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Anxiety and fear of negative evaluation as predictors of hypomanic activity among freshly admitted university students in Lagos Nigeria

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ABSTRACT

This study examines whether anxiety and fear of negative evaluation predict hypomanic activity among new entrants to the University. A total of 350 first-year students comprising 181(51.7%) females and 169 (48.3%) males, selected from various departments and faculties of the University of Lagos, Nigeria, surveyed through convenient sampling, participated in the study. State-Trait Anxiety Inventory: Fear of Negative Evaluation scale and Hypomania scale of Multiphasic Personality Inventory 2 (MMPI-2) were used to collect data for the study. The result of the regression analysis indicates that anxiety predicts hypomanic activity (R=. 122, R square=. 012, F ratio = 5.21, Pv=. 23), and the t-test revealed that male participants (t (348) =-3.560, Pv=0.001) scored higher on measures of hypomanic activity compared to their female counterparts. It also found that fear of negative evaluation does not predict hypomanic activity, while anxiety and fear of negative evaluation have no combined predictive ability on hypomanic activity; participants' age has no association with hypomanic activity. We recommend that parents and university administration implement interventions to reduce anxiety-provoking situations among freshers to ensure an easy adjustment into the university environment.

Keywords: Anxiety, Fear of negative evaluation, Hypomanic activity, newly admitted undergraduates.

Introduction

Transitioning to and adjusting to the University by newly admitted students can be challenging. Adjustment problem is among the leading mental health challenges on the university campus (Sime et al., 2023), and universities and other tertiary institution are constantly seeking to improve the mental health services available to their student population due to the steady rise in the mental health issues among undergraduate students on their campuses (National Council on Disability, 2017). New students experience various physical, social, and emotional issues due to the difficulties they are exposed to (Saleem and Mahmood, 2013), with the majority of the newly admitted reporting that moving to campus is an eventful period in their lives and it is challenging to adjust (Aderi et al., 2013). With a 54.4% overall prevalence of adjustment problems among new students, above 70% of new students reported a high level of anxiety in the first 12 months of admission, and over 60% of students visiting the university counseling

centers reported anxiety as their primary challenge (Centre for Collegiate Mental Health, 2017; American College Health Association). Anxiety and fear of negative evaluation have been identified as primary causes of college student mental health concerns (Centre for Collegiate Mental Health, 2017; Cooper and Brownell, 2020). Mental health is defined as a "state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a connection to their community" (World Health Organization, 2014); these are disrupted and threatened by the anxiety and fear of negative evaluation being experienced by the newly admitted students due to adjustment challenges.

Anxiety is an appropriate response to threats, adjustment, and stress; It is an emotional response to everyday situations and a typical everyday experience (Bamber & Schneider, 2016) but can be abnormal when its level is out of proportion. It could also be conceptualized as anticipation of future threats, more often associated with muscle tension and vigilance in preparation for future danger and cautious or avoidant behaviours (DSM-5). It is often a diffuse, unpleasant, and uncomfortable feeling of apprehension accompanied by one or more bodily sensations that characteristically recur in the same manner in the person. Anxiety may be internal or external, immediate or future, definite or vague, and conflictual or non-conflictual. The somatic manifestation of anxiety includes fatigue, dizziness, palpitation, headache, insomnia, and excessive palpitation. The global prevalence of anxiety among university students is 33.6% (Li et al., 2022), the African prevalence for university students is 47% (Bello et al., 2022) while the Nigerian prevalence among students ranges between 61.7% - 63.5% (Anosike et al., 2022; Aluh et al., 2020). Studies have demonstrated that anxiety is associated with increased vigilance and a tendency to act proactively against possible threats (Andrews and Thomson, 2009). Several factors have been implicated in anxiety among newly admitted students, some of which are found in the study of Bourdet and Goldenberg (1994), who found an association between anxiety and decreased levels or lack of sleep; similarly, in extreme forms, anxiety impairs daily functioning (Sara, 2021). It has also been found to affect student academic negatively (Vitasari et al., 2010), exam performance (Ballen et al., 2017; McKeachie, 1984), and classroom participation and performance (Stipek, 1993; Cooper et al., 2018). Therefore, anxiety may be an essential construct to explore when considering the effect of transitioning and adjusting to the university environment by the newly admitted.

Similarly, fear of negative evaluation involves persistent fear of encountering other people, in small groups and large gatherings, because of fear of being negatively evaluated, i.e., being mocked, not doing the right things, laughed at, or insulted, thereby experiencing automatic belief that they will be ridiculed (Irmak, 2015; Subasi, 2009). This constantly precipitates anxiety in the new entrants because fear of negative evaluation is a precursory factor to anxiety, inevitably leading to hypomanic activity (Weeks et al. (2008). Thus, they utilize several excuses to avoid the public domain- Social Anxiety. Social anxiety is characterised by a Fear of negative evaluation lasting more than six months, whereby the individuals dissociate entirely from any social gathering because of fear of being judged negatively. Despite these findings, the available pieces of the literature indicated that the number of studies on anxiety and fear of negative evaluation is limited. In this context, assessing the influence of anxiety and the fear of negative evaluation on hypomanic activities among the new students in the University, who are the leaders and adults of our future, are an object of interest.

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This current study is anchored on the work of Rapee & Heimberg (1997); Cleark & Wells (1995), in which they explain the role of cognitive models in the continuance of social anxiety, which is based on unrealistic

appraisal and the tendency to overestimate the potential for danger in an anxiety-provoking situation; thus, they avoid such situations and scenarios. However, cognitive restructuring, social skill training, and exposure therapy effectively combat it (David, 2003; Albano & DiBartolo,2007; Leichsenring et al., 2009).

Therefore, the present study aimed to examine the influence of anxiety and fear of negative evaluation on hypomanic tendencies among the new entrant to the University. For this purpose, we seek to provide validation to the following hypotheses set out in this research:

1) Anxiety will significantly predict hypomanic activity.
2) Fear of negative evaluation will significantly predict hypomanic activity.
3) Anxiety and Fear of Negative evaluation will jointly predict Hypomanic activity.
4) Male freshers will score higher on measures of hypomanic activity than their female counterparts.
5) Freshers aged ≤ 20 will score higher on measures of hypomanic activity than their counterparts aged ≥21.

Data and Method

Participants

The participants of the study were chosen using Convenience and balloting sampling techniques. The samples were selected from the Social Sciences, Engineering, Law, and Arts faculties of the University of Lagos. Three hundred fifty freshers from different departments within the faculties were selected to participate in the research as a representative of this large population. They comprise (169) males and (181) females with similar educational backgrounds and ages between 16 and 35 years.

Instrument

The measuring instruments used for this research include the Hypomanic scale of the Minnesota Multiphasic Personality Inventory-II (MMPI-2), the Fear of Negative Evaluation Scale (FNE), State Anxiety Inventory. Hypomanic Scale of MMPI-2

The MMPI-2 is the second version of the Minnesota Multiphasic Personality Inventory (MMPI), revised by Butcher, Dahlstrom, Graham, Tellegen, and Kraemer in 1989. The MMPI-2 is a 567-item, true or false self-report measure of a person's psychological state. The MMPI-2 has ten validity and ten clinical scales. Scale 9 of MMPI-2 was adopted and adapted for use in this study. The hypomania scale, 9, has 46 items originally developed to identify persons experiencing hypomanic symptoms. These symptoms might include cyclical periods of euphoria, increased irritability, and excessive unproductive activity that might be used as a distraction to starve off an impending depression. Thus, the items are centered on energy level, irritability, egotism, and expansiveness. The Harris- Lingoes subscales classify the content of the items under amorality, psychomotor acceleration, imperturbability, and ego inflation. The instrument was pilot tested with 120 newly admitted students of Lagos State University, and a Cronbach alpha of .84 was obtained.

Fear of Negative Evaluation Scale (FNE)

Watson and Friend developed the Fear of Negative Evaluation Scale (FNE) in 1969. It is a 30 true-false item, the self-related scale of which 17 are straight-forwardly worded, and 13 are reverse-worded, which measures social anxiety. It is mainly used to determine the degree to which people experience apprehension at the prospect of being negatively evaluated. The Cronbach alpha rating for internal reliability is reported

at .94 to .98. The test-retest reliability was .78 to .94 by Watson & Friend. The FNE scale showed high validity to its strong correlation rating with several scales such as Taylor's Manifest Anxiety Scale, Jackson's Personality Research Form, anxiety, and personality measures. The instrument was pilot tested with 120 newly admitted students of Lagos State University, and a Cronbach alpha of .94 was obtained.

State Anxiety Inventory

The State Anxiety Scale (STAI Form Y-1) was developed by Charles Spielberger, Gorsuch, and Lushene (1970). It underwent revision to its current form in 1983. It consists of 20 statements that evaluate how respondents feel 'right now, at this moment.' It may also be used to evaluate how respondents felt at a particular time in the recent past and how they will feel in a specific situation likely to be encountered. Form Y-1 has 20 items for assessing state anxiety. State anxiety items include:' I am tense; I am worried, and 'I feel calm; I feel secure.' All items are related on a 4-point scale. Higher scores indicate significant anxiety. Internal consistency coefficients for the scale have ranged from .86 to .95; test-retest reliability coefficients have ranged from .65 to .75 over a 2- month interval (Spelberger et al., 1983), while the test–retest coefficients for this measure ranged from .69 to .89. Considerable evidence attests to the construct and concurrent validity of the scale (Spielberger, 1989). The instrument was pilot tested with 120 newly admitted students of Lagos State University, and a Cronbach alpha of .84 was obtained.

Procedure

The Psychology Ethics Committee (PEC) of the University of Lagos approved the concept for this study. Data for this study was collected from the first-year students in their respective lecturer halls after the General Studies (GST) classes in the respective faculties. The data were collected after the researcher and research assistant met the course lecturers and briefed them about the purpose of the study, seeking their cooperation; after the lecture, students were briefed about the study, and those who indicated interest by volunteering to participate were allowed to take part in the study by issuing a set of questionnaire and consent form to them to fill and return to the researchers. The study participants were debriefed by sharing the result of the study findings with them after the study had been concluded.

Design and statistics

The cross-sectional survey design was adopted for this study, and data for the study were analysed using the Statistical Package for Social Sciences (SPSS).

Results

The analysis of age and gender distribution for the study revealed that out of the sample of 350, 181 (51.7%) were females, while 169 (48.3%) were males. The respondents' age distribution showed that 272 (77.7%) were aged between 16 and 20, and 75 (21.4%) were between the ages 21-25; 2 (0.6%) students were between the ages 26-30, while 1 (0.3%) student fell within the age range 31 and above. This was expected as the samples were first-year students in the University,

Table 1: Descriptive Statistics showing respondents' mean scores and standard deviation on Hypomanic activity and anxiety.

	Mean	Std. Deviation	N
Hypomania	25.19	4.57	350
Anxiety	38.21	12.73	350

Table 1 above represents the descriptive statistics for responses to the hypomania and anxiety scales. Responses to the hypomania scale show a mean response score of 25.19 (N=350, SD= 4.57). Responses to the Anxiety scale show a mean response score of 38.21 (N=350, SD=12.73).

Table 2: Showing the linear regression coefficient of anxiety on hypomanic activity.

Variables	B	Beta	T	Sig	R	R2	F ratio	Pv
Anxiety	.044	.122	2.28	.023	.122	.012	5.21	.023

Dependent variable=Hypomanic activity.

Table 2 above presents the result of the linear regression analysis. There was a small significant relationship between anxiety and Hypomanic activity, R=0.12, P=0.23. R square for the regression model = 0.12, thus indicating that Anxiety accounted for 1.2% of the variance in Hypomanic activity. The ANOVA table of regression indicated that anxiety significantly predicted hypomanic activity in the study sample, F (1, 348) = 5.21, $p<0.05$. Thus hypothesis 1, which stated that anxiety would predict hypomanic activity, was accepted.

Table 3: Descriptive Statistics showing respondents' mean scores and standard deviation of hypomanic activity and fear of negative evaluation.

	Mean	Std. Deviation	N
Hypomania	25.19	4.57	350
Fear of Negative Evaluation	15.94	6.51	350

Table 3 above represents the descriptive statistics for responses to the hypomania scale and fear of negative evaluation scale. Responses to the hypomania scale show a mean response score of 25.19 (N=350, SD= 4.57). Responses to the fear of negative evaluation scale show a mean response score of 15.94 (N=350, SD=6.51).

Table 4: Showing the linear regression coefficient of Fear of negative Evaluation on hypomanic activity.

Variables	B	Beta	T	Sig	R	R2	F ratio	Pv
Fear of negative evaluation	.015	.022	.403	.687	.122	.000	.162	.687

Dependent variable=Hypomanic activity

Table 4 above presents the evaluation and Hypomanic activity, R=0.022, P=0.23. R square for the regression model = 0.00, thus indicating that fear of negative evaluation accounted for 0% of the variance in Hypomanic activity. The ANOVA table of regression indicated that fear of negative evaluation failed to significantly predict hypomanic activity in the study sample, F (1, 348) = .162, p=0.687. Thus, hypothesis 2 which stated that fear of negative evaluation will predict hypomanic activity, was refuted in this study sample based on the linear regression analysis result. A small significant relationship existed between fear of negative evaluation and hypomanic activity.

Table 5: Showing the results of the multiple regression analysis.

Variables	B	Beta	T	Sig	R	R2	F ratio	Pv
Anxiety	.044	.123	2.246	.025	.122	.015	2.60	.075
Fear of negative evaluation	-.004	-.005	-.094	.925				

Dependent variable= Hypomanic activity

Table 5 above presents the result of the multiple linear regression analysis. R square for the regression model = 0.015, thus indicating that Anxiety and Fear of negative evaluation jointly accounted for 1.5% of the variance in Hypomanic activity. The ANOVA table of regression indicated that anxiety and fear of negative evaluation failed to jointly predict hypomanic activity in the study sample, F (2, 348) = 2.60, p>0.05. Thus hypothesis 3, which stated that anxiety and fear of negative evaluation would jointly predict hypomanic activity, was rejected.

Table 6: Showing means, standard deviation, and T-test statistics of comparison of females and males on hypomanic activity.

Gender	N	Mean	SD	T	df	Sig.
Females	181	24.37	4.73	-3.560	348	0.001
Males	169	26.08	4.23			

Table 6 above shows the results of the t-statistic test of independence comparing male and female Freshers on hypomanic activity. There was a significant difference in the hypomanic scores of females (M=24.37, Standard deviation=4.73) and males (Mean=26.08, Standard deviation=4.73). Freshers in the study sample, t (348) =3.56, p=0.01. Thus hypothesis 4 was accepted.

Table 7: Showing means, standard deviation, and T-test statistics of comparison of Freshers below 20 and Freshers above 20 on hypomanic activity.

Gender	N	Mean	SD	T	df	Sig.
Below 20	272	25.16	4.52	.242	348	.80
Above 20	78	25.30	4.75			

Table 7 above shows the results of the t-statistic test of independence comparing Freshers below 20 and Freshers above 20 on hypomanic activity. There was no significant difference in the hypomanic scores of Freshers below 20 (Mean=25.16, Standard deviation=4.52) and male (Mean=25.30, Standard deviation=4.75S) Freshers in the study sample, t (348) =.242, p=0.80. Thus hypothesis 5 was refuted in this study sample.

Discussion of Results

This study was designed to examine the relative influence of anxiety and fear of negative evaluation on hypomanic activity among Freshers samples at the University of Lagos. This objective was based on the premise that Freshers who are just entering the university environment will be more likely to experience anxiety and fear of negative evaluation, which stems from difficulty adjusting to the university environment they are not used to. Five hypotheses were formulated and tested using the appropriate statistics, and the results were presented.

Findings from the current research supported the hypothesis that anxiety will predict hypomanic activity in Freshers of the University of Lagos. According to the research results, the sample showed a slight positive relationship between anxiety and hypomanic activity. This means that Freshers with a high level of anxiety were more likely to engage in hypomanic activity. As put forward in the introduction to this study, Freshers in the University will be more likely to have increased anxiety levels due to the change in environment and strain they are likely to experience as they adjust to the university environment, which would lead them to engage in the hypomanic activity. According to Andrews and Thomson (2009), anxiety leads to increased vigilance and a tendency to take proactive actions against possible threats. Individuals who experience high anxiety levels will find ways to mitigate their anxiety. Several individuals are likely to adopt different coping skills for their anxiety. The increase in anxiety-related activity may likely evolve into hypomanic activity (Andrews & Thomson, 2009). Freshers coming into the University are more prone to naivety and thus are more likely to experience anxiety about many things due to lack of experience, adequate coping skills, and psychological resources. This study's findings align with Bourdet and Goldenberg (1994), who found an association between anxiety and decreased levels or lack of sleep, an indicator of hypomanic activity. High anxiety levels can impact an individual physiologically and psychologically. It has been shown that exposure to stress triggers the fight or flight response activated via the autonomic nervous system. High anxiety levels can lead to high arousal levels via the sympathetic nervous system (Bourdet and Goldenberg, 1994), leading to hypomania. However, this present study did not examine dimensions of hypomanic activity and, as such, cannot adequately identify which hypomanic activities students were more likely to engage in. On average, the sample used in the study showed low anxiety levels, as the mean anxiety level was less than the prescribed norm for state-trait anxiety presented by the scale developer. This could be due to the differences in the cultural context of the sample the scale was delivered on and the sample in this present study. This, however, does not affect the significance of this current study.

The second hypothesis tested in this study predicted that fear of negative evaluation would predict hypomanic activities among Freshers at the University of Lagos. Fear of negative evaluation refers to the apprehension individuals are likely to experience about other people's evaluative situations and the expectation that others would evaluate them negatively. However, this hypothesis was not supported by the result of this study. It was found that fear of negative evaluation was not significantly related to hypomanic activities in the Freshers sample and failed to predict hypomanic activity. This finding did not align with Weeks et al. (2008) proposition that fear of negative evaluation is a precursory factor to anxiety which inevitably leads to hypomanic activity. If this proposition was accepted, then fear of negative evaluation should have been significantly related to hypomanic activity in the sample, but the reverse is the case in this study. Therefore, it could have been possible that the relationship between anxiety and fear of negative evaluation was mediated or moderated by a third variable not examined in this study sample.

The third hypothesis stated that anxiety and fear of negative evaluation would jointly predict hypomanic activity in the sample of first-year students; this hypothesis sought to examine the combined effect of anxiety and fear of negative evaluation in accounting for hypomanic activity in new students. This hypothesis was not significant and thus led to the conclusion that anxiety and fear of negative evaluation could not predict hypomanic activity. This hypothesis sought to find whether individuals with a high level of anxiety and high fear of negative evaluation will likely engage in hypomanic activity. The results did not support this assertion. The fourth and fifth hypotheses tested in this study were on gender and age differences in hypomanic

activity in the sample of newly admitted undergraduates. The results of the hypotheses testing revealed that males experience higher levels of hypomanic activity than females. This hypothesis considered hypomania in males and females and did not check the influence of anxiety on hypomanic activity between the two gender groups. Meyer et al. (2007), in their study on hypomanic personality features and addictive behaviour found that males were more likely to engage in hypomanic activities related to gambling and alcohol intake, while females were likelier to engage in hypomanic activity related to shopping. Their study did not compare gender differences but instead checked for the association between gender and different hypomanic activities, unlike this present study, which only checked for gender differences. On average, both samples in our present study engaged in hypomanic activities, but males significantly differed from females in hypomanic activity. Age was not a significant factor in the levels of hypomanic activity in the study sample. The findings revealed an insignificant difference between Freshers aged ≤ 20 and Freshers aged ≥ 20 years.

Limitations of the study

This research is not entirely free from methodological limitations, which may have confounded the results. The first flaw lies with the psychological inventories used in the study. The hypomanic scale is typically used in clinical settings on patients believed to have cases of bipolar disorder. However, our study employed individuals in a school setting, and there was no way of identifying individuals with bipolar disorder who could have confounded the study by their high scores on the hypomania scale.

Also, the research period might have affected this study's results because the survey was done when Freshers had already spent a semester in school and might have managed to find ways to handle their anxiety about being in the University. It would have been more appropriate and yielded greater statistical significance had the research been conducted at the beginning of the semester when their anxiety and fear of harmful evaluation levels might have been higher to examine how they predicted hypomanic activity.

Conclusion

The study concludes that anxiety predicted hypomanic activity among new entrants into the University. Furthermore, it established a relationship between gender and hypomanic activity among new entrants to the University. These results imply that parents and university authorities should implement programs to help the newly admitted to be well-adjusted and settle down more appropriately with minimal or no adjustment issues. Thus, it reduces negative issues associated with problematic adjustments, such as anxiety, and enhances quality inter or intra-personal relationships between them and their peers. Finally, despite the study's broad conclusions and significant contributions to knowledge, the data for the study was gathered from a university campus. Therefore, there are no bases for comparing our data and findings with other universities nationwide.

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