

**ASSESSING POST-LOCKDOWN PSYCHOLOGICAL  
PREPAREDNESS FOR RESUMPTION AMONG UNIVERSITY  
STUDENTS IN NIGERIA: THE ROLE OF ANXIETY AND  
SOCIAL SUPPORT**

**Catherine Oluwatoyin Chovwen<sup>1</sup>, Richard Akinjide Adu<sup>2</sup> & Luqman Adekunle  
Morakinyo<sup>3</sup>**

<sup>1,2,3</sup>Department of Psychology, University of Ibadan, Nigeria

\*adurichard3@gmail.com

**ABSTRACT:** Psychological preparedness is critical for one to be able to successfully adapt to life changes/challenges. Previous studies focused more on psychological preparedness during disasters. There is dearth of literature on students' psychological preparedness for changes that may occur in the course of their studies. Therefore, this study examines the role of anxiety and social support in psychological preparedness among university students in Nigeria. Cross-sectional survey design via online questionnaire administration to 676 respondents from 30 universities across the 6 geo-political zones of Nigeria was utilised in this study. The questionnaire comprised of anxiety ( $\alpha = 0.84$ ), social support ( $\alpha = 0.90$ ) and psychological preparedness ( $\alpha = 0.81$ ) scales. Data were analysed using descriptive statistics, Pearson Product Moment Correlation, Hierarchical Multiple Regression Analysis and Analysis of Variance. Participants' age ranged from 17 to 32 years. , 72.6% were males while 94.4% attended public universities. There was significant negative relationship between anxiety and psychological preparedness ( $r = -.15, p < .01$ ). Whereas significant positive association occurred between social support and psychological preparedness ( $r = .23, p < .01$ ). Anxiety and social support jointly predicted psychological preparedness significantly [ $R^2 = .13, F(4,671) = 24.15, p < .01$ ]. There was significant main effect of social support on psychological preparedness among participants, [ $F(1,672) = 13.96, p < .01$ ]. Anxiety and social support jointly predicted participants' psychological preparedness. Low level of anxiety and high level of social support enhanced the psychological preparedness of the participants.

**Keywords:** Anxiety, Social support, Psychological preparedness, Nigerian university students

## **INTRODUCTION**

Change is inevitable in life for everyone. Ability to successfully navigate the change that an individual encounters may depend on whether or not such individual is psychologically prepared for the change. The current global pandemic known as CORONA Virus (COVID-19) had caused tremendous changes in every sphere of human endeavours including the educational sector. The announcement of a global pandemic by the World Health Organization in early March 2020 compelled many countries including Nigeria to closedown public places in which educational institutions were not left out, to limit the spread of the virus from person-to-person. This closedown of educational institutions with the uncertainty of when academic activities will resume again may have impacted on students in different

ways. There is a great concern regarding whether students are psychologically prepared to face the challenges that may come up post COVID-19 school sessions. The unexpected pandemic breakout and associated changes cum challenges make this study on psychological preparedness a compelling and relevant one especially among students.

Psychological preparedness is defined as an intra-individual and psychological state of awareness, anticipation, and readiness- an internal, primed, capacity to anticipate and manage one's psychological response in an emergency situation (Malkina-Pykh & Pykh, 2013). For Australian Psychological Society (APS, 2007), "psychological preparedness entails processes and capabilities such as knowledge, anticipation, recognition, thinking, feeling, decision making, management of one's own thoughts, feeling and action". Psychological preparedness can assist people to think clearly and reasonably, which in turn may assist them to be better equipped for challenge (s) ahead (Reser & Morrissey, 2009). According to Malkina-Pykh and Pykh (2013), psychological preparedness can play an essential role in preparing people for challenges, in handling the stress of the unfolding circumstance, and in reducing the severity of post-incident distress.

Several factors may have an impact on university students' psychological preparedness. In this study, two of these factors, namely anxiety and social support, are taken into consideration.

Anxiety refers to the response to circumstances perceived as stressful or dangerous. It is also a feeling of fear or apprehension about future occurrences. Everyone experiences anxiety at point or the other in their life. It is normal for everyone to experience anxiety, it becomes a problem when an individual feels uncontrollable level of anxiety and this may become a medical condition. Moderate level of anxiety had found to correlate positively with disaster preparedness behaviour (Malkina-Pykh & Pykh, 2013). Lazarus (1991) opined that people with dispositional anxiety seem to appraise any situation as threatening whereas those who are high in trait-anxiety scores are more likely to take adaptive adjustments to disaster.

For Paton, Smith and Johnston (2005), extreme level of anxiety decreases the possibility that people will prepare for disasters. This implies that, high level of anxiety will bring about lower level of psychological preparedness. De Man and Simpson-Housley (1987) found that, high trait anxiety was positively related to perceived threat.

It may be right to say that, overall level of psychological preparedness will be low for highly anxious people and this may reflect in their action to possibly result to selective avoidance strategies and increase their feeling of anticipatory stress and panic.

Social support is defined as the perception and certainty that one is cared for, has assistance accessible from other people, and most especially, that one is part of a supportive social network. Social support may be emotional (e.g., nurturance), informational (e.g., advice), or companionship (e.g., sense of belonging); tangible (e.g., financial assistance) or intangible (e.g., personal advice). The awareness that help is available, the actual assistance received, or the degree to which a person is integrated into a social network are all examples of social support. Support can come from difference sources, including family, friends, neighbours, coworkers, organisations, and many more.

Social support as a construct has been of tremendous interest to researchers across different disciplines including psychology, sociology, etc. For instance, Rao (2006) found that family and friend support is very critical in boosting preparation and readiness among flood victims especially in the aspect of psychology. Having people to turn in critical times may make an individual to be more focused which in turn enhances their psychological preparedness for challenges ahead of them.

Psychological preparedness has been linked to personality factors, though in the context of natural disasters. However, there is a dearth of literature on the role of anxiety and social support on psychological preparedness. Hence, the current study attempts to fill that gap in knowledge by examining influence of anxiety and social support on post-lockdown psychological preparedness among university students in Nigeria.

## **METHODOLOGY**

### **Design**

The study utilized cross-sectional survey design to elicit information on anxiety and social support in relation to psychological preparedness of students for school resumption after the novel COVID-19 lockdown. Data for the study were collected from 676 respondents purposively sampled from thirty (30) universities across the six geo-political zones of Nigeria. All the necessary ethical guidelines were observed; the participants' consent were duly sought, their participation was voluntary and anonymous. The independent variables under consideration were anxiety and social support whereas the dependent variable was psychological preparedness.

### **Participants**

The participants for this study were university students purposively sampled via online survey from thirty (30) universities across the six geo-political zones of Nigeria. The participants age ranged from 17 to 32 with mean age of 22.22 (SD = 2.50). Five hundred and fifteen (76.2%) of the participants were male and 161 (23.8%) female. Regarding institution type, 38 (5.6%) of the participants currently attend private universities whereas 638 (94.4) public universities. As per religious affiliation, 1 (0.1%) was agnostic, 1 (0.1%) ATR, 503 (74.4%) Christianity, 1 (0.1) Eckankar and 170 (25.1%) Islam. The respondents were asked further to indicate how they finance their education, 9 (1.3%) of them financed their education through government, 455 (67.3%) parental sponsorship, 88 (13%) parental sponsorship and government and 124 (18.3%) self sponsored.

### **Instruments**

Three validated scales were used for data collection on the independent and the dependent variables.

**Demographics:** The researchers tapped the relevant demographic information such as; age, sex, university type and sponsorship from the participants for the purpose of the study.

### **Anxiety**

Anxiety was measured in this study with a 7-item anxiety scale developed by (Spitzer, Kroenke, Williams & Lowe, 2006). The scale was constructed to measure generalized anxiety disorder. The scale has adequate psychometric properties. Johnson, Ulvenes, Øktedalen and Hoffart (2019) reported Cronbach's alpha of 0.88 for the scale. Cronbach's alpha of 0.84 was reported in the present study by the researchers. Each of the seven items of the scale was scored on a four-point Likert scale (0-3) with a possible total scores ranging from 0 to 21. Participants who scored within the mean or above the mean were considered to be high on anxiety, while respondents who scored below the mean were considered low on anxiety.

### **Social Support**

The Multidimensional scale of perceived social support developed by (Zimet, Dahlem, Zimet & Farley, 1988) was utilised to measure social support in this study. It was a 12-item self-reported scale and scored on a seven-point Likert scale (1-7) with a possible total scores ranging from 12 to 84. The scale has good psychometric properties. Zimet, Powell, Farley, Werkman and Berkoff (1990) reported coefficient alpha of 0.84 to 0.92 for the scale. Cronbach's alpha of 0.90 was reported in the present study. Participants who scored within the mean or above the mean were considered to be high on social support, while respondents who scored below the mean were considered low on social support.

### **Psychological Preparedness**

Psychological Preparedness was assessed using a 10-item psychological preparedness scale adapted from Zulch (2019) Psychological Preparedness for Disaster Threat Scale (PPDTS). The scale was self-rated with five-point Likert from ranging from "strongly disagree" to "strongly agree". The scale showed internal consistency ( $\alpha = 0.93$ ) with an alpha coefficient of 0.81 for the present study. High scores on the scale depict high psychological preparedness and low scores denote low psychological preparedness.

### **Data Analysis**

Both descriptive and inferential statistics were employed in the data analysis of the study. Frequency and percentages were used to describe the demographic information of the participants. Pearson product moment correlation, multiple regression and ANOVA were used to assess the influence of anxiety and social support on psychological preparedness.

## RESULTS

**Table 1: Summary Pearson Product Moment Relationship among Variables of Study**

Variables	1	2	3	4	5	6	7
1 Age	-						
2 Gender	.23**	-					
3 University type?	.15**	.12**	-				
4 Sponsorship	.19**	.06	.11**	-			
5 Anxiety	.05	-.11**	.05	.01*	-		
6 Social Support	.06	.002	-.01	-.13**	-.22**	-	
7 Psychological Preparedness	.17**	.23**	-.03	.003	-.15**	.23**	-

N = 676; \*p<0.05; \*\*p<0.01

Significant negative associations occurred between anxiety and psychological preparedness ( $r = -.15$ ,  $p < .01$ ), while positive association occurred between social support and psychological preparedness ( $r = .23$ ,  $p < .01$ ). Similarly, significant positive relationship existed between age and psychological preparedness ( $r = .17$ ,  $p < .01$ ); and between gender and psychological preparedness ( $r = .23$ ,  $p < .01$ ). However, no significant relationship between university type and psychological preparedness ( $r = -.03$ ,  $p > .05$ ), between sponsorship and psychological preparedness ( $r = .003$ ,  $p > .05$ ).

**Table 2: Summary of Hierarchical Multiple Regression Showing Influence of Anxiety and Social Support on Psychological Preparedness**

Model	Variables	Beta	t	P	R	R <sup>2</sup>	F	P
1	Age*	.13	3.32	< .05	.264	.07	25.15	< .01
	Gender*	.20	5.33	< .01				
2	Age*	.12	3.22	< .05	.355	.13	24.15	< .01
	Gender*	.20	5.22	< .01				
	Anxiety	-.09	-2.42	< .05				
	Social Support	.20	5.39	< .01				

\* Control variable

The result shows significant joint predictive influence of anxiety and social support on psychological preparedness  $R^2 = .13$ ,  $F(4,671) = 24.15$ ,  $p < .01$ . The result also indicates that 13% variance of psychological preparedness among the participants is accounted for by anxiety and social support. While the remaining 87% were accounted for by variables not covered in this study. The results also indicate that anxiety ( $\beta = -.09$ ) and social support ( $\beta = .20$ ) have significant independent influence on psychological preparedness.

**Table 3: Summary of 2X2 ANOVA Showing Main and Interaction Effects of Anxiety and Social Support on Psychological Preparedness**

Source	SS	df	MS	F	P	Partial Eta Squared
Anxiety	271.94	1	271.94	7.12	< .01	.010
Support	533.37	1	533.37	13.96	< .01	.020
Anxiety * Support	73.73	1	73.73	1.93	> .05	.003
Error	25674.35	672	38.21			
Total	861974.00	676				

a. R Squared = .034 (Adjusted R Squared = .030)

The result shows that there is significant main effect of anxiety on psychological preparedness among participants [ $F(1,672) = 7.12, p < .01$ ]. The result revealed further that, participants who scored low ( $\bar{x} = 35.66$ ) on anxiety reported higher psychological preparedness than participants who scored high ( $\bar{x} = 34.29$ ) on anxiety. Also, there is significant main effect of social support on psychological preparedness among participants [ $F(1,672) = 13.96, p < .01$ ]. Observation of the mean scores indicated that participants scored high ( $\bar{x} = 35.91$ ) on social support reported higher psychological preparedness than participants who scored low ( $\bar{x} = 34.03$ ) on social support. However, there is no significant interaction effect between anxiety and social support on psychological preparedness [ $F(1,672) = .17, p > .05$ ].

## DISCUSSION

Finding revealed that, participants who received high social support tended to be more prepared psychologically than students who received low or no social support. This is because participants who received support from family and friends are more likely to be prepared for a new challenge that the outbreak of COVID-19 may bring forth. In particular those that are provided with the necessary support during the period are likely to have had more exposure and thus be more mentally prepared.

The finding that social support is related to psychological preparedness is consistent with the finding of (Munich, 2014). Munich (2014) conducted a qualitative inquiry study of undergraduate and graduate nursing students, who were studying part-time, working and raising children and that almost every student identified husbands, children and extended family as providing instrumental support, releasing the students to use their limited time to study. Also, families provided emotional and affirmational support by telling the students they believed the students could succeed.

Further, the finding that anxiety is related to psychological preparedness is consistent with the findings of Yazdi and Zandkarimi (2013) and (Abdous, 2019) who investigated the role of anxiety on preparedness for e-learning and found that anxiety influenced preparedness for e-learning significantly. The reason for this kind of finding is that, low level of anxiety may prepare an individual for challenge (s) ahead.



### **Conclusion**

It is established in this study that social support and anxiety influenced post-lockdown psychological preparedness for resumption among university students in Nigeria. Therefore, social support should be given to students to boost their psychological preparedness during post-lockdown resumption. Also measures should be put in place to reduce anxiety among students in order their psychological preparedness.

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### **Declaration of interest statement**

The authors declare that, there is no conflict of interest

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