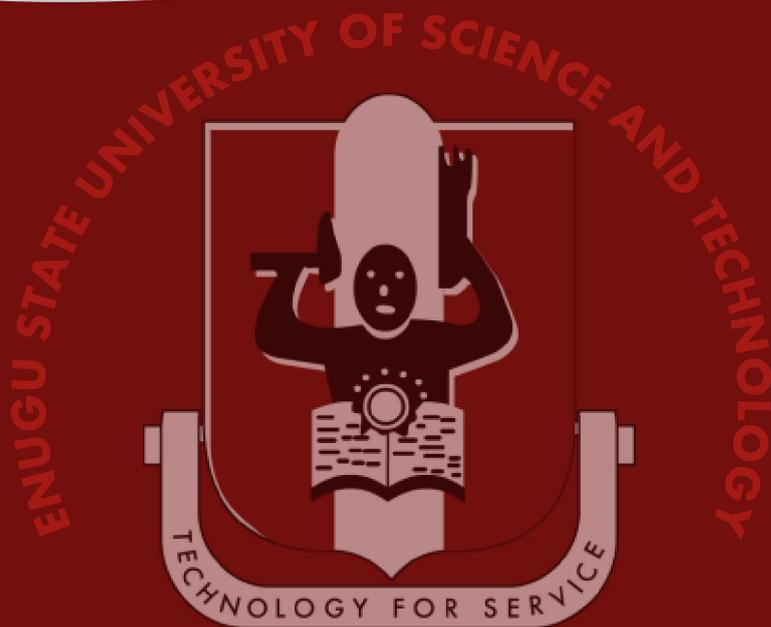


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Influence of Self Efficacy and Level of Education on Test Anxiety among Adolescents

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Abstract

The study examined influence of Self Efficacy and level of education on Test Anxiety among adolescents. Using available sampling technique (that is, students who were present and willing at the time of the study to participate in the research). 100 students from Ozalla High School in Nkanu West in Enugu State were drawn to participate in the study; comprising 57 junior students and 43 senior students, out of which 51 are females and 49 are males. They were between 12-17 years with a mean of 14.3 years and standard deviation of 2.1 years. Self-Efficacy Scale (Sheker, et al, 1982) and Test-Anxiety Inventory (Spielberger, 1980). Cross sectional design was used and 2×2 Analysis of variance F-test statistic used for data analysis. The findings revealed no significant outcome on self-efficacy $F(1, 96) = 1.26$ at $P > .05$; a significant outcome on level of education $F(1,96) = 4.58$ at $P < .05$; and no interaction between self-efficacy and level of education $F(1,96) = 0.08$ at $P > .05$ on test anxiety among adolescents. The findings were discussed in relation to literatures reviewed and suggestions made

Keywords: Self –Efficacy, Level of Education, Test-anxiety and Adolescents

Introduction

In today's world everybody faces stress in everyday life and no one can escape from pressures of life competition with others in sport, education, professional fields and other contexts, inevitably, he/she tries to meet the demands and requirements of modern life. In many cases due to limited resources and multitude of applicants, one is forced to compete for getting some external goals, such as winning in a competition, interviews, getting good grades in school exams, promoting job or putting on absolute spotlight of others. In such an environment, the goal of the students is to show their superior capability. According to Bandura (1997) self-efficacy is defined as: perceptions of students from the ability to

successfully resolve the issue, learning the activities or perform them on a desire level. Studies have shown that mental health and human well-being requires an optimistic sense of self-efficacy (Maciejewski et al., 2000). A strong sense of efficacy leads to a high level of motivation, academic achievements and interests growth in educational issues (Pajares & Schunk, 2001). Ashby and Kathryn (2007) reported that high efficacy in talented students is related to a number of behaviours such as: enhancement of social harmony, improvement of interpersonal relations and social and academic skills, vice versa low efficacy in ordinary students is a major contribution to personal, social and educational problems.

Bandura (1997) defined Self-efficacy as the belief in one's own capacity to organize and execute the courses of action required to manage prospective situations. In other words, Self efficacy is a person's belief in his or her own ability to succeed in a particular situation. Bandura described these beliefs as determinants of how people think, behave and feel. An individual's sense of self efficacy can play a major role in how they feel, how they approach goals, task and challenges. The concept of self-efficacy lies at the centre of Bandura's social cognitive theory which emphasizes the role of observational learning and social experience in the personality development.

A strong sense of self-efficacy enhances human accomplishment and personal well-being in many ways. Such an efficient outlook produces personal accomplishments, reduces stress and lowers vulnerability to depression. In contrast, people who doubt their capabilities shy away from difficult tasks which they view as personal threats. They have low aspirations and weak commitment to the goals they choose to pursue. They fall easy victim to stress and depression. Parajares and Schunk (2001) indicated that individuals tend to engage in tasks about which they feel competent and confident, and avoid those in which they feel incompetent. In the study of Tella and Ayeni (2007) on self-efficacy of nurses, found out that self-efficacy propels nurses to keep trying to accomplish their goals and make good decisions that translate into meaningful achievements. According to Bandura (1997), people with high self-efficacy are those who believe they perform well and are more likely to view difficult tasks as something to be mastered rather than as threats to be avoided. Self-efficacy is one's belief in one's effectiveness in performing specific tasks. People who regard themselves as highly efficacious act, think, and feel differently from those who perceive themselves as inefficacious. Self-efficacy beliefs provide the foundation for human motivation, well being and personal accomplishments. This is because unless people believe that their actions can produce the outcomes they desire, they have little incentive to act or to persevere in the face of difficulties (Parajares, 2006).

Another variable studied in this research is test anxiety. Anxiety is a very common phenomenon in psychological studies, which has been researched for many years and in fact it is the most common reaction to stress (Sarason, 1984). McKee (2007) showed that students in all levels of academic achievements and intellectual abilities can be affected by test anxiety. Test anxiety leads to behavioural, physical and phenomenological reactions along with the test (Zeidner, 2007). Hembree (1988) reported that there is a negative correlation between test anxiety and success in IQ, intelligence, memory and problem solving tests. Biabangard (1999) reported that students with low level of test anxiety have better performance in difficult exams than the easy ones, while the performance of students with moderate test anxiety is contrary; finally students with high level of test anxiety, have low function in both hard and easy exams. On the other hand, there are few studies that have examined the relationship between self efficacy and anxiety. Anxiety is a state of anticipatory apprehension over possible deleterious happenings. Individuals experiencing anxiety embody apprehension and avoidant behaviour that often interfere with performance on everyday life as well as in academic situations. In social cognitive theory, one's perceived sense of efficacy plays a key role in the arousal of student anxiety.

Individuals, therefore, only experience anxiety when they believe themselves to be incapable of managing potentially detrimental events. Anxiety is a physiological state characterized by cognitive, somatic, emotional and behavioural components (Seligman, Walker & Rosenhan, 2001). These components combine to create the feeling that we typically recognize as fear, apprehension or worry. It is accompanied by physical sensations such as heart palpitations, nausea, and chest pain, shortness of breath, stomach ache or headache. The cognitive component entails expectation of a diffuse and uncertain danger. Somatically, the body prepares the organism to deal with threat (known as emergency reaction): blood pressure and heart rates are increased, sweating, blood flow to the major muscles groups as increased. Externally, Somatic signs of anxiety may include pale skin, sweating, trembling, and papillary dilation. However, anxiety is not always pathological or maladaptive. It is a common emotion along with fear, anger, sadness and happiness and it has a very important function in relation to survival. Too much anxiety about a test is commonly referred to as Test Anxiety. Test anxiety is a set of response like worry, depression, nervousness, task irrelevant, cognitions, etc. to a class of stimuli arising from an individual's experience of assessment or testing (Razor & Rasor, 1998). Test anxiety is a psychological situation whereby an individual becomes perplexed or worried as a result of lack of preparation, lack of study habit, poor time management which results in physiological changes outside the body such as sweat, palpitations, etc. It can cause whole lots of problems in individuals such as upset stomach, headache, and loss

of focus, irritability, anger and even depression. Test anxiety implies the debilitating experiences of anxiety as described by Lewis during the preparation for a test or during the test itself (Jing, 2007). Test anxiety makes it hard for students to concentrate on test and perform adequately. Chapel (2005) showed that test anxiety has negative correlations with academic performance.

According to Bandura, (1997), Self-efficacy as a correlate of test anxiety means the psychological belief one has in him or herself in doing a particular task efficiently which can reduce or procure more anxiety to the person. Self efficacy which deals on the psychological natural strength of a person in functioning efficiently on a particular difficult task coupled with his or her belief that he or she can do it has a lasting influence and effect of lesser or greater anxiety. This happens when an individual believes that whatever the task appears to be, he or she can achieve without much process. Such belief and aspiration occurs when the individual has a high level of Self efficacy. Bandura identified two levels of Self efficacy as High Self efficacy and Low self efficacy.

High level of Self efficacy can be seen as the greater intensity of belief that one has about him or herself to achieve a greater goal. High Self efficacy can affect motivation in both positive and negative ways. In general, people with high self efficacy are more likely to make efforts to complete a task and to persist longer on those efforts than those with low level of self efficacy; the stronger the self efficacy or mastery expectations the more active the effort. Low level of self efficacy emphasizes that an individual feels incompetent or has the belief that he or she cannot organize and execute some tasks effectively. When an individual has a high self efficacy, it is believed that they can execute any task given to them and also making them to have a low test anxiety; unlike an individual who has a low self efficacy, he or she will have a high test anxiety (Bandura, 1997). Bandura, further made it vital for individuals to believe that self efficacy is situational in nature rather than being viewed as a stable trait. Casually, self efficacy is believed to affect performance via influence on task perception. For example, research suggests that high self efficacy creates a feeling of calmness, or security when approaching difficult tasks while low self efficacy may result in an individual perceiving a task as more difficult than reality, which, in turns, may create anxiety, stress and a narrower idea on how best to approach the solving of problem or activity (Eccles, 2005).

However, Self efficacy theory suggests that self efficacy is an individual's confidence in their ability to organize and execute a given course of action to solve a problem or accomplish a task (Eccles & Wigfield, 2002). Students who are confident in their capability

to organize, execute and regulate their problem-solving or task performance at a designated level of competence are demonstrating high self efficacy while those that cannot execute, and regulate their problem-solving are demonstrating low self-efficacy. The major aim of this research is to investigate whether Self efficacy will influence test anxiety.

Theoretical framework

The following theories of Self efficacy and test anxiety are discussed below;

The Multi Dimensional Theory (Martin, 1990)

This theory is based on the assumption that competitive anxiety is comprised of two distinct parts, a cognitive component and a somatic component, both having similar effects on performance. Hence, theoretically, the components can be manipulated independently on one another, the cognitive component has been defined as the negative expectations and concerns about one's ability to perform and the possible consequences of failure where as the somatic component is the physiological effect of the anxiety experienced, such as an increase in autonomic arousal, with negative physiological effect like palpitation, tense muscles, shortness of breath, clammy hands (Morris, Davis & Ravin, 1981). This theory can be seen happening in an individual or student's life when faced with test anxiety. Martin (1990) using a time paradigm found out that a selection of athletes forty eight hours, twenty hours, four hours, two hours, five minutes before a critical event, they affirmed that the Cognitive component stayed stable before the start but the Somatic component began to increase prior to the onset of the event.

However, the secondary students usually obtain good marks during the terms but their final term scores (for example, WAEC, GCE, NECO and JAMB) usually considerably drop and this can be as a result of the high level of their test anxiety. The low rate of anxiety during the course of examinations seem to be necessary for carrying out studies and researches, but the students' anxiety is sometimes to the extent that their activities are constrained and limited (Yazdani & Soleimani, 2012; Heravi, & , Jadid, 2004). Test anxiety is a special type of the general anxiety which manifests itself with somatic, cognitive and behavioral signs and symptoms during the period that the students are getting ready for their exams and accomplishing tests. Test anxiety turns to be a big problem when it gets so much severe and enormous that it mingles with getting prepared for the exams and test accomplishment (Latas , Pantić, & Obradović , 2017). In the study performed by Abazary, Abbaszadeh, and Arab,(2004) which aimed at the survey of the anxiety source and rate among the nursing students the results indicated that this field of study besides the instructional environment

anxiety they are exposed to the clinical atmospheres. Moreover, when the test anxiety is also added up to such worries may be subsequently followed with academic underachievement and the expression of somatic and psychological disorders in the nursing students (Abazary, Abbaszadeh & Arab, 2004). Also one should be attentive to the issue that anxiety is one of the factors that can influence the individual's self-efficacy level, Bandura (1997) was of the belief that physiological and emotional arousals are among the factors that influence the individual's self-efficacy. He opined that in cases we are free from being stimulated, nervous or with headache and if we experience lower anxieties then we are more likely to believe that we can conquer our problems successfully. The more we feel we are relaxed and cool our self-efficacy will be more heightened, accordingly. To put it differently, the higher our level of physiological and emotional arousal then the lower our feeling of efficiency and self-efficacy would be (Saadat , Asghari , & Jazayeri , 2015). Therefore, based on the self-efficacy theory, factors such as stresses, psychological tensions and pressures, economical conditions, social and curriculum statuses do not seem to be directly influencing the individuals' behaviours rather such an effect is intermediated and exerted via self-efficacy (Arabian, Khodapanahi, Heydari & Saleh, 2005). In the article proposed by Murriss, et al (1981) there was also found a significant relationship between anxiety and phobia symptoms and the generalized anxiety disorder (Murriss, 2002)

Therefore, according to the importance of self-efficacy among the university students and the adverse and diminishing effects that can be exerted by anxiety on self-efficacy and consequently on students' performance, thus the present study intends to investigate the influence of Self efficacy and level of education on test anxiety among secondary students

However, the above may threaten students self efficacy which is referred to as one's belief and capabilities to perform a task. Hence, the study intends to address the problem stated below:

Will there be a statistically significant influence of self efficacy on test anxiety among adolescents?

Will there be a statistically significant influence of level of education on test anxiety among adolescents?

The purpose of this study was to investigate whether Self efficacy will significantly influence test anxiety among adolescents. And also whether level of education will significantly influence test anxiety among adolescents. It was hypothesized as follows:

1. That there would be no statistically significant influence of self efficacy on test anxiety among adolescents.
2. That there would be no statistically significant influence of level of education on test anxiety among adolescents

Method

Participants

A total of 100 participants comprising 57 junior students and 43 senior students, out of which 51 are females and 49 are males were drawn making use of available sampling technique (ie the present students on ground that were used for the periods of the research) from the population of junior secondary school students attending Ozalla High School in Nkanu West Local Government Area of Enugu State. They are within the ages of 12-17 years with a mean age of 14.3 years and standard deviation of 2.1 years.

Instrument

Two sets of instrument were used. The first instrument utilized was self efficacy scale (SES). A 30 item questionnaire and it was developed by the following authors: Sheker, et al (1982) to measure Self efficacy. The instrument was validated in Nigeria. Ayodele (1988) obtained a concurrent validity coefficient of .23 by correlating Self efficacy Scale with Mathematics Anxiety Rating Scale (Plake & Parker, 1982). It has a direct scoring, reverse scoring and inert. The inert entails numbers that should not be calculated.

The second instrument used was Test Anxiety Inventory (TAI) comprising of 20 item questionnaire developed by (Spielberger, 1980). This instrument was deigned to assess three components which are worry, emotionality and the total anxiety. Worry refers to excessive pre-occupation and concern about the outcome of a test especially the consequences of failure. Emotionality refers to individual behavioural reactions and feelings aroused by test situations. Total anxiety score is the sum of worry and emotionality. It refers to the overall cognitive, effective and behavioural reactions to test examination situations. Test Anxiety Inventory (TAI) was validated in Nigeria by Omoluabi (1993) who provided the properties for Nigerian samples. It has a reverse scoring and direct scoring.

Procedure

The two sets of questionnaire were distributed across the target population. 140 copies of each of the questionnaire were taken to the students of Ozalla High School in Nkanu West Local Government Area of Enugu State. The tutors served as research assistants and participated in administering the copies of the questionnaire. The administration took the form of group testing. 137 copies out of the number distributed were collected by the tutors from their students. Also, 100 copies that are correctly filled were scored and tabulated for analysis, and 37 were discarded.

Design/ Statistics

A cross sectional design was adopted based on different categories of participants; while a 2×2 Analysis of variance F-test statistic using the method of unweighted means for unequal cell frequency based on two levels of self efficacy (low/high), level of education (JSS/SSS) and test anxiety as a dependent variable.

Results

Table I: Summary table of means on influence of self efficacy and level of education on test anxiety among adolescents.

	Level of education	
	JSS	SSS
Self Efficacy	Low $\bar{x}_{11} = 54.68$	$\bar{x}_{12} = 52.09$
	High $\bar{x}_{21} = 50.20$	$\bar{x}_{22} = 48.63$

From table 1 above, adolescents in junior secondary school categorized under Low self efficacy obtained the highest group of mean score of 54.68, followed by adolescents in senior secondary school categorized under Low self efficacy ($x = 52.09$); adolescents in junior secondary school categorized under high self efficacy ($x = 50.20$); and adolescents in senior secondary school categorized under high self efficacy ($x = 48.63$). Generally, adolescents in junior secondary school with a group mean of 104.88 showed high disposition of test anxiety than adolescents in senior secondary school with a group mean of 100.72; while adolescents categorized under low self efficacy with a group mean of 106.77 showed high disposition of test anxiety than adolescents categorized under high self

efficacy with a group mean of 98.83. Thus, a high mean indicates high level of test anxiety; while a low mean indicates low level of test anxiety.

Table II: Summary table of 2x2 ANOVA on influence of self efficacy and level of education on test anxiety among adolescents.

Source of variation	Sum of squares	Df	Mean square	F	P
Row (Self efficacy)	63.00	1	63.00	1.26	>.05
Columns (level of education)	229.31	1	229.31	4.58	<.05
Interaction (self efficacy versus level of education)	3.78	1	3.78	0.08	>.05
Within cells	4808.42	96	50.09		

From the above summary table, some interpretations could be made: Since the F calculated value of self efficacy 1.26 is found to be less than the critical value of 3.94 at $P > .05$ level of a non significant outcome was obtained. Hence, hypothesis I which stated that “there will be no significant influence of self efficacy on test anxiety among adolescents” is hereby accepted. This means that adolescents with low self efficacy do not vary remarkably from adolescents with high self efficacy on test anxiety.

Also, F-calculated value of 4.58 is found to be greater than F-critical value of 3.94 at $P < .05$ level of significance, indicating a significant outcome. Hence, hypothesis II which stated that “there will be no significant influence of level of education on test anxiety among adolescents” is hereby rejected. This means that adolescents in junior secondary school vary remarkably from adolescents in senior secondary school on test anxiety.

Based on F-calculated value of 0.08 which is found to be less than F-critical value of 3.94 at $P > .05$ level of significance, a non significant interaction effects of self efficacy and level of education is hereby obtained in relation to test anxiety among adolescents.

Discussion

The outcome of this study revealed that the hypotheses tested was confirmed in relation to self efficacy and disconfirmed in relation to level of education. Hence, hypothesis 1 which stated that “There will be no statistically significant influence of self efficacy on test anxiety among adolescents” was confirmed. This shows that adolescents categorized under low self efficacy do not differ remarkably from adolescents categorized under high self-efficacy in test anxiety. Although, adolescents with low self-efficacy obtained a higher group mean than adolescents with high self efficacy in test anxiety, this may account for the variation on the degree of test anxiety between low and high self efficacy adolescents. This was in tandem with Ali, Rahim, Sadegh and Ehsan, (2016) and Onyeizugbo,(2010).

The second hypothesis tested which stated that “There will be no statistically significant influence of level of education on test anxiety among adolescents” was disconfirmed. This means that a remarkable difference was observed between adolescents in junior secondary school and adolescents in senior secondary school in test anxiety, although adolescents in junior secondary school showed high disposition towards test anxiety. This indicates that adolescents in junior secondary school revealed high degree of test anxiety in relation to task performance or other related activities

However, the outcome of this study was found to be in accordance with the findings of Schwarzer and Jerusalem (2004), Bandura, (1997), Davis and Hutching, (2001) and Murriss (2005). In another research it was shown that the perceived self-efficacy latent variable directly or indirectly influences the academic anxiety through adaptive and non-adaptive cognitive coping strategies. Based on this, the individuals with perceived high self-efficacy tend to take advantage of the adaptive coping strategies and therefore they usually experience lower academic anxiety (Cheraghi, Dasta, Ghorban, Abidizadegan, & Arabzade 2009). The present result point to the idea that the individuals who seem to have doubts regarding their abilities in presenting appropriate output come up to have pessimistic

valuation of their own selves accordingly and therefore they are lost of their problem-solving competencies and the anxiety level is increased in them. In a study conducted by (Artino, La Rochelle & Durning, 2017) on the medicine students in the US it was made evident that the negative feelings such as anxiety can influence the self-efficacy beliefs.

Implications of the Findings

One major implication of this study is that test anxiety and self efficacy is like a very important tool in academic performance and school environment might be a contributory factor that influences students' level of self efficacy and test anxiety. Students with low sense of self efficacy have test anxiety disposition and this can interfere with learning and lower academic performance but students with high self efficacy have low test anxiety disposition. It also implies that more or less as self efficacy influences test anxiety, ability to perform in a task will differ based on ones belief that he or she is capable.

Conclusion

According to the findings of the present study the self-efficacy as a factor yielded no remarkable difference between low and high self-efficacy among the adolescents; while level of education yielded a remarkable difference between junior and senior secondary school adolescents.

However, the test anxiety has always been one of the problems in the educational systems, and it always has disrupted the function of the students in achieving of the educational goals in a record time. It can lead to the loss of academic performance and prolongation of learner's education duration. In addition, the test anxiety is a risk factor for developing other mental disorders. Therefore, the planning for reduction of this phenomenon among the students and especially in the students with higher anxiety (such as newly arrived students) has a great importance. According to the opinion of the experts, intervention in the test anxiety can reduce. This implies that self efficacy as a factor yielded no remarkable

difference between low and high self efficacy adolescents; while level of education yielded a remarkable difference between junior and senior secondary school adolescents.

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