

Effects of Type of School and Gender on Personality, Social Support, Exam Anxiety and Health

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Abstract: *Personality factors pertaining to resilience and hardiness are found to be linked with anxiety and health. Often students encounter adversities and disappointments in their career which adversely affect their health. Similarly, social support derived from others reduces the health-related problems. The present study was conducted to examine the effects of type of school and gender on measures related to personality, social support, exam anxiety and health. Of the total sample 397, 225 males and 172 females' respondents were randomly selected from ninth standard across six English and Hindi medium schools located in Bhopal. The major ANOVA results revealed the students seeking education in Hindi medium school reported significantly higher level of hardiness and exam anxiety. Furthermore, students from English medium of education reported less health problems than their counterparts. However, no significant difference was found across type of school in respect to level of resilience. Gender difference was not found significant related to personality, exam anxiety and health. Implications of the study in the context of developing resilience and hardiness of students by teachers is much needed so that they are mentally equipped to handle any disappointments and failure without been adversely affected.*

Key Words: *Personality, Resilience, Exam Anxiety, Health, Adversities, Education.*

1. INTRODUCTION:

During the last three decades psychological research on personality factors related to resilience and hardiness with an exclusive focus on childhood and adolescents have grown in voluminous proportion (Luthar & Zigler, 1991). Resilience in individual is exhibited by an individual capacity to recover and bounce back from hardship and adversity. (Luthar & Zigler, 1991). Adversity and disappointment are major part of life which are often faced by people in different context like home and school. Some people find it easy to adapt and adjust to these challenges while others find it difficult to deal with adverse conditions. Sufficient empirical evidences exist that people who are unable to stand through adversities face issues which affect their health and well-being (Luther & Zigler 1991). Thus, for healthy development of children and adolescents focus should be on building resilience and hardiness in school and home settings.

1.1. Author's Note:

- The paper is the part of Master's level dissertation done by the first author under the Supervision of second author.
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Evidence exists when adversities are prolonged children exhibits health problems (Gabrielle, 2002). Attention to resilience research is also rising in paediatric research and practices (Gabrielle, 2002). The pioneering studies of resilience are majorly focused upon factors that assist individuals to fight adversities. For example, a study by Kathleen (2004) have suggested the role of intrapersonal and environmental factors. Cognitive and environmental factors that contribute to resilience. One of the crucial factors in building resilience in children is parental interaction. Earlier studies have suggested that parental interactions are moderately to strongly correlated with adolescent resilience in major domains (Brooks, 2006; Raana, 2015).

Hardiness is defined as a personal resilience characteristic that refers to one's ability to effectively manage the challenging situations (Kobasa, 1979). Hardiness has been conceptualized as a personality style that provides a foundation for the development of resilient responses to stressful life events (Bartone, 1999). According to various studies conducted on hardiness concludes hardy individuals are better able to endure stressful situations because they tend to be more positive and confident about their ability to successfully handle the situations (Maddi, 1999). A large number of studies reveal positive links between social support and resilience. Narayan et al. (2016) studied social support and self-efficacy were significant predictors of resilience. The environment in which children is learning, understanding and exploring, role of teachers and staff of the school, peer relations and close friends from school has

an equivalent role in encouraging resilient factor among children. The results from Rizwana's study revealed reduction in PTSD symptoms and improvement in resilience in conditions when social support was provided.

Positive student teacher relationships help adolescents in danger for school disappointment. In contrast, negative relationship worsens the adverse effects (Ladd and Burgees, 2001). A study by Johnson (2008) suggested that teachers can directly or indirectly help their students build resilience providing social support and engaging in different practices like being available and accessible to students in need, engage in active listening, identifying problematic issues. A study conducted by Gao et.al (2017) concluded positive correlation among resilience, mental health and well-being. The study further reveals that strategies to enhance well-being can build resilience.

Some of the empirical studies have demonstrated that emotion dysregulation mediated the association between adverse childhood experiences and anxiety symptoms, and the strength of this effect varied as a function of psychological resilience (Poole et al, 2017). Negative correlation has been found among test anxiety and resilience (Trigueros et al, 2020) showing positive correlation between motivation and resilience. A tension and apprehensiveness associated with taking a test, frequently resulting in a decrease in test performance is known as Test anxiety.

Recent data reported in one of the lead Indian magazine reveal that only up to 17 per cent of the children go to English medium schools and about 49 per cent students' study in Hindi medium school. The combined percentage for other languages is around 33 per cent. It is generally seen that parents who belong to higher and middle-income group prefer sending their children to English medium schools because they hold strong feelings that English medium education is superior to Hindi medium. Furthermore, in big urban cities a large number of English and Hindi medium institutions are available which caters to the need of students who are different in terms of their economic status. This study is conducted on both male and female students. In the Indian cultural context prominent gender differences are noticed in terms of different roles performed by children in their home setting. For instance, the male child take care of many outdoor responsibilities like purchasing groceries, receiving guests coming from outstation at odd hours etc. In contrast, the females are more involved in household indoor activities like extending help to their mother or other female members in cooking and cleaning the homes etc. Thus, the roles vary across gender which may have some spill over effects from home to educational context. While things are changing but strong preference for educating male child as compared to female child is observed in many families. Within this backdrop the present study attempts to examine gender difference and type of school on various outcome measures related to personality, exam anxiety and health.

2. METHODOLOGY:

2.1. Subject and Design:

Of the sample size of 397, 225 males and 172 females were randomly selected from Hindi and English medium schools of Bhopal. 2X2 factorial design involving two types of school (English vs Hindi) and gender (male and female) was utilized. Thus, 75% of the sample was drawn from English medium school where as 25% of the sample represented Hindi medium school. 57% of the respondents were male and 43% were female. The subjects were randomly selected from six higher secondary schools located in the same vicinity.

2.2. Measures:

The eight pages survey questionnaire comprising of six sections was designed by the investigator. The details of the scales used is given below:

Demographical Characteristic: The first page of the questionnaire was comprised 10 items related to understand respondent's personal information. Some of the items included in this section were focused on age, family type, self-study versus joined coaching, hours spent in coaching, social media usage a day, phone price range, number of times mobile changed.

Resilience Scale: A 25 items scale constructed by Wagnild & Young (1987) was utilized to understand the level of resilience of the respondents. All the items were rated on a seven-point Likert type rating scale ranging from strongly agree to strongly disagree. A total score which can be obtained by respondent may range from 25 to 175; where high score is indicative of high resilience.

Hardiness Scale: Hardiness scale developed by Kobasa (1985) was administered. The questionnaire consists of 12 statements. These 12 items were further divided into 3 sub scales namely: control, commitment, challenge which were designed to measure factors that reflect hardiness of adolescents.

Social Support Scale: The child and adolescents social support scale (CASSS,2000) comprised of 60-items was utilized. The participants were asked about received social support from five major sources including parents, teachers, peers, close friend and school. Each of the five-source subscale consists of 12 items. The subjects were asked to tell how often they receive social support and respondents were asked to mark each sub scale items in two aspects; how often and important.

2.3. Students Exam Anxiety Scale: A 38 items scale constructed by Agrawal and Kaushal (1995) was utilized to understand the level of exam anxiety of the respondents. The scoring of the test was done by summing up each ‘yes’ response by marking one. The reliability by test-retest reliability method after an interval of 15 days to one month was found to be 0.92. The split-half reliability was found to be .87. Validity was also found to be sufficiently high.
Health Scale: A 15 items self-constructed scale on health was prepared. The items included on the scale were related to physical and mental health symptoms. The items were marked on a five-point scale. The scale ranged from 15 to 75 where low score is indicating

Procedure:

The investigator approached the principals of various schools and explained them the objective of the study. After receiving formal approval from the principals, a time slot was provided to the researcher for conducting the test directly in the classroom setting. The researcher introduced herself and explained the aim of the research to the participants followed by distributing the questionnaire. The instructions were imparted to the respondents and all the doubts were clarified. Participants were informed in advance that confidentiality will be maintained. After the survey was over the participants were thanked for their cooperation.

Table 1: ANOVA results depicting main effect of type of school on personality, social support, exam anxiety and health.

Variables	Type of school		Range of scores	F
	English medium (mean)	Hindi medium (mean)		
Predictors				
Personality factors				
(a) Resilience	126.02	125.78	25-175	0.01
(b) Hardiness	21.914	23.38	0-36	6.724**
Social Support				
A1. Degree of parental social support.	56.419	53.080	12-72	6.045**
A2. Perceived importance of parental social support.	26.615	28.72	12-36	0.029
B1. Degree of teacher’s social support.	50.297	52.533	12-72	1.831
B2. Perceived importance of teacher’s social support.	26.094	27.809	12-36	5.583**
C1. Degree of friend’s social support.	57.48	52.12	12-72	13.85**
C2. Perceived importance of friend’s social support.	27.43	27.09	12-36	0.74
Outcome variables				
(a) Exam anxiety	20.776	23.589	0-38	8.533**
(b) Health	28.144	31.054	15-75	7.780**

Table 2: ANOVA results depicting main effect of gender on personality, social support, exam anxiety and health.

Variables	Gender		Range of scores	F
	Male (mean)	Female (mean)		
Predictors				
Personality factors				
(a) Resilience	125.96	125.81	25-175	0.10
(b) Hardiness	22.305	22.957	0-36	1.38
Social Support				
A1. Degree of parental social support.	54.615	54.884	12-75	0.03
A2. Perceived importance of parental social support.	28.250	29.092	12-36	1.64
B1. Degree of teacher’s social support.	51.369	51.461	12-75	0.003
B2. Perceived importance of	26.109	27.795	12-36	5.395*

teacher's social support.				
C1. Degree of friend's social support.	54.83	54.78	12-75	0.10
C2. Perceived importance of friend's social support.	26.58	27.03	12-36	1.05
Outcome variables				
(a)Exam anxiety	22.310	22.055	0-38	0.071
(b)Health	28.899	30.299	15-75	1.802

3. RESULTS:

3.1. Demographical Result:

The major demographic information about the respondents reveals that approximately 65% of the respondents were residing in nuclear family; while 35% were residing in joint family system. Apart from attending classroom lectures, 53% students have enrolled themselves in coaching classes and among them 38.5% spend 10-20 hours per week in coaching. Overwhelming 81% of the respondents have restricted their social media usage for 1 to 2 hours per day. Furthermore, the results reveal that 60.8% of male respondents engage themselves in WhatsApp, 69.8% Google and 59.5% YouTube. In contrast, the 55.3% females preferred using Instagram, 55.8% using Snapchat. 57% of the respondents were using mobile, purchased in the range of 10000-20000 INR. 26.5% of the respondents purchased mobile phones under the range of 10000 INR. Very few percentage respondents purchased mobile exceeding the range of 30000 INR and above. Furthermore, 72% of the respondents haven't changed their mobile since the first purchase, whereas; approx. 20% have changed their mobiles once or twice.

3.2. Two-way ANOVA result:

The two-way analysis of variance results across type of school and gender on various variables on personality, social support, exam anxiety and health measures are presented in table 1 and 2 respectively. Inspection of table 1 reveals that student studying in Hindi medium schools reported significantly high level of hardiness than their counterparts who are studying in English medium schools. The students who have enrolled in English medium schools reported deriving significantly high level of social support from parents and friends than students from Hindi medium schools. In contrast, students enrolled in Hindi medium schools reported giving more importance to social support from teachers than English medium school students. Finally, the students enrolled in Hindi medium school reported significantly higher level of exam anxiety than English medium school students. However, English medium school students reported significantly better health than from Hindi medium schools' students.

Gender difference was not found significant on major predictors and outcome variables related to personality, exam anxiety and health. However, on only one dimension of social support gender differences were formed significant with females reporting giving more importance to teacher than male students.

4. DISCUSSION:

The major objective of the study is to find the effect of type of school and gender on personality factors, social support and outcome variables. The present study does reveal some strong evidences showing the role of building resilience and hardiness in ninth grade children along with the role of level of social support through different support groups (parents, teachers and friends) and the impact of health and exam anxiety. The broad results reveal the level of resilience is moderately high in students from both the medium of education (English and Hindi). This is a remarkable indication that education systems have been improving over time by teaching children to become more resilient. Also, it may be predicted that teaching methods in different schools are including instruments and methods to encourage resilience no matter which medium of education children is studying from both English and Hindi medium schools are encouraging students to build resilience and become ready for facing adverse stressful situations in life. The hardiness level is found to be significantly higher in Hindi medium students. The result reveals students enrolled in English medium school reportedly deriving significantly high level of social support from parents and friends than their counterparts from Hindi medium school. Parental support refers to "gestures or act of caring, acceptance, and assistance that are expressed by parents towards a child." Support from parents received during childhood is thought to have significant and lasting health implications because the parent child relationship serves as the context within which important health enhancing social and psychological development takes place Caspi and Elder (1998). Thus, it can be predicted that social support from parents can improve health and build resilience. Another research by Frank et al (2009) "The role of friendship in child and adolescent psychosocial development" suggested that characteristics of children's friends helps in identifying and contributing healthy or unhealthy patterns of health. On the basis of this findings, it may be concluded that as students from English medium schools are getting more efficient social support from friends, it can be a leading factor for their significantly high level of resilience.

Furthermore, the result also reveals that students from Hindi medium schools are getting more social support from their teachers than their counterparts. A study conducted by Wolmer et al (2011) "Teacher delivered resilience focused interventions in schools with traumatized children following the second Lebanon war" suggested that teachers are valuable cost-effective providers of building resilience and hardiness in school going traumatized children. It may be predicted that teachers are good source of providing resilience and thus, it may be called a reason for students from Hindi medium schools having significantly high level of resilience. The result reveals students from Hindi medium schools reported significantly higher level of exam anxiety than their counterparts from English medium school. However, English medium school students reported significantly better health than students from Hindi medium schools. Zinder (2007) in his book "Emotion in Education" (pages 165-184) suggest test anxiety is frequently cited among the pivotal factors at play in determining a wide array of unfavourable outcomes for students, including poor cognitive performance, scholastic underachievement, psychological distress, and ill health. Another study conducted by Embse et al (2013) "Test anxiety intervention for children and adolescents: A systematic review of treatment studies from 2000-2010" suggest students with high test anxiety perform poorly on tests when compared to students with low test anxiety. Also, students with high test anxiety have unhealthy mental and physical health. Thus, it can be concluded from both the studies mentioned above that exam anxiety and health are interdependent and this may predict that the students from Hindi medium school have significantly high level of exam anxiety and lower health in contrast students studying in English medium schools are having low level of exam anxiety and good health conditions.

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