

**A study on the Anxiety Among Students During the
Covid-19 Pandemic**

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Requirements for the Master of Business Administration**

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DECLARATION

I hereby declare that the case study is based on my original work except for quotations and citations that have been duly acknowledged. I also declare it has not been previously or concurrently submitted for any other degree at Universiti Tun Abdul Razak (UNIRAZAK) or other institution.



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Completing this research was a challenging task for me. However, fortunately, I get the help of many parties until I have done this task successfully. All parties involved in completing this research kept me motivated and on the course during all those moments when things did not go as planned.

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LIST OF ABBREVIATION

APA	: American Psychological Association
COVID-19	CORONAVIRUS DISEASE 2019
ETB	: Ethiopian birr
GAD-7	: General Anxiety Disorder-7
KKRC	: Kota Kinabalu Regional Center
MCO	: Movement Control Order
SPSS	: Statistical Package for Special Science
WHO	: World Health Organization

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ABSTRACT

This study is a review of a study on the anxiety among students during the COVID-19 pandemic, in which this study will determine the relationship between year of studies and the level of anxiety, the relationship between academic-related concerns and the anxiety among university students, and the relationship between health-related concern and the level of anxiety among university students. The researcher carried out the research at SIDMA College, which serves as the UNIRAZAK regional center, to determine the factors associated with anxiety levels among students during the COVID-19 pandemic. The method used in this study is a quantitative approach. The statistical methods that were used to perform this research in order to achieve its purpose and hypotheses were Chi-square for the first hypothesis and Pearson Correlation for the second and third hypotheses, respectively. From this study, it was found that there is a there is a relationship between the year of studies and the level of anxiety among students. ($X^2(26, N=152) = 127.89, p < .05$). There is a positive relationship between academic related-concern and the level of anxiety ($r = .221^{**}, p\text{-value} = .006$) and also there a positive relationship between health related-concern and the level of anxiety ($r = .284^{**}, p\text{-value} = .000$). In conclusion, the researchers proposed to study the awareness of the society, institutions and also government regarding on the consequences for students' academic and mental health.

CHAPTER 1

INTRODUCTION

1.0 INTRODUCTION

This chapter discusses the study's context, which is the preceding COVID-19 pandemic and how it impacted Malaysia's educational system, particularly in determining what elements were associated with the level of anxiety among students at UNIRAZAK KKRC during the COVID-19 pandemic.

1.1 RESEARCH BACKGROUND

In late December 2019, the first outbreak of the novel coronavirus infection (COVID-19) was spotted in Wuhan, China. The World Health Organization declared a pandemic on March 11, 2020, due to the virus's rapid spread worldwide (Villani *et al.*, 2021). Coronavirus Disease 2019 (COVID-19) continues to devastate almost every country globally. According to a report published by Villani *et al.*, (2021) as of November 18, 2021, there have been 5.1 million deaths and 255.7 million illnesses. The virus has a diverse impact in different nations because of the health system, environment, herd immunity, public response and government measure.

On January 24, 2020, the first covid-19 case was confirmed in Malaysia, and cases continued to emerge until February 2020. After March 14, there was a significant spike in covid-19 instances, which was believed to be linked to a religious gathering in Kuala Lumpur. The event drew around 16,000 people, with attendees rising over the next two months. According to Irfan *et al.*, (2021) research, Malaysia had 2.56 million confirmed cases, 2.5 million recovered cases, and 29,837 deaths as of November 18, 2021, because of better policies and public reactions. On March 18, 2020, Malaysia's government promptly issued the Movement Control Order (MCO), which was later

withdrawn in August 2020 and re-enacted in September 2020 until the recent transition to the endemic phase, which took effect on April 1, 2022. (Kaos, 2020).

All gatherings were outlawed during the MCO period, including religious services and universities. Almost all public and private Malaysian universities transitioned from physical to virtual teaching mediums. Each country has undertaken a variety of health, fiscal, and governmental strategies to counteract the covid-19's detrimental consequences. Because of the potential for death from covid-19, isolation, and lockdown, the unexpected shift in teaching methods has heightened anxiety and generated enormous stress for both the public and pupils. Students' depression and abnormal stress have affected their academic performance and have also been related to an increase in self-injury and suicide attempts. As a result, it's vital to keep track of students' mental health and discover the dangers and preventative factors associated with anxiety and other mental health issues.

Therefore, the researcher chose Malaysia as a case study country because of the greater possibilities for data collecting. Second, a most previous study has concentrated on the impact of COVID-19 on paramedical staff, international students, patients, and even the public, while Malaysian university students have been overlooked. Because of cultural norms, shifting public behaviour patterns, varied countries' economic and political frameworks, and current government policies and legislation to counteract COVID-19, the psychological impact of COVID-19 differs by country. As a result, research into the level of anxiety of COVID-19 in Malaysian university students is required and valuable.

The researcher expects that the findings may assist Malaysian colleges and universities develop a theoretical foundation for assessing psychological well-being and identifying evidence-based psychological intervention measures to support students in future pandemics. It should also give policymakers advice on mitigating the effects of anxiety on students amid health crises.

1.2 PROBLEM STATEMENT

According to the Encyclopedia of Psychology (2000), anxiety is the feeling of anxious thoughts, tension, and physical changes such as increased blood pressure. In the meantime, they may have physical symptoms such as shaking, sweating, a racing heart, or disorientation. People with anxiety disorders may have intrusive thoughts or concerns, and they may avoid specific situations because they are worried, according to the American Psychological Association (2022).

Wang *et al.*, (2020) conducted a survey on student anxiety during the Covid-19 pandemic. They found out that majority of respondents (n=1443 or 71.26 %) stated the outbreak had worsened their stress and anxiety levels. According to most students, the epidemic was causing tension and anxiety among their peers (n=1982, or 97.83%). Aside from general comments about the pressures, the respondents reported how bad the effects were based on specific academic, health, and lifestyle issues. Son *et al.*, (2020) found similar results, with most students (n=138, or 71% of the 195 students) reporting more significant stress and worry because of the COVID-19 epidemic.

Anxiety is a mental health disorder with no identifiable cause that usually requires more than just lifestyle changes to cure (Johnston, 2022). When there is a public health emergency, students' mental health is affected, and they need help, support, and attention right away from the community, their families, and academic institutions. The government and schools collaborate to address this issue, ensuring that students suffering from a crisis receive high-quality, prompt psychological care (Pragholapati, 2020). COVID-19 poses a significant threat to human life and health due to its rapid spread, vigorous transmission, death in severe cases, and lack of particular medicines. It also has a substantial impact on the public's mental health, resulting in various emotional problems. As a result, the COVID-19 outbreak is expected to trigger public psychological emotions such as anxiety, fear, and tension, leading to psychological diseases such as suicide, post-traumatic, acute stress disorder, and depression.

During their university experience, many students seek social interaction. According to Schlesselman *et al.*, (2020), researchers have found programmes that have improved mental health, virtual group exercise and meditation or mindfulness classes, accountability partners and exercise challenges, and counselling visits or telemedicine are just some of the options. The has study expressed anxiety and a sense of isolation, and these group gatherings may help them feel less isolated. Universities can continue to build mechanisms that allow students to engage in safe social interactions. Digital interventions may include automated and integrated therapeutic interventions, such as applications and online programmes, calls or text messages to reach people with limited digital resources, suicide risk assessments, chatlines and forums, and other technologies to passively or actively monitor risk for students with clinical levels of depression or anxiety and a chance of self-harm.

Worship places, gyms, yoga studios, cafeterias, and classes can all be accessed over the internet or held outside in pleasant weather on a schedule similar to that which existed before the pandemic. Other recent achievements include making it easier to share recipes, books, and podcasts online and virtual movies, games, quizzes, and happy hour nights. Supportive student organizations organizing these online social events could speed up their availability. Moreover, this also can be supported by Browning *et al.*, (2021), who found that during COVID-19's early stages, students' opportunities for socializing decreased considerably. As a result, appropriate efforts to recognize and address mental health issues among students, especially during a pandemic, are essential because failure to do so may cause the students' health and education to suffer long-term consequences.

1.3 RESEARCH QUESTIONS

The following research questions are developed for better understanding:

- I. What is the relationship between year of study and the level of anxiety among students?

II. What is the relationship between the academic-related concern and the level of anxiety among students?

III. What is the relationship between the health-related concern and the level of anxiety among students?

1.4 RESEARCH OBJECTIVES

The following are the study's specific objectives:

I. This study will identify the relationship between year of studies and the level of anxiety among students.

II. To determine the relationship between the academic-related concern and the level of anxiety among students.

III. To determine the relationship between health-related concerns and the level of anxiety among students.

1.5 SCOPE OF STUDY

This research focuses on the factors associated with students' anxiety during the COVID-19 pandemic at UNIRAZAK KKRC. To be specific, these studies put limits only on students.

1.5.1 LEVEL

The year of study distribution for the respondents can be classified as fresh, which refers to the first year of the student, junior refers to the second year of study, and senior refers to the student who is in the third year above. This study's objective is to determine if there is a relationship between the year of study and the level of anxiety among students about the covid-19 pandemic. Following that, COVID-19 has impacted the entire Malaysian population, regardless of age.

1.5.2 AREA

This research shows the dynamics of the factor associated with student anxiety during the COVID-19 epidemic in UNIRAZAK KKRC, whereby it can be classified from the demographic, academic-related concern, health-related concerns among students and their level of anxiety. This determines whether there is any significant difference between their social demographics and influencing factors, which are the academic-related concerns and health-related concerns with their level of anxiety regarding the COVID-19 pandemic among students.

1.5.3 TIME

The research was carried out throughout this semester, from March to May 2022. Likewise, Malaysia's government announced earlier this month that on April 1, 2022, it will shift to the endemic phase of COVID-19. This study is still relevant since the respondent involved are those who experienced the studied environment during the pandemic of COVID-19, 2019.

1.6 SIGNIFICANCE OF THE STUDY

Knowing the factor associated with the level of anxiety among students during the COVID-19 pandemic is essential. This research can show the comparison and provide insight into psychological well-being among students throughout the COVID-19 pandemic in Malaysia. Furthermore, it is intended that this study will provide information on the actions and measurements that management will need to prevent these adverse effects on students in the future if they encounter similar situations.

1.7 SUMMARY OF CHAPTER

Overall, this chapter outlines the study's background by proposing some research objectives and questions to examine the research problem. Aside from that, the study's significance is being discussed.



CHAPTER 2

LITERATURE REVIEW

2.0 INTRODUCTION

This chapter presents a review of the literature on the factors that contributed to student anxiety during the COVID-19 outbreak. The definition of anxiety is given first in this chapter. It then moves on to a discussion of a conceptual framework for this subject. For this study, the conceptual framework was modified, and the literature review used a variety of resources. An overview of the subject concludes this chapter.

2.1 LITERATURE REVIEW

2.1.1 ANXIETY

The Encyclopedia of Psychology (2000) defines anxiety as a worried thought, sensation of tension, and physical changes, such as high blood pressure. According to the American Psychological Association (2022), people with anxiety often have intrusive thoughts or concerns, and they may avoid certain situations because they are frightened. People may have physical symptoms such as sweating, shivering, dizziness, or a rapid heartbeat in the meanwhile.

A survey conducted by Wang *et al.*, (2020) on anxiety among students during the COVID-19 pandemic found that most participants (n=1443, or 71.26%) showed their stress and anxiety levels had grown because of the epidemic. According to most students, the epidemic was producing tension and anxiety among their peers (n=1982, or 97.83%). Participants rated the degree of the effect by specific health, academic, and lifestyle-related issues besides general remarks on the stressors. Research by Son *et al.*, (2020) also shows the same results whereby most of the students (n=138, or 71%) of the 195 students reported increased worry and stress because of the outbreak.

2.1.2 DEMOGRAPHIC

According to previous research among Ethiopia students by Aylie *et al.*, (2020), anxiety, depression, and stress among university students were high concerning COVID-19. From their study, being a woman, living at home, having a history of medical disease, and having poor or moderate social support all raised the chance of depression. Compared to male university students, students had a 2.1 times higher chance of having depression. Hence, this study discovered that gender is significantly associated with depression. The researcher also has stated that students from low-income families with less than 2500 ETB had 2.8 times higher chances of having anxiety than their other income families. Another independent variable included in further research for university students during this outbreak is relatives infected with COVID-19. This was supported by Coa *et al.* (2020), who found that having COVID-19-infected relatives or acquaintances increased college students' anxiety (OR = 3.007, 95%, CI = 2.377 - 3.804).

Because of the COVID-19 epidemic, approximately 24.9% of students have reported anxiety (Cao *et al.*,2020). Relatives infected with COVID-19, which could be linked to the high contagiousness of the new coronavirus pneumonia, are another independent variable that has been included in other research for university students during this outbreak. During epidemics, the effects of economic pressure on daily life and academic delays are positively associated with Chinese students' anxiety levels, whereas social support is adversely related to their anxiety (Wang & Zhao, 2020). As a result of Wang and Zhao's (2020) research, it can be stated that students who live with their parents, live in urban, and have a solid family income are less likely to experience anxiety during the COVID-19 pandemic.

Furthermore, according to Wang *et al.*, (2020), 569 (28.25%) participants reported minimal anxiety, whereby participants reported anxiety are 71.75% (n=1445), with severity levels ranging from severe (n=298, 14.80%), moderate (n=477, 23.68%), or mild (n=670,33.27%), whereby this can

be classified as the freshman was reported to show severe anxiety compared to the senior students in their university. Similarly, most participants (n=1830, or 89.57%) complained about their academic progress and future goals and their academic accomplishments (n=1752, or 85.71%). Most of the participants reported had an increased class workload (n=1358, or 66.57%) and difficulty adjusting to distance learning (n=1554, or 76.03%). Wang and Zhao (2020) reported that, compared to students in grade two, grade three was a more stable year, in which students grew more mature and had more experience dealing with shifting emotions.

2.1.3 ACADEMIC-RELATED CONCERN

Student mental health has become a severe trend in higher education. Many institutions and colleges worldwide have switched to online learning in response to the novel coronavirus pandemic.

According to Son *et al.*, (2020), 138 students (71%) experienced higher anxiety and stress because of the covid-19 epidemic, which was also linked to increased concerns about academic performance (159/195, 82%). Meanwhile, Mahdy (2020) discovered that the most participants were affected to different degrees by the COVID-19 pandemic lockdown. (96.7%). The overall mean evaluation score for online education was 5.1 ± 2.4 , while the practical elements received a 3.6 ± 2.6 . Although self-study is possible with online learning, the essential issue in veterinary medicine is how to give practical learning. Learning most of the subjects online is challenging because of their practical nature. Students believe that getting veterinary competency through online learning is difficult.

Academic stress was the most common cause (532/1360, 39.12%), with most cases (n=278) caused by the abrupt transition to and maintenance of online programmes, followed by increased worry about grades (n=58) and delayed graduation (n=53). Furthermore, a small percentage of

individuals (n=389) reported additional free-response reasons for the increased stress connected with academics regarding academic-related concerns. Reduced existing and potential work chances (n=42), a higher burden of paying tuition and fees (n=16), and effects on scholarship and funding (n=15) were among the financial worries expressed by nearly a fifth of those who identified such reasons (73/389, 18.8%). Some participants (27/389, or 6.9%) expressed concern about upcoming semesters, such as deciding on a major during a pandemic (n=10), continuing online classes (n=12), and continuing face-to-face classes with ongoing virus infection concerns (n=5).

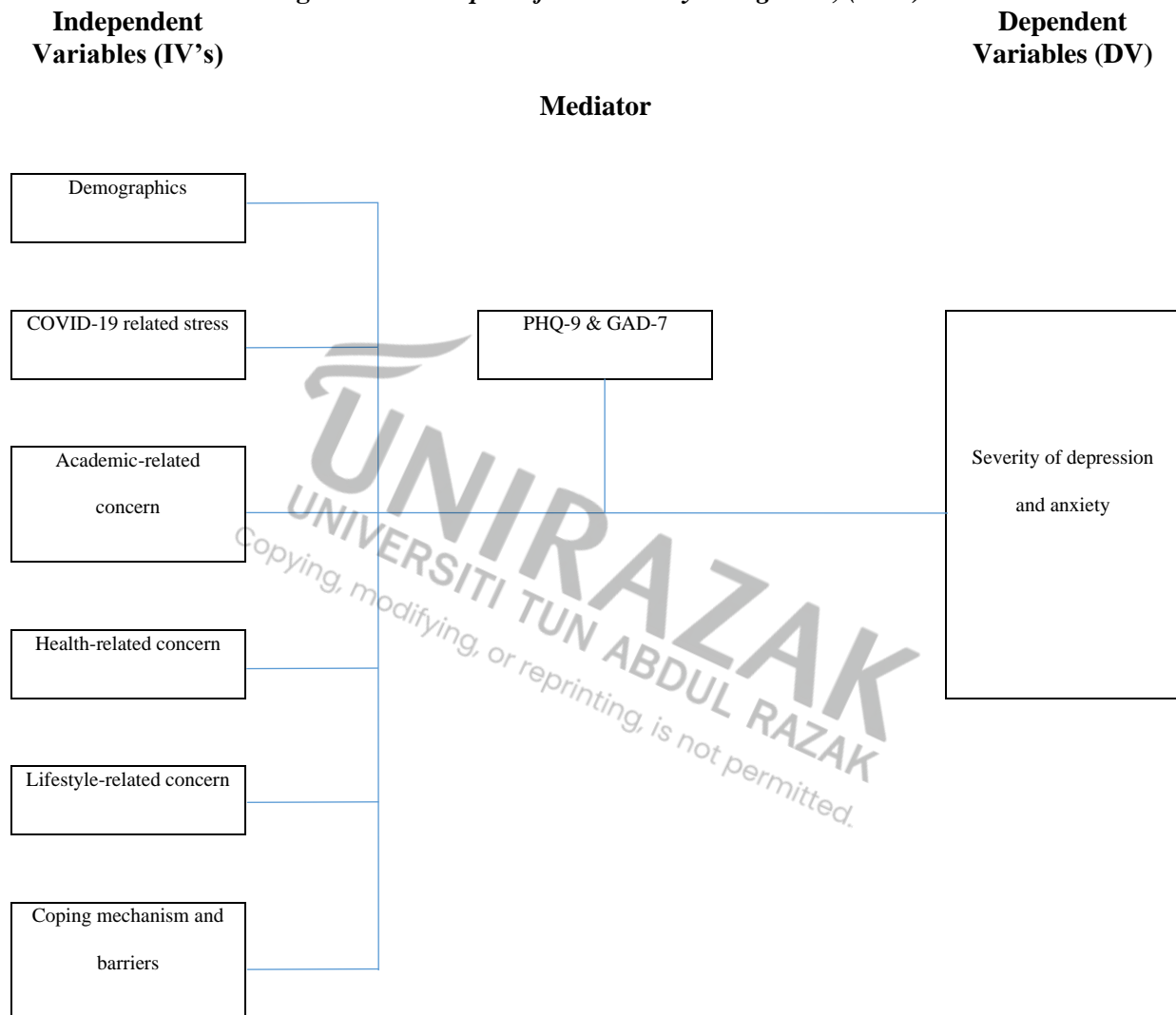
2.1.4 HEALTH-RELATED CONCERN

The COVID-19 epidemic has had a substantial impact on the mental health of the general public (Salari *et al.*, 2020). According to Wang *et al.*, (2020), the top health-related concern (n=1825, 89.24%) was fear and worry about personal health and the health of loved ones, followed by changes in sleeping habits (n=1735, 84.92%), eating patterns (n=1641, 80.44%), and depressive thoughts (n=1362, 66.67%). Physical illness was the most common cause of concern (52/180, or 29.9%), with 31 people (n=6) reporting a physical condition that worsened throughout the epidemic. Some people are more likely to contract COVID-19 if they have asthma (n=9), autoimmune disease (n=4), are immune-compromised (n=3), or have other disorders (n=3). Four of the responders said they had a COVID-19 infection. Reduced exercise (n=45), weight gain (n=12), and muscle/back pain from a sedentary lifestyle (n=5) were all mentioned as concerns (49/180, 28.2%). Some people (n=31) claimed to have been diagnosed with mental illness, which had worsened during the outbreak (n=11). 29 participants reported barriers to health care, including reluctance to contact doctors for non-pandemic illnesses (n=24), receiving medication (n=3), and receiving a COVID-19 test (n=1).

2.2 CONCEPTUAL FRAMEWORK

This paper proposed a conceptual framework that adapted from the previous research by Wang *et al.*, (2021) as the principle to investigate the anxiety among students during the COVID-19 pandemic.

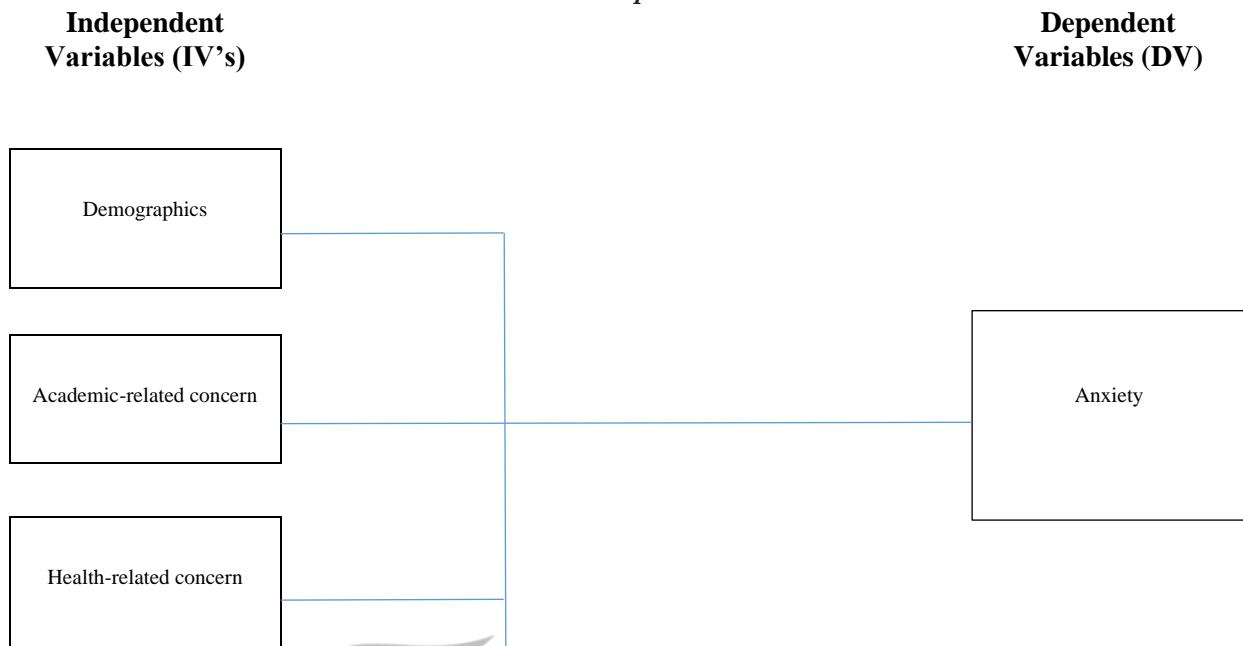
Figure 2.1 Conceptual framework by Wang *et al.*, (2021)



Source: Wang *et al.*, (2021)

Based on the early literature by Wang *et al.*, (2021), this conceptual framework has been modified. Students' demographics, academic-related concerns, and health-related concerns are all variables that impact their anxiety levels during the COVID-19 pandemic. This variable represents the independent and dependent variables adopted and changed from earlier studies to perform this research, as described above.

Figure 2.2 Conceptual framework on the factor associated with anxiety among students during the COVID-19 pandemic



Source: Adopted and adapted from Irfan *et al.*, (2021) and Wang *et al.*, (2021).

2.3 HYPOTHESIS

Based on the research conducted by Aylie *et al.*, (2020), sociodemographic characteristics such as sex, age, year of study and residence were related to the factor associated with the level of anxiety among the university students who were living in the Bench-Sheko zone. Wang *et al.*, (2020) found that participants with a better classification had lower GAD-7 scores. Tukey's HSD test was used to see if there were any differences between the classifications, and it revealed a significant difference between doctoral and all undergraduate classifications (P.001, P.001, P=.002, and P=.002, respectively), as well as a significant difference between sophomore and master's (P=.03).

H_{a1}: There are relationship between year of study and level of anxiety among students

H₀₁: There are no relationship between year of study and level of anxiety among students

According to research conducted by Wang *et al.*, (2020), the factor associated with the student's degree of anxiety is their academic-related concern. In terms of academic issues, 1851

(90.74%) of participants had trouble concentrating, describing their problem as moderate with 716 (35.10%) and 706 (34.61%) as severe. Similarly, the majority of participants (n=1830, 89.57%) expressed concern about their academic progress and plans and their academic achievement (n=1752, 85.71%). The majority of participants experienced difficulty adapting to virtual learning (n=1554, or 76.03 %) or had a heavier class load (n=1358, or 66.57 %).

H_{a2}: There are relationship between the academic-related concern and the level of anxiety among students

H₀₂: There are no relationship between the academic-related concern and the level of anxiety among students

Furthermore, Wang *et al.*, (2020) stated that, for health-related concerns, the majority of the respondents showed concern for their health and their loved ones, which is consistent with recent findings. A substantial percentage of responders (over 80%) stated that their eating and sleeping patterns had changed. This is not surprising, but it is concerning, considering past research linking such changes to depression in college students. Physical distancing and changes in social ties were extensively cited among lifestyle-related concerns, comparable to those documented earlier among students and the general population. In addition, three-quarters of respondents reported news channels had made them worried or worried. Misinformation, particularly false and misleading material, disseminated via news and social media platforms may increase this type of anxiety.

H_{a3}: There are relationship between the health-related concern and the level of anxiety among students

H₀₃: There are no relationship between the health-related concern and the level of anxiety among students

2.4 SUMMARY

All in all, this chapter defines the terms and discusses the literature on anxiety levels and the contributing factors. Early literature has shown the negative impact of pandemics on students' psychological health, which has led to anxiety in this study. Hence, future researchers and the university or college management can consider these elements if this situation happens in the future.



CHAPTER 3

RESEARCH METHODOLOGY

3.0 INTRODUCTION

The research methodology is discussed in this chapter. This study adopts a quantitative research strategy, which is a quantitative research strategy for determining the relationship between two variables (independent and dependent variables). It is all about the information and facts gathered for this study.

3.1 RESEARCH DESIGN

The method adopted by the researchers may have been a cross-sectional design strategy, as it involved data collecting at a specific point in time. Cross-sectional studies are commonly used to evaluate factors that can contribute to anxiety levels among UNIRAZAK KKRC students. The variables are collected at a specific point in time in a cross-sectional design, and it is recommended to locate common issues across variables (Setia, 2016). In addition, this quantitative survey was conducted using a one-time distribution of a questionnaire to UNIRAZAK KKRC students.

3.2 UNIT OF ANALYSIS

The unit of analysis refers to the level at which the study is conducted. Therefore, it is vital to understand the unit of analysis (Hazman, 2015). This unit is essential for the conceptual framework, the data collection, the sample size, the results, and the discussion. Individuals who are students at UNIRAZAK KKRC are the unit of investigation for this study to look at the factors associated with the level of anxiety among them during the COVID-19 outbreak.

3.3 SAMPLE SIZE

A sample is a subset of the population that a researcher selects for study (Sekaran & Bougie, 2009). According to Cohen (1968), the sample size of respondents can be determined by referring to the plan created, and the sample size is the number of perceptions used to measure the estimation of a population. The sample size for this study is mainly focused on the students at UNIRAZAK KKRC. For this semester, there are 253-degree students, so the proposed sample size for this study is 152 samples, according to table 3.1, which shows how Krejcie and Morgan (1970) determined the sample size for a population.

Table 3.1 Determining Sample Size of a Known Population

N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	283	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	100000	384

Note: N is Population Size; S is Sample Size
Source: Krejcie & Morgan, 1970

Source: Krejcie and Morgan (1970)

Table 3.2 Number of Population: UNIRAZAK, Kota Kinabalu Regional Centre

Total Population	Sample Size
UNIRAZAK KKRC	
253	152

3.4 SAMPLING TECHNIQUE

The sampling technique can be summarized as selecting a sufficient number of correct elements from the entire population. The possession of the populace's elements can be simplified more easily (Sekaran & Bougie, 2009).

The chosen sampling method is convenient. Convenience sampling is a non-probability sampling approach in which respondents are selected based on their proximity to the study site and ease of access. This non-probability method is commonly used in preliminary research to get a basic concept of the outcomes without paying the cost or effort associated with selecting a random sample. Aside from that, there are no specific requirements that must be completed or considered in order to be included in the sample.

A convenient sampling technique creates samples based on accessibility and desire to participate. The researchers prefer this sampling method for this study since the population in UNIRAZAK KKRC is chosen based on proximity, not on whether or not they reflect a specific background. Furthermore, this sampling technique varies from other non-probability sampling strategies, such as purposive sampling, which selects a representative sample of elements based on expert opinion.

As a result of using these technologies in conducting this research, the researchers were able to ask random students among UNIRAZAK KKRC students, making it easier to recruit. It is simple, quick, and usually the least expensive to use the traditional technique because it is simple, time-consuming, and the subject is already available.

3.5 MEASUREMENT

3.5.1 VARIABLE

The dependent variable is either positive or negative results, and measurement is used to assess a level of an independent value. Measures were put to the test to see if the prior study's results would be the same or different in this one. The measurement will be carried out to see an association between the anxiety levels and demographic, academic-related concerns and health-related concerns.

3.5.2 SUMMARY OF MEASUREMENT/INSTRUMENT

Table 3.3 Summary of Measurement/Instrument

Variable	Items	Sources	
Demographic	1. Gender	Irfan <i>et al.</i> , (2021)	
	2. Age		
	3. Year of study		
	4. Residency		
	5. Internet access		Aylice <i>et al.</i> , (2020)
	6. My family income was affected due to the pandemic Covid-19		
	7. I spent more than 30 minutes on Covid-19 news.		Wang <i>et al.</i> , (2020)
	8. My relatives and friends have been infected with Covid-19		
Academic-related concern	1. Difficulty concentrating	Wang <i>et al.</i> , (2020)	
	2. Fear and worry about your academic progress and future plans (Graduation, Job search)		
	3. Fear and worry about your academic performance		

		4. <i>Difficulty adapting to distance learning</i>	
		5. <i>Increased class workload</i>	

Health-related concern		1. <i>I'm worried about my health as well as my loved ones.</i>	Wang et al., (2020)
		2. <i>Changes in sleeping habits</i>	
		3. <i>Changes in eating pattern</i>	
		4. <i>I been having depressive thoughts</i>	
		5. <i>This pandemic making chronic health problems worse</i>	
		6. <i>When contemplating suicide, I should get help.</i>	

Generalized anxiety disorder - 7 item (GAD-7) scale		1. <i>Feeling nervous, anxious, or on edge</i>	Irfan et al., (2021)
		2. <i>Not being able to stop or control worrying</i>	
		3. <i>Worrying too much about different things</i>	Wang et al., (2020)
		4. <i>Trouble relaxing</i>	
		5. <i>Being so restless that it's hard to sit still</i>	Bilgi et al., (2020)
		6. <i>Becoming easily annoyed or irritable</i>	
		7. <i>Feeling afraid as if something awful might happen</i>	Grover et al., (2020)

Stochl et al., (2020)

3.6 DATA COLLECTION

Researchers used Google forms to disseminate the questionnaire and collect data. Each questionnaire includes a cover letter explaining that respondents must answer all questions and that all data will be kept strictly confidential for academic purposes.

3.7 DATA ANALYSIS

According to Sekaran (2009), data analysis has three purposes. Data analysis is essential for determining the truth about the subject or phenomenon under investigation. To do data analysis, one must categorize and compare the data to establish specific significant properties stated in the research objectives. The data in this study was analyzed using the Statistical Package for Social Science (SPSS) version 26.

3.7.1 DESCRIPTIVE DATA

Descriptive analysis refers to a set of approaches to summarize the data gathered as a consequence of the investigation. The descriptive technique is a fact-finding method that includes an adequate interpretation and discusses questions based on current events (Good, 2000). Section A: Demographic, Section B: Academic-related Concern, Section C: Health-related Concern, and Section D: Generalized Anxiety Disorder Item (GAD-7) Scale are the four areas in which the data is presented. A summary table is included in the descriptive results. The standard deviation and mean are examples of a summary of data that has been collected and interpreted in a relevant way.

3.7.2 TESTING OF THE HYPOTHESES

Two types of statistical approaches were applied in this research to assess the association and test the hypotheses. The Chi-square technique is the first. The Chi-square test is a method for determining the strength of a relationship between two categorical variables. It can then determine the strength of the relationship between various parameters and the respondent's study. Pearson Correlation is the second statistical approach that the researcher used in this study. Its value ranges from -1 to 1 and quantifies the linear connection between two interval or ratio variables. A correlation of -1 or 1 shows a strong link between the variables. Hence, both statistical methods are suitable for this study.

3.7.2 SUMMARIZE OF STATISTICAL TECHNIQUES

Table 3.4 Summary of Statistical Technique Employed In Data Analysis

Statistical Technique	Research objective
Chi-square	This study will identify the relationship between year of studies and the anxiety levels among students
Pearson Correlation	To determine the relationship between the academic-related concern and anxiety levels among students
Pearson Correlation	To determine the relationship between the health-related concern and anxiety levels among students

3.8 RESULTS OF PILOT STUDY

In April 2022, a survey pilot study was undertaken in the UNIRAZAK KK area. A pilot study is also known as a 'possibility study,' referring to mini models of the overall study scale and pre-testing of a specific research tool, like interview sessions or questionnaires (Teijlingen & Hudley, 2001). Seventeen respondents completed the online questionnaires as part of the pilot study analysis. According to Sekaran Bougie, Cronbach's alpha is a good measure of internal consistency reliability (2010). Furthermore, Cronbach's alpha reliability levels are regarded as poor are less than 0.60, within 0.70 is acceptable, and over 0.80 is good (Sekaran & Bougie, 2010). According to the results of the pilot study, the researchers discovered that all the reliability was assumed.

Table 3.5 Results of Pilot Study

Variables	Cronbach's Alpha	No. Of Items	Reliability assumed
Academic-related concern (IV)	0.923	5	Yes
Health-related concern (IV)	0.743	6	Yes
Anxiety level (DV)	0.942	7	Yes

3.9 SUMMARY

The research methodology of the study is discussed in this chapter. It covers how the study was conducted, including the research design, the unit of analysis, sampling technique, instrument measurement, data collecting, and data analysis. Therefore, understanding and analyzing the research process is critical to establishing the best way to gather all necessary data. This chapter also includes the pilot study as a pre-testing tool and has adopted SPSS version 26 to evaluate the information.



CHAPTER 4

FINDINGS & RESULTS

4.0 INTRODUCTION

The findings and results of the study are discussed in this chapter, which is the heart of the research. Data cleaning and screening were undertaken to ensure that the researcher had entered the data correctly. Furthermore, the respondents' profiles were presented in this area, and the goodness of measure. The Chi-square test is being used to differentiate between the year of study and the level of anxiety among students during the COVID-19 pandemic. While the Pearson Correlation is used to measure the relationship between academic-related concerns and health-related concerns regarding the level of anxiety among students during the COVID-19 pandemic and used to measure the linear relationship between academic-related concerns and health-related concerns regarding the level of anxiety among students. Finally, this chapter summarizes the hypotheses that the researcher has tested.

4.1 DATA CLEANING

In research, data screening and transformation techniques ensure proper data entry and a normal distribution of variables (Coakes, 2013). It is the process of detecting and correcting data discrepancies. Data screening was utilized in this study to verify that the researcher had entered the collected data accurately, and descriptive statistics were employed to accomplish the data screening. As a result, the researchers discovered that the data was submitted correctly because the screening technique had no missing values.

4.2 PROFILE OF RESPONDENTS

The researcher has surveyed 152 respondents on the UNIRAZAK campus, making up a response rate of 100%. Table 4.1 shows the profile of respondents in the study. Based on the gender of the respondents, 95 were female respondents, who contributed 62.5%, and 57 were male respondents, which contributed 37.5%. Most of the respondents, 57.2%, were aged from 20 to 24 years old, 27.6% the respondents aged between 25 two 29 years old, and 15.1% respondents aged 30 years old and above. Based on the findings, most of the respondents' years of study were senior, with 42.8%, followed by a first year, with 30.9% and 26.3% of the respondents in their junior year of study. Most of the respondents' residence was in the urban area (65.1%), while 34.9% lived in the rural area. From this demographic background majority of respondents, 93.4%, have access to the Internet despite their place of residency. The pandemic affected 74.3% of respondents' family income, whereas only 25.7% of respondents' family income was unaffected. Moreover, 73% of the respondents have reported that they are not spending over 30 minutes on the covid-19 news and only 27% of the respondents have a reasonable concern about the information. In the last section on the demographic profile, 86.8% of the respondents were to have been when their relatives and friend had been infected with COVID-19, while only 13.2% of them said that their family and friends were not infected.

Table 4.1 Profile of respondents

No.	Profile	No. of respondents	Frequency (%)
1	Gender		
	Female	95	62.5
	Male	57	37.5
2	Age		
	20 - 24 years old	87	57.2
	25 - 29 years old	42	27.6
	30 years old and above	23	15.1
3	Year of Study		
	Freshman	47	30.9
	Junior	40	26.3
	Senior	65	42.8

4	Place of Residency		
	Rural	53	34.9%
	Urban	99	65.1%
5	Internet Access		
	No	10	6.6%
	Yes	142	93.4%
6	My family income was affected due to the pandemic Covid-19		
	No	39	25.7
	Yes	113	74.3
7	I spend more than 30 minutes on Covid-19 news		
	No	111	73%
	Yes	41	27%
8	My relatives and friends has been infected with Covid-19		
	No	20	12.2%
	Yes	132	86.8%

4.3 GOODNESS OF MEASURE

4.3.1 VALIDITY TEST (EXPLORATORY FACTOR ANALYSIS - EFA)

An initial review is being conducted to see whether the data is acceptable for Exploratory Factor Analysis (EFA). The Kaiser-Meyer-Olkin (KMO) Index of sampling adequacy for each variable ensures that the measure items in the definition have sufficient covariance to allow for factor analysis. Aside from that, each test is subjected to a Bartlett sphericity check to ensure that the correlation matrix is not an identity matrix (Hernández-Martnez *et al.*,2021). The independent variable items are recorded as 0.691 in the KMO index analysis, and this value is acceptable because it is above the 0.6 thresholds (Yarina *et al.*,2018). If the Bartlett sphericity test for this study is significant ($p=.000$, $p.05$), the data set is appropriate, and the correlation matrices for the independent variable items are not identity matrices.

Table 4.2 Exploratory Factor Analysis (EFA)

No	Items	Factors				
		1	2	3	4	5
Factor 1 : Academic-related concern						
1	Difficulty concentrating	.627				
2	Fear and worry about your academic progress and future plans (Graduation, Job search)	.810				
3	Fear and worry about your academic performance	.779				
4	Difficulty adapting to distance learning	.614				
5	Increased class workload	.793				
Factor 2 : Health-related concern						
6	I'm worried about my health as well as my loved ones.					.852
7	Changes in sleeping habits				.920	
8	Changes in eating pattern			.740		
9	I been having depressive thoughts.		.856			
10	This pandemic making chronic health problems worse		.701			
11	When contemplating suicide, I should get help.				-.587	.409
Eigenvalue		2.716	1.332	1.158	1.043	1.003
Percentage of Variance (%)		24.684	12.109	10.528	9.478	9.114
Total Variance Explained		24.694	24.694	47.332	56.810	65.924
KMO Measure of Sampling Adequacy		0.691				
Appropriate Chi-square		253.826				
Sig		0.000				

4.3.2 RELIABILITY

Cronbach's alpha is an appropriate indicator of internal accuracy value, according to Sekaran and Bougie (2010), where 0.7 is acceptable, and 0.80 is perfect. Cronbach's alpha reliability levels of less than 0.60 are deemed poor. It had become tangled in measurement problems and could not successfully test many topics or theories without trustworthy metrics (Hazman, 2015). To establish

the internal consistency of the scale, a Cronbach coefficient alpha test was performed on the 19 items in four parts from Section B, Section C, and Section D. According to Table 4.2, the reliability of the items for the actual study is perfect, with a Cronbach's alpha of over 0.60 for all variables.

Table 4.3 Result for Reliability Test

Variables	No. Of Items	No. Of Item drop	Cronbach's Alpha
Academic-related concern (IV)	5	-	0.826
Health-related concern (IV)	6	-	0.743
Anxiety level (DV)	7	-	0.879

4.3.3 TESTING OF NORMALITY

It is one technique to assess normality by referring to skewness and kurtosis. Positive skew values imply a positive skew, whilst negative skew values suggest a negative skew, whereas negative kurtosis values show a flatter distribution (Coakes,2013). According to George and Mallery (2013), the range of skew and kurtosis between +2 and -2 is acceptable. Table 4.3 shows the normality results for this study, with the skewness and kurtosis values ranging from +2 to -2. The choice of normalcy for the variables of academic-related concern, health-related concern, and level of anxiety is normal.

Table 4.4 Result for Normality Score

Variables	Skewness	Kurtosis	Normality assumed
Academic-related concern (IV)	0.111	-0.467	Yes
Health-related concern (IV)	0.215	-0.306	Yes
Anxiety level (DV)	-0.862	-0.283	Yes

4.4 FINDING ANALYSIS

4.4.1 OBJECTIVE 1: TO IDENTIFY THE RELATIONSHIP BETWEEN YEAR OF STUDIES AND THE LEVEL OF ANXIETY AMONG STUDENTS

According to the results of Chi-square statistics, the P-value in the row of the Asymptotic Significance (2-sided) column is P-value (.000). The study may presume that the year of study and the level of anxiety among students are related because the p-value (.000) is less than the significance level (0.05). ($\chi^2(26, N=152) = 127.89, p < .05$).

Table 4.5 Chi-Square on The Relationship Between Year of Studies and Level of Anxiety

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	127.897 ^a	26	.000
Likelihood Ratio	145.925	26	.000
Linear-by-Linear Association	.280	1	.597
N of Valid Cases	152		

4.4.2 OBJECTIVE 2: TO DETERMINE THE RELATIONSHIP BETWEEN THE ACADEMIC-RELATED CONCERN AND THE LEVEL OF ANXIETY AMONG STUDENT.

Based on the correlation coefficient ($r = .221^{**}$, $p\text{-value} = .006$), it shows a positive relationship between academic related-concern and the level of anxiety. Hence, there is a significant and positive relationship between academic-related concerns and the level of anxiety.

Table 4.6 Correlation Results on The Relationship Between Academic-related Concern and Level of Anxiety

Pearson Correlation

		Level of Anxiety (DV)
Academic-related concern	Pearson Chi-Square	.221**
	Sig.	.006
	N	152

($r=.221^{**}$, $p\text{-value}=.006$)

4.4.3 OBJECTIVE 3: TO DETERMINE THE RELATIONSHIP BETWEEN THE HEALTH-RELATED CONCERN AND THE LEVEL OF ANXIETY AMONG STUDENTS.

Based on the correlation coefficient ($r=.284^{**}$, $p\text{-value}=.005$), it shows a positive relationship between health related-concern and the level of anxiety. Hence, it shows that there is a significant and positive relationship between health-related concerns and the level of anxiety.

Table 4.7 Correlation Results on The Relationship Between Health-related Concern and Level of Anxiety

Pearson Correlation

		Level of Anxiety (DV)
Academic-related concern	Pearson Chi-Square	.284**
	Sig.	.000
	N	152

($r=.284^{**}$, $p\text{-value}=.000$)

4.5 SUMMARY OF HYPOTHESES TESTED

The decision for each hypothesis is shown in Table 4.7. Referring to the finding of H_{a1} , the $p\text{-value}$ is less than the significance level ($p\text{-value} = 000, p0.05$). Hence, since there is a relationship

between the year of study and the level of anxiety among students, H_{a1} is accepted, and H_{01} is rejected. According to the findings for H_{a2} , there is a significant and positive link between academic-related anxiety and anxiety level ($r=.221^{**}$, $p\text{-value}=.006$). Since there is a significant and positive relationship between academic-related concerns and anxiety levels, we accepted H_{a2} and rejected H_{02} . According to the finding H_{a3} , there is a significant and positive association between the level of anxiety and the level of health-related concern ($r=.284^{**}$, $p\text{-value}=.000$). As a result, we accepted H_{a3} because there was a relationship between health-related concerns and student anxiety during the COVID-19 pandemic.

Table 4.8 Summary of Hypothesis Tested

Objectives	Analysis	Result	Hypotheses
To identify the relationship between year of studies and the level of anxiety among students.	Chi-square	$P(X^2(26, N=152) = 127.89, p < .05)$	H_{a1} are accepted and H_{01} rejected
To determine the relationship between the academic-related concern and the level of anxiety among students.	Pearson Correlation	$r=.221^{**}$, $p\text{-value}=.006$	H_{a2} are accepted and H_{02} rejected
To determine the relationship between the health-related concern and the level of anxiety among students.	Pearson Correlation	$r=.284^{**}$, $p\text{-value}=.000$	H_{a3} are accepted and H_{03} rejected

4.6 SUMMARY

This chapter covers the topics of interpreting the data collected through the sampling technique. The respondents' profile was first discussed, followed by the goodness of measure, including reliability, normalcy, chi-square, and the correlation coefficient. Various tests were used to analyse the data, and the results were also explained in this report.

CHAPTER 5

DISCUSSION & CONCLUSION

5.0 INTRODUCTION

This chapter summarizes the findings and draws a conclusion for the research. This chapter's findings are discussed in light of the research questions. The results of the previous study were compared and contrasted with those of this study. The findings of the level of anxiety among demographic categories, as well as academic-related and health-related concerns, are described in this chapter. This part also includes recommendations for future research, as well as a discussion of the study's findings.

5.1 SUMMARY OF FINDINGS

In this study, the researcher has met the three primary objectives. The first objective is to determine the relationship between the year of study and the level of anxiety; the second objective is to determine the relationship between academic-related concerns and the level of anxiety among students, and the third objective is to determine the relationship between health-related concern and the level of anxiety among students during the COVID-19 pandemic. The researchers discovered that the degree of anxiety Standard Deviation is 0.496, which suggests that anxiety among the students is low, or in psychological terms, the anxiety level is still moderate.

The researcher has analyzed the first objective and it was reported that the demographics, namely the year of studies, have shown a relationship between the year of studies and the level of anxiety among students toward their studies during the COVID-19 pandemic. This can be seen where the p-value (.000) is less than the significance level (.05).

During the COVID-19 epidemic, however, it was discovered that there is a positive relationship between academic-related problems and the level of anxiety among students. The study's correlation coefficient ($r=.221^{**}$, $p\text{-value}=.006$) supports this, indicating a positive relationship between academic-related anxiety and anxiety levels.

Finally, on the third objective, during the COVID-19 pandemic, it was discovered that there is a positive relationship between health-related concerns and the level of anxiety among students ($r=.284^{**}$, $p\text{-value}=.000$), indicating that there is a positive relationship between health-related concern and level of anxiety.

5.2 RECOMMENDATION / RESEARCH IMPLICATION

The recommendation is suggested to suggest ways to encourage society to be aware of the anxiety level. Society should be involved in anxiety awareness to be more alert and conscious when they know that they are having anxiety symptoms or know someone who has the symptoms. For this reason, it is much better and helpful if they are diagnosed earlier if they are facing mild or severe anxiety so that they can have better treatment. Anxiety disorders can make it difficult for a person to work, study, or participate in other activities. Therefore, with the proper treatment, a person can be recovered.

Anxiety is treated with various approaches, including medication, counselling, and therapy, with a combination of these three usually being most helpful. The researcher proposes that higher education institutions help universities build mental health support clinics on every campus, which can be in face-to-face sessions or online access to provide both psychiatric and psychology based. Because students who cannot physically visit the clinic can receive mental support via phone or chat, institution management should provide these services on an informal and formal basis. It is also

crucial to keep track of the student's mental health. Furthermore, when students have access to psychological counselling, they will learn how to cope with the problem by learning to be assertive and mindful, learning about anxiety, relaxation techniques, exercise, medication, correct breathing techniques, exposure and cognitive therapy, dietary adjustments, building self-esteem, structured problem solving, and support groups.

Moreover, financial packages or support can assist families in maintaining their income and also can be lowering their anxiety levels if this situation might happen in the future. Hence, the researcher also suggests that the government consider offering financial assistance to families that work from home during lockdowns and stricter security measures. Furthermore, by working within social distancing, sports clubs and student groups might lessen anxiety among students.

5.3 CONCLUSION

In conclusion, Wang *et al.*, (2020) conducted a study among college students in the United States and found that the findings in this study, which showed that the year of study was associated with the level of anxiety among university students, were supported. It has demonstrated a significant difference between the year of studies among first-year students and the doctoral students who are considered senior. Regarding the second objective, it has supported the research being conducted by Wang *et al.*, (2020), which indicates that the majority of respondents had trouble adapting to distant learning. The third objective also shows the same result where most of the respondents are worried about their health and their loved one's health. Moreover, most respondents also agree that the pandemic and online learning have affected their sleeping habits and eating patterns.

COVID-19 has spread worldwide, causing widespread panic and increased anxiety and tension (World Health Organization, 2020a). The COVID-19 outbreak has had a significant impact on many people worldwide. The dramatic increase in virus cases worldwide has sparked fear and concern about what will happen next. It has also caused a lot of concern among the students. A previous study has shown that public health catastrophes like the Covid-19 outbreak can affect college students, including anxiety, fear, and worry (Wang *et al.*, 2020; Cao *et al.*, 2020). Overall, this anxiety may have profound implications for students' academic and mental health, and if it is not addressed, they may find themselves in a difficult situation.

5.4 LIMITATIONS OF THE STUDY AND RECOMMENDATIONS FOR FUTURE RESEARCH

Based on the findings, the researchers have recognized several limitations in this study and recommended future research. The first issue has been identified as the low sample size used in the study, with this study focusing just on the university campus in UNIRAZAK. As a result, only a limited number of people will be able to provide sufficient data to support this research. When some respondents have not participated in the survey, small sample sizes might lead to bias, such as undesirable reactions. The small sample size may affect the study's reliability, which leads to more variability and bias. As a result, the researcher should broaden the scope of the study in future research recommendations. This ensures that a large number of respondents can provide the best results for the research study's reliability.

The second limitation highlighted in this study is that the model is limited. This study only looks at three independent variables. As a result, due to the limited model, this study will not be able to produce accurate results or provide more information to the public. The result is only for the selected variable. Some of the variables analyzed may make it difficult for some people to understand some of the questions, which may be evident to the developer but not the respondents. This is because the study may or may not be relevant to the person who responded to the question. This misunderstanding may result in a poor decision or outcome. The simplest way to deal with this is to construct variables relevant to the individual who is answering. So, for future research recommendations, the researcher should input more variables.

Another limitation that the researchers discovered while conducting this study is the cross-sectional study's limitations. It is where a cross-sectional study is described as a research tool used to collect data at a certain point in time. Data is compiled from a set of people known as variables with varied characteristics and demographics. Because the study was a one-time exposure and result study, obtaining a causal relationship from the cross-sectional analysis is challenging, and these studies are also prone to biases. As a suggestion, the researchers should undertake a longitudinal study in the future, in which they will conduct many observations of the same subjects over time.

Last but not least, this study used quantitative research, where the survey was not in-depth in collecting the data. Using qualitative or mixed methods research can produce more accurate findings. Quantitative analysis gathers and generalizes numerical data from groups of people or characterizes a specific phenomenon (Babbie, 2010). Furthermore, the results of this method are limited due to the use of pre-designed questionnaires containing close-ended questions. As a result, respondents will have determined options to respond to based on the researchers' questionnaire (Chetty, 2017). As a result, it was proposed that future researchers undertake qualitative studies or use both qualitative and quantitative studies.

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APPENDICES

APPENDIX 1 - QUESTIONNAIRE



DEGREE OF MASTER OF BUSINESS ADMINISTRATION

A STUDY ON THE LEVEL OF AMONG STUDENTS DURING THE COVID-19 PANDEMIC

Dear respondents,

I am students of **Degree of Master of Business Administration** are currently conducting "**A STUDY ON THE LEVEL OF AMONG STUDENTS DURING THE COVID-19 PANDEMIC**". Therefore, your kind and sincere cooperation to answer this questionnaire is really needed. We also appreciate it if you could spend few minutes of your time answering this survey. Please take note that all information obtained will be kept confidential for this academic purpose. Thank you for your valuable time and cooperation.

Researcher: Bryan Oliver Cabalce

PART A		DEMOGRAPHIC PROFILE	
1. Age	<input type="checkbox"/>	20 - 24 years old	
	<input type="checkbox"/>	25 - 29 years old	
	<input type="checkbox"/>	30 and above	
2. Gender	<input type="checkbox"/>	Female	
	<input type="checkbox"/>	Male	
3. Year of study	<input type="checkbox"/>	Freshman	
	<input type="checkbox"/>	Junior	
	<input type="checkbox"/>	Senior	
4. Residency	<input type="checkbox"/>	Rural	
	<input type="checkbox"/>	Urban	
5. Internet access	<input type="checkbox"/>		

		Yes
		No
6. My family income was affected due to the pandemic Covid-19		Yes
		No
7. I spent more than 30 minutes on Covid-19 news.		Yes
		No
8. My relatives and friends has been infected with Covid-19		Yes
		No

PART B

ACADEMIC-RELATED CONCERN

Please choose for the appropriate answer in the box given,

Scale						
1	2	3	4	5		
Strongly disagree	Disagree	Mixed feeling	Agree	Strongly Agree		
1. Difficulty concentrating		1	2	3	4	5

2. Fear and worry about your academic progress and future plans (Graduation, Job search)	1	2	3	4	5
3. Fear and worry about your academic performance	1	2	3	4	5
4. Difficulty adapting to distance learning	1	2	3	4	5
5. Increased class workload	1	2	3	4	5

PART C

HEALTH-RELATED CONCERN

Please choose for the appropriate answer in the box given,

Scale

1	2	3	4	5	
Strongly disagree	Disagree	Mixed feeling	Agree	Strongly Agree	
7. I'm worried about my health as well as my loved ones.	1	2	3	4	5
8. Changes in sleeping habits	1	2	3	4	5

9. Changes in eating pattern	1	2	3	4	5
10. I been having depressive thoughts	1	2	3	4	5
11. This pandemic making chronic health problems worse	1	2	3	4	5
12. When contemplating suicide, I should get help.	1	2	3	4	5

PART D

GENERALIZED ANXIETY DISORDER - 7 ITEM

(GAD-7) SCALE

Please choose for the appropriate answer in the box given.

Scale					
1	2	3	4		
Not at all	Several days	Over half the days	Nearly every day		
1. Feeling nervous, anxious, or on edge					
	1	2	3	4	5
2. Not being able to stop or control worrying					

	1	2	3	4	5
3. Worrying too much about different things					
	1	2	3	4	5
4. Trouble relaxing					
	1	2	3	4	5
5. Being so restless that it's hard to sit still					
	1	2	3	4	5
6. Becoming easily annoyed or irritable					
	1	2	3	4	5
7. Feeling afraid as if something awful might happen					
	1	2	3	4	5

End of Questionnaire

THANK YOU

APPROVAL PAGE

**TITLE OF PROJECT PAPER: A STUDY OF MANAGEMENT STYLES AND
EMPLOYEE MOTIVATION IN SABAH**

NAME OF AUTHOR: BRYAN OLIVER CABALCE

The undersigned certify that the above candidate has fulfilled the condition of the project paper prepared in partial fulfillment for the degree of Master of Business Administration.

SUPERVISOR

Signature : _____

Name : _____

Date : _____



ENDORSED BY

Dean

Graduate School of Business