

## COMPARATIVE STUDY OF ANXIETY AMONG GRADUATE LEVEL STUDENTS IN NUCLEAR AND JOINT FAMILIES

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### ABSTRACT

*Anxiety among graduate level students play and important role in shaping behavior. It is characterized by emotional and cognitive components. The students' belongs to Nuclear and Joint families who studied in college feel problems of anxiety. The aims of this study to check the anxiety level among students. The purpose is also to see the differences among different streams also. This study is descriptive type in nature. It covers only graduate level student of Bahraich, Gonda and Balrampur districts of U.P. This research is conducted on B.A., B.Sc., B.C.A., B.P. Ed and B.Ed. students. Tool for comprehensive anxiety test is used which was developed by **Dr. R.L. Bharadwaj, Dr. H. Sharma and Dr. M. Bharadwaj**. This tool is published by **National Psychological Corporation Agra**. This is highly reliable and valid. The findings of this study are as followed. Students belong to nuclear and joint families have same level of anxiety. No significant different is found between male and female in nuclear families. Gender is not an indicator among students on anxiety joint families. Same condition is found in different colleges with respect anxiety. The level of anxiety is not affected by different streams of students.*

**Key words-** Anxiety, Graduate Level Students, Nuclear, Joint Families

### **Anxiety**

Anxiety (also called angst or worry) is a psychological and physiological state characterized by somatic, emotional, cognitive, and behavioral components It is

the displeasing feeling of fear and concern. The root meaning of the word anxiety is 'to vex or trouble'; in either presence or absence of psychological stress, anxiety can create feelings of fear, worry, uneasiness, and dread. Anxiety is considered to be a normal reaction to a stressor. It may help an individual to deal with a demanding situation by prompting them to cope with it. When anxiety becomes excessive, it may fall under the classification of an anxiety disorder.

### Signs and symptoms

Anxiety is a generalized mood that can occur without an identifiable triggering stimulus. As such, it is distinguished from fear, which is an appropriate cognitive and emotional response to a perceived threat. Additionally, fear is related to the specific behaviors of escape and avoidance, whereas anxiety is related to situations perceived as uncontrollable or unavoidable. Another view defines anxiety as "a future-oriented mood state in which one is ready or prepared to attempt to cope with upcoming negative events," suggesting that it is a distinction between future and present dangers which divides anxiety and fear. In a 2011 review of the literature fear and anxiety were said to be differentiated in four domains: (1) duration of emotional experience, (2) temporal focus, (3) specificity of the threat, and (4) motivated direction. Fear was defined as short lived, present focused, geared towards a specific threat, and facilitating escape from threat; while anxiety was defined as long acting, future focused, broadly focused towards a diffuse threat, and promoting caution while approaching a potential threat.

Anxiety takes several forms: phobia, social anxiety, obsessive-compulsive, and post-traumatic stress. The physical effects of anxiety may include heart palpitations, tachycardia, muscle weakness and tension, fatigue, nausea, chest pain, shortness of breath, headache, stomach aches, or tension headaches. As the body prepares to deal with a threat, blood pressure, heart rate, perspiration, blood flow to the major muscle groups are increased, while immune and digestive functions are inhibited (the fight or flight response). External signs of anxiety may include pallor, sweating, trembling, and

pupillary dilation. Someone who has anxiety might also experience it subjectively as a sense of dread or panic.

### Anxiety disorder

Anxiety can be a symptom of an underlying health issue such as chronic obstructive pulmonary disease (COPD), heart failure, or heart arrhythmia. Abnormal and pathological anxiety or fear may itself be a medical condition falling under the blanket term "anxiety disorder". Such conditions came under the aegis of psychiatry at the end of the 19th century and current psychiatric diagnostic criteria recognize several specific forms of the disorder. Recent surveys have found that as many as 18% of Americans may be affected by one or more of them.

Standardized screening tools such as Zung Self-Rating Anxiety Scale, Beck Anxiety Inventory, Taylor Manifest Anxiety Scale and HAM-A (Hamilton Anxiety Scale) can be used to detect anxiety symptoms and suggest the need for a formal diagnostic assessment of anxiety disorder. The HAM-A (Hamilton Anxiety Scale) measures the severity of a patient's anxiety, based on 14 parameters, including anxious mood, tension, fears, insomnia, somatic complaints and behavior at the interview.

### Existential anxiety

The philosophers Soren Kierkegaard, in the concept of Anxiety, described anxiety or dread associated with the "dizziness of freedom" and suggested the possibility for positive resolution of anxiety through the self-conscious exercise of responsibility and choosing. In *Art and Artist* (1932), the psychologist Otto Rank wrote that the psychological trauma of birth was the pre-eminent human symbol of existential anxiety and encompasses the creative person's simultaneous fear of – and desire for – separation, individuation and differentiation.

The theologian Paul Tillich characterized existential anxiety as "the state in which a being is aware of its possible nonbeing" and he listed three categories for the nonbeing and resulting anxiety: ontic (fate and death), moral (guilt and

condemnation), and spiritual (emptiness and meaninglessness). According to Tillich, the last of these three types of existential anxiety, i.e. spiritual anxiety, is predominant in modern times while the others were predominant in earlier periods. Tillich argues that this anxiety can be accepted as part of the human condition or it can be resisted but with negative consequences. In its pathological form, spiritual anxiety may tend to "drive the person toward the creation of certitude in systems of meaning which are supported by tradition and authority" even though such "undoubted certitude is not built on the rock of reality".

According to Viktor Frankl, the author of *Man's Search for Meaning*, when a person is faced with extreme mortal dangers, the most basic of all human wishes is to find a meaning of life to combat the "trauma of nonbeing" as death is near.

#### Need and Significance of the Study

There are so many problems which is faced by individual at every walk of life. Our need is increasing day by day but resources are limited. Youth expectation is very high which generate anxiety at different level. Everybody is anxious for their problems. It is often said that people are running for material gain. They are less concern about their mental satisfaction and health. It sometimes leads to mental derailment. In its slighter form it is expressed in mental tension, frustration and maladjustment is one's daily life anxiety in its proper degree helps the individual as well. It prepares him to face the challenge of life in advance. But it is the normal way of expressing anxiety. Heightened anxiety leads to maladjusted behaviour. There is an urgent need to study about different types of anxiety in nuclear and joint family of graduate level students. Researcher will try to find out the reasons behind it.

#### Objectives of the study

1- To compare the anxiety between male and female graduate level students in Nuclear and Joint families.

2- To study the anxiety among different streams (B.A, B.Sc., B.Ed., B.C.A., and B.P. Ed.) graduate level students in Nuclear and Joint family.

### Hypotheses

1. There is no significant difference between Nuclear and Joint family graduate level students on anxieties.
2. There is no significant difference between male and female graduate level students on anxiety in Nuclear families.
3. There is no significant difference between male and female graduate level students on anxiety in Joint families.
4. There is no significant difference between Saryu Degree College and Haji Ismail Degree College students on anxiety in nuclear families.
5. There is no significant difference between Haji Ismail Degree College and Sanjivni Degree College students on anxiety in nuclear families.
6. There is no significant difference between Saryu Degree College and Sanjivni Degree College students on anxiety in nuclear families.
7. There is no significant difference between Saryu Degree College and Haji Ismail Degree College students on anxiety in joint families.
8. There is no significant difference between Haji Ismail Degree College and Sanjivni Degree College students on anxiety in joint families.
9. There is no significant difference between Saryu Degree College and Sanjivni Degree College students on anxiety in joint families.
10. There is no significant difference among different streams (B.A, B.Sc., B.Ed., B.C.A., and B. P .Ed.) graduate level students on anxiety in Nuclear families.
11. There is no significant difference among different streams (B.A, B.Sc., B.Ed., B.C.A., and B.P.Ed.) graduate level students on anxiety in Joint families.

### Review of Related Literature

(1) **Cara A. Settapani and Philip C. Kendall (2012)** conducted study on ‘Social functioning was assessed using the Child Behavior Checklist and Teacher Report Form for children with anxiety disorders’ who participated in a randomized clinical trial ( $N = 161$ , aged 7–14). Significant relationships were found between severity of

children's principal anxiety disorder and most measures of social functioning, such that poorer social functioning was associated with more severe anxiety. Among youth who received cognitive-behavioral therapy ( $n = 111$ ), significant associations were found between parent-reported social competence and both absence of principal anxiety disorder and lower anxiety severity at post treatment and 1-year follow-up, controlling for the severity of the child's principal anxiety disorder at pretreatment. Findings support a relationship between anxiety severity and social difficulties, and suggest the importance of social competence for a favorable treatment response.

**(2) Reuben Ng and Rebecca P. Ang and Moon-Ho Ringo Ho (2012)** conducted study on 'Coping with Anxiety, Depression, Anger and Aggression'. Mediation analysis using Structural Equation Modeling found that resilience factors mediated the approach coping–psychopathology relationship but not the avoidance coping–psychopathology relationship. Specifically, positive thinking mediated the approach coping–internalizing disorders (anxiety, depression) relationship tenacity mediated the approach coping–aggression link, help-seeking mediated both the approach coping–internalizing disorders, and approach coping–externalizing behaviors (anger, aggression) links. Further, strength-of-mediation analysis revealed that help-seeking was a stronger mediator than positive thinking in the approach coping–anxiety relationship.

**(3) Lisa R. Starr and Joanne Davila (2011)** studied on 'Responding to Anxiety with Rumination and Hopelessness: Mechanism of Anxiety-Depression Symptom Co-Occurrence?' The current research proposes that certain anxiety response styles (specifically, responding to anxiety symptoms with rumination or hopeless cognitions) may increase risk of depressive symptoms, contributing to anxiety-depression comorbidity. Researcher delineates preliminary evidence for this model in three studies. Controlling for anxiety response styles significantly reduced the association between anxiety and depressive symptoms in an undergraduate sample. These findings were replicated controlling for conceptually related variables, and anxiety interacted with anxiety response styles to predict greater depressive symptoms. Anxiety response styles moderated the prospective association between anxiety and later depression in a generalized anxiety disorder sample. Results support a role for anxiety response styles in anxiety-depression co-occurrence and show that hopeless/ruminative anxiety

response styles can be measured with high reliability and convergent and divergent validity.

(4) **J. Drost, A. J. W. Van der Does (2011)** studied on ‘General, Specific and Unique Cognitive Factors Involved in Anxiety and Depressive Disorders’ Results revealed both specific and unique cognitive components of anxiety and depression. Across symptomatic and remitted groups, Anxiety Sensitivity was specific to social anxiety disorder and panic disorder, Aggression Reactivity was a unique component of dysthymia, and Rumination on Sadness was unique to major depressive disorder.

### Methodology

The present study is descriptive survey type research. The purpose of survey type research, according to Kerlinger (p.410) is to discover the relative incidence, distribution and inter-relations of sociological and psychological variables. Survey type studies by and large describe the current status of a phenomena, some group of people, an institution, some existing practice policy or event. Sometimes they compare the status with some available standards and make suggestions for improving the status. Survey research as being used in social science is however different from the status survey and is considered enough scientific if looked from methodology point of view.

### Population

Present study covers only graduate level students of Balrampur, Gonda and Bahraich districts of UP. These degree colleges are affiliated to Dr. Ram Manohar Lohiya Avadh University Faizabad. These colleges are providing under graduate and post graduate courses. This research covers only B.A., B. Sc., B.Ed., B.C.A. and B. P. Ed. course students.

### Sample and Sampling Techniques

In the present study, researcher selected Non-probability sampling method for this study. Purposive method of sampling was selected for the study. In this type of sampling the researcher picks up units from the population of his own way.

There are 98 samples from Haji Ismail Degree College Sadullah Nagar Balrampur, 180 samples from Saryu Degree College Colonel Ganj Gonda and 91 samples Sanjeevni Degree College Bahraich. Total 369 samples were taken. These colleges have different stream students included as B.A, B.Sc., B.Ed., B.C.A, and B. P. Ed.

#### Tool for Comprehensive Anxiety Test

This tool was developed by **Dr. R. L. Bharadwaj, Dr. H. Sharma and Dr. M. Bharadwaj** and published by National Psychological Corporation Agra.

In the final form of the test has 90 items relating to the symptoms of the anxiety and possesses the capacity to evoke the responses correctly. The responses are in the form of Yes and No.

#### Reliability of the test

The test retest method (N=100) was employed to determine the temporal stability of the test. The product moment correlation between test and retest score has been found to be .83. By applying the split-half method (Gutman Formula), the reliability coefficient of the test has been found to be .94 (N=100).

#### Validity of the test

1. With anxiety dimension of eight state questionnaire 'From A' Hindi version by Kapoor and Bhargava. N=50r=.68
2. With anxiety dimension of eight state questionnaire 'From B' Hindi version by Kapoor and bhargava. N=50r=.74

#### Findings and Conclusions

1. Hypothesis-1 i.e. there is no significant difference between Nuclear and Joint families graduate level students on anxiety, is accepted because the value of anxiety of students is approximately same in Nuclear and Joint family. Students have the same

environment in the society and face the same problems. There are so many personal and other matters are also influence the young graduate students.

2. Hypothesis-2 i.e. there is no significant difference between male and female graduate level students on anxiety in Nuclear families. There is no difference at level of anxiety graduate level male and female nuclear family student all of three college because difference of mean anxiety is (.41) only at .05 and .01 levels of significance. Therefore no significant difference is found between male and female graduate level students on anxiety in Nuclear families at both levels.
3. Hypothesis-3 i.e. there is no significant difference between male and female graduate level students on anxiety in Joint families. More level of anxiety is seen in girl students in caparison to boys at both levels of significance.
4. Hypothesis-4 i.e. there is no significant difference between Saryu Degree College and Haji Ismail Degree College students on anxiety in nuclear family. Here no significant difference is observed between the said colleges. Therefore is no significant difference between Saryu Degree College and Haji Ismail Degree College students on anxiety in nuclear families at both levels of significance.
5. Hypothesis-5 i.e. there is no significant difference between Haji Ismail Degree College and Sanjivni Degree College students on anxiety in nuclear families. Therefore is no significant difference between Haji Ismail Degree College and Sanjivni Degree College students on anxiety in nuclear families at .05 and .01 levels of significance.
6. Hypothesis-6 i.e there is no significant difference between Saryu Degree College and Sanjivni Degree College students on anxiety in nuclear family. No significant difference is observed between Saryu Degree College and Sanjivni Degree College students on anxiety in nuclear families at both levels of significance.
7. Hypothesis-7 i.e. there is no significant difference between Saryu Degree College and Haji Ismail Degree College students on anxiety in joint families. The finding is significant difference between Saryu Degree College and Haji Ismail Degree College students on anxiety in joint families at .both levels of significance. Therefore hypothesis is rejected at both levels.
8. Hypothesis-8 i.e. there is no significant difference between Haji Ismail Degree College and Sanjivni Degree College students on anxiety in joint families. Here hypothesis is accepted because the value of anxiety of students is approximately same of Haji Ismail

Degree College and Sanjivni Degree College students in joint families at both levels of significance.

9. Hypothesis-9 i.e. there is no significant difference between Saryu Degree College and Sanjivni Degree College students on anxiety in joint families. The result shows that Saryu Degree College student mean at anxiety more than sanjivni Degree College student mean at anxiety. It difference to significant at .05 level but not significant at .01level.
10. Hypothesis-10 i.e. there is no significant difference among different streams (B.A, B.Sc., B.Ed., B.C.A., and B. P .Ed.) graduate level students on anxiety in Nuclear families. The result shows that the value of anxiety among different stream is approximately same. Students of all streams are suffering from the same sociological problems and environmental situations. Hence there is no difference occurred at both levels.
11. Hypothesis-11 i.e. there is no significant difference among different streams (B.A, B.Sc., B.Ed., B.C.A., and B. P. Ed.) graduate level students on anxiety in Joint families. The result shows that the value of anxiety among different stream is approximately same. Therefore no significant difference between different stream graduate level students at anxiety level in Joint family at both levels of significance.

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