

# Relationship Between Coping Skill and Family Values to Anxiety Level Among Undergraduates FHPK, UMK Students

Dalina Saifulnazim, Nurul Husna Haji Abdullah Alawi, Nur Ain Syasya Izzati Zaidi, Ahmad Safari Kiply & \*Siti Fatimah Ab Ghaffar\*

Faculty of Hospitality, Tourism and Wellness, University Malaysia Kelantan

Corresponding email: fatimah.g@umk.edu.my

---

## ABSTRACT

*Anxiety is one of the most common mental health problems among university students. The objective of the study is to identify the relationships between sociodemographic, coping skills and family values with anxiety. A cross-sectional study was conducted among 335 undergraduate students. The convenience sampling method was used as sampling method. A set of online questionnaires consisted of three sections, Section A for sociodemographic characteristics, Section B for coping skills, and Section C for family values. Data were analyzed using Pearson correlation analysis to investigate the association between variables. The findings of this study showed that coping skills and family values were significantly associated with anxiety. Useful findings of this study could contribute to the body of knowledge on factors of anxiety in university students and an early anxiety intervention for this target group is urgently needed.*

**Keywords:** *Anxiety, Mental health, Socio-demographics, Coping Skill, Family Values*

---

## INTRODUCTION

In many nations, poor mental health among university students has become a severe problem. Malaysia is one of the countries which is a leader in Asia-Pacific education. (Kotera et al., 2020). The attitude of students who are less sensitive about their mental health makes the government's effort to raise mental health awareness among students still difficult to achieve and a challenge nowadays. Mental health refers to our emotional, psychological, and social well-being, all of which have an impact on how we think, feel, and behave. In this stage of life mental health is very important because if someone had experience with this problem it will affect their thinking, mood, and behaviours. (Mental Health.gov.2020).

Anxiety is one of the mental health problems commonly found among university students. Anxiety can refer to the body's natural response to stress. It is a feeling of fear about the future. Nearly all people are scared and terrified of a situation that is not ordinary. This problem can occur in any age, gender and situation. It can induce distress syndromes like shivering, breathing problems, headaches, mental deterioration, anger, cardiac arrest, and a variety of other symptoms.

### Significance of the Study

The findings of this study will benefit undergraduate students, which will increase awareness of serious health problems such as anxiety which is a big problem for a student. In addition, the studies can help the future researcher to develop anxiety program modules to prevent or reduce the prevalence of anxiety among public university students. Future researchers could use the findings of this research to understand anxiety problems among university students. Moreover, this research, it can be used as a reference and guideline by other researchers, especially in primary health education. In addition, other researchers can use data for different populations

and regions for this anxiety. In the same way, it raises awareness and enhances a healthy quality of life especially for university students.

### **Student**

The findings of this study will benefit all students, which will increase awareness of serious health problems such as anxiety which is a big problem for a student. In addition, the studies can help develop anxiety program modules to prevent or reduce the number of statistical cases among public university students. However, this study will also help other researchers study anxiety problems among public university students in the future.

### **Society**

This study can also benefit all society to add knowledge and give awareness to increasingly worrisome anxiety problems. It is because the total number of people with anxiety problems that are on the rise. Therefore, it can encourage society to the importance of mental health care and the benefits of undergoing treatment and counseling to ensure better mental health.

### **University**

The study also benefits the university. The university can identify the total number of students suffering from anxiety disorders and know the causes that lead them to it. The university can also raise awareness among public university students about mental health and the value of both mental and physical well-being.

### **Future Study**

Future researchers could use this research to understand anxiety problems among university students. Moreover, this research can be used as a reference and guideline by other researchers, especially in primary health education. In addition, other researchers can use data for different populations and regions for this anxiety disorder. In the same way, it raises awareness and enhances a healthy quality of life, especially for university students. So that this information can be used to develop an intervention module or program to reduce anxiety among university students.

## **LITERATURE REVIEW**

### **Anxiety**

Anxiety disorders are a type of mental health problem. If someone has an anxiety condition, they will experience fear in response to the circumstances. They also can experience physical symptoms of anxiety such as a racing heart or starting to sweat. Anxiety can be defined as an emotion that is expressed by tension feeling, a worried mind, and physical changes such as an increase in high blood pressure (American Psychological Association, 2022).

There are several types of anxiety disorders, for example, i) Generalized anxiety disorder (GAD), ii) panic disorder, iii) Phobias, and iv) Separation anxiety. Anxiety is known as one of the most emotional health problems, especially for university students. This anxiety problem will become even more worrying if it cannot be treated and prevented as soon as possible. The possible factors of anxiety are coping skills; and family issues. But there is a significant level of anxiety which is divided into several levels: low level, moderate level, and high level. But this classification level of anxiety can be determined through the symptoms and problems faced by the student. (Khoshaim, et al, 2020)

## **Sociodemographic**

Sociodemographic can be referred to as a combination of social and demographic factors that will define a person in a group or in a population. In this study, the socio-demographics that were included in the data analysis were gender, age, education, religion, marital status, race, and ethnicity. One of the most important socio-demographic parameters influencing a study decision is age. People in the same age group or category usually have similar experiences, which influences their preferences. The lifestyles of married students and single students are a bit different, like responsibility as students and as a wife or husband, especially for married students that have children (Hishan et al, 2018).

## **Coping Skills**

The adopted coping techniques are attempts to avoid or decrease threat, harm, or loss, as well as the anxiety that comes with it. May help people adjust to stressful conditions daily, as well as their physical and mental health. Student coping strategies may be a risk or protective factor for psychological distress and psychological well-being. During the covid-19 pandemic, a study observed that the effect of the pandemic crisis on the mental health of undergraduates can be reduced or increased following the adopted coping strategies. (Adriana Rezende Lopez and Oscar Kenji Nihei, 2021). There are two types of coping that have been stated which Adaptive coping and Maladaptive coping. There were weak positive correlations between stress and anxiety with one maladaptive coping (venting) and weak negative correlations between depression and stress with three adaptive coping systems (religion, utilizing emotional support, and using instrumental support) (acceptance, religion). (Adriana Rezende Lopez and Oscar Kenji Nihei, 2021).

All subscales of psychological well-being revealed substantial positive relationships (mild, moderate, or strong) with life satisfaction. The ratings of life satisfaction and psychological well-being showed substantial (weak or moderate) correlations: positive with four adaptive coping strategies (active coping, planning, positive reframing, acceptance); negative with three maladaptive coping strategies (substance use, behavioural disengagement, self-blame). (Adriana Rezende Lopez and Oscar Kenji Nihei, 2021).

## **Family Values**

Some university students have a variety of family problems that cause them anxiety as they study. One of these issues is a family member's illness, such as that of a parent, which necessitates the student's proximity to the patient. (Nabila Y. AlKandari, 2020).

Students who had negative family relationships in childhood had higher levels of anxiety. Parents' bad connections can lead to more unfavourable interactions between parents and children. Negative parent-child connections, as well as divorce, are both detrimental to mother-child relationships. A divorce between parents can disrupt the health of students and also the behaviour problem because they think too much about their parents and cause them to worry that they will be separated from their mother or father. (Amy Morin and LCSW, 2021).

## **Research Hypothesis**

Hypotheses of this study were:

The literature review highlighted that the independent variable was coping skill and family values. There this research planned

- H1            There is a significant relationship between coping skills and anxiety among university students.

H2 There is a significant relationship between family values and anxiety among university students.

**Research Framework**

Figure 1 below shows the research framework use for this study

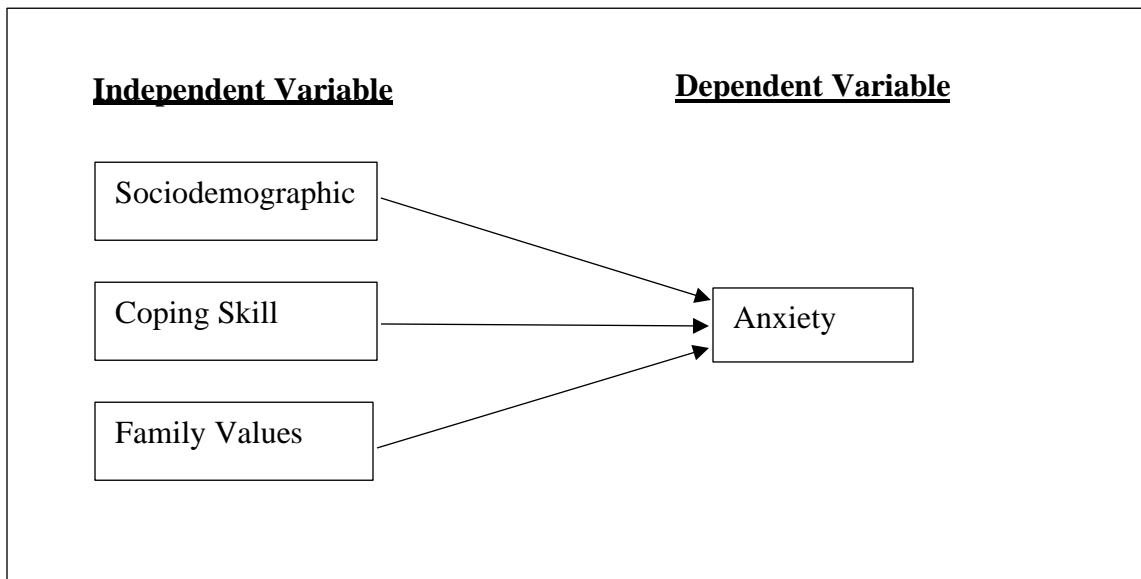


Figure 5: Research Framework

**METHODOLOGY**

**Research Design**

This study used the quantitative method to gain data through questionnaire. The data for this experiment was collected using the cross-sectional design approach. A cross-sectional study entails collecting data from a population at a single point in time. It will be chosen based on a set of certain variables (Cherry, K, 2019).

**Data Collection**

A set of questionnaires consisted of 4 sections, section A to section D. Section A has 6 questions that are about sociodemographic like age, gender, race, marital status, year of study, and course of students. Section B to section D has 4 points Likert – Scale. Section B (Anxiety) has 21 items, Section C (Coping Skills) have 28 items and the last section D (Family Value) has 30 items. The questionnaire used in the research study is through an online survey using Google Form which was distributed to 335 undergraduate students at UMK Campus City. Google Form link distributed via WhatsApp, Instagram, and Telegram. This is because this method does not need a high cost compared to other methods and it is very easy to collect the data quickly.

**Sampling**

In this study, because the sample was not randomly selected, the researcher will use a non - probability sampling technique. Non -probability sampling involves non-random selection. It will be based on convenience or other criteria, it will allow researchers to easily collect all the data. In a non-probability sample, individuals are picked based on non-random criteria. The advantages of sampling are designed to assist researchers to extract more information about students from the data they collect.

$$s = \frac{x^2 N p (1 - P)}{e^2 (N - 1) + x^2 p (1 - p)}$$

n= sample size

N= population size

e = the degree of accuracy expressed as a proportion (0.05)

$\chi^2$  = chi-square of the degree of freedom 1 and confidence 95% (3.841)

p = proportion of population (if unknown, 0.5)

## Data Analysis

There were four types of data analysis used in this study, namely frequency analysis, descriptive analysis, reliability test, and Pearson correlation analysis. The data obtained were analyzed by using SPSS version 26.

## FINDINGS

### Result of Frequency Analysis

Table 1 below shows the frequency analysis of this research.

Table 1: Frequency Analysis (n=335)

Characteristics	Frequency	Percentage
<b>Gender</b>		
Male	95	28.3
Female	240	71.4
<b>Age</b>		
20-year-old	18	5.4
21-year-old	27	8.0
22-year-old	100	29.8
23-year-old	139	41.4
24-year-old	33	9.8
25-year-old	11	3.3
26-year-old	7	2.1
<b>Race</b>		
Malay	248	73.8
Chinese	26	7.7
Indian	29	8.6
Other	32	9.5
<b>Marital Status</b>		
Single	322	95.8
Married	12	3.6
Divorced	1	.3
<b>Years</b>		
Year 1	22	6.5
Year 2	90	26.8
Year 3	193	57.4
Year 4	30	8.9
<b>Course</b>		
SAS	136	40.5
SAP	122	36.3
SAH	77	22.9

This part it will explain the result of socsocio-demographic characteristics of respondents from undergraduate students in the FHPK Programme, the total of the collected data was 335 respondents. From table 1 Majority gender that answered was Female students 240 respondents (71.4%) and 95 respondents (28.3%) had been represented as male. The majority of the students aged 23 years old had given a response of 139 (41.4%). There were 248 Malay respondents representing (73.8%). For the marital status, the majority of single students consist of 322 which shows 95.8% meanwhile for the educational years majority of year 3 students 193 respond that consisting of 57.4% of students. Lastly, 136 students from SAS had the higher respondents which were 136 students to 40.5%. All the 335 respondents were students under the FHPK which were SAS, SAP, and SAH students' programs that consisted of 100%.

## Result of Descriptive Analysis

Table 2 below shows the descriptive analysis of this research

Table 2: Descriptive Analysis

Variable	Item	Mean	Standard Deviation
<b>Anxiety</b>	A2) I was aware of the dryness of my mouth	1.77	0.756
	A4) I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness in the absence of physical exertion)	1.67	0.714
	A7) I experienced trembling (e.g. in the hands)	1.70	0.720
	A9) I was worried about situations in which I might panic and make a fool of myself	1.71	0.753
	A15) I felt I was close to panic	1.72	0.768
	A19) I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat)	1.72	0.761
	A20) I felt scared without any good reason	1.72	0.729
	<b>Coping Skill</b>	1) I've been turning to work or other activities to take my mind off things	2.90
2) I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.		2.98	0.744
3) I've been concentrating my efforts on doing something about the situation I'm in.		3.01	0.746
4) I've been taking action to try to make the situation better.		3.03	0.771
5) I've been saying to myself "this isn't real".		2.59	0.917

	6) I've been refusing to believe that it happened.	2.54	0.937
	7) I've been using alcohol or other drugs to make myself feel better.	1.00	0.000
	8) I've been using alcohol or other drugs to help me get through it.	1.00	0.000
	9) I've been getting emotional support from others.	2.89	0.851
	10) I've been getting comfort & understanding from someone	2.95	0.823
	11) I've been getting help & advice from other people.	3.02	0.785
	12) I've been trying to get advice or help from other people about 0.81 II what to do	2.97	0.847
	13) I've been giving up trying to deal with it.	2.61	0.988
	14) I've been giving up attempting to cope.	2.16	1,014
	15) I've been saying things to let my unpleasant feelings escape	2.88	0.825
	16) I've been expressing my negative feeling.	2.85	0.816
	17) I've been trying to see it in different light, to make it seem more I 0.75 0.52 III positives	2.99	0.756
	18) I've been looking for something good in what is happening	3.03	0.744
	19) I've been trying to come up with a strategy about what to do	3.04	0.769
	20) I've been thinking hard about what steps to take	3.05	0.755
	21) I've been making jokes about it	2.65	0.976
	22) I've been making fun of the situation.	2.41	1.059
	23) I've been accepting the reality of the fact that it has happened	2.68	0.962
	24) I've been learning to live with it	2.79	0.900
	25) I've been trying to find comfort in my religion or spiritual belief	3.10	0.783
	26) I've been praying or meditating	3.11	0.769
	27) I've been criticizing myself.	2.12	0.955
	28) I've been blaming myself for things that happened	2.16	0.969
<b>Family Values</b>	FP1 We exercise and carry out activities together	3.07	0.817
	FP2 We frequently visit our close relatives whenever we have the time	3.16	0.729
	FP3 We do the house chores together during weekends	3.16	0,762
	FP4 We usually watch movies with a family member	3.04	0.885

FP5 We usually discuss this whenever we have family problems	3.14	0.791
FP6 We smile because there is harmony in our family	3.18	0.728
FP7 We usually fight over small or trivial matters	1.73	0.854
FP8 We keep our own problems to ourselves	1.79	0.845
FP9 We keep our feeling to ourselves	1.79	0.855
FP10 My parents do not understand me	1.64	0.828
FP11 It is difficult for me to understand my family	1.62	0.806
FP12 My family usually controls me	1.62	0.814
FP13 We express our love through hugging and kissing	2.93	0.910
FP14 We usually help one another	3.16	0.793
FP15 We often receive praises for each other	3.13	0.760
FP16 We are concerned about the problems of each family member	3.17	0.708
FP17 We respect our elders	3.24	0.730
FP18 Each family member fulfils his/her responsibilities	3.14	0.791
FP19 My family members are usually self-centred or selfish	1.76	0.928
FP20 We solve problems on our own	1.82	0.915
FP21 Some of our family members are isolated or isolate themselves	1.71	0.867
FP22 Some of our family members are irresponsible and cause inconvenience to others	1.61	0.811
FP23 We often raise our voices when discussing	1.66	0.871
FP24 Some of our family members retaliate when they are being reminded by another family member.	1.71	0.881
FP25 We are taught to be always truthful and punctual	3.13	0.760
FP26 We often engage ourselves in spiritual activities	3.26	0.684
FP27 We celebrate festive seasons (Hari Raya, Deepavali, Chinese, New Year, etc.) together	3.26	0.701
FP28 We often discuss religious matters together	3.17	0.718
FP29 We are taught to respect other religious and cultural belief	2.08	1.064
FP30 We always keep things tidy and organized	3.22	0.750



For this descriptive analysis, we used a categorical data concept so it will state about means and the standard deviation meanwhile for the continuous data will use frequency and percent. For the Anxiety question, a DASS-21 questionnaire consisted of 21 questions that contained stress, anxiety, and depression and only had 7 questions for every part. The first ranked dependent variable “I was aware of dryness of my mouth” has the higher mean that consists of 1.77 and the standard deviation of 0.76. Then it had been followed by three questions that have the same means of 1.72 but have a different sum of standard deviation which were “I felt I was close to panic were (0.768), ‘I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat)’”(0.761), I felt scared without any good reason(0.729). and for the last range was 1.67 and the standard deviation was 0.714.

Coping Skill question, which used the Brief-COPES questionnaire, the question of Coping Skill that contributes to anxiety was selected by all the respondents for this research. According to Table 2, the higher means for the coping skill was “I’ve been praying or meditating” which represented 3.11 for the mean meanwhile for standard deviation was 0.769. for the second highest was “I’ve been trying to find comfort in my religion or spiritual belief consisted of 3.10 and 0.783 from the questionnaire’. Lastly, the last statements were questions “I’ve been using alcohol or other drugs to make myself feel better, and I’ve been using alcohol or other drugs to help me get through it” that consisted of 1.000 and the standard was 0.

Table 2 had demonstrated the mean and standard deviation for the family characteristics. The first rank with the highest mean represented the question of “We respect our elders” with is 3.24 (0.730) and followed by “We often engage ourselves in spiritual activities and We celebrate festive seasons (Hari Raya, Deepavali, Chinese, New Year, etc.) together (3.26) consist to 0.769 and We often engage ourselves in spiritual activities that the means were same (3.62) means 0.701. After that, for rank 3 was represented for the We are concerned about the problems of each family member with is in 3.17. Lastly, as the lowest number of ranking questions, Some of our family members are irresponsible and cause inconvenience to others (1.61) to 0.811.

### Result of Reliability Analysis

Table 4 below shows the reliability analysis of this research

Table 4: Reliability Analysis

Variable	Number of Items	Cronbach Alpha
Anxiety	7	0.927
Coping Skill	28	0.943
Family Values	30	0.885

A pilot study was conducted before actual data collection. A pilot test was conducted among 30 of respondents that need to be used to obtain the reliability of questionnaire. Table 2 shows Cronbach's Alpha for the questionnaire. Cronbach's Alpha value of 0.927, 0.943, 0.855 for anxiety coping skill and family values, respectively. Cronbach's Alpha value of 0.7 and above indicated good internal consistency.

## Result of Pearson Correlation Analysis

The Table 5 below shows the correlation analysis of this research

Table 28: Pearson Correlation Analysis

Independent Variables	Pearson Correlation	p-value	Confidence interval (lower, upper)	Interpretation
Coping Skill	0.123	0.025	(0.007, 0.218)	Weak Positive Correlation
Family Values	-0.306	0.001	(-0.400, -0.205)	Moderate Negative Correlation

The table shows that the relationship between the two dependent variables which were coping skills and family values, and the independent variable anxiety were significant ( $p = 0.001$ ). However, the strength of association between coping skills and anxiety was a weak correlation, but there was a significant relationship. Whereas the relationship between family values and anxiety was a moderate negative correlation. The result of the Pearson correlation analysis is presented in Table 3.

## DISCUSSION AND RECOMMENDATION

The objective of the research study was to determine the relationship between coping skills and family values with anxiety among undergraduate students in Faculty Hospitality Tourism and Wellness in Campus City. Based on the findings of the study, it was shown that there was a significant association between coping skills and family values with anxiety even if the association is a weak positive and moderate negative correlation. For the Coping Skill, even though the result was weak but it was a significant relationship with the Malay Brief-COPE that the sample was adequate being significant ( $p\text{-value} < 0.001$ ). (Yusoff M.S.B., 2021).

For the recommendation for this research, it can use different styles of research design. In this research, we used a quantitative method that just shared the questionnaire by a link to WhatsApp so for the improvement questionnaire can be distributed face to face so the researcher can see the commitment from all the respondents and data can be collected effectively and does not take a long time to collect all the data. In addition, future research also could use a long-short study style because the researcher can see more details on the differences before the case is studied and after the completion of the study which may provide more knowledge, and the information collected will also be more detailed than that used in this research which uses cross-sectional study allocated a short period of time. Other than that future researchers also can further expand the study such as opening this study to lecturers as well as private universities, further researchers can also look more broadly at the way of life of students.

## CONCLUSION

The purpose of this study is to determine factors associated with anxiety among undergraduate students in the FHPK students' course at University Malaysia Kelantan, Campus City. The independent variables we choose from this research are sociodemographic factors, coping skills, and family values. The research methodology employed in this study comprises a few

data, which are the researchers' method of collecting data in numerical data in groups, whereas, for candidates, a broader study was used and measured by questionnaire.

## REFERENCES

Alkandari, N.Y (April 2020). Students Anxiety Experiences in Higher Education Institutions. ResearchGate, 1-11 Retrieved from [https://www.researchgate.net/publication/340708415\\_Students\\_Anxiety\\_Experiences\\_in\\_Higher\\_Education\\_Institutions](https://www.researchgate.net/publication/340708415_Students_Anxiety_Experiences_in_Higher_Education_Institutions)

American Psychological Association (2022). Anxiety. Retrieved from <https://www.apa.org/topics/anxiety>

Morin, A.L. (February 2021). The psychological Effects of Divorce on Children very well family retrieved from 4140170#:~:text=Behavior%20Problems,with%20peers%20after%20a%20divorce.

Aylie, N. S., Mekonen, M. A., & Mekuria, R. M. (2020). The Psychological Impacts of COVID-19 Pandemic Among University Students in Bench-Sheko Zone, South-west Ethiopia: A Community-based Cross-sectional Study. *Psychology Research and Behaviour Management*, Volume 13, 813–821. Retrieved from <https://doi.org/10.2147/prbm.s275593>

Berndt, A. E. (2020). Sampling Methods. *Journal of Human Lactation*, 36(2), 224–226. Retrieved from <https://doi.org/10.1177/0890334420906850>

Cross, J. (2006). MEDLINE, PubMed, PubMed Central, and the NLM. *Editors' Bulletin*, 2(1), 1–5. <https://doi.org/10.1080/17521740701702115>

Khoshaim, H. B. (2020). Anxiety Level of University Students During COVID-19 in Saudi Arabia. *Frontiers*. Retrieved by <https://www.frontiersin.org/articles/10.3389/fpsy.2020.579750/full>

Lopes, A. R. (2021, October 13). Depression, anxiety and stress symptoms in Brazilian university students during the COVID-19 pandemic: Predictors and association with life satisfaction, psychological well-being and coping strategies. *PLOS ONE*. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0258493>

Muhammad Saiful Bahri Yusoff. (2021) The Validity of the Malay Brief Cope in identifying Coping strategies among Adolescent in Secondary School. Retrieved by [https://www.researchgate.net/publication/209859053\\_The\\_VValidity\\_of\\_the\\_Malay\\_Brief\\_COPE\\_in\\_Identifying\\_Coping\\_Strategies\\_among\\_Adolescents\\_in\\_Secondary\\_School](https://www.researchgate.net/publication/209859053_The_VValidity_of_the_Malay_Brief_COPE_in_Identifying_Coping_Strategies_among_Adolescents_in_Secondary_School)

QuestionPro.(2022) Correlation analysis | Analyze correlation between two variables | Retrieved from <https://www.questionpro.com/features/correlation-analysis.html>

Research on Humanities and Social Science. (2020). Qualitative Data Analysis: An Overview of Data Reduction, Data Display and Interpretation. Retrieved <https://doi.org/10.7176/rhss/10-21-02>.

Statistics How To (2021) Cronbach's Alpha: Simple Definition, Use and Interpretation. Retrieved by <https://www.statisticshowto.com/probability-and-statistics/statistics-definitions/cronbachs-alpha-spss/>

Thayabaranathan, T., Andrew, N. E., Stolwyk, R., Lannin, N. A., & Cadilhac, D. A. (2021). Comparing the EQ-5D-3L anxiety or depression domain to the Hospital Anxiety and Depression Scale to identify anxiety or depression after stroke. *Topics in Stroke Rehabilitation*, 29(2), 146–155. Retrieved by <https://doi.org/10.1080/10749357.2021.1895494>

SPSS FAQ. UCLA (2021). What does Cronbach's alpha mean Retrieved by <https://stats.oarc.ucla.edu/spss/faq/what-does-cronbachs-alpha>