

Research Article

Relationship between Academic Stress and Socio-Demographic Information among the Health Trainees of the Faculty of Nursing and Public Health (FNPH), Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB)

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Abstract

Introduction: Academic stress can negatively impact health and wellbeing, and students with poor coping skills can easily become victim to drug and alcohol use. This paper explored relationship between academic stress and socio-demographic information among the healthcare trainees of the Faculty of Nursing and Public Health, Khesar Gyalpo University of Medical Sciences of Bhutan.

Methods: A descriptive cross-sectional survey was conducted and data were collected through structured questionnaire. A total of 423 healthcare trainees (male=197, female=226) participated in this study with overall response rate of 90.2%.

Results: The average academic stress score was 109.34 (SD=28.15). A slightly more than half (53.9%) of the participants reported study related problems as the sources of academic stress. Nearly 53% reported having resorted to sleeping a lot and talking to a friend to combat their academic stress. Courses (p-value<0.001) and gender were significant correlates of academic stress (p-value<0.001). Likewise, the final year trainees and with their parental background as home makers experienced the highest academic stress.

Conclusions: Efforts to reduce academic stress is critical to promote psychological well-being among the healthcare trainees of FNPH. Further research is recommended to explore how the identified potential sources of stress can influence the performance and the personal health of an individual.

Keywords: Academic stress; Psychological well-being; Healthcare trainees; Social support; Public health; Bhutan

Introduction

Stress is defined as reaction people may have when presented with demands and pressures that does not match to their knowledge and abilities, and challenges their ability to cope [1]. Stress is an unavoidable part of everyone's life that can levy on physical and mental health and academic success if it's not appropriately dealt with [2]. Stress can take various forms to various people depending on the situation and the response to it also depends on how an individual appraise stress; as an opportunity or a threat [3]. While the ability to take stress as an opportunity could lead to constructive outcomes

such as inspiration and better performance, considering stress as threat may result into apprehension, despair, social dysfunction, and suicidal intention [4]. Stress can be of different types depending on the situation, participation, time and its encounter. Factors such as relationship, personal, an academic and environment influences stress [5]. College students experience stress mainly due to changes in their lifestyle, interpersonal relationships, and increased workload, which could directly affect their work efficacy leading to poor academic performance and one's overall happiness [2].

Academic stress is defined as a mental distress with respect to anticipated frustration associated with academic challenges [3]. For most students, not confining to examination, issues related to academic such as time pressure, lack of financial support, fear of lagging behind in homework, assignments and group projects are the common sources of their stress [6]. Academic stress can bring about anxiety, withdrawal, aggression, and students with poor coping skills can easily become prone to drug and alcohol use [7]. Furthermore, when a person is exposed to a chronic stress, he or she is likely to experience both physical and mental illnesses negatively impacting their performance. Common behavioral problems among the students such as deliberate self-harm, substance abuse, suicidal attempts, alcohol addiction, anti-social behaviour and eating disorders are often linked to stress [7]. It is imperative to learn how to deal and manage the consequences of academic stress before it becomes chronic.

Citation: Phuntsho S, Dorji N. Relationship between Academic Stress and Socio-Demographic Information among the Health Trainees of the Faculty of Nursing and Public Health (FNPH), Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB). *J Med Public Health*. 2022;3(4):1039.

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Publisher Name: Medtext Publications LLC

Manuscript compiled: Aug 22th, 2022

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In Bhutan, as a result of increasing competition in the job market, uncertain future prospects and high expectation from parents, the academic life of students especially in the tertiary education institutions have become more stressful [5]. The relationship between the socio-demographic variables, social support, and health risk and health promoting behaviors and academic stress is still largely unknown among the Bhutanese health care trainees. Therefore, this study was conducted among the healthcare trainees of the Faculty of Nursing and Public Health (FNPH), Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB) to fill up the identified gap. The finding from this study is expected to serve as a statistical reference for future studies and is envisaged to have policy implications for better academic stress management and provision of conducive learning environment.

Materials and Methods

Study design

This study employed descriptive cross-sectional quantitative research design.

Sample size and sampling techniques

All the healthcare trainees (n=469) of the FNPH for the academic year 2018 were conveniently approach to participate in the study.

Data collecting techniques

The data for the study were collected using self-administered questionnaires. Prior to data collection, permission was officially sought from the head of the institute (RCSC/HRCS/CIR (10)/2018/2056). All the trainees were approached during one of the morning assemblies where all the students were present. The principal researcher briefed the trainees about the study including its aims and the objectives, maintenance of confidentiality, and obtaining of consent from the participants. The participation was purely based on voluntary and an option to withdraw at any point of time of interview was provided to the participants. After taking consent from each of the participants, they were requested to complete the questionnaire which took approximately 30 to 40 minutes. The duly filled questionnaires were kept in the safe place under lock and key accessible only to the researcher.

Instrumentation

Student Academic Stress Scale (SASS) [8], which is widely used, was adapted to assess academic stress among the study participants. SASS contain 40 items rated on a five-point Likert scale (1=No Stress to 5=Extreme Stress) with the score range of 40 to 200, higher score indicating higher stress. The instrument has a good internal consistency score (Cronbach alpha score of 0.70) [8].

Data management

Statistical Analysis: Data obtained from the participants were checked for its correctness as part of the data cleaning. Each variable was sorted and crossed checked for the missing data and wrong entry through physical verification in the presence of the supervisor. Data was entered through EpiData version 3.1, and on completion of its entry, data was transferred to the Statistical Package for Social Sciences (SPSS version 24.00) for analysis. Frequency (percentage) and mean (standard deviation) were calculated to present the background characteristics and independent t-test, one-way ANOVA, and Pearson correlation coefficient test was conducted to examine the relationships between the socio-demographic characteristics and academic stress.

Results

A total of 423 (male =197, female =226) healthcare trainees participated in this study with an overall response rate of 90.2%.

Characteristics of the study participants

As illustrated in Table 1, the average age of the participants was 21.9 (SD=2.53) years, ranged between 18 to 34 years. A slightly more than half of the participants were female (53.4%) aged below 21 years (52.4%). Among the eight different courses offered at the Faculty of Nursing and Public Health, Khesar Gyalpo University of Medical Sciences of Bhutan, General Nurse Midwife (GNM) course represented the highest (33.8%) followed by foundation (19.1%) and medical technician (19.1%) courses. The participants from first year represented the highest (38.5%). Nearly 53% of the participants reported having close friends less than five. Most of the participants were from farming parental background (65%).

Table 1: Socio-demographic characteristics of the study participants.

Socio-Demographic Characteristics	n(%)
Age (n=422) (Mean: 21.9, SD: 2.53; Min-Max: 18-34)	
18-21 years	221(52.4)
>21 years	201(47.6)
Sex:	
Male	197(46.6)
Female	226(53.4)
Courses:	
Foundation	81(19.1)
General Nurse Midwife	143(33.8)
Health Assistant	51(12.1)
Medical Technician	81(19.1)
BSc. Nursing Midwifery	10(2.4)
Bachelor of Public Health	5(1.2)
BSc. Clinical Counselling	24(5.7)
Emergency Medical Response	28(6.6)
Year(s) into Training	
1 st year	163(38.5)
2 nd year	129(30.5)
3 rd year	126(29.8)
4 th year	5(1.2)
Number of Close Friends(n=408) {Median=5 (Min-Max: 1-82)}	
1-5	216(52.9)
>5	192(47.1)
Parental background:	
Civil Servant	75(18.1)
Farmer	269(65.0)
Business	24(5.8)
Armed Forces	27(6.5)
Home Maker	5(1.2)
Others	14(3.4)

Academic stress of the participants

Table 2 shows the univariate analysis of the academic stress of the respondents. The average academic stress score was 109.34 (SD=28.15). More than one third of the respondents have experienced both extreme (32.9%) and high stress (33.6%) from worrying about their examination (30.9%) followed by difficulty in remembering all that is studied (33.3%), respectively. Further, around 30% of the participants reported extreme stressed from worrying about their results after the examination, and more than one fourth of them extremely stressed (26.8%) and highly stressed (27.5%) due to heavy examination syllabus for certain subjects. The eleventh- hour preparation for their examination have also resulted in high to extreme stress (51.7%). Lack of concentration during study hours (23.8%), lack of self-confidence (21.4%), not knowing how to prepare for the examinations (23.4%),

Table 2: Academic stress among healthcare trainees at FNPH (n=378).

SASS Items	Response Options				
	No stress n(%)	Slight Stress n (%)	Moderate Stress n(%)	High stress n(%)	Extreme Stress n(%)
Teachers make too many extra demands from students	52(12.3)	121(28.6)	131(31.0)	73(17.3)	46(10.9)
Poor interest in some subject	54(12.9)	145(34.5)	145(34.5)	59(14.0)	17(4)
Progress reports to parents	140(33.4)	119(28.4)	79(18.9)	57(13.6)	24(5.7)
Teacher is not humorous to us	126(30.0)	115(27.4)	111(26.4)	49(11.7)	19(4.5)
Lack concentration during study Hrs	32(7.6)	111(26.4)	127(30.2)	100(23.8)	51(12.1)
Difficulty in remembering all that is studied	8(1.9)	46(10.9)	97(23.0)	140(33.3)	130(30.9)
Worrying about the examinations	12(2.8)	45(10.7)	84(19.9)	142(33.6)	139(32.9)
Lack of self confidence	41(9.7)	128(30.4)	131(31.1)	90(21.4)	31(7.4)
The teachers do not listen to our ideas	98(23.2)	125(29.6)	95(22.5)	60(14.2)	45(10.6)
Conflicts with friends/college Authorities	146(34.7)	111(26.4)	75(17.8)	53(12.6)	36(8.6)
Teachers give more punishment in the class	181(43.1)	94(22.4)	74(17.6)	50(11.9)	21(5.0)
Worry about results after Examinations	29(6.9)	63(15.0)	81(19.2)	122(29.0)	126(29.9)
Hesitate to ask the teacher for detailed explanation	70(16.7)	141(33.6)	125(29.8)	58(13.8)	26(6.2)
Biased attitude of the teacher	98(23.2)	100(23.7)	96(22.7)	75(17.8)	53(12.6)
Inadequate room or space for study at home	125(29.8)	104(24.8)	90(21.4)	61(14.5)	40(9.5)
Not knowing how to prepare for the examinations	51(12.2)	113(27.0)	122(29.1)	98(23.4)	35(8.4)
Lack of confidence (assertiveness) in the class	68(16.2)	140(33.3)	115(27.3)	76(18.1)	22(5.2)
Lack of opportunity to meet the Teachers	117(27.8)	151(35.9)	105(24.9)	36(8.6)	12(2.9)
Teacher shows socio-economic status on students	185(44.0)	116(27.6)	73(17.4)	30(7.1)	16(3.8)
Slow in getting along with the Curriculum	48(11.3)	133(31.4)	127(30.0)	75(17.7)	40(9.5)
Exam papers are tough and not valued well	53(12.6)	108(25.7)	120(28.5)	81(19.2)	59(14.0)
Unable to complete the assignment in time	69(16.3)	118(27.9)	109(25.8)	89(21.0)	38(9.0)
Lack of communication between teachers and students	83(19.8)	116(27.6)	127(30.2)	66(15.7)	28(6.7)
Monotonous teaching style by teachers	73(17.3)	119(28.3)	130(30.9)	64(15.2)	35(8.3)
Not enough discussion in the class	81(19.2)	153(36.3)	117(27.7)	52(12.3)	19(4.5)
Lack of mutual help among classmates	119(28.2)	131(31.0)	100(23.7)	50(11.8)	22(5.2)
Lack fluency speaking lang. other than M. tongue	63(14.9)	115(27.2)	117(27.7)	82(19.4)	46(10.9)
Difficulty in public speaking	46(10.9)	110(26.1)	107(25.4)	94(22.3)	64(15.2)
The teacher is fast and does not use blackboard legibly	75(17.8)	134(31.8)	117(27.8)	59(14.0)	36(8.6)
Teachers lacking interest in students	103(24.5)	113(26.8)	96(22.8)	62(14.7)	47(11.2)
Examination syllabus is too heavy in some subjects	35(8.3)	72(17.1)	86(20.4)	116(27.5)	113(26.8)
Feeling of inferiority	91(21.6)	138(32.7)	91(21.6)	67(15.8)	35(8.3)
Unable to discuss academic failures with the parents	95(22.5)	106(25.1)	93(22.0)	80(18.9)	49(11.6)
Not able to grasp the subject Matter	54(12.8)	139(32.9)	129(30.5)	74(17.5)	27(6.4)
Incomplete and confusing study Materials	37(8.8)	140(33.3)	129(30.6)	83(19.7)	32(7.6)
Eleventh hour preparation for the examinations	26(6.2)	66(15.7)	111(26.4)	113(26.9)	104(24.8)
Importance of the subject matter	45(10.7)	109(26.0)	147(35.1)	88(21.0)	30(7.2)
Difficulty in adjusting with opposite gender	164(38.8)	147(34.8)	77(18.2)	24(5.7)	11(2.6)
Inadequate subject knowledge of the teacher	123(29.1)	117(27.7)	107(25.3)	56(13.2)	20(4.7)
Inadequate lab and library Facilities	167(39.5)	110(26.0)	73(17.3)	39(9.2)	34(8.0)
Total academic stress score	Mean=109.34 (SD=28.15); Min-Max=42-188				

unable to complete assignments on time (21%) and difficulty in public speaking (22.3%) were also reported highly stressful. Nearly 18% participants reported to have high stress due to biased attitude of the teachers. One in four (25.3%) of the participants also reported to have experienced moderate stress due to inadequate subject knowledge of the teachers and when teachers do not listen to their ideas (29.6%).

Sources of academic stress and available options to combat academic stress

As indicated in Table 3, slightly more than half of the participants (53.9%) reported that their sources of academic stress are due to study related problems including study issues (26.1%), course load (16.4%) and time pressure (11.4%). Personal problems (13.3%), financial issues (12.1%), and employability (12.3%) also contributed to their academic stress.

A little over half (52.9%) of the participants reported resorting to sleeping a lot (27.5%) and talking to a friend (25.4%) to deal with their academic stress in the institute. More than a quarter of the participants (30.4%) have also mentioned playing games (16.4%) and listening to music (14.0%) as the ways to combat academic stress.

Table 3: Sources of academic stress (n=422) and available options to combat academic stress.

Sources of Academic Stress		Options to combat academic stress		
Sources of Academic Stress	n(%)	Available Option	n	%
Course load	69 (16.4)	Play games	69	16.4
Financial issues	51 (12.1)	Sleep lot	116	27.5
Family issues	15 (3.5)	Read books	15	3.6
Sports activities issues	5 (1.2)	Smoking	2	0.5
Employability	52 (12.3)	Shopping	2	0.5
Personal problems	56 (13.3)	Talk to a friend	107	25.4
Friend issues	4 (0.9)	Eat lot	6	1.4
Time pressure	48 (11.4)	Dance/Sing	2	0.5
Study issues	110 (26.1)	Use social media	35	8.3
Health related issues	7 (1.6)	Play computer games	5	1.2
Others	5 (1.2)	Listen to music	59	14
Total	422 (100.0)	Drink alcohol	4	0.9
		Total	422	100

Bivariate relationship between socio-demographic characteristics and academic stress

Table 4 illustrates bivariate relationship between socio-demographic variables and academic stress. Female gender significantly

reported higher academic stress (p -value <0.001) compared to male counterpart. Courses that the participants undertake were also significantly associated with academic stress (p -value <0.001). For instance, compared to course on medical emergency response, that undertaking general nurse midwife significantly reported higher academic stress. Final year participants and whose parents were home makers seemingly have experienced higher academic stress although no statistical significance was found in the bivariate analysis.

Table 4: Relationship between socio-demographic and academic stress among the health care trainees of the FNPH, KGUMSB.

Socio-Demographic Variables	Academic Stress	p-value
	M \pm SD	
Age	(n=378)	0.319
18-21 years	110.71 \pm 27.21	
>21 years	107.82 \pm 29.16	
Gender	(n=378)	0.000***
Male	103.52 \pm 28.69	
Female	114.31 \pm 26.76	
Number of close friends	n=365	0.74
44682	109.09 \pm 27.07	
>5	110.07 \pm 29.18	
Course	(n=378)	0.000***
^a Foundation	106.51 \pm 30.49	
^b General Nurse Midwife	116.53 \pm 24.66 ^d	
^c Health Assistant	105.41 \pm 24.53	
^d Medical Technician	97.85 \pm 26.13 ^{bs}	
^e BSc. Nursing Midwife	104.40 \pm 47.22	
^f Bachelor of Public Health	91.33 \pm 14.01	
^g BSc Clinical Counselling	120.45 \pm 28.93	
^h Emergency Medical Response	108.96 \pm 29.35 ^d	
Years of training	(n=378)	0.099
1 st year	108.45 \pm 30.54	
2 nd year	111.58 \pm 24.59	
3 rd year	107.20 \pm 28.04	
4 th year	140.00 \pm 16.59	
Parental background	(n=372)	0.335
Civil Servant	109.29 \pm 26.70	
Farmer	110.23 \pm 28.28	
Business	105.83 \pm 32.34	
Armed forces	100.54 \pm 24.01	
Home Maker	129.00 \pm 12.04	
Others (monks, students, carpenters.)	114.27 \pm 34.40	

***p-value <0.001 ; **p-value <0.01 ; *p-value <0.05 ; M: Mean; SD: Standard Deviation

Discussion

The aim of this study was to examine the relationship between academic stress and socio-demographic information among the health trainees of the Faculty of Nursing and Public Health (FNPH), Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB), Bhutan. Although the overall stress score was lower than the mid score range, higher to extreme level of stress was attributed by academic issues such as worrying about examination, heavy syllabus, difficulty in remembering all that have been studied, course load and time pressure. This finding is in concurrence to previous study where end of semester exams, excessive assignment workloads were identified as the major sources of academic stress [9]. The universities and colleges in Bhutan mainly assessed the performance of the students through the academic parameters which is an exam centric mode of assessment. This could contribute to a stressful life of students. Amore holistic academic assessment for the students could reduce certain stress related to their academic performance. Also due to increased competition in the job market and high expectation from parents, the academic lives of students in the tertiary education institutions have

become stressful [5]. These findings are true reflective of the Bhutanese society, which is evident from rising overall unemployment rate of 5% in 2020 compared to 3.1% in 2017 [10]. Further, parental pressures and teachers' expectations were associated with students' stress especially during the time of examinations or choosing a particular academic study or a future career [11]. A study in India has also found that students who joined dentistry due to parental pressure showed greater stress than those who enrolled on their own [12]. The parents could have considered the relevance and employability of their children while choosing the courses as it involves huge burden for the parents to educate their children. It is also the responsibility of the parents to ensure that the children get good education, which could help lead a successful career in life. However, it is imperative to consider the interest, capacity and potentiality of the children to perform in that particular field. Otherwise, it could be a burdensome, stressful and life threatening at times for the children to complete the course successfully. It is imperative to have consistent support and guidance from the teachers to perform well but at the same time, expectations of the students should also be balanced so that they don't feel stressed.

Nevertheless, even if the students suffer from stress, it is crucial to learn to manage them properly. There are many options to combat academic stress of the students. In this study, more than half of the respondents resorted to sleeping a lot and talking to a friend to combat academic stress. However, in other studies, the use of substance such as alcohol and smoking were perceived to help cope with stress especially among the adolescents [13]. The study participants resorting to use of alcohol and tobacco to combat academic stress is minimal (0.9% and 0.5%), respectively. This could be due to the continued advocacy and awareness programs on the harmful use of alcohol and tobacco in the country. Besides, they are all health trainees who could be an advocator for better health in future.

The socio-demographic variables such as the age and parental background were found to have no significant effects on the overall stress level of the participants. Irrespective of the difference in the family background, trainees experience almost the same level of stress academically. This finding is in line with the previous study where it was found that the family wealth or various parental backgrounds does not automatically confer either wisdom in parenting or equanimity of spirit and psychological well-being to their children [14]. The study has also highlighted course wise differences in the experience of academic stress among the participants which showed direct correlation between the duration of the course and the stress level. The participants undertaking Bachelor of Science in Clinical Counselling; a four years course which is the longest duration course offered at the faculty has experienced worst academic stress followed by General Nurse Midwife. This could also be due to the technical contents of the courses that add to their stress level. These findings were concurrent to the previous study where a significant difference in academic stress was found between the streams of courses offered [14].

Policy implications

The findings from this study have an important implication owing to its contradiction and agreement with some of the previous research findings on the same topics. The study recommends policy makers to provide trainees with all possible psychological, social and academic counselling and supports for better academic stress management. The majority (53.9%) of the respondents have reported that they experienced stress from study related issues. The faculty needs to

consider reviewing the current syllabus, course load, its relevance and improve teaching and learning methods to reduce academic stress. Besides, the teacher-student relationship needs to be strengthened, and proper planning for completing the syllabus and assignments on time and not crowding towards the end of the semester would enable trainees to get adequate time to prepare for their examination and reduce stress. In addition, the issue of students experiencing academic stress should never be taken for granted as it might negatively impact the overall performance and daily activities of the students. It is also necessary for the students to plan their routine schedule for their daily works and ensure proper implementation to complete their work by the end of their sessions on the given time. They must also develop positive attitude towards their lives to enable them to perform well in activities without much fear and stress. The positive thinking lowers the levels of distress and better psychological and physical well-being [15].

Furthermore, it would be important to organize some relevant trainings or workshops at the beginning of each semester for the new trainees to learn how to cope and manage their academic stress. It is highly recommendable that students discuss their issues with their parents, teachers, counsellors or friends to explore potential solutions to their problems irrespective of its nature. A finding from this study supports the evidence that academic stress continues to be a problem and affects student's well-being. Therefore, the management of the condition thus becomes fundamental at personal, social, and institutional level [16].

Conclusions

The academic stress has become a persistent problem across the globe for the students. This problem cuts across cultures and ethnic groups irrespective of emotional, physical, natural or man-made, public or private, which has put forth pressure into the lives of individuals. The young people are predominantly susceptible to problems associated with academic stress and are essential to understand the sources and the consequences of academic stress to develop adequate and efficient intervention strategies [15]. This study provided better insights to the academic administrators in issues related to academic stress and socio-demographic information of the health trainees. Initiating effective intervention strategies in reducing academic stress would promote effective learning and well-being among the trainees.

Acknowledgement

The authors would like to thank the management, faculty and trainees of Faculty of Nursing and Public Health (FNPH), KGUMSB for their cooperation and support in conducting this study.

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