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**SCHOOL FACTORS AS PREDICTORS OF ANXIETY DISORDER AMONG
LEARNERS WITH HEARING IMPAIRMENT IN IBADAN, OYO STATE,
NIGERIA**

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Abstract

Anxiety disorders are the most common, or frequently occurring, mental disorders. It occurs when anxiety gets out of control and starts to affect everyday life. However, students with hearing impairment with an anxiety disorder have very strong feelings of worry, uneasiness or fear. But previous research has reported that rates of overall anxiety in students with hearing impairment are elevated compared with hearing students. Therefore, this study examined how school factors predict anxiety disorder among students with hearing impairment. This study utilized correlational survey research design to determine the relationships between the variables. Purposive sampling technique was used to select three local government areas in Ibadan metropolis where schools for the deaf are available. A secondary school from each of the three local government areas was also purposively selected. From each of the schools, J.S.S 3 to S.S.3 students within the age range of 14 to 18 were randomly selected. In each class, all students with hearing impairment were randomly selected. A total of 90 students were selected. School Factors Scale (SFS) and Anxiety Disorder Scale (ADS) were the instruments used to gather the research data. The research questions were analysed using multiple regression analysis at 0.05 level of significance. Findings showed that the joint contribution of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments were significant ($F_{(2, 87)} = 17.14; p < 0.05$). Also, the relative contribution of

teacher-students interaction ($\beta = 0.522$; $t = 4.39$; $p < 0.05$) was significant with 15.8% contribution, while the relative contributions of classroom environment ($\beta = 0.014$; $t = 0.121$; $p > 0.05$) was not statistically significant. There was positive teacher-student interaction, decreased anxiety disorder among students with hearing impairments. It was therefore recommended that schools should provide more conducive environment to students with hearing impairment, to reduce the risk of anxiety disorder.

Keywords: School factors, Anxiety disorder, Hearing impairment, Oyo State

Introduction

Anxiety is characterized by worry, phobia, fear of different situations such as social situations, and avoiding whatever is feared (Helland & Mathiesen, 2009). It is reported as a prevalent mental health problem among students with hearing impairment and is an undertreated health concern (Siegel & Dickstein, 2012). It can either be specific to certain situations or events; such as social anxiety which affects students with hearing impairment ability to meet new people and speak in front of large groups, and so affect a wide range of everyday life occurrences. Anxiety is often accompanied by physical symptoms such as restlessness, fatigue, poor concentration, irritability and or insomnia (Green, McGinnity, Meltzer, Ford & Goodman, 2005).

Anxiety disorders are the most common, or frequently occurring, mental disorders (Munir, Gondal & Takov 2019). These disorders describe a group of related mental illnesses. A very common myth is that anxiety disorders are the same thing as problems with stress. Anxiety and stress problems can have a lot in common. The difference is that in an anxiety disorder, the symptoms are extreme and do not leave even when the stress is over (Canadian Mental Health Association, 2013). Everyone experiences anxiety (National Alliance on Mental Illness, 2015). However, when feelings of intense fear and distress are overwhelming and prevent us from doing everyday things, an anxiety disorder may be the cause (National Alliance on Mental Illness, 2015). Anxiety disorder is defined as a neurosis characterized by anxious over concern and associated with somatic symptoms frequently. It affects the manner in which students with hearing

impairment behave and feel. A severe form of anxiety can be extremely debilitating, having a serious effect on students with hearing impairment daily life (Martin, Ressler and Binder 2009).

Furthermore, Anxiety disorder occurs when anxiety gets out of control and starts to affect everyday life. They are the most common mental health problem around the world; around 1 in every 3 persons will have an anxiety disorder at some point in life. Students with hearing impairment with an anxiety disorder have very strong feelings of worry, uneasiness or fear. They are more anxious than most people would be in the same situation. They may go out of their way to avoid things, people, events or places that make them anxious. These disorders most often start when people are teenagers. They are also more common among people who were neglected/abused as children, or who are neglected/abused as adults. However, it is not necessary to suffer trauma to have anxiety. For some people, stress from different sources can build up over time, for example, stressful events at home, work, and in relationships, until the worry and distress develop into an anxiety disorder (Andrews, Caroline & Gregory. 2018).

According to Mind (2021), some commonly diagnosed anxiety disorders include: Generalized Anxiety Disorder (GAD), Social Anxiety Disorder (SAD), Panic Disorder, Phobias, Post-traumatic Stress Disorder (PTSD), Obsessive-compulsive Disorder (OCD), Health Anxiety, Body Dysmorphic Disorder (BDD) and Perinatal Anxiety. These disorders comprise a heterogeneous group of disorders and each of these disturbances has a different etiology and outcome, and different physiological characteristics. Depending on actual classification rules according to the DSM 5 (2013), panic attacks and panic disorder, phobias, social phobia, and generalized anxiety disorder are summarized in anxiety disorders. In contrast to former classifications, post-traumatic stress disorder and obsessive compulsive disorder are no longer included, despite the fact that anxiety is a relevant dimension of these disorders; anxiety has to be differentiated from fear and the so-called stress responses (Wiedemann, 2015).

Generalized anxiety disorder involves excessive, unrealistic worry and tension, even if there is little or nothing to provoke the anxiety (Sabina, 2015). It is relatively common, with lifetime prevalence rates of 4-7%. It is a disorder of chronic uncontrollable worry, compounded by physiological symptoms such as disturbed sleep,

muscle tension, and difficulty concentrating. The disorder is associated with seriously impaired social and occupational functioning, comorbidity with other disorders, and increased risk for suicide (Nepon, Belik, Bolton & Sareen, 2010).

Among the proposed risk factors for anxiety are cognitive and functional impairments, poorer social support networks, loneliness, and traumatic events (Vink, Aartsen & Schoevers, 2008). All of these risk factors are associated with hearing impairment (Fellinger, Holzinger and Polland, 2012; Schild & Dalenberg, 2012). Hearing impairment can impair verbal communication, increasing social exclusion and loneliness and exacerbating existing cognitive and functional impairments. It can also lead to greater dependence on others, increasing vulnerability to neglect, discrimination or abuse. It is possible that students with hearing impairment may feel a greater sense of threat in challenging situations, if they are less able to understand what is happening or communicate their needs. Previous research has reported that rates of overall anxiety in students with hearing impairment are elevated compared with hearing students. (Fellinger, Holzinger & Polland, 2012). Hearing impairment can have a profound effect on people's mental health and alter some psychological and social disorders (Zarafshan, Mohammadi & Salmanian, 2015; Adigun, 2017). Some psychological conditions such as depression, anxiety, and personality disorders can even lead to serious outcomes such as self-harm and suicide attempts (Khezeil, 2021), especially in students with hearing loss (Ogunwale, 2016; Turner & Kapur, 2007). Anxiety is one of the most common disorders associated with hearing loss (Ariapooran & Khezeli, 2021).

Generalised Anxiety Disorder is the most common anxiety disorder encountered in students (Tassin, Reynaert, Jacques & Zdanowicz, 2014; Raleigh, 2019), with a prevalence rate of 9.1% but which can be as high as 13% (Brook & Schmidt, 2008; Sweeney, Warner, Brice, Stewart, Ryan, Loeb & McGrath, 2015). Prior studies found that hearing loss and anxiety disorder are linked due to their intertwined nature (Eleuteri, Forghieri, Ferrari, Marrara, Monzani & Rigatelli, 2010). Hearing loss can prevent people from being exposed to socially challenging circumstances resulting in isolation which significantly impinges upon their quality of life and mental health (Mumtaz & Saqulain, 2020).

Hearing impairment creates situations that can irritate people because of the limitations the individuals has in hearing, sometimes, they cannot hear well or may miss clues that allows to know if someone is about to talk or has not finished conversing, and end up interrupting. Therefore, hearing impairment can make the people affected felt left out or socially unskilled (Ehrenfeld, 2021). It is estimated that 15% to 30% of students with hearing impairment are diagnosed with an anxiety disorder prior to adulthood (Freid, Stroeh, Elkins, Steinberg, Albano & Rynm, 2017).

Research suggests that anxiety disorders are largely undertreated (Cartwright-Hattohasn, Roberts, Chitsabesan, Fothergill & Harrington 2004; Siegel & Dickstein, 2012). Anxiety disorders does not just go away, and the consequences often include loneliness, low self-esteem, reduced success in school, depression, and substance misuse. Individuals with anxiety disorders have difficulties in interpersonal relationships (family and social interactions), low self-esteem, low school performance, school dropout, and impairment in memory, perception, and thinking processes. (Estanislau & Bressan, 2014). Untreated anxiety disorders can push students with hearing impairment into avoiding situations that trigger or worsen their symptoms. People with anxiety disorders are likely to suffer from depression, and they also may abuse alcohol and other drugs in an effort to gain relief from their symptoms. School work, and personal relationships can also suffer (Sabina, 2015). The quality of life of these people is degraded. In rare cases, this disorder, normally present in very specific situations, such as speaking in front of an audience or eating in public, while in most cases, can be generalized to all situations of social interaction and performance in public (Blöte, Kint, Miers & Westenberg, 2009). Anxiety disorder is among the most prevalent mental health problems; contributes to the development of other psychiatric disorders, such as depression; and is challenging to treat (Rodebaugh et al., 2004; Acarturk et al., 2009; Mathew et al., 2011; Neubauer et al., 2013; Craske et al., 2017; Stein et al., 2017). Those with elevated levels of anxiety disorder tend to experience substantial distress and impairment and are more likely to develop psychopathology (Merikangas et al., 2002).

However, this study will identify how school factors can be responsible for Anxiety disorder. These school factors are classroom

environment and teacher-student interaction among other relevant variables. The school is the place where students with hearing impairment spend most of their daily time, interacting and socialising with others. It is the natural social setting for them. However, it is also in this socio-temporal space that the student with hearing impairment behaviour is influenced. In fact, the characteristics of the school may impact on the ways in which the students with hearing impairment behave with others (Belle, 2017). Schools play a vital role in developing the life skills of students with hearing impairment. The degree to which they are able to establish and maintain satisfactory interpersonal relationships, gain peer acceptance, establish and maintain friendships, and terminate negative or pernicious interpersonal relationships defines social competence and predicts adequate long-term psychological and social adjustment (Gresham, Sugai, and Horner, 2001).

According to Byoung-Suk (2012) students with impairment need safe, healthy and stimulating environment in which to grow and learn. This also includes the classroom environment, students with hearing impairment needs stimulating classroom environment to develop appropriate skills. The issues surrounding students with hearing impairment within the school which may lead to anxiety disorders include: poor study habits, lack of resource materials, poor school climate, indiscipline, inadequate facilities, teachers' ineffectiveness, the teaching method and the type of learning environment available for both the students and the teachers (Ajewole & Okebukola, 2009).

The teacher–student interaction, the most important aspect of the classroom environment, has been associated with student with hearing impairment learning outcomes and social-emotional development (Barile, 2012; Wentzel, 2002). A positive teacher–student interaction as an external factor of motivational adjustment, contributes to learning outcomes (Ma et al., 2018). This affects students with hearing impairment perception of themselves, with possibly self-efficacy being an important indicator. Motivational theories suggest that motivational beliefs may not only be related to learning outcomes, but also affect students' perceptions about learning (Akin & Kurbanoglu, 2011; Shores & Shannon, 2010). Negative perceptions toward learning and anxiety have been shown to be

associated with worse learning outcomes (Maloney & Beilock, 2012; Ramirez, Chang, Maloney, Levine & Beilock, 2016; Ramirez, Gunderson, Levine & Beilock, 2012).

Objectives

The study was guided by the following objectives:

1. Determine the joint contributions of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments.
2. Determine the relative contribution of classroom environment and teacher-students interaction on anxiety disorder among students with hearing impairments.
3. Determine which of the school factors (classroom environment, teacher-students interaction) will predict most on anxiety disorder among students with hearing impairment.

Research Questions

1. What is the joint contributions of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments?
2. What is the relative contribution of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments?
3. Which of the school factors (classroom environment, teacher-students interaction) will predict most on anxiety disorder among students with hearing impairment?

Methodology

This study utilized correlational survey research design to determine the relationships that exists between the variables. Purposive sampling technique was used to select three local government areas in Ibadan metropolis. This was because all the local government areas of choice are parts of the local government areas in Ibadan metropolis where schools for the deaf are available. A secondary school from each of the three local government areas were also purposively selected. From each of the schools, J.S.S 3 to S.S.3 students within the age range of 14 to 18 were randomly selected. In each class, all students with hearing impairment were randomly selected. A total of 90 students were

selected. School Factors Scale (SFS) and Anxiety Disorder Scale (ADS) were the instruments used to gather the research data. The research questions were analysed using multiple regression analysis at 0.05 level of significance.

Findings

1. What is the joint contributions of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments?

Table 1.0: Joint contribution of school on anxiety disorder among students with hearing impairments

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	354.387	2	177.193	17.143	.000 ^b
	Residual	899.269	87	10.336		
	Total	1253.656	89			

R = 0.532^a R² = 0.283 Adj R² = .266

a. Dependent Variable: Anxiety_disorder

b. Predictors: (Constant), Teacher_student, Classroom_environment

Table 1.0 revealed that the joint contribution of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments. The model summary revealed independent variables; classroom environment, teacher-students interaction when combined, have positive relationship with anxiety disorder among students with hearing impairments ($R = 0.532$). This indicates that school factors are good determinants of anxiety disorder among students with hearing impairments. Also, the coefficient of determination, indicates that the independent variables (classroom environment, teacher-students interaction) jointly accounted for about 8.01% of the total variance in the dependent variable ($R^2 \times 100 = 8.01\%$). This implies that the remaining 91.99% of the variance in the dependent variable is due to other factors not examined in this study. More so, the F-ratio in the ANOVA result reveals the fact that the joint contribution of classroom environment, teacher-students interaction to the dependent variable

(anxiety disorder among students with hearing impairments) is statistically significant ($F_{(2, 87)} = 17.14$; $p < 0.05$).

2. What is the relative contribution of school factors (classroom environment, teacher-students interaction) on anxiety disorder among students with hearing impairments?

Table 2.0: Relative contribution of school on anxiety disorder among students with hearing impairments

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Correlations		
	B	Std. Error	Beta			Zero-order	Partial	Part
1 (Constant)	7.708	3.696		2.086	.040			
Classroom environment	.035	.291	.014	.121	.904	.352	.013	.011
Teacher_student Interaction	.385	.088	.522	4.385	.000	.532	.425	.398

a. Dependent Variable: Anxiety_disorder

Table 2.0 shows the relative contribution of classroom environment, teacher-students interaction to dependent variable, anxiety disorder among students with hearing impairments. The table shows that teacher-students interaction has the highest positive relative contribution ($\beta = 0.522$). The result further showed that the contribution of teacher-students interaction is 15.8%, while classroom environment is 0.01%. However, table 2.0 shows that the relative contribution of teacher-students interaction ($\beta = 0.522$; $t = 4.39$; $p < 0.05$) was statistically significant, while the relative contributions of classroom environment ($\beta = 0.014$; $t = 0.121$; $p > 0.05$) was not statistically significant.

3. Which of the school factors (classroom environment, teacher-students interaction) predicted most on anxiety disorder among students with hearing impairment?

Table 2.0 shows that teacher-students interaction predicted most on anxiety disorder among students with hearing impairment ($\beta = 0.522$; $t = 4.39$; $p < 0.05$).

Discussion of Findings

School Factors and Anxiety Disorder among Students with Hearing Impairment

Analysis from research question one revealed that classroom environment, teacher-student interaction when combined, have positive relationship with anxiety disorder among students with hearing impairments. This indicated that school factors are good determinants of anxiety disorder among students with hearing impairments. The result also revealed the fact that the joint contribution of classroom environment, teacher-students interaction to the dependent variable (anxiety disorder among students with hearing impairments) was statistically significant. This was in line with the findings of Gresham et. Al., (2001) that the school plays a vital role in developing the life skills of students with hearing impairment. They opined that the degree to which they are able to establish and maintain satisfactory interpersonal relationships, gain peer acceptance, establish and maintain friendships, and terminate negative or pernicious interpersonal relationships defines social competence and predicts adequate long-term psychological and social adjustment. Also, the characteristics of the school may impact on the ways in which the students with hearing impairment behave with others (Belle, 2017). According to Byoung-Suk (2012), students with impairment need safe, healthy and stimulating environment in which to grow and learn. This finding was also buttressed by Freid et. al., (2017) that about 15% to 30% of students with hearing impairment are diagnosed with an anxiety disorder prior to adulthood.

Classroom Environment, Teacher-Students Interaction and Anxiety Disorder among Students with Hearing Impairments

The table revealed that teacher-student interaction has the highest positive relative contribution. The result further revealed that the contribution of teacher-student interaction was 15.8%, while classroom environment was 0.01%. However, the relative contribution of teacher-

student interaction was statistically significant, while the relative contributions of classroom environment was not statistically significant. This showed that teacher-student interaction predicted most on anxiety disorder among students with hearing impairments. This prediction implied that, has teacher-student interaction positively improved, anxiety disorder decreased among students with hearing impairments. According to Ma et al., (2018), a positive teacher–student interaction as an external factor of motivational adjustment, contributed to learning outcomes. This affects students with hearing impairment perception of themselves, with possibly self-efficacy being an important indicator. Barile (2012) is also of the opinion that teacher–student interaction, the most important aspect of the classroom environment, has been associated with student with hearing impairment learning outcomes and social-emotional development.

Conclusion

Students with hearing impairment with an anxiety disorder have very strong feelings of worry, uneasiness or fear. They are more anxious than most people would be in the same situation. This disorder is often traced to school factors, such as classroom environment and teacher-student interaction among other relevant variables. However, school factors have been found to be good determinants of anxiety disorder among students with hearing impairments. More especially, has teacher-student interaction positively improved, anxiety disorder decreases among students with hearing impairments.

Recommendations

Based on the findings of the study, it was recommended that:

1. The school should provide more conducive environment to students with hearing impairment, to reduce the risk of anxiety disorder.
2. Teachers should be encouraged to promote positive interaction with students. with hearing impairment.
3. Hearing impaired students should be encouraged to interact frequently with their teachers to prevent anxiety disorders.

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