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Relationship between personality organisation and the prevalence of symptoms of depression, anxiety and stress among university students in health careers in the Region of Coquimbo, Chile[☆]

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ABSTRACT

Objective: The literature reports a set of variables associated with depression, anxiety and stress in health career students. The only one of these that could have a constant input is the structure of personality organisation. The present study aims to determine the relationship between the dimensions of personality organisation and depression, anxiety, and stress symptoms reported by first-year university health career students.

Methods: Under a non-experimental ex-post-facto design, the personality organisation was evaluated in 235 1st year university, medical, nursing, and kinesiology from three universities of La Serena and Coquimbo (Chile). Inventory of personality organisation and scale of depression, anxiety and stress to sift participants was used. The relationship of personality with depressive, anxiety and stress symptoms was determined by multiple regression analysis.

Results: It was found that the primary and overall personality dimensions explained 28% of the variance of depression ($p < 0.01$), 20% of anxiety, and stress 22%, with the use of primitive defenses and identity diffusion dimensions that largely contribute to the explanatory model. **Conclusions:** The dimensions of personality organisation could have a significant relationship with the emergence of depression, anxiety and stress, as the explanatory burden dimension provides the primitive defenses and identity diffusion. These results may be useful for early recognition of aspects of personality of applicants, and to perform actions that strengthen them in order to improve efficiency.

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Relación entre organización de personalidad y prevalencia de síntomas de depresión, ansiedad y estrés entre universitarios de carreras de la salud en la Región de Coquimbo, Chile

R E S U M E N

Palabras clave:

Personalidad

Depresión

Ansiedad

Estrés

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Objetivo: La literatura informa de un conjunto de variables asociadas a la depresión, la ansiedad y el estrés en estudiantes de salud. La única de ellas que tendría un influjo constante es la organización estructural de la personalidad. El presente trabajo ha determinado la relación de las dimensiones de organización de la personalidad con los síntomas depresivos, ansiosos y de estrés reportados por estudiantes universitarios de primer año de carreras de salud.

Material y método: Con un diseño no experimental *ex-post-facto*, se evaluó la organización de personalidad de 235 universitarios de primer año de Medicina, Enfermería y Kinesiología de tres universidades de La Serena y Coquimbo (Chile). Se utilizó el inventario de organización de la personalidad y la escala de depresión, ansiedad y estrés para tamizar a los participantes. La relación de la personalidad con los síntomas depresivos, ansiosos y de estrés se determinó mediante análisis de regresión múltiple.

Resultados: Se encontró que las dimensiones primarias y generales de la personalidad explican un 28% de la varianza de la depresión ($p < 0,01$), un 20% de la de ansiedad y un 22% de la de estrés, y el uso de defensas primitivas y difusión de identidad son las dimensiones que aportan mayormente al modelo explicativo.

Conclusiones: Las dimensiones de la organización de la personalidad tendrían relación significativa en la emergencia de depresión, ansiedad y estrés; la dimensión defensas primitivas y difusión de identidad aporta la mayor carga explicativa. Estos resultados pueden ser útiles para reconocer tempranamente los aspectos de personalidad de los postulantes y realizar acciones que la fortalezcan para mejorar la eficacia adaptativa.

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Introduction

Studies on depression, anxiety and stress in healthcare science students have attracted more attention and acquired greater relevance in recent years.¹⁻⁵ According to the literature, the emergence of such symptoms in this student group has a negative effect not only on their mental and physical well-being,⁵⁻⁷ but also on their social⁸ and academic environment.⁶ This results in poor academic achievements and can even influence their effectiveness as professionals in the future.⁴

Studies carried out in Chile⁸⁻¹⁰ have shown that the prevalence of depression, anxiety and stress in first-year healthcare science students and in their peers in the general population is higher than previously thought, which suggests a deterioration in the mental, social, academic and physical planes mentioned above.

A number of studies have explored the emergence of anxiety, stress and depression in these groups of university students, showing that these symptoms are related with a wide range of environmental variables such as infectious diseases¹² and academic,^{5,6,14} sociodemographic and social^{6,13,14} and individual^{8,9,16-18} factors.

With regard to individual variables, although there are several that influence these symptoms, possibly one of the most relevant is personality,^{19,20} since personality organisation is

the only variable that would, in theory, exert a continuous influence. This becomes more important when we consider that these students are in their late adolescence – one of the last stages of the process of identity consolidation^{21,22} – that will define largely unchangeable personal attributes that will provide different degrees of emotional stability and a sense of identity.²³

According to Kernberg,²⁴ dimensions of personality organisation explain the genetic and inborn disposition to intensity, rate and threshold of affect activation. These impact the individual, modulating their relationships with others and the way they conduct themselves and act in the world. When these dimensions describe inappropriate functioning, there is a greater tendency towards the appearance of intense negative effects, which generate emotional distress, a characteristic feature of borderline personality structures.²³ Thus, it is established that personality dimensions, being attributes that exert a relatively permanent effect, have a more stable influence on different levels of emotional well-being,⁸ and become largely unchangeable. This is why it is important to understand their influence and real impact in terms of the emergence of these highly prevalent symptoms among healthcare science undergraduates.^{5,12}

Given the above, insight into the effect of personality on depression, anxiety and stress in Chilean healthcare science students would allow healthcare professionals to focus their interventional and preventive efforts on early assessment of

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