Monographic article

Does stress and university adjustment relate to health in peru?[☆]

¿Se relacionan el estrés y el ajuste universitario con la salud en Perú?

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Abstract

The aim of this study was to assess the relationship between university adaptation, perceived stress and mental and physical health. We also evaluated if perceived stress mediated the relationship between university adaptation and health. A cross-sectional study was carried out among general studies undergraduate students of one private university in Lima, Peru. The sample was composed of 200 students with an average of 18.13 years old ($SD = 1.41$). Multiple regression and mediation analyses were assessed to understand the relationship between university adaptation and health. Multiple linear regression estimations had the following results for mental and physical health. Interpersonal relationships in university better related to mental health. This model was composed by interpersonal relationships (Interpersonal), dedication to study and future career plans, which accounted for 23% of the whole model. Physical health model was composed of perceived stress and study which accounted for 22% of the whole model of physical health. Mediation analysis showed that perceived stress fully mediated the relationship between study and physical health. Our findings could help further understand how college students are adjusting in order to have a better health. These findings have important implications on assessing interventions for students that are struggling to adapt to college demands.
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Keywords: Peru; Health perception; University adaptation; Adolescent

Resumen

El objetivo de este estudio fue evaluar la relación entre adaptación universitaria, estrés percibido, salud mental y física. Además, se evaluó si el estrés percibido mediaba la relación entre adaptación y salud. Se realizó una investigación transeccional con estudiantes de estudios generales de una universidad de Lima, Perú. La muestra estuvo compuesta por 200 estudianes con un promedio de edad de 18.13 años ($DE = 1.41$). Un análisis de regresión múltiple y otro de mediación fueron utilizados para evaluar la relación entre adaptación y salud. La regresión múltiple arrojó que las relaciones interpersonales fueron las que mejor predecían la salud mental. Este modelo fue compuesto por las relaciones interpersonales, la dedicación hacia el estudio y las expectativas futuras de carrera, el cual explicó el 23% de la varianza. El modelo de salud física estuvo compuesto por las relaciones interpersonales y el estrés percibido, el cual explicó el 22% de la varianza. El estrés percibido mediaba completamente la relación entre dedicación hacia el estudio y salud física. Nuestros hallazgos podrían ayudar a enteder cómo los estudiantes se están adaptando para mantener una adecuada salud. Estos resultados tienen implicaciones importantes en la evaluación de las intervenciones para los estudiantes que están luchando para adaptarse a las demandas de la universidad.
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Palabras clave: Perú; Percepción de la salud; Adaptación a la universidad; Adolescentes

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Introduction

Late adolescents and emerging adults have an important role in development of a nation because in the future they will become the main workforce of it. They will lead political, economical and social movements. In particular, in Peru a population between 15-29 years of age represents 27.2% of the whole population of the state. Moreover it is possible that in the year 2021 this group will increase to 8,512764 people (INEI, 2013).

Therefore, the health states of late adolescents and emerging adults is very important for this country. The health ministry has found out that in people between 18 and 29 years old, the most common diseases are the following: respiratory infections (26.2%), oral diseases (19.9%) and affections related to pregnancy (12.3%) (MINSA, 2011).

A national study with adolescents showed that these late adolescents and emerging adults have also suffered from changes in their sleep patterns (56.40%), feel tired or bored the majority of the day (51.1%), suffer constant headache, neck and back pain (47.5%) and also an important group of people (44.0%) suffer from depressive and anxiety symptoms such as feelings of sadness and listlessness (SENAJU, 2012). Overall, the principal need this population has is the access to higher education (Ministerior de salud del Perú (MINSA), 2011). According to a Peruvian national study with adolescents, 15.6% of young people between 15-29 years have completed the first year of higher education. Moreover, the majority of people that where able to pass this level are between 25 and 29 years and old (23.0%) and 20 to 24 years old (19.7%) (SENAJU, 2012).

Going to university is a big challenge for late adolescents and emerging adults. In this path they have a lot of different challenges from and developmental perspective and an academic perspective. In the developmental level, this population has to face difficult tasks as a result of maturation. Physical and emotional changes transform the way they have to relate with peers and family. Moreover, this period is marked by an increase in psychological autonomy that is related to making own independent decisions, which could influence on their health (Currie et al., 2010).

In an academic level they have to face the challenges that require adapting to new environment, with new rules and higher academic workload, which show new stressors and high academic achievement (Leary & DeRosier, 2012). In other words, these late adolescents have to develop an academic adaptation towards university.

To understand academic adaptation, Portuguese researchers used a psychosocial perspective and made questionnaires that measured three big domains: Student which is related to autonomy, competence and well-being. Course, which is related to academic achievement and how the person is succeeding in their academic career. Context which describes the institutional adaptation of the student with the academic environment (Almeida, Ferreira Soares, 2001; Soares, Almeida y Ferreira, 2006). Finally, these three big domains were divided into five subdomains: Personal (Personal or well being), Interpersonal (Interpersonal relationships), Career, Study and Institutional.

The first one is appointed to the student domain, the third and fourth to the course domain and finally, interpersonal and institutional to the contextual domain (Almeida et al., 2001; Almeida, Soares, & Ferreira, 2002). If the person succeeds in these five domains then he/she has an adequate university adaptation.

The university environment shows a variety of demands that can cause stress in young people. For example, lack of time to finish all academic tasks, oral presentations, heavy academic workload and course evaluations (García-Ros, Pérez-González, Pérez-Blasco & Natividad, 2012; Pozos-Radillo, Preciado-Serrano, Acosta-Fernández, Aguilera-Velasco & Delgado-García, 2014). In a qualitative study, Sevinc and Gizir (2014) found out that perception of distant teachers was related to the university adaptation process. Furthermore, peer relations, leisure time and participation in recreational activities were positively related with a better social adaptation. Moreover, being shy, fear of being rejected by others and identity were related to personal adaptation. Finally, sense of belonging to a group was also positively related to institutional adaptation.

Furthermore, Pozos-Radillo et al., (2014) found in 527 Mexican university students that class participation, mandatory tasks and exams predict chronic symptoms of stress. This could be very important because high levels of stress are related to low academic adaptation. In that case, adaptation is also related to health in late adolescents and emerging adults.

Self-perceived health is the subjective perception of how healthy physically and mentally a person feels. The person could feel healthy but when he or she is evaluated by a doctor founds out that is not (Schwartzmann, 2003). Besides, a person could not feel any physical discomfort but regardless of that does not feel healthy (Ardila, 2003).

Hussain, Guppy, Robertson and Temple (2013) found that stress has a negative relationship with a lower perception of health in late adolescents. Therefore, they also found that late adolescents that suffered higher levels of stress had more health problems, more fatigue, which was related with a less class attendance, more feelings of dropping out from college and less enjoyment of university. Other studies have found out that late adolescents that perceive a better health also feel they have a better academic achievement in comparison to the ones that have a lower self-perceived health (Ansari & Stock, 2010). Furthermore, late adolescents that have less physical health, less well-being and little social support and lower satisfaction towards their courses tend to consider school dropout (Hixenbaugh, Dewart & Towell, 2012).

As a result of all these, it is very important to study the relationship of university adaptation and health in late adolescents and emerging adults. It appears that they have a strong bond with each other, but we don't know much of what specific domains are more related to health in late adolescents and emerging adults. Empirical research gives evidence that the developmental level and academic level are important for late adolescents and emerging adult's health.

Therefore, the aim of this study was to assess the relationship between university adaptation, perceived stress and mental and physical health. Moreover, we evaluated if perceived stress