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Development and Standardization of Indigenous Student Problem Identification Scale

| Fizzah Abid Warris* | Ivan Sunee | l Samuel [†] | Saima Majeed‡ |
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stract

An individual's development ensures continuous changes that introduce challenges and conflicts that may hassle him. Transition to the university may expose them to a wide array of threats that they may not be able to cope with successfully. These may thus influence individuals' psychological and behavioral functioning and physical wellbeing. It may be the institution's responsibility to provide help to these individuals; however, for this purpose, these problems need to be identified and evaluated foremost. Henceforth, this research is concerned with the development and standardization of the Student Problem Identification Scale (SPIS) on a sample of 415 undergraduates. Through a semi-structured interview, a list of problems was generated. Those that were recurring were subsequently removed. The obtained list was reviewed by four experts who provided feedback on the relevance of each item. The list was then put through statistical analysis, and its psychometric properties were evaluated. Principal Component Analysis with Varimax rotation and Kaisar normalization generated four factors that were labeled as Personal Pressures, Poor Adjustment, Low Academic Achievement, and Unhealthiness. Convergent validity was determined with the help of the Student Problem Checklist (Mahmood & Saleem, 2011). Cronbach Alpha revealed excellent internal consistency of the scale. Implications for further research are also discussed.

Key Words: Problem, Transition, Scale Development, University/Undergraduate Students, Mental Health, Academic Issues.

Introduction

It has been suggested that throughout the span of development, an individual experiences a number of transitions and changes. These changes may range from shifts in social settings to changes in the routine of the individual (Goodman, Schlossberg, & Anderson, 2006; Weiten, 2012). They may serve as a challenge that the individual needs to cope with in order to attain a healthy development. If he is unsuccessful in doing so, he may experience stress and strain (Weiten, 2012).

A number of theorists have contributed to transition and its implications on the individual's health (Goodman, Schlossberg, & Anderson, 2006), including Darwin, who maintained that only those who are able to successfully adapt to the environment survive. This ensures the vitality of successful cope with an unfavorable event for the individuals. It should be ascertained that these changes that individuals experience may be small shifts in daily routine or may encompass major life-changing events that may distress the individual (Goodman, Schlossberg, & Anderson, 2006; Weiten, 2012).

The variability in the human population must also be observed here as it may play a role in how individuals perceive events as problems and deal with them. This is significant as it has been ascertained that the variability exists due to the differing experiences and events that individuals are exposed to (Goodman, Schlossberg, & Anderson, 2006). Culture may also play a significant role as it contributes to the social context an individual

Email: saimapsychologistpimh@gmail.com

^{*}Research Student, Department of Psychology, Forman Christian College: A Chartered University, Lahore, Punjab, Pakistan.

[†]Assistant Professor, Department of Psychology, Forman Christian College: A Chartered University, Lahore, Punjab, Pakistan.

[‡]Senior Clinical Psychologist, Punjab Institute of Mental Health, Punjab, Pakistan.

resides within (<u>Goodman, Schlossberg, & Anderson, 2006</u>). It also aids in the perceptions individuals hold regarding themselves, which may also affect their perception of problems (<u>Weiten, 2012</u>).

While challenges trouble individuals at all stages of their life, a particular period in the development is adolescence, where adjustment is required more continuously due to affective imbalance present at this stage (Hall, 1904). It is however, in this era that individuals experience a major shift in their social setting that is when decide to further their education by entering a university (Paul & Brier, 2001; Swenson, Nordstorm & Hiester, 2008).

The foreign atmosphere they are exposed to may serve as a great challenge to them as it introduces a more complex social and educational environment for these individuals. If they are not able to adjust to this change, they may experience mental health issues (<u>Acharya, 2009</u>), which may lead to problems in their academic performance as well (<u>Andrews & Wilding, 2004</u>).

It has been suggested that it is the institution's responsibility to provide significant help to individuals (<u>Stanley & Manthorpe, 2001</u>). However, as all humans display variability, the students' population is also suggested to be "heterogeneous," implying that the experiences of problems of a single student or a body of students may not be prevalent among others. As not much research has been carried out on the current population, it was essential to develop a tool that assessed the problems of university students.

Hence the purpose of this research is to develop a contextually indigenous tool that measures and assesses problems experienced by undergraduate students. The problem for this purpose has been defined as an event or incident that may occur regularly or occurred just once in the internal or external environment of the individual that influences the individual, making it difficult for him to cope with and causing him health-related problems.

The tool developed through the present study may aid the administration in filtering out the popular problems and plan interventions that would educate students in learning how to deal with them.

Objectives

- To explore the phenomenon of problems students encounter in the university.
- To develop an indigenous scale to assess the problems as reported by the students.
- To determine the psychometric properties of the tool developed.

Research Questions

The following queries will be addressed in the present study.

- What are some of the problems that concern students in a private university?
- What are the demographics of the student population that faces problems?

Method

This section of the study explores the procedure employed to construct the Student Problem Identification Scale (FPIS). The study encompasses three phases, which comprise systematic processes that are identified and elaborated below.

Phase I: Exploring the Phenomenon

This was the preliminary phase of the research, where the phenomenon of problems in the population was observed. The participants were interviewed, and a list of problems from their responses was generated.

Participants

Twenty-six undergraduate students were conveniently selected to participate in the initial phase of the study.

Procedure

The semi-structured interviews of the participants for this phase were carried out individually where the participant was contacted directly and was asked an open-ended question that explored the phenomenon of

problems, "What are some of the problems that students face at university?" The participant's response was recorded from which a list of 135 items was extracted. The items that were recurrent or obscure were removed, and the final number of problems was 102.

Phase II: Empirical Validation

The tool retrieved from the first phase was empirically validated in the second phase. The relevance of each item was also assessed in this phase.

Participants

Four faculty members took part to empirically validate the scale with teaching experience five years and above. They were considered to be experts in the field as they were not only involved with the academic environment but were also acquainted with dealing with student problems.

Procedure

The experts were informed of the study and its implications and were given a copy of the list of problems obtained from the first phase. They were asked to read through the list and rate each item on the basis of its relevance on a scale of 1 to 5. 1 indicates very little relevance, and 5 indicates high relevance. They were then asked, "Are there any other items that you think should be added to this checklist?"

Their responses were considered, and the items marked below 2.75 were removed. This refining left 61 items on the scale, which was standardized in the following phase.

Phase III: Main Study

The final stage of the construction of the Student Problem Identification Scale comprised of standardization and assessing the psychometric properties of the tool, and performing relevant statistical analysis on the data.

Setting and Sampling Technique

Participants were selected from two private and two public universities of Lahore through convenience sampling.

Participants

The sample size consisted of 415 undergraduate students who had not taken part in the previously administered phases of the study.

Ethical Considerations

The informed consent of the participants was obtained, and their anonymity and confidentiality were assured. Student Problem Identification Scale was introduced to them, and they were informed of its implications. As deception was not required, there was a minimal ethical concern, and the participants knew how their responses would affect the research.

Instruments

The following instruments were also administered to the sample alongside the Problem Identification Scale.

- Demographic Profile: This retrieved the basic information of the participants, including their age, gender, ethnicity, family system, etcetera.
- 2) Validating Tool; Student Problem Checklist: This tool measures the mental health of university students in four categories; Sense of Being Dysfunctional, Loss of Confidence, Lack of Self-Regulation, and Anxiety Proneness. It consists of 45 items and has an internal consistency of 0.94, a test re-test reliability of 0.81, and split-half reliability of 0.83, respectively (Saleem, Mahmood, & Naz, 2013). Its concurrent validity is measured against three other scales with which it was found to be positively correlated. It was measured

against General Health Questionnaire (r=0.701; p>0.001), with Siddiqui Shah Depression Scale (r=0.757; p>0.001) and Eysenck Personality Inventory (r=0.691; p>0.001) (<u>Mahmood & Saleem, 2011</u>).

Results

Table 1. Frequencies and Percentages, Birth Order, Siblings in Groups, Age in Groups, Residence, Family Status, Prior Medium of Education, Family Monthly Income with respect to Gender.

| V:1.1 | Male | Female | Total |
|--|------------|------------|------------|
| Variables - | f (%) | f (%) | f (%) |
| Gender | 223 (53.7) | 192 (46.3) | 415 (100) |
| Birth Order | | | |
| First | 73 (17.6) | 58 (14) | 131 (31.6) |
| Middle | 98 (23.6) | 92 (22.2) | 190 (45.8) |
| Last | 47 (11.3) | 38 (9.2) | 85 (20.5) |
| Only Child | 5(1.2) | 4(1) | 9 (2.2) |
| Residence | | | |
| Hostel on Campus | 28 (6.7) | 37 (8.9) | 65 (15.7) |
| Off Campus and not with Parent or Guardian | 62 (14.9) | 1 (0.2) | 63 (15.2) |
| With Parents | 128 (30.8) | 145 (34.9) | 273 (65.8) |
| With Relatives | 5 (1.2) | 9 (2.2) | 14 (3.4) |
| Family Status | | | |
| Nuclear | 159 (38.3) | 159 (38.3) | 318 (76.6) |
| Combined | 64 (15.4) | 32 (7.7) | 96 (23.1) |
| Prior Medium of Education | | | |
| English | 200 (48.2) | 179 (43.1) | 379 (91.3) |
| Urdu | 22 (5.3) | 10 (2.4) | 32 (7.7) |
| Both | 1 (0.2) | 3 (0.7) | 4 (1.0) |
| Family monthly income | | | |
| Don't Know | 4(1) | 1 (0.2) | 5 (1.2) |
| Less than 20,000 | 14 (3.4) | 3 (0.7) | 17 (4.1) |
| Between 20,000 and 50,000 | 36 (8.7) | 21 (5.1) | 57 (13.7) |
| Between 50,000 and 100,000 | 57 (13.7) | 70 (16.9) | 127 (30.6) |
| More than 100,000 | 90 (21.7) | 77 (18.6) | 167 (40.2) |
| More than 500,000 | 21 (5.1) | 19 (4.6) | 40 (9.6) |
| No monthly Income | 1 (0.2) | 0 (0) | 1 (0.2) |
| Retired | 0 (0) | 1 (0.2) | 1 (0.2) |

As far as ethnicity is concerned, the majority of the participants (332) were Punjabi, signifying 80% of the sample in which the males were 41.2%, and the females were 38.8%. 5.5% of the sample was Pashtoon, with 21 males and 2 females. 3.6% of the total participants were Saraiki, with 7 males and 8 females. 3.1% of the sample was Kashmiri, comprised of 5 males and 8 females.

The majority of the sample 46% had majored in the social and behavioral sciences category, with males being 27.5 % and females' being 18.6%. 27.7% had a science and mathematics major in which 14.9% were males, and 12.8% were females. Of the sample, 5.1 % were males studying humanities, and 6% were females making a total of 11.1%. 13.3% of the participants had dual majors, and only 0.5% had triple majors. Some (0.7%) had not yet decided on a major.

Factor Analysis

The following are the Factors Established from the Scale and its Psychometric Properties.

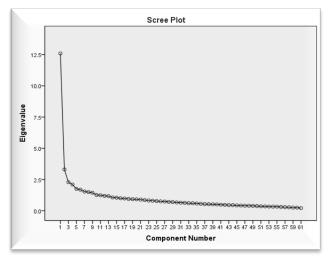


Figure 1: Scree Plot

The Scree Plot helped Indicate that Forman Problem Identification Scale Consists of four Factors.

Factor Analysis

Factor analysis was carried out on the newly developed scale with computation of 61 items. The criterion for retaining items as if they obtained factor loadings above or equal to .3 (Kline, 2000). Hence 2 items were eliminated. The factor structure of 59 items is given in Table 2.

Table 2. The Factor Structure of Items of 59 Items of Forman Problem Identification Scale with Varimax Rotation

| S. No | Item no. | F1 | F2 | F3 | F4 |
|-------|----------|------|------|-------|-------|
| 1 | 3 | 0.47 | 0.13 | -0.1 | 0.13 |
| 2 | 7 | 0.54 | 0.07 | 0.24 | 0.17 |
| 3 | 8 | 0.54 | 0.19 | 0.26 | 0.04 |
| 4 | 11 | 0.60 | 0 | 0.35 | 0.03 |
| 5 | 13 | 0.47 | 0.01 | 0.45 | 0.12 |
| 6 | 15 | 0.17 | 0.13 | 0.46 | 0.11 |
| 7 | 17 | 0.60 | 0.26 | 0.16 | 0.17 |
| 8 | 19 | 0.46 | 0.33 | -0.09 | 0.22 |
| 9 | 21 | 0.4 | 0.11 | 0.23 | 0.25 |
| 10 | 23 | 0.38 | 0.18 | 0.13 | 0.2 |
| 11 | 27 | 0.66 | 0.17 | 0.18 | 0.03 |
| 12 | 28 | 0.34 | 0.32 | 0.26 | 0.06 |
| 13 | 30 | 0.34 | 0.19 | 0.22 | 0.15 |
| 14 | 31 | 0.39 | 0.33 | 0.3 | 0.2 |
| 15 | 33 | 0.58 | 0.29 | 0.01 | 0.16 |
| 16 | 43 | 0.16 | 0.38 | 0.42 | -0.01 |
| 17 | 54 | 0.44 | 0.3 | 0.3 | 0.11 |
| 18 | 2 | 0.12 | 0.36 | 0.15 | 0.07 |
| 19 | 18 | 0.09 | 0.65 | 0.12 | 0.01 |
| 20 | 20 | 0.03 | 0.65 | 0.24 | -0.05 |
| 21 | 22 | 0.25 | 0.39 | 0.06 | 0.29 |

| 22 | 24 | 0.08 | 0.33 | 0.17 | 0.18 |
|-----------------|-----------------|--------------------|--------------------|----------------------|---------------------|
| 23 | 32 | 0.34 | 0.39 | 0 | 0.1 |
| 24 | 35 | 0.32 | 0.34 | -0.06 | 0.29 |
| 25 | 36 | 0.27 | 0.31 | -0.16 | 0.12 |
| 26 | 37 | 0.25 | 0.31 | -0.19 | 0.25 |
| 27 | 38 | -0.01 | 0.71 | 0.08 | 0.15 |
| 28 | 40 | 0.09 | 0.36 | 0.24 | 0.33 |
| 29 | 42 | 0.33 | 0.44 | 0.21 | 0.02 |
| 30 | 46 | 0.11 | 0.72 | 0.03 | 0.12 |
| 31 | 53 | 0.34 | 0.52 | 0.06 | -0.08 |
| 32 | 56 | 0.23 | 0.52 | -0.04 | 0.1 |
| 33 | 1 | 0.12 | 0.39 | 0.29 | 0.2 |
| 34 | 10 | 0.12 | 0.08 | 0.32 | 0.03 |
| 35 | 12 | 0.13 | -0.02 | 0.61 | 0.1 |
| 36 | 14 | 0.09 | 0.06 | 0.45 | 0.18 |
| 37 | 29 | 0.25 | 0.28 | 0.57 | 0.04 |
| 38 | 34 | 0.22 | 0.26 | 0.38 | 0.21 |
| 39 | 41 | 0.01 | -0.06 | 0.64 | 0.24 |
| 40 | 44 | 0.32 | 0.2 | 0.46 | 0.07 |
| 41 | 45 | -0.09 | 0.16 | 0.57 | 0.2 |
| 42 | 52 | -0.02 | -0.02 | 0.57 | 0.19 |
| 43 | 4 | 0.33 | -0.05 | 0.2 | 0.46 |
| 44 | 5 | 0.19 | 0.02 | 0.21 | 0.53 |
| 45 | 6 | 0.13 | -0.06 | 0.14 | 0.59 |
| 46 | 9 | 0.19 | 0.23 | 0.4 | 0.24 |
| 47 | 16 | 0.24 | 0.12 | 0.13 | 0.6 |
| 48 | 25 | 0.18 | -0.01 | -0.02 | 0.33 |
| 49 | 26 | 0.4 | 0.13 | 0.21 | 0.45 |
| 50 | 39 | -0.11 | -0.04 | 0.11 | 0.33 |
| 51 | 47 | 0.09 | 0.09 | 0.2 | 0.54 |
| 52 | 48 | 0.11 | 0.22 | 0.04 | 0.39 |
| 53 | 49 | 0.06 | 0.09 | 0.34 | 0.48 |
| 54 | 50 | 0.15 | 0.07 | 0.22 | 0.56 |
| 55 | 51 | 0.24 | 0.3 | -0.01 | 0.42 |
| 56 | 55 | -0.17 | 0.13 | -0.02 | 0.33 |
| 57 | 57 | 0.20 | 0.22 | 0.11 | 0.54 |
| 58 | 58 | 0.09 | 0.14 | 0.23 | 0.33 |
| 59 | 59 | -0.05 | 0.18 | 0.39 | 0.45 |
| E values | | 5.44 | 5.29 | 4.93 | 4.63 |
| % of Variance | | 8.92 | 8.67 | 8.08 | 7.6 |
| Itoms with fact | or loading ogua | l or above 30 were | rotained from a to | tal of 61 itams Save | entoen items leaded |

Items with factor loading equal or above .30 were retained from a total of 61 items. Seventeen items loaded onto the first factor, 15 onto the second factor, 10 onto the third, and 17 onto the fourth factor. The descriptive labels assigned to each factor were Personal Pressures, Poor Adjustment, Low Academic Achievement and Unhealthiness.

Factor 1: Personal Pressures (PP)

The first factor obtained through factor analysis was Personal Pressures (PP) containing 17 items. This factor comprises of problems that students experience due to perceived personal shortcomings. Some of the items are 'I cannot share my financial problems with anyone as I feel that they will judge me and this burdens me,' 'I sometimes compare myself to others who wear better clothes and have more money than I do,' 'I worry how I

am going to pay my fees,' 'I am stressed and strained due to peer pressure,' 'I feel bad that I am poor and people around me are rich,' and 'I fear rejection, so I do what others ask me to do.'

Factor 2: Poor Adjustment (PA)

The second factor computed was Poor Adjustment (PA), consisting of 15 items. The poor adjustment refers to the experience of problems when one is unable to adapt to the environment and external conditions and cannot cope with the challenges and unfavorable circumstances. From this factor, a few items are, 'I have a problem in understanding the foreign teachers because of their accents,' 'I experience cultural shock in my institution,' 'I feel insecure as my parents are separated,' 'I find that fights in my romantic relationship are a cause of my academic problems,' 'I come from a conservative family background; therefore, I have trouble adjusting in a coeducation institution,' and 'I am bullied by other students.'

Factor 3: Low Academic Achievement (LAA).

Low Academic Achievement, the third factor, contains the least number of items that is 10. LAA are problems faced when a student's academic goal is not achieved or its attainment is challenged. Some items falling under this factor are, 'I feel that poor grades lower my self-esteem,' 'I feel tension when I think about my future job,' 'I wait till the last minute to complete my assignment, and this stresses me,' 'I am pressurized by my teachers when they threaten to fail me,' 'I worry about my grades,' and 'I am pressurized by my family to excel in class so that I get a job later.'

Factor 4: Unhealthiness (UH).

The fourth factor of the Forman Problem Identification Scale is Unhealthiness comprising of a total of 17 items. UH is related to deficiencies in the mental and physical health of the individual. A few items from this factor are stated as 'I have constant thoughts regarding the problems in my interpersonal relationships,' 'I am worried about the unhygienic condition of the café,' 'I find work burnout causes me to sleep less,' 'I do not eat properly, so I feel lethargic and tired,' 'I find exams to cause stress and affect my concentration,' and I avoid going to places where I think I will be harassed.'

| • | | | | |
|---------|-------|-------|-------|-------|
| Factors | F1 | F2 | F3 | F4 |
| F1 | | .66** | .59** | .60** |
| F2 | | | .42** | .49** |
| F3 | | | | .54** |
| F4 | | | | |
| M | 59.26 | 55.16 | 28.03 | 47.94 |
| S. D | 11.55 | 9.97 | 7.68 | 10.86 |

Table 3. Summary of Mean, Standard Deviation, Inter Factor Correlation of Factors of 415 Participants

The inter-factor correlations show that there is a significant positive correlation between each factor, with the other factors ranging between .42 and .66, respectively. Test re-test reliability.

The test re-test reliability of the Forman Problem Identification Scale was also determined on 12.5% of the sample (N=52) with a gap of 1 week. The correlation between Personal Pressures with its re-administration was found to be significant at .91 (p<0.01), Poor Adjustment, and its re-test were also found to be significant at .80 (p<0.01). A positive correlation was found between Low Academic Achievement and its re-administration at .74 (p<0.01) and Unhealthiness with its re-administration at .81 (p<0.01).

Concurrent Validity

The concurrent validity of the Forman Problem Identification Scale was established with the aid of the Student Problem Checklist (Mahmood & Saleem, 2011). Student Problem Checklist was found to be significantly correlated with Personal Pressures at .44 (p<.01). It was found to be correlated at .22 (p<.01) for poor

adjustment. Significance correlation was found between SPCL and Low Academic Achievement at .45 (p \leq .01) as well as with Unhealthiness at .50 (p \leq .01), respectively.

Discussion

It was the purpose of the present research to develop a culturally indigenous tool that identified and measured the problems experienced by undergraduate university students. Such an instrument would bring out those problems that were faced by the general student body. Problems present in the first factor of the scale represent the event where an individual is unable to fulfill the expectations he sets for himself. Those falling under this category may have ideas regarding how they should conduct themselves in a given situation or how their behavior should be according to the norms. The pressures of attaining such a benchmark or failure of meeting up these ideas may cause problems to arise for these individuals.

University students scoring low in this factor are expected to maintain positive self-esteem and a healthy self-efficacy. These individuals are confident and are not influenced by societal pressures. They appreciate their strengths and try to improve their weaknesses without worrying over what others think. They perceive the world and themselves in a positive light and do not make unrealistic demands of themselves. They believe themselves to be equal to others, maintain a positive self-regard, and are not easily manipulated. They have healthy interpersonal relationships and perceive unconditional social support. They aren't afraid to stand up for their opinions and consider themselves worthy of others' attraction, attention, and respect.

In contrast, individuals who score high in this factor may entertain insecurity regarding them, along with low self-esteem. They have ideals in their heads that they try to match up to. They are easily influenced by those around them and strive hard to conform to social expectations. They try to please others and mold themselves in order to be appreciated more. They would be conscious regarding what others think of them and how they can reform themselves in order to be seen in a better light. They are indecisive and may not be confident in their judgments as they fear they would make the wrong choice.

Changes in the roles or identity due to transition that has been purported by a number of theorists may rely on the fact that prior to entering the institute, these students were likely in the senior-most class at school. Due to this, they may have received attention and praise given to the graduating class. Now in the university, they suddenly find themselves at the bottom of the hierarchy, and they strive to climb it in order to again receive the prestige they once had (Goodman, Schlossberg, & Anderson, 2006).

Broderick and Blewitt's theory of lifespan may explain a problematic attitude of these individuals as they are unable to reconcile with an inferior form of themselves and continuously strive to improve (2004, as cited in Goodman, Schlossberg, & Anderson, 2006).

For a better understanding, the qualities students scoring high on this factor possess, it is important to understand their perception of life events as well as their evaluation of the self. As Lazarus and Folkman propound, how individuals define an event and appraise it determines whether or not it is problematic to them (1984, as cited in Weiten, Dunn, & Hammer, 2014). However, appraisals are influenced by cognitions that were discussed by Albert Ellis and Aaron Beck.

For individuals who are personally pressurized, it is possible that not only maladaptive thinking patterns may lead to problems but also the way they see and evaluate themselves be significant. Self-concept, an idea initially proposed by William James in 1890 (as cited in Dacey, & Kenny, 1997; Feist, & Feist, 2008), then elaborated by Carl Rogers in 1959, reveals that people tend to construct notions regarding themselves which may not be accurate. Rogers added that they also develop ideal selves, a view they desire to be like. This theory may be employed to explain students falling under this factor as they may develop self-concepts that are not congruent to their ideal selves. They do not accept themselves as who they are; rather, they try to be someone that they are not, which raises disturbances in their personality (Schultz, & Schultz, 2005).

Karen Horney was of a similar view, though she believed that the contradictory relation between the self-concept and the ideal self would influence individuals to 'search for glory' and actualize the ideal self. These individuals, according to her, develop a need for perfection due to which they encounter the 'tyranny of shoulds' that represents the conflict between 'should' and 'shouldn't'. This idea is comparable with Ellis' REBT where he identifies 'should' to be one of the keywords of irrational beliefs (Feist, & Feist, 2008).

When an individual attempts to compare himself to others, he may be trying to discover the self. This is assumed in Leon Festinger's theory of social comparison (1954). The research suggested that negative social comparison may lead to the development of feelings of inferiority that result in improper self-concepts (Burleson, Leach, & Harrington, 2005). Students scoring in PP are expected to compare themselves to others who are better than them in order to see how well they fit. They then try to better themselves, and the pressure of doing that distresses them (Weiten, 2012).

Poor adjustment describes a set of problems related to the condition where an individual is unable to cope with a situation. It represents the event where he lacks the skill required to maintain a balance between the familiar and new social and psychological reality. When introduced to an unfamiliar environment, the individual scoring high in this factor will have trouble dealing with stress and anxiety that comes along with it and will have difficulties adapting behavior needed to deal with it.

An individual who scores low in PA will be considered to be well adjusted. He is realistic and forms rational, logical ideas and expectations. He recognizes his abilities and strengths and fulfills his responsibilities, and he clearly understands his flaws and weaknesses and tries hard to better himself. He is not dependent on others to solve his problems but is capable of doing that himself. He is open to exploring new experiences and accepts environmental change easily. Additionally, he does not overburden himself and makes only those commitments that he knows he can keep. This person is considered to have low emotional instability and fewer interpersonal problems as compared to a maladjusted individual.

The one who scores high on this factor is expected to face psychological adjustment issues and may have low self-esteem and self-efficacy. He is not prepared to deal with a problematic situation and does not know what to do. He dwells on his weaknesses, which causes him to doubt himself and his capabilities. He may also hold unrealistic views regarding him and the world. He is expected to be rigid in his thought and beliefs and dislikes all such incidents that go against them. Due to this, he may not welcome change and may close off all opportunities to explore experiences different from routine.

Such a person not only has a hard time coping with the university environment but is also troubled to accept the responsibilities that come along with it and seems to be highly dependent on others. He lacks confidence and may experience feelings of inferiority regarding him and his abilities to deal with a problem. He is unable to maintain equilibrium between environmental challenges and threats and the quality of his life.

Adler proposed that children of spoiling or neglectful parents may experience maladjustment when they enter a new social setting. This may be explained by understanding the parents' attitudes towards individuals. The individuals who were pampered are used to having their every desire and whim fulfilled by their caregivers. When they enter a new social setting, they do not have anyone to take care of their needs. As they have never have solved their own problems, they are clueless about how to handle situations, making them feel inadequate and incompetent. Elaborating on inferiority, Adler claimed that individuals attempt to compensate for these feelings by adopting a style of life. The getting style of life seems to be consistent with the personality of students experiencing adjustment issues. According to Adler, these individuals prefer to receive satisfaction than to give it.

On the other hand, individuals who have been neglected during childhood already feel unworthiness and insecurity. They, according to Maslow (1968, 1970) have not had their need to be loved and appreciated satisfied, due to which they are unable to acquire healthy self-esteem. This causes them to develop feelings of inferiority, helplessness, and inadequacy that lead to maladjustment.

The third factor in the scale describes a set of problems that may arise when an individual believes he has not successfully attained an academic goal. In this case, his acquired cumulative grade point average is irrelevant, while his perception and expectations regarding it and his academic performance are significant. Moderate stress related to academics may be beneficial for the student as it would motivate him to work harder and achieve more; however, excessive or too little may be a cause for concern (Acharya, 2009).

Students scoring low in LAA are not expected to experience stress regarding their academics. They would not necessarily have good CGPAs, yet they are still happy about what they have achieved and are not negatively influenced by it. These are carefree individuals who are not bound by pressures of exceedingly academically. And

as they are not troubled to perform better, they may lack motivation and even interest in their studies. They are extraverts, love fun, and are generally happy, optimistic people.

On the other hand, students who gain a high score in this factor worry excessively over their grades and academics. They may experience low self-esteem and maintain poor self-efficacy in regard to their performance. They work increasingly hard to attain an academic goal and feel stress and anxiety when they are unable to do so. Yet, even when they do attain it, happiness is short-lived as they then start putting efforts at maintaining it and even exceeding that.

Stern's theory of individuals' expectations, causing them mental health issues may be of concern in this factor as well. It is possible that the previously high achievers may have perceived university academics to be easy to them as well. However, when they experience the contrary, they encounter mental health problems (Dyrbye, Thomas & Shanafelt, 2006). They might not be able to adjust adequately and may not be able to deliver on the academic demands, facing more problems. The individuals scoring high on this factor may also construct possible selves in accordance to their current perception of the self. As their self-concept is poor, their possible self will also not be healthy. In addition to this, they are likely to experience self-discrepancy as well since there is little consistency between what they actually are, what they desire to be, and what they believe they ought to be.

It was noted that Asian families might pressurize the students both directly and indirectly to achieve academic success through their involvement in the individual's education (Sarma, 2014). This pressure from the families may cause the students to believe that their worth is conditioned. If they perform better academically, only then they will be respected and appreciated by others. They need to be loved and appreciated, so they incorporate the socially approved behaviors into their lifestyle and restrain themselves from engaging in socially disapproved ones.

The relationship between family pressure, self-esteem, and academic-related problems has been observed (Sarma, 2014). The rationale behind this may be given through the looking glass self-theory and Fromm's conformity. When individuals realize their parent's expectations to see them achieve academic success and the energy that they have invested in their studies, they may consciously or unconsciously conform to this pressure and adopt the identity of someone striving for success for their parents. When it appears that even though they tried hard, they failed at getting their desired grades, they feel frustration that causes them stress.

The perception of failure that individuals scoring high on LAA may incite feelings of doubt in their own abilities to achieve success, as was maintained in Bandura's self-efficacy. These students may start engaging in negative thoughts that they will never be accepted by their families as it appears, they lack the skills necessary for satisfying the condition of love.

Another stage of Erikson's Identity theory that appears to be significant to low academic achievers is the childhood age between 6 to 11 years. During this period, children go to the school where they are introduced to the academic environment. If they are praised, they are reinforced, and if they are ridiculed, they may develop inferiority. Both scenarios seem to be applicable to these students. When their behaviors are reinforced, they may associate academic success to praise. This is in accordance with the learning theories by Skinner and Pavlov. According to Pavlov's classical conditioning, they may perceive attaining good grades to appreciation and respect from others and poor grades to be ridiculed and shunned. If they perceive they obtained grades below a set criterion, they may expect a negative response from others, which would be stressful to them.

The fourth factor consists of problems related to an individual's mind as well as physical health. These problems may arise as a concomitant to experiencing personal pressures, adjustment issues, and perceiving a low academic achievement or due to the prevalence of other environmental issues that affect the mental and physical health. These issues may also arise due to an individual's dysfunctional cognitions and behavior that causes him distress.

Students not falling under the category of Unhealthiness are generally happy individuals who engage in healthy coping styles to deal with problems. They are confident in their abilities and have adequate self-concept. They adopt rational beliefs and maintain positive self-esteem and self-efficacy. They maintain a balance between their academic demands and social interests. They sustain a healthy lifestyle and avoid unhygienic behaviors. They have secure interpersonal relations and do not collapse under societal pressures and expectations. They do not

let the problematic areas of their lives influence their quality of life and their wellbeing. They have a positive outlook on life and avoid stress inciting events.

Students who fall into this category engage in an unhealthy lifestyle. They, as claimed before, maybe experiencing pressures and adjustment issues that would affect their health. They are expected to maintain poor social networks and lack adequate social support. They experience stress and anxiety more than other students, as they may not be able to deal with academic pressure and social expectations. They are not organized and lack time management skills. They may entertain a poorly constructed self-concept, influencing their self-worth and lowering their self-esteem and self-efficacy. Due to this, they are unable to focus on their health and do not engage in beneficial behavioral activities. They may not pay much attention to their physical health and may not exercise or eat properly.

This need is also supported by Maslow's physiological need without which the higher needs for love and belongingness and maintaining self-esteem are of no significance to the individual. Thus students, who are not taking proper care of their physical health, may experience mental health problems due to it.

Student's mental health may be affected by their physical health and vice versa, and this phenomenon can be explained in light of the biopsychosocial model. According to Engel, who developed the model, there is a strong relationship between the biological, social, and psychological attributes that influence the health of an individual (1977, 1980). Thus, unhealthy students may experience sleep disturbances (i.e., biological) as they are diligent hard workers (psychological traits) who try to exceed academically (social).

In other words, poor physical health may lead to problems in social performance and the mental health of the individual. This can be explained through a situation where the student does not exercise, so he gains weight (biological). This causes him stress and anxiety (psychological) as he thinks his friends won't want to be with him since he is 'fat' (social). Problems in the social performance of an individual may also lead to inadequate mental health and negatively affect the physical healthiness of the body. For instance, the poor interpersonal relations (social) may cause individual anxiety (psychological) affecting his eating or sleeping patterns (biological).

Thus, the bio psychosocial model provides an explanation to the suggestion that a number of psychosocial factors affect the sleep pattern of a university student (Lund, Reider, Whiting, & Prichard, 2010; Steptoe, O'Donnell, Marmot, Wardle, 2008). Furthermore, Buboltz Jr, Brown, and Soper (2001) have claimed that psychosocial problems may arise due to academic and social demands that may lead to sleep disruption, which may, in turn, form a circle and lead to more psychosocial disturbances continuing the cycle.

Another way of understanding the prevalence of inconsistent sleep styles among university students is through the locus of control. Students with disruptive sleep styles or even problematic interpersonal relationships may believe that their sleep or their complicated social connections are out of their control, which causes them stress. They may perceive their sleep to be controlled by their academic demands; for instance, if they do not stay up all night finishing a project, they may fail. If this continues on for a while, they may even get used to sleeping fewer hours as they may learn the behavior. So even when they do not have a deadline, they are unable to sleep for the appropriate amount of time.

Conflict, while expounding on the dilemma of sleep disturbances, may also explain problems arising in the social environment as well. The individual may be facing trouble making friends at the university as he is shy. The dilemma would develop between forming social networks and fearing having to talk to new people. In this case, it would be an approach-avoidance conflict. Here the current conflict is between the individual's desire to form a social network and a personal shortcoming that creates an obstacle. This may frustrate the individual.

Social problems may also arise by how individuals perceive others' behavior. Heider in 1958 founded the psychological theory of attributions that proposed that individuals may attribute events internally, on the personality or externally, on the environment. The attribution style students engage in may explain how they perceive problems. As the fundamental attribution error predicates, people tend to attribute other's behavior to their personality traits and characteristics. This will raise problems as they may blame the other person for a particular behavior and not empathize with them or understand the circumstances of the action.

The interpersonal relations of the students falling under the category of Unhealthiness may also be a reflection of their attachment styles with their parents during infancy. As per the theory, it is plausible that these

individuals experienced ambivalent or avoidant attachment styles, the consequence of which is that currently, their health suffers due to interpersonal conflicts.

As explained before, children under the care of those parents who are only at times available to the infant, or those who just ignore or reject them, may develop these concerning attachment styles. These may generate negative feelings of unworthiness and insecurity. They may also doubt other people's loyalty and be suspicious in nature, not trusting other people and not relying on them. They may thus find it hard to form strong social connections.

The idea that individuals may question other's intentions and motivations is also suggested in Rotter's model of interpersonal trust. He supposes that people tend to form their opinions regarding whether or not they trust others on the basis of the previous incident. Conclusively an individual who has faced situations where he observed his peers lying or deceiving, he may doubt their intentions and stop trusting them. This may be one of the reasons for his facing social problems.

In the stages of psychosocial development, Erikson theorized the need for intimate relationships during the period of emerging adulthood. If individuals are unable to form strong social bonds, he maintains, they may experience isolation and rejection (Schultz, & Schultz, 2005). The individuals experiencing interpersonal problems and scoring high on UH, may also develop these negative feelings that would, in turn, affect their health.

Social support has been studied by <u>Sanderson (2012)</u> in great detail. She believes that not only the number of social connections an individual maintains is important, but the quality of those connections is also important. Yet, how he perceives his social support to appear to be most significant in the case of an unhealthy student. In this case, it would not matter whether he has four close friends or twenty intimate connections if he does not trust them and does not rely on them.

Conclusively, the individuals scoring high on healthiness may need to be educated to maintain proper hygiene and to develop concern for their physical health. They need to realize how to deal with problematic relations and how to form healthy social bonds.

The four factors of IPIS, Personal Pressure, Poor Adjustment, Low Academic Achievement, and Unhealthiness have been discussed in detail in the light of theories proposed by various scholars. Most of them are interlinked, one theory complementing another, and they may explain more than one factor, however differently.

Assessing the factors from a holistic perspective, it is easy to see how the developmental and transitional factors contribute to the prevalence of problems among the students. The factors inclusively may be a reflection of Darwin's survival of the fittest. Only the individuals who do adapt to the environment and develop behaviors necessary for survival do survive the rest that is unable to do so experience mental health problems.

Implications

The tool constructed helps in filtering out problems that are prevalent among the general student body. It is designed so that they may identify the degree to which these students experience the problems. The screening of problems can later help the administration organize problem intervention or seminars that will educate the students to be able to deal with them appropriate and in a healthy manner. This would improve the mental health of the students, and as a concomitant, their physical health and their academic achievement, and they may be able to improve their quality of life.

Future Research

Further research can be executed regarding the problem's students specify. Correlational studies can be performed with personality traits, locus of control, self-efficacy, attachment styles, academic achievement, and other related constructs. The tool can be used for the development of other tools that measure similar constructs, e.g., factors affecting/affected a university student's performance. The tool can be further refined; the item number can be reduced; an adaptation can be made in the Urdu language, so students who are more comfortable with Urdu are more clearly able to express themselves.

References

- Acharya, S. (2009). Stress among students in developing countries An overview. In K.Oxington (Ed.). Psychology of Stress (pp. 83-100). New York: Nova Science Publishers Inc.
- Andrews, B., & Wilding, J. M. (2004). The relation of depression and anxiety to life-stress and achievement in students. *British Journal of Psychology*, 95(4), 509-521. Retrieved from http://www.researchgate.net/profile/John_Wilding/publication/8192220_The_relation_of_depression and anxiety to lifestress and achievement in students/links/54aaf1a50cf 25c4c472f7072.
- Buboltz Jr, W. C., Brown, F., & Soper, B. (2001). Sleep habits and patterns of college students: a preliminary study. *Journal of American college health*, 50(3), 131-135. Retrieved from https://www.researchgate.net/profile/Franklin_Brown/publication/11593058_Sleep_Habits_and _Patterns_of_College_Students_A_Preliminary_Study/links/09e4150e5e788f0fea000000.pdf
- Burleson, K., Leach, C. W., & Harrington, D. M. (2005). Upward social comparison and self-concept: Inspiration and inferiority among art students in an advanced programme. *British Journal of Social Psychology*, 44(1),109-123. Retrieved from https://www.researchgate.net/profile/Colin_Leach/publication/7840992_Upward_social_comparison_and_selfconcept_Inspiration_and_inferiority_among_art_students_in_an_advanced_programme/links/54f861470cf210398e96599d.pdf
- Dacey, J., & Kenny, M. (1997). The self and identity formation. *Adolescent development*. (2nded.) (pp. 165-174) Dubuque: *Brown & Benchmark Publishers*.
- Dyrbye, L. N., Thomas, M. R., &Shanafelt, T. D. (2006). Systematic review of depression, anxiety, and other indicators of psychological distress among US and Canadian medical students. *Academic Medicine*, 81(4), 354-373. Retrieved from http://medical-mastermind-community.com/uploads/63-Systematic_Review_of_Depression_Anxiety_and.9.pdf
- Ellis, A., Abrams, M., & Abrams, L. (2009). Personality theories: Critical perspectives. California, United Sates of America: Sage Publications.
- Feist, J., &Feist, G. J. (2008). Theories of Personality (7thed.). Retrieved from http://bookzz.org/dl/1225805/791381
- Festinger, L. (1954). A theory of social comparison processes. *Human Relations*, 7, 117-140. Retrieved from http://www2.psych.ubc.ca/~schaller/528Readings/Festinger1954.pdf
- Goodman, J., Schlossberg, N. K., & Anderson, M. L. (2006). Counseling adults in transition: Linking practice with theory (3rd ed.). Retrieved from http://bookzz.org/dl/816796/3968f6
- Hall, G. S. (1904). Adolescence: Its psychology and its relations to physiology, anthropology, sociology, sex, crime, religion, and education, vol. II. Retrieved from http://repositories.tdl.org/ttu-ir/bitstream/handle/2346/47053/ttu_fap001_000010.pdf?sequence=1&isAllowed=y
- Lund, H. G., Reider, B. D., Whiting, A. B., & Prichard, J. R. (2010). Sleep patterns and predictors of disturbed sleep in a large population of college students. *Journal of adolescent health*, 46(2), 124-132. Retrieved fromhttps://www.researchgate.net/profile/J_Prichard/publication/41188763_Sleep_patterns_and _predictors_of_disturbed_sleep_in_a_large_population_of_college_students/links/00b4952ab4988 cad6d000000.pdf
- Paul, E. L., & Brier, S. (2001). Friendsickness in the transition to college: Precollege predictors and college adjustment correlates. *Journal of Counseling & Development*, 79(1), 77-89. Retrieved from http://onlinelibrary.wiley.com/doi/10.1002/j.1556-6676.2001.tb01946.x/abstract
- Saleem, S., &Mahmood, Z. (2013). Risk and Protective Factors of Emotional and Behavioral Problems in School Children: A Prevalence Study. *Pakistan Journal of Psychological Research*, 28(2). Retrieved from http://www.pjprnip.edu.pk/pjpr/index.php/pjpr/article/viewFile/305/303
- Saleem, S., Mahmood, Z., &Naz, M. (2013). Mental Health Problems in University Students: A Prevalence Study. FWU Journal of Social Sciences, 7(2), 124. Retrieved from http://sbbwu.edu.pk/journal/FWU%20Journal%20Vol.7,%20No.2/3.Mental%20Health%20Problems%20in%20University.pdf
- Sanderson, C. A. (2012). Health psychology (2nd ed.). Retrieved from http://bookzz.org/dl/2320906/0e9d99

- Sarma, A. (2014). Parental Pressure for Academic Success in India (Doctoral dissertation, Arizona State University). Retrievedfromhttps://repository.asu.edu/attachments/137354/content/Sarma_asu_0010E_14259.pdf
- Schultz, D., & Schultz, S. (2005). Theories of personality (8thed.). Belmont, United stated of America: Wadsworth Cengage Learning
- Stanley, J. & Manthorpe, N. (2001). Responding to students' mental health needs: Impermeable systems and diverse users. *Journal of Mental Health*, 10(1), 41-52. Retrieved from http://www.tandfonline.com/doi/abs/10.1080/2-09638230020023606
- Steptoe, A., O'Donnell, K., Marmot, M., & Wardle, J. (2008). Positive affect, psychological well-being, and good sleep. Journal of psychosomatic research, 64(4), 409-415. Retrieved from http://www.hi5sleep.com/uploads/2/0/7/4/20745924/positive_affect_psychological_well-being_and_good_sleep.pdf
- Swenson, L. M., Nordstrom, A., & Hiester, M. (2008). The role of peer relationships in adjustment to college. *Journal of College Student Development*, 49(6), 551-567. Retrieved from https://www.researchgate.net/profile/Alicia_Nordstrom/publication/236827033_The_Role_of_Peer_Relationships_in_Adjustment_to_College/links/554cd9db0cf29752ee8172aa.pdf
- Weiten, W. (2012). Psychology: Themes and Variations (9thed.). Belmont, United stated of America: *Wadsworth Cengage Learning*
- Weiten, W., Dunn, D., & Hammer, E. (2014). Psychology applied to modern life: Adjustment in the 21st century (10th ed.). Belmont, United stated of America: *Wadsworth Cengage Learning*.