Dealing with stress and anxiety in a pandemic: A gender perspective

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Abstract- The aim of the study was to investigate how the COVID-19 pandemic impacted the mental health of male and female students. The tools that were used in this study were: COVID-19 student stress questionnaire (Zurlo et al., 2020) and Hamilton anxiety scale (Hamilton, 1959). A total of 140 students participated in this study, consisting of 82 females and 58 males. Gender differences were observed in both psychological measures of stress anxiety. Female participants showed comparatively higher levels of stress and anxiety as compared with that of men.

Keywords: Anxiety, COVID, College students, Gender difference.

I. INTRODUCTION
A global crisis brought on by the COVID-19 pandemic has resulted in significant changes and extreme stress for the general public. All facets of society were impacted by the pandemic since everyone was required to self-quarantine in their houses to stop the virus from spreading. People have been exposed to a wide variety of stressors as a result of the virus, which has led to mental health problems like despair and anxiety (Renner et al., 2018). Anxiety is a state in which one feels uneasy, worried, or apprehensive as though a threat is imminent (Renner et al., 2018). People experience anxiety, as if something bad is about to happen, and are typically accompanied by autonomic symptoms that may linger for a while. It is classified as a subjective emotion without any concrete object (Renner et al., 2018). According to Taylor (2019), there are no particular theoretical frameworks that specifically account for emotional responses during pandemics. But those already dealing with mental health issues have been particularly exposed to the changes.

Depending on certain sociodemographic and health characteristics, COVID-19 may have varying effects on different persons. The results of a poll done in the USA (Anna, 2020), revealed that 48% of respondents felt nervous about getting the coronavirus, added to the anxiety caused by COVID-19. A whopping 62 percent of respondents were concerned that they or a loved one will contract COVID-19 and become extremely ill or die, while about 40 percent shared this concern. More than 36% of respondents reported that the COVID-19 pandemic had a significant negative influence on their mental health, and 59% claimed that the impacts were noticeable in daily life. The pandemic's effects on finances, the scarcity of food, medicine, and other requirements are the respondents' top concerns.

Women were nearly three times as likely than males to report dysfunctional anxiety as a result of COVID-19 (Caycho-Rodríguez, 2021). Furthermore, receiving too much information regarding COVID-19 has also been shown to cause worry and anxiety (Scholten et al., 2020). Similar to this, persons who have COVID-19 and have a relative or friend who has the condition have more dysfunctional anxiety as a result of COVID-19 (Evren et al., 2020; Ozamiz-Etxebarria et al., 2020). Patients who have COVID-19 can experience severe psychological issues as a result of their clinical symptoms, which include fever, coughing, and exhaustion, among others (Duan & Zhu, 2020). Similarly, persons without jobs during the COVID-19 pandemic displayed a sharper decline in mental health (Posel et al., 2021).

Another significant effect of gender is highlighted by stress-related diseases and the long-term effects of COVID-19 on health outcomes. In addition to being a pandemic infectious disease, COVID-19 also serves as a significant stressor, causing millions of people to experience social isolation and anxiety over an extended period of time. Persistent stress exposure is linked to increased vulnerability to and severity of stress-related mental disorders, which affect women more commonly than males and include posttraumatic stress disorder, panic disorder, and severe depression (Hodes et al., 2019). According to the transactional perspective (Lazarus and Folkman, 1984), stress is also seen as a dynamic relational process that depends on the constant interaction between individual factors (such as age and gender) and situational factors. As a result, it’s important to take target populations' particularities into consideration when developing tools to assess perceived sources of pressure.
**I.1. The Current Study**
The Covid-19 pandemic has affected pupils' mental health and made anxiety among them more common. (Salari, N., et al., 2020). The goal of the current study is to comprehend how different genders are affected by mental health in a pandemic scenario. It has been hypothesized that female students will have higher levels of anxiety than male students.

**II. METHOD**

**II.1 Participants**
The sample for this study consisted of 140 students between the age group of 18-23 years (58 males and 82 females) residing in different areas of Punjab and New Delhi. Accidental sampling method was used for the purpose of this research.

**II.2 Tools**
The instruments that were used for research purpose are mentioned below.

**II.3 Hamilton anxiety rating scale (Hamilton, 1959)**
The HAM-A was among the first rating scales created to assess the severity of anxiety symptoms, and it is currently frequently employed in both clinical and academic settings. The 14-item scale evaluates both somatic and psychic anxiety (mental agitation and psychological discomfort) and is made up of 14 items, each of which is characterised by a set of symptoms (physical complaints related to anxiety). Each item is graded from 0 (not present) to 4 (severe), with a total score range of 0-56; 17 denotes mild severity, 18–24 mild–to–moderate severity, and 25–30 moderate–to–severe intensity. The reliability and concurrent validity of the HAM-A and its subscales were found to be sufficient by Maier et al. (1988), who tested the scale's validity and reliability in two samples of 97 anxious and 101 depressed people. There is acceptable inter-rater reliability and good one-week retest reliability.

**II.4 COVID-19 student stress questionnaire (Zurlo et al., 2020)**
For the purpose of measuring student stress during the COVID period, the COVID-19 student stress questionnaire was used. In 2020, Zurlo along with other researchers created the scale. Totaling seven items, the scale is further broken down into three categories: isolation and fear of spreading disease, relationships and academic life, and isolation. From "not at all stressful" to "very stressful," the things are rated on a 5-point Likert scale. Continual frameworks are used for scoring. The scale's score is between 0 and 28. Internal consistency of the questionnaire was acceptable (Cronbach's alpha = 0.71; McDonald's omega = 0.71). Additionally, evidence for both convergent and discriminant validity was shown.

**III. RESULTS**
The complexity of the pandemic's problems, which touch practically every element of life, causes everyone to feel apprehensive, concerned, and scared for their survival. The COVID-19 pandemic has a significant impact on many facets of human existence, including schooling. Formal education has changed from face-to-face instruction in classrooms and institutions to online or virtual learning activities conducted at home. In the present study, it has been hypothesized that female students would score higher in stress and anxiety. Table 1 shows the independent samples t-test for males and females on scores for stress and anxiety. These findings indicate that, there are significant differences in anxiety (t(138) =4.38, p< .000 α=0.01) of males and females. Females are comparatively high in anxiety as compared to males (M=41.65, SD=11.09; M=32.75, SD=12.81). On the other hand, on the measure of stress, males and females are significantly different from each other (t (138) =2.84, p=.005 α=.005). Females show higher scores on stress as compared to males (M=16.79, SD=6.94; M=13.58, SD=6.01).

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<td>Stress</td>
<td>13.58</td>
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<td>Anxiety</td>
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<td>Sig (2- tailed)</td>
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The complexity of the pandemic's problems, which touch practically every element of life, causes everyone to feel apprehensive, concerned, and scared for their survival. The results of the present research support these gender disparities in mental health (Salkind, 2009).
Additionally, it was shown that whereas female respondents with anxiety experienced it at a rate of 87.5 percent, male respondents with anxiety only made up 50.0 percent of the mild anxiety level category (Schaller et al., 2016). Men typically suffer externalizing symptoms (such as aggression or substance misuse), but women typically experience internalizing symptoms, generally brought on by despair and anxiety (Smith et al., 2016). In addition, women are more likely than men to seek emotional assistance when under stress (Kelly et al., 2007).

In relation to educational settings, 5.4 percent of female students and 2.6 percent of male students reported having anxiety in their second year, which was much greater than in their first year of study (Fawzy & Hamed, 2017). Additionally, studies by Gebhard et al., 2020 and Spagnolo et al., 2020, respectively, show that women who live alone experience more severe levels of anxiety than men do. This finding supports the existence of gender differences in the response to COVID, which may be related to women's predominate role as family caregivers and their greater susceptibility to social isolation. These findings provide important new data and substantiate the gender differences identified in regard to the issues that men and women raised during COVID-19, with a particular focus on the effects on the economy and society for men and on the health and well-being of families for women (Van der et al., 2020).

In a nutshell, it is crucial to look at the difference in anxiety levels between male and female students in relation to COVID-19. The present research was done to understand whether gender differences exist in male and female students or not. It has been seen that females are comparatively higher in stress and anxiety in comparison to males. These results along with the previous existing researches (Angst & Dobler-Mikola, 1985; Bruce et al., 2005; Regier et al., 1990) provide strong justifications that gender disparities exist in anxiety and stress levels. The most accurate predictor of anxiety across all stages was gender, with females continually reporting higher levels of anxiety than males, even during the post-peak stage, and lower confidence in COVID-19 control. Excessive protective behaviour and regular exposure to COVID news also had an impact on public anxiety (Wu.Y., et al., 2022). In addition, a study on anxiety discovered that, on social anxiety tests, women performed better than men on average, indicating that women normally experience anxiety at a higher degree than men. 2020 (Tokgozoglu & Canpolat).

REFERENCES:


