and participants answer on a four point frequency scale. All 28 items were used in this inventory.

The remaining items measured demographics. In total there were 124 items; two of which asked age and gender.

Procedure

The questionnaire was completed online by two universities via email, facebook private messenger and also posted on www. Reddit.com/r/Samplesize. A cover sheet was included detailing that participants must be over 18, that completion was entirely anonymous and withdrawal was possible at any time before clicking submit. The results returned in an excel file; this precludes the need for data entry by the researcher and the associated risk of human error.

Data Analysis

Student t-tests and Pearson's Correlation were used to examine differences in predictors of stress, such as, teaching quality, time management, academic support, peer support, university support, general support, seeking support, work load, relationships, financial responsibilities, control, and coping methods; and outcome measures, such as, self esteem, academic results and general health. The significant predictors were entered into a Pearson's Correlation's test to show where any significant relationships occurred. As it has been recognised that small sample sizes are more often not normally distributed, the decision was made to run the normal parametric tests. Descriptive statistics (median, mean, standard deviation) and some frequency statistics were used. The strengths range from 0.1 - > 0.3 = weak; 0.3 -> 0.5 = moderate; and 0.5 and above = strong.

The data was analysed using a Pearson's Correlation to investigate the relationship between sources of stress and outcome measures. The Pearson's Correlation was utilised to

test the strength of association between academic stress and such as, teaching quality, time management, academic support, peer support, university support, general support, seeking support, work load, relationships, financial responsibilities, control, and coping methods; and outcome measures, such as, self esteem, academic results and general health. Results of these analyses determined the variables that were included in subsequent regression analysis, where academic stressors and reactions to stressors served as the dependent variable. Hierarchical regression analysis was employed to control for the combined impact of general health, academic results and self esteem behaviours to predict academic stress. Correlations and T-tests were used to identify those predictors that were significant with each outcome measure and those significant were then entered into a regression analysis, taking each outcome measure in turn. The regressions were re-run until the author arrived at the most parsimonious model.

Results

Student t-tests and Pearson's Correlation between the predictors of stress and outcome measure were carried out and none were significant.

Tables 1 are the descriptive statistics of sources of stress, acquired and dispositional coping variables, and outcome measures. Results are shown in Tables 1 below.

Table 2 are the correlations between chosen sources of stress and coping variables; and the chosen outcome measures, which are, general health, academic results and self esteem. Results of Pearson's Correlation are shown in Table 2 below.

Table 3 shows the linear regression model of General Health

Table 4 shows the linear regression model of Academic Results

Table 5 shows the linear regression model of Self Esteem

Results of linear regression are shown in Tables, 3, 4, & 5 below.

Table 1. Illustrating means and SD and the minimum and maximum answers possible per item for different groups of items

	N	Minimum	Maximum	Mean	Std. Deviation
Teaching quality hassle	140	.00	9.00	2.9214	2.16602
Teaching quality uplift	140	.00	10.00	7.4857	1.76083
Time management hassle	140	.00	10.00	6.6286	2.21292
Time management uplift	140	.00	10.00	4.8214	2.56784
Intellectual stimulation hassle	140	.00	10.00	3.9571	2.13525
Family relationships hassle	139	.00	5.00	1.5683	1.49419
Family relationships uplift	139	.00	5.00	3.6763	1.45570
Intellectual stimulation uplift	140	.00	10.00	7.0357	1.68962
Intimate relationships uplift	138	.00	5.00	3.1087	1.93954
Intimate relationships hassle	138	.00	5.00	1.5362	1.53860
Interpersonal relationships uplift	137	.00	10.00	6.7737	2.68436
Interpersonal relationships hassle	137	.00	10.00	3.1022	2.42015
Academic support hassle	140	.00	10.00	2.5214	2.43319
Academic support uplift	140	.00	10.00	6.3929	2.43977
Peer support hassle	140	.00	5.00	.9714	1.25201
Peer support uplift	140	.00	5.00	3.5643	1.40508
University support hassle	140	.00	8.00	1.7714	1.87503
University support uplift	140	.00	10.00	6.1929	2.54992
Work load hassle	140	.00	10.00	6.5500	2.20635
Work load uplift	140	.00	10.00	4.8000	2.60658
Financial responsibility hassle	139	.00	10.00	5.3741	2.81629
Financial responsibility uplift	139	.00	10.00	4.4820	2.64398
Self esteem	140	8.00	30.00	19.4500	4.82697
Humour	140	10.00	26.00	19.8000	3.00168
General support	140	5.00	20.00	15.8929	3.48005
Dispositional control	140	3.00	10.00	6.9643	1.64649
Context control	140	1.00	5.00	2.9929	.99997
Approach coping	139	9.00	33.00	21.4388	5.43488
Avoidance coping	139	9.00	31.00	16.3309	4.56259

Seeking support	139	4.00	16.00	9.0072	3.23813
General Health (GHQ1234)	140	15.00	43.00	23.9214	6.07160
Self efficacy	140	19.00	40.00	28.8714	4.65940
Academic results	140	.00	80.00	65.1714	8.48608
Happiness	138	1.00	10.00	7.1087	1.59692
Anxiety	140	.00	26.00	6.8786	5.37710
Valid N (list wise)	134				

Table 2. Correlation between sources of stress & coping resources against each outcome measure

		General Health	Academic Results	Self Esteem
Teaching quality hassle	Pearson Correlation	.190[*]	.138	-.167[*]
	Sig. (2-tailed)	.024	.104	.049
	N	140	140	140
Teaching quality uplift	Pearson Correlation	-.172[*]	.256[**]	.165
	Sig. (2-tailed)	.042	.002	.051
	N	140	140	140
Time management hassle	Pearson Correlation	.255[**]	.224[**]	-.224[**]
	Sig. (2-tailed)	.002	.008	.008
	N	140	140	140
Time management uplift	Pearson Correlation	-.036	.049	.024
	Sig. (2-tailed)	.673	.568	.779
	N	140	140	140
University support uplift	Pearson Correlation	-.096	.093	.073
	Sig. (2-tailed)	.259	.277	.392
	N	140	140	140
University support hassle	Pearson Correlation	.163	-.028	-.162

	Sig. (2-tailed)	.055	.740	.056
	N	140	140	140
	Pearson Correlation	.186*	-.007	-.149
Academic support hassle	Sig. (2-tailed)	.028	.933	.078
	N	140	140	140
	Pearson Correlation	-.167*	.175*	.113
Academic support uplift	Sig. (2-tailed)	.048	.039	.183
	N	140	140	140
	Pearson Correlation	-.107	.142	.075
Work load uplift	Sig. (2-tailed)	.207	.095	.377
	N	140	140	140
	Pearson Correlation	.230**	.079	-.215*
Work load hassle	Sig. (2-tailed)	.006	.355	.011
	N	140	140	140
	Pearson Correlation	-.088	.146	.049
Peer support uplift	Sig. (2-tailed)	.304	.085	.563
	N	140	140	140
	Pearson Correlation	.108	-.022	-.109
Peer support hassle	Sig. (2-tailed)	.206	.797	.202
	N	140	140	140
	Pearson Correlation	-.123	.034	.036
Financial responsibility uplift	Sig. (2-tailed)	.149	.688	.676
	N	139	139	139
	Pearson Correlation	.226**	.056	-.179*
Financial responsibility hassle	Sig. (2-tailed)	.008	.514	.035
	N	139	139	139

Humour	Pearson Correlation	-.136	-.058	.146
	Sig. (2-tailed)	.109	.499	.085
	N	140	140	140
General support	Pearson Correlation	-.358**	.135	.432**
	Sig. (2-tailed)	.000	.111	.000
	N	140	140	140
Dispositional control	Pearson Correlation	-.530**	.168*	.544**
	Sig. (2-tailed)	.000	.047	.000
	N	140	140	140
Context control	Pearson Correlation	-.284**	.021	.343**
	Sig. (2-tailed)	.001	.802	.000
	N	140	140	140
Self efficacy	Pearson Correlation	-.528**	.164	.551**
	Sig. (2-tailed)	.000	.052	.000
	N	140	140	140
Seeking support	Pearson Correlation	.045	-.066	-.037
	Sig. (2-tailed)	.602	.439	.664
	N	139	139	139
Approach coping	Pearson Correlation	.054	.020	-.130
	Sig. (2-tailed)	.524	.818	.128
	N	139	139	139
Avoidance coping	Pearson Correlation	.462**	-.167*	-.434**
	Sig. (2-tailed)	.000	.049	.000
	N	139	139	139

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

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

Table 3. Regression Model of General Health

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
		B	Std. Error	Beta			Tolerance	VIF
1	(Constant)	18.972	1.629		11.647	.000		
	Work load hassle	.470	.240	.172	1.959	.052	.882	1.133
	Financial responsibility hassle	.359	.189	.167	1.901	.059	.882	1.133
2	(Constant)	47.147	3.502		13.462	.000		
	Work load hassle	.189	.193	.069	.978	.330	.841	1.190
	Financial responsibility hassle	.194	.150	.090	1.294	.198	.865	1.157
	General support	-.395	.116	-.228	-3.413	.001	.943	1.060
	Dispositional control	-1.215	.274	-.331	-4.434	.000	.752	1.330
	Self efficacy	-.372	.100	-.287	-3.729	.000	.710	1.408

Dependent Variable: General Health (GHQ1234)

R squared = .442, Adjusted R squared = .421

The final regression model shows that 42.1% of the variance in General health scores can be explained by the predictors in the model. The largest predictor was dispositional control, followed by self efficacy, and then general support accounted for the most variance in general health. As dispositional control, self efficacy, and general support increased, the lower was the reported general health.

Table 4. Regression Model of Academic Results

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1 (Constant)	47.143	3.891		12.117	.000		
Teaching quality uplift	1.467	.388	.304	3.782	.000	.969	1.032
Time management hassle	1.063	.309	.277	3.446	.001	.969	1.032
2 (Constant)	34.248	5.920		5.785	.000		
Teaching quality uplift	1.386	.380	.288	3.651	.000	.964	1.037
Time management hassle	1.254	.308	.327	4.064	.000	.925	1.081
Dispositional control	.624	.459	.121	1.359	.176	.756	1.323
Self efficacy	.273	.164	.150	1.669	.097	.741	1.350

Dependant Variable: Academic Results

R squared = .192, Adjusted R squared = .168

The final regression model shows that 16.8% of the variance in Academic result scores can be explained by the predictors in the model. The largest predictor was time management hassle, followed by teaching quality uplifts and then self efficacy accounted for the most variance in Academic Results. As time management hassle, teaching quality uplift and self efficacy increased, so did academic results.

Table 5. Regression Model of Self Esteem

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
		B	Std. Error	Beta			Tolerance	VIF
1	(Constant)	23.507	1.394		16.858	.000		
	Time management hassle	-.259	.254	-.119	-1.020	.310	.512	1.952
	Work load hassle	-.218	.250	-.100	-.871	.385	.528	1.892
	Financial responsibility hassle	-.171	.156	-.099	-1.095	.276	.842	1.188
2	(Constant)	-4.367	2.849		-1.533	.128		
	Time management hassle	.173	.192	.079	.901	.369	.474	2.109
	Work load hassle	-.136	.191	-.062	-.713	.477	.485	2.060
	Financial responsibility hassle	-.105	.115	-.061	-.915	.362	.820	1.220
	Self efficacy	.316	.075	.305	4.226	.000	.708	1.412
	Dispositional control	.846	.218	.288	3.874	.000	.665	1.504
	Context control	.639	.336	.132	1.901	.060	.765	1.306
	General support	.454	.090	.327	5.069	.000	.884	1.131

Dependent Variable: Self Esteem

R squared = .518, Adjusted R Squared = .492

The final regression model shows that 49.2% of the variance in Self Esteem scores can be explained by the predictors in the model. The largest predictor was general support, followed by self efficacy, and then dispositional control accounted for the most variance in self esteem. As general support, self efficacy, and dispositional control increased, so did self esteem.

Discussion

The aim of this study was to explore the predictive ability of sources of stress that are likely to contribute not just to the distress but to satisfaction and to look at a range of coping behaviours and outcome measures. It was hypothesized that there will be a significant correlations between the student experience rated as sources of potential uplifts and distress and satisfaction, motivation, support, control, self esteem, self-efficacy, academic results, general health and feeling part of a learning society.

General Health

The outcome measure in the first regression model explained 42.1% of the variance in the general health scores (Table. 3). Work load and financial responsibility was a source of stress. As dispositional control, self efficacy, and general support increased, the lower was the reported general health.
Dispositional control, self efficacy and general support were significant predictors.

As dispositional control increased, it showed better general health. This suggests that when students feel a greater sense of control in college, the more satisfied they are with the course, meaning they have better health. As it was suggested by Lazarus and Folkman (1984), that coping effectiveness plays a key role in the impact of perceived stress on psychological outcomes.

High levels of self-efficacy in general health, showed that the student's believed in their own abilities to complete tasks and reach their objective. Student's set themselves higher goals and stuck to them (Locke & Latham, 1990), increasing confidence and therefore, improving one's overall health.

General health also improved when there was sufficient support available. Social support shows a lengthily list of benefits (Ben-Zur, 2009; Lundberg, McIntire, & Creasman,

2008) contributing to happiness and satisfaction with life. Here, college students found that they had people that were willing to listen and talk to them, (i.e. lecturers, friends, family, etc). Therefore, the adequate amount of social support strengthened and protected their well-being.

Academic Results

Table 4 illustrates the regression model with academic results as the outcome measure. The model explained 16.8% of the variance in the academic results scores. As time management (as a hassle), teaching quality (as an uplift) and self efficacy increased, so did academic results.

Time management as a hassle, teaching quality as an uplift, and self efficacy were significant predictors.

Time management was found to be a major stress in academic results. Students seem to find it difficult to have a healthy balance between coursework, major projects, studying, socialising, relationships, sleep and work. Sufficient time management strategies increase academic performance (Campbell & Svenson, 1992) and are commonly suggested by academic assistance personnel as aids to improve achievement for college students. Although programs emphasise starting tasks well in advance, breaking down large tasks into small ones, and doing small tasks on a regular basis, students regularly ignore these techniques and find themselves in great distress before assignments and exams (Brown, 1991).

The more the teaching was rated as uplifting and the more the structure and correlation of the course was clear, the higher were scores on academic results. Effective course delivery is necessary in helping students feel they have control, and therefore, helping

them receive good academic results. This goes to show that good teaching cannot be overestimated as a key to preventing and minimising distress among students.

The student's sense of self efficacy had a major influence on their academic results. Their beliefs about their academic capabilities help determine what they do with the knowledge and skills they have learned; and therefore what they can accomplish. This helps explain why students' academic performances may differ markedly when they have similar ability. It has been implied that a student's self-beliefs play a key role in relation to cognitive engagement and that enhancing them might lead to increased use of cognitive strategies, therefore, leading to improved performance (Pintrich & De Groot, 1990).

Self Esteem

Table 5 illustrates the regression model with self esteem as the outcome measure. The model explained 49.2% of the variance in the self esteem scores. As general support, self efficacy, and dispositional control increased, so did self esteem.

General support, self efficacy, and dispositional control were significant predictors.

General support improved one's self esteem. It is believed that the sense of self-worthiness develops gradually over time on the basis of perceived self-competence and achievement, as well as feedback provided by others (Guindon, 2002; Rosenberg, 1965). Social support has been shown to serve as a buffer against major health problems among college students (McCarthy & Salotti, 2006; Merianos, King, & Vidourek, 2012). Here, it was found that general support assisted the feeling of self worth, and therefore, improved the self esteem and well being of college students.

Self efficacy had a big impact on self esteem for college students. It can be concluded that it matters how a person perceives themselves. People who are more productive have more esteem than people who are less productive. Also, people who have more self esteem

and self efficacy are more outgoing. Showing that the majority of student's happily developed new skills and learning.

As dispositional control increased, so did self esteem. Student's who felt they had more control and influence over their environment tended to have a high amount of self esteem, whereas those who felt unable to control their circumstances, were more prone to have less self esteem, which could ultimately lead to failure in college. There are several ways in which the college(s) may have provided sufficient support, which led to a feeling of control, such as, providing assistance, securing financial resources, lecturers facilitating student's perceptions of control by making their course more predictable, study techniques, and clear class assignments, etc. A person with high self esteem can better acknowledge that they can change and reappraise the stressor and therefore manage our coping skills.

The results supported the initial hypothesis that a significant correlation between the student experience rated as sources of potential uplifts and distress, which in turn demonstrates that when a student feels they are receiving sufficient support and advice from others, and are able to utilize their time efficiently, it gives them more control, and therefore motivates them to achieve their goals; which in turn improves their overall health, academic results, self esteem and well being.

Limitations

There are some limitations to the study, particularly those associated with the survey design, and its reliance on self-reported measures. Also, the length of time between when one answers the question on the survey and when the actual event occurred, can affect one's answer given. Although there was a large enough sample given, if there were more participants it would have allowed for more variables to be entered into the regression models, giving a broader outlook. Contrary to that, the surveys were given to two

universities, and it would have been interesting to get results from just one college, in order to get a greater understanding of student's feedback about just that one college.

Recommendations

Self-efficacy could be improved by validating a student's learning in response to contributions in teaching sessions, sufficient support, securing financial resources, effective study techniques, and clear class assignments, timely feedback, and through work experiences, and in written feedback made on student's work.

Approach coping was not found to be a significant predictor in general health, academic results or self esteem. Recognising strategies such as promoting support, control and self-efficacy, are more likely to have an immediate benefits.

Another solution to reduce a student stress is providing students with a sense of control over their education. This can be done through adequate support interventions, which will enhance one's learning, well being, and satisfaction; and is likely to benefit student's social opportunities, which will have a positive impact on them as a whole.

Conclusion

Good teaching cannot be overestimated as a key to preventing and minimising distress among students. Positive teacher-student interaction have been shown to support students' adjustment to college, contribute to their social skills, promote academic performance, and nurture students' resiliency in academic performance (Battistich, Schaps, & Wilson, 2004; Birch & Ladd, 1997; Hamre & Pianta, 2001). Continuous assessments are important both for students and teachers. For both groups, correctly evaluated assessments give a great deal of information. They form a basis of understanding of the student as an individual; their learning style, level of commitment, level of support, etc. For the teacher, the assessments can tell what individual students need help with. They can also, assuming that the teacher

analyses them, show the teacher which things he or she has done a good job of teaching. This can inform the teacher about what needs to be reinforced and perhaps about what strategies did and did not work.

Of course, faculty may not be good teachers if they are themselves stressed and if they feel unrewarded for good teaching. Being aware of one's own coping style and any positive changes possible could benefit a student's well-being and learning.

College teacher's who can effectively use feedback and control in the classroom; create an environment ready for learning. Students are relaxed and motivated to learn when they have an instructor who provides direction and feedback and who is willing to accept it in return.

The indication that uplifts and hassles are important predictors suggests that the aim to understand sources of stress must be taken both into account to understand the primary influences on a student's well-being.

Stress can be prevented my providing sufficient information to people. So far, there has been little research in the field of higher education describing how to better inform students about the challenges of higher learning. There is a need to identify the factors that influence the helpfulness of information in reducing stress.

More research is needed to identify the effective side of professionalism, self-disclosure, and teaching. Further research could determine why and how teacher-student relationships deteriorate and help teachers themselves construct more successful relationships with each other. Future research is needed to outline the learning that occurs when one teaches another. And more research is clearly needed to understand stress among teaching staff.

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Appendices

THE SOURCES OF STRESS AND COPING INDEX

Thank you so much for agreeing to take part in this questionnaire. It will take approximately ten minutes to complete. All the results are treated in confidence and they will be destroyed once the analyses are complete. The questionnaire is made up of a number of measures on stress, coping and well-being. It is not intended and it is unlikely that the questionnaire will cause any distress but you have the right to stop at any time and to choose not to complete the questionnaire.

Should you require any further information about the research, please contact me at

My supervisor for this research is Chris Gibbons who can be contacted at

- Some experiences, however, lead to distress, for example, the difficulties you might have had in understanding some of the core reading. We call these sources of stress 'hassles'.

- The same experience can often be a source of distress, a hassle, *and* an uplift, an experience that helps you to achieve. An essay, for example, may be distressing but also an experience where you consolidated your learning and achieved.

- You are likely to have had a number of experiences that relate to each item you will be asked about but it is your *overall* response that we are asking you to consider in your reply.

- Add a hassle *and* an uplifting value for each item. If the item asks about an experience that does not apply to you please do not add any numerical value under hassle or uplift and move on to the next item.

- You will be shown a series of items and we would like you to rate each twice – once as a hassle and once as an uplift. When rating the item as a hassle, 0 represents no hassle, 5 represents a significant source of distress.

- When rating the item as an uplift, 0 indicates that the item represents no source of satisfaction or influence that helps you achieve, 5 represents an influence that really helps you achieve and gives you a strong sense of satisfaction. For example:

HASSLE	Item	UPLIFT
0 - 5	Item	0 - 5
3	The extent to which teaching staff explain things.	5

1. The extent to which teaching staff explain things.

2. The extent to which the teaching staff make the subject interesting.

3. Course deadlines and the pressure this puts on me as a student.

4. Making sure time is spent effectively on academic study.

5. The overall general intellectual stimulation on this course.

6. The comprehensibility of the material taught on the course.

7. How much I am valued during tutorials.

8. The support of other students on this course.

9. The level of support offered by my personal tutor.

10. The level of support offered by university staff.

11. The support from the Student Guidance Centre to meet my needs

12. The opportunities there are to interact socially with other students on my course.

13. The extent to which assessment tests me on what I have understood not what I have memorised.

14. Using opportunities to engage with the range of clubs and societies available at the university.

15. The workload on my course.

16. Having a relationship with a partner.

17. Course deadlines and the pressure this puts on me as a student.

18. Maintaining relationships with family members back home.

19. Feeling pressure from others to use recreational substances (drugs, alcohol, tobacco)

20. Encouragement from others to engage in activities outside your comfort zone.

21. Moving away from parents.

22. Moving in with new people.

23. Management of funds responsibly to meet every day needs.

24. Part time job whilst at university.

25. Dealing with everyday chores (Cooking, cleaning, washing, laundry)

26. Maintaining a good state of health.

27. Being aware of local hazards. (e.g. Dangerous areas in the city)

28. Protection of personal goods, property and self.

29. How my course is helping me improve my career prospects.

30. The advice available for making further study and career choices.

31. How the course has helped me to improve my presentation skills.

32. How the course has helped me to improve my communication skills.

33. The extent to which the course helps me manage new problems.

Please tick the box that best applies to you in response to each statement:

34. I feel that I am a person of worth, at least on an equal plane with others.
Strongly Agree /Agree/ Disagree/ Strongly Disagree

35. I feel that I have a number of good qualities.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

36. All in all, I am inclined to feel that I am a failure.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

37. I am able to do things as well as most other people.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

38. I feel I do not have much to be proud of.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

39. I take a positive attitude toward myself.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

40. On the whole, I am satisfied with myself.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

41. I wish I could have more respect for myself.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

42. I certainly feel useless at times.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

43. At times I think I am no good at all.
Strongly Agree/ Agree/ Disagree/ Strongly Disagree

Please tick the box that best applies to you in response to each statement:

44. I often lose my sense of humour when I'm having problems.
Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

45. I have often found that my problems have been greatly reduced when I tried to find something funny in them.
 Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

46. I usually look for something comical to say when I am in tense situations.
Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

47. I must admit my life would probably be easier if I had more of a sense of humour.
Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

48. I have often felt that if I am in a situation where I have to either cry or laugh, it's better to laugh.

Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

49. I can usually find something to laugh or joke about even in trying situations.
Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

50. It has been my experience that humour is often a very effective way of coping with problems.
Strongly Disagree/ Mildly Disagree/ Mildly Agree/Strongly Agree

Please circle the number that best applies to you in response to each statement:

People sometimes look to others for companionship, assistance, or other types of support. How often is each of the following kinds of support available to you if you need it?

1.None of the Time	2. A little of the Time	3. Some of the Time	4. Most of the Time	5. All of the Time

51. Someone you can count on to listen to you when you need to talk 1/2/3/4/5
52. Someone to give you good advice about a crisis 1/2/3/4/5
53. Someone to have a good time with 1/2/3/4/5
54. Someone to confide in or talk to about yourself or your problems 1/2/3/4/5

In the past week how much have each of the symptoms affected you? Please circle the relevant numbers

Item	Not at all	Mildly	Moderately	Severely
	0	1	2	3
55. Numbness or tingling				
	0	1	2	3
56. Feeling hot				
	0	1	2	3
57. Wobbliness in the legs				
	0	1	2	3
58. Fear of the worst happening				
	0	1	2	3
59. Dizziness or lightheaded				
	0	1	2	3
60. Heart pounding or racing				

	0	1	2	3
61. Unsteady				

	0	1	2	3
62. Terrified				

	0	1	2	3
63. Nervous				

	0	1	2	3
64. Feelings of choking				

65. I often feel I don't have enough control over the decisions I have to make

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

66. In general I feel in control of the things that happen to me.

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

67. The pace of learning often leaves me with little feeling of control

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

You have done really well – thank you. These next items deal with ways you've been coping with the stress in your life. The stress issue is the 'it' in some of the items! Use the response choices below and try to rate each item separately in your mind from the others. Make your answers as true FOR YOU as you can. Write the number that is relevant at the end of the item:

1 = I haven't been doing this at all
2 = I've been doing this a little bit
3 = I've been doing this a medium amount
4 = I've been doing this a lot

68. I've been turning to work or other activities to take my mind off things.

69. I've been concentrating my efforts on doing something about the situation I'm in.

70. I've been saying to myself "this isn't real."

71. I've been using alcohol or other drugs to make myself feel better.

72. I've been getting emotional support from others.

73. I've been giving up trying to deal with it.

74. I've been taking action to try to make the situation better.

75. I've been refusing to believe that it has happened.

76. I've been saying things to let my unpleasant feelings escape.

77. I've been getting help and advice from other people.

78. I've been using alcohol or other drugs to help me get through it.

79. I've been trying to see it in a different light, to make it seem more positive.

80. I've been criticizing myself.

81. I've been trying to come up with a strategy about what to do.

82. I've been getting comfort and understanding from someone.

83. I've been giving up the attempt to cope.

84. I've been looking for something good in what is happening.

85. I've been making jokes about it.

86. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.

87 I've been accepting the reality of the fact that it has happened.

88. I've been expressing my negative feelings.

89 I've been trying to find comfort in my religion or spiritual beliefs.

90. I've been trying to get advice or help from other people about what to do.

91. I've been learning to live with it.

92. I've been thinking hard about what steps to take.

93. I've been blaming myself for things that happened.

94. I've been praying or meditating.

95. I've been making fun of the situation.

96. If I had to choose again, I would still want to study this subject.

| Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree |

97. I enjoy my studies.

| Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree |

98. If the opportunity arises, I would like to stop this course.

Strongly agree   Agree   Neither agree   Disagree   Strongly
                                      nor disagree   disagree

Almost done! Please circle the appropriate response. These items refer to how you manage situations in general

	Not at all true	Barely true	Moderately true	Exactly true
99. I can always manage to solve difficult problems if I try hard enough.				
100. If someone opposes me, I can find means and ways to get what I want.				
101. It is easy for me to stick to my aims and accomplish my goals.				
102. I am confident that I could deal efficiently with unexpected events.				
103. Thanks to my resourcefulness, I know how to handle unforeseen situations.				
104. I can solve most problems if I invest the necessary effort.				
105. I can remain calm when facing difficulties because I can rely on my coping abilities.				
106. When I am confronted with a problem, I can usually find several solutions.				
107. If I am in a bind, I can usually think of something to do.				
108. No matter what comes my way, I'm usually able to handle				

it.				

Finally ☺ The following items ask about your general health *over the past few weeks*. Please answer all the questions simply by circling or emboldening the answer that you think most nearly applies to you. Remember that we want to know about your present and recent complaints, not those you had in the past. It is important that you try to answer all the questions.

109. Been able to concentrate on whatever you're doing?	Better than usual	Same as usual	Less than usual	Much less than usual
110. Lost much sleep over worry?	Not at all	No more than usual	Rather more than usual	Much more than usual
111. Felt that you are playing a useful part in things?	More so than usual	Same as usual	Less useful than usual	Much less useful
112. Felt capable of making decisions about things?	More so than usual	Same as usual	Less so than usual	Much less capable
113. Felt constantly under strain?	Not at all	No more than usual	Rather more than usual	Much more than usual
114. Felt you couldn't overcome your difficulties?	Not at all	No more than usual	Rather more than usual	Much more than usual
115. Been able to enjoy your normal day-to-day activities?	More so than usual	Same as usual	Less so than usual	Much less than usual
116. Been able to face up to your problems?	More so than usual	Same as usual	Less able than usual	Much less able
117. Been feeling unhappy and depressed?	Not at all	No more than usual	Rather more than usual	Much more than usual
118. Been losing confidence in yourself?	Not at all	No more than usual	Rather more than usual	Much more than usual
119. Been thinking of yourself as a worthless person?	Not at all	No more than usual	Rather more than usual	Much more than usual
120. Been feeling reasonably happy, all things considered?	More so than usual	About same as usual	Less so than usual	Much less than usual

121. Overall, in all your assessments so far (estimating both assignment and exam results), circle the number that accurately reflects your academic standard: 45 48 52 55 58 62 65 68 73 80 90

122. On a scale from 1-10 how happy would you say you are in general in your life.

Please complete the following details about yourself:

123. Male   Female

124. Age:

Thank you for taking part in this study. Your contribution has been really important and will be used to help current and future psychology students cope with the demands of the course.

Nieve O'Brien