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## **The Types of Anxiety Disorders Common among Girls' Secondary School Students in Selected Public Schools in Dagoretti North Sub-County, Kenya**

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# The Types of Anxiety Disorders Common among Girls' Secondary School Students in Selected Public Schools in Dagoretti North Sub-County, Kenya

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## Abstract

Anxiety disorders among high school students have been on the rise in the recent decade. Though anxiety disorders affect both boys and girls, studies have shown that there exist gender differences in the prevalence of anxiety. The purpose of the study was to identify the types of anxiety disorders common among girls' secondary school students in selected public schools in Dagoretti North Sub-County, Kenya. Descriptive research design was used. The target population was 1260 girls studying in the girls' schools in the Sub County aged between 13-18 years. A sample of 200 participants was selected using simple random sampling technique. The findings indicated that GAD, panic disorder, social anxiety disorder, separation anxiety disorder, and school avoidance were all common among secondary school students in the sampled schools. 81.5% of the respondents had at least an anxiety disorder. The study recommended that the rising levels of anxiety among secondary school students need to be addressed urgently because of the comorbidity of anxiety. Managing anxiety is most likely to lead to higher academic achievement. Secondary school students need to be psycho-educated on the self-management of anxiety.

**Keywords:** *Types of Anxiety Disorders, Girls' Secondary School, Public Schools*

### 1.1 Introduction

In an extremely frightening or threatening situation, anxiety is a subjective state of fear, apprehension, or stress (Hartmann, 2014) that affects students cognitively, behaviorally and psychologically (Sharma, Kumar, & Sarin, 2016). Research has shown that the growing number of students faced with troublesome anxiety is troubling and the situation is made worse by the inadequate attention provided to these students (De Wit *et al.*, 2011; Miller, Gold, Laye-Gindhu, Martinez, Yu, & Waechter, 2011). One can easily relate these behaviors to the presence of anxiety disorders with the rampant cases of problematic behaviors among students in girls' schools.

When high school students transition from one stage of growth to another, they may be negatively impacted by anxiety (Costello, Copeland, & Angold, 2011), thereby preventing them from reaching the necessary developmental milestones. Due to the existence of other

psychological disorders (Essau, 2003), high levels of anxiety among parents (Pereira, Barros, Mendonca, & Muris, 2014), uncertainties during the transition (De Wit, Karioja, Rye, & Shain, 2011), among other reasons, anxiety among high school students may occur.

Students faced with elevated levels of anxiety are more likely to encounter difficulties with information processing systems. It may be difficult for such students to store and retrieve knowledge taught (Nelson & Harwood, 2011). It has been pointed out that the anxiety levels of students decrease as the levels of academic achievements increase (Sharma, 2016). This indicates that anxiety impacts academic performance negatively. When anxiety co-occurs with other illnesses, the condition is made worse.

The development of awareness and treatment of anxiety disorders can be a positive step towards reducing comorbidity among mental health disorders due to the negative effect of anxiety disorders (Miller, Laye-Gindhu, Bennett, Liu, Gold, March, Olson, & Waechter, 2011) in addition to offering adolescent protection from stressors that are normal during that stage of life (Leikanger, Ingul, & Larsson, 2012). If students are treated for these anxiety disorders, they will be able to work more effectively and concentrate more on academics, experience a decrease in behavioral issues, boost attendance at school, and their relationship with others as a whole (Bostick & Anderson, 2009).

## 1.2 Statement of the Problem

In the last decade, anxiety disorders among high school students have been on the increase. While both boys and girls are affected by anxiety disorders, studies have shown that gender differences in the prevalence of anxiety exist. Although a study by Ghandour, Sherman, Vladutiu, Ali, Lynch, Bitsko, & Blumberg (2019) found that boys are more likely than girls to suffer from anxiety, it is troubling that this pattern is changing (Khesht-Masjedi, *et al.* 2019). Given the co-morbid nature of anxiety disorders, it may be difficult for students in this state to achieve their academic objectives (Chege, Munene, & Oladipo, 2015). While the government has made a major effort to resolve anxiety issues among secondary school students, there is a disparity in anxiety disorders among girls in Kenya's high schools. It is such a worrying pattern that girls act the way they do in Kenya's secondary schools. There is scant evidence of studies in secondary schools in Kenya on anxiety disorders among girls. This study, therefore, investigated the types of anxiety disorders common among girls' secondary school students in selected public schools in Dagoretti North Sub-County, Kenya.

## 1.3 Purpose of the Study

The purpose of the study was to identify the types of anxiety disorders common among girls' secondary school students in selected public schools in Dagoretti North Sub-County, Kenya

## 2.0 Literature Review

### 2.1 Reality Theory

Reality theory (RT) was developed by William Glasser in 1965. Its main focus is on what Glasser calls psychiatry's three Rs: realism, responsibility, and right-and-wrong, rather than symptoms of mental disorders. The Reality theory maintains that students faced with anxiety disorders are suffering from a socially universal human condition rather than a mental illness. It is in the unsuccessful attainment of basic needs that a student's behavior moves away from the norm. Since fulfilling essential needs which in this case is the student's indulgence in education, is part of their life present life, reality theory does not concern itself with a student's past.

The reality theory focuses on the here-and-now actions of the students and the ability to create and choose a better future. In a normal school setting, students at times find it difficult to choose

what they want to do in the future. Therefore they need guidance. This theory helped the students to discover what they really want and how they are currently choosing to behave to achieve these goals.

When used in reality therapy, the three guiding principles of this therapy are realism, responsibility, and right-and-wrong. Realism encourages clients to discuss solutions to their problems realistically. This might even mean facing hard facts and letting go of impossible dreams. The students in this study should commit to change the behaviors that are keeping them from having the life they want. These students should ground themselves in the reality of whom they are, how the world works, and the reality of what they need to do in the here-and-now to improve their lives and relationships. The next principle is on responsibility which is a key element in reality therapy because a student can only change her world when she understands what others are responsible for and what is only hers to do. The theory encourages students to change their behaviour. To do that, they have to take responsibility for both the choices they make and the consequences that come from those choices. The last principle is on Right-And-Wrong. The theory says that what is important in life is to satisfy their needs in ways that don't infringe on the rights of others who are also trying to meet their needs. A student should know what is right and wrong.

The main strengths of this theory include producing a real working model for different problems, populations, and settings. It is a very important theory when it comes to group counseling e.g. in settings to create a trusting climate within their groups. The theory promotes accountability and gears towards achieving concrete outcomes. Many therapists prefer this theory because it emphasizes short term treatment.

Like any other theory, reality theory has some weaknesses. Some of these weaknesses include too much emphasis on here and now. The theory has been accused of being too simplistic and superficial hence may not address some issues fully. Some critics see the theory as if it ignores biology as a factor in mental illness. Reality therapy does not deal with the full complexity of human life therefore it depends on two-way communication or the establishment of a good client-counselor relationship.

## **2.2 Anxiety Disorders among Secondary School Girls**

Anxiety is a feeling of nervousness and stress which is associated with the stimulation and activation of the person (Gould et al., 2002). It can also be defined as an imbalance between the demands of the environment and the demands of the individual (Cox, Martens, & Russell, 2003). According to Hartmann (2014), anxiety is a subjective state of fear, apprehension, or tension in an extremely fearful or threatening situation. Anxiety affects students cognitively, behaviorally, and psychologically (Sharma, Kumar, & Sarin, 2016) and this impacts on academic achievements. Anxiety can have negative effects on all students as students with anxiety problems tend to show lower levels of academic achievement, self-efficacy, and self-concept.

Anxiety harms the information processing system. People with anxiety have difficulty storing and retrieving information (Nelson & Harwood, 2011). It is common in situations where students are facing problems with their learning process (Kim, 2009; Marcos-Llinas & Garau, 2009; Sparks & Ganschow, 2007). This was also confirmed by Sizoo, Jozkowskia, Malhotra, and Shapero (2008) who asserted that anxiety makes students lag in their studies and as their level of academic achievement improves, their anxiety levels reduce (Sharma, 2016). Global statistics show that 13% to 25% of adolescents in schools face anxiety (Walsh, Deb, & Chatterjee, 2010). Due to the negative effects of anxiety, students' academic performance most likely gets affected. The situation is made worse when anxiety co-occurs with other disorders.



A study conducted by Andrews and Wilding (2004) among university students reported that 40% of the students who attended a mental health clinic for psychological problems presented with anxiety and in turn reported a decreased academic performance. Another study was done (Nelson & Harwood, 2011) showed a negative correlation between anxiety and academic performance. Though these studies were conducted among university students, they could be replicated among secondary school students because of their adolescent stage which made them more vulnerable to high levels of anxiety.

### 3.0 Research Methodology

The study adopted the descriptive research design. The target population was 1260 girls studying in the girls' schools in the Sub County aged between 13-18 years. One national school and one extra county school were sampled from the three girls' schools in Dagoretti sub-County. A sample of 200 participants was used. Analysis included descriptive statistics which comprised of mean, standard deviation, variance and percentiles. Inferential analysis using Karl Pearson Moment correlation analysis was also conducted to test the strength of the relationship between the variables through the generation of the Pearson correlation coefficient (r). Tables were used to present responses for further analysis and facilitate comparison.

### 4.0 Results and Discussion

#### 4.1 Descriptive Statistic Results

The objective of this study was to identify the types of anxiety disorders common among girls in selected Girls' secondary schools in selected public schools in Dagoretti North sub-County. A descriptive analysis done yielded results shown in the following tables.

**Table 1: Respondent's Level of Anxiety**

Level of Anxiety	Frequency (n)	%	Cumulative Frequency
Below 25	37	18.5	18.5
Between 25-39	125	62.5	81
Between 40-54	32	16	97
Above 55	6	3	100
Total	200	100	100

Table 1 presents the level of anxiety among the 200 respondents in this study. The findings showed that 62.5% of the respondents had an anxiety level between 25-39, 18.7% had a level below 25, 16% of the respondents had a level of between 40-54, and 3% of the respondents had an anxiety level above 55. The information presented in table 4.13 shows that 81.5% of respondents had at least an anxiety disorder (since scores of above 25 on SCARED points to the presence of an anxiety disorder).

Regarding the specific types of anxiety disorder, descriptive statistics were run for generalized anxiety disorder, panic disorder, separation anxiety disorder, social anxiety disorder, and school avoidance.

**Table 2: Respondent's level of Generalized Anxiety Disorder**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2	6	3.0	3.0	3.0
	3	5	2.5	2.5	5.5
	4	11	5.5	5.5	11.0
	5	17	8.5	8.5	19.5
	6	22	11.0	11.0	30.5
	7	18	9.0	9.0	39.5
	8	38	19.0	19.0	58.5
	9	12	6.0	6.0	64.5
	10	35	17.5	17.5	82.0
	11	22	11.0	11.0	93.0
	12	6	3.0	3.0	96.0
	13	3	1.5	1.5	97.5
	14	3	1.5	1.5	99.0
	15	1	.5	.5	99.5
	16	1	.5	.5	100.0
	Total		200	100.0	100.0

Table 2 presents findings on the level of GAD among the respondents. 58.5% of the respondents had a GAD level of below 9 while the remaining 41.5% had a GAD level of above 9. This finding shows that a section of the respondents (83) had GAD. The findings further indicate that a significant number of learners are having GAD which is characterized by consistent and severe stress, sometimes without good cause or reason. This kind of stress causes strain in interpersonal relationships and everyday work-life occurrences of students.

Regarding separation anxiety disorder, the findings were presented in table 3.

**Table 3: Respondent's level of separation anxiety disorder**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2	6	3.0	3.0	3.0
	3	4	2.0	2.0	5.0
	4	26	13.0	13.0	18.0
	5	22	11.0	11.0	29.0
	6	22	11.0	11.0	40.0
	7	26	13.0	13.0	53.0
	8	19	9.5	9.5	62.5
	9	23	11.5	11.5	74.0
	10	25	12.5	12.5	86.5
	11	12	6.0	6.0	92.5
	12	8	4.0	4.0	96.5
	13	4	2.0	2.0	98.5
	14	2	1.0	1.0	99.5
	15	1	.5	.5	100.0
	Total		200	100.0	100.0

Table 3 presents the findings on separation anxiety disorder among the respondents. Only 18% of the respondents did not meet the criteria of a separation anxiety disorder while 82% of the respondents met the criteria for separation anxiety disorder. The findings here point out that the majority of secondary school students have excessive fear or anxiety concerning their separation from home or their caregivers.

The study also sought to find out the level of social anxiety disorder among the respondents. A score of 8 or more is a clear indication of the presence of a social anxiety disorder. Table 4 shows the findings on social anxiety disorder.

**Table 4: Respondent's Level of Social Anxiety Disorder**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	4	2.0	2.0	2.0
	2	6	3.0	3.0	5.0
	3	15	7.5	7.5	12.5
	4	33	16.5	16.5	29.0
	5	30	15.0	15.0	44.0
	6	29	14.5	14.5	58.5
	7	13	6.5	6.5	65.0
	8	19	9.5	9.5	74.5
	9	21	10.5	10.5	85.0
	10	18	9.0	9.0	94.0
	11	4	2.0	2.0	96.0
	12	8	4.0	4.0	100.0
Total		200	100.0	100.0	

From table 4, 65% of the respondents did not meet the criteria for a social anxiety disorder while the remaining 35% of the respondents met the criteria. This is a shocking finding because social anxiety disorder normally remains untreated in the majority of people having it. When students have this type of anxiety, they are likely to have a reduced quality of life, disturbed social interactions, poor daily functioning, and poor treatment adherence for other medical or psychiatric conditions hence affecting their studies negatively.

The study also wanted to find the level of school avoidance among the respondents. A total level of 3 or more was taken to be an indication of school avoidance. The results are presented in Table 5.

**Table 5: Respondent's level of school avoidance**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	10	5.0	5.0	5.0
	1	10	5.0	5.0	10.0
	2	68	34.0	34.0	44.0
	3	52	26.0	26.0	70.0
	4	8	4.0	4.0	74.0
	5	16	8.0	8.0	82.0
	6	18	9.0	9.0	91.0
	7	12	6.0	6.0	97.0
	8	2	1.0	1.0	98.0
	9	2	1.0	1.0	99.0
	11	2	1.0	1.0	100.0
Total		200	100.0	100.0	

Table 5 shows the level of school avoidance among the respondents. 56% of the respondents met the criteria of school avoidance while the rest did not. The findings indicate that a significant number of learners in secondary schools experience school avoidance and this is a more serious problem because such students are likely to experience numerous problems including school dropouts, mental health problems, and, even, committing suicide.

The results of panic disorder were presented in table 6. A score of 7 and above indicates the presence of panic disorder.

**Table 6: Respondent's Level of Panic Disorder**

	Frequency	Percent	Valid Percent	Cumulative Percent
Below 6	32	24.5	24.5	24.5
7	18	9.0	9.0	33.5
8	22	11.0	11.0	44.5
9	17	8.5	8.5	53.0
10	54	27.0	27.0	80.0
11	9	4.5	4.5	84.5
12	11	5.5	5.5	90.0
13	2	1.0	1.0	91.0
14	2	1.0	1.0	92.0
16	4	2.0	2.0	94.0
17	1	.5	.5	94.5
18	5	2.5	2.5	97.0
20	2	1.0	1.0	98.0
21	2	1.0	1.0	99.0
33	1	.5	.5	99.5
34	1	.5	.5	100.0
Total	200	100.0	100.0	

Table 6 presents findings on the level of panic disorder among the respondents. Only 24.5% of the respondents didn't have a panic disorder. The remaining 168 (84%) respondents had a panic disorder. Though this is alarming, the high prevalence could be attributed to the previous incidences in one of the schools and the anxiety arising due to the Covid-19 first case being reported in Kenya.

Besides anxiety disorders, the researcher was also interested to assess the levels of depression and self-esteem. These were done by administering CDI and Rosenberg self Esteem Scale respectively. Results are presented in table 7 and 8.

**Table 7: Respondent's level of depression**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Normal Level of Depression (Below 15)	139	69.5	69.5	69.5
Mild Depression (Between 16-19)	39	19.5	19.5	89.0
Moderate Depression (20-24)	22	11.0	11.0	100.0
Total	200	100.0	100.0	

Table 8 presents the levels of depression among the respondents. 69.5% had a normal level of depression, 19.5% had mild depression, and 11% had moderate depression. The findings can be interpreted to mean that many secondary school students especially in urban areas have normal levels of depression. This may be because the two schools in this study were national schools that are well cushioned by the status of their schools and their families of origin.



**Table 8: Respondent's level of self esteem**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Between 0-14 (Low Self - Esteem)	28	14.0	14.0	14.0
	Between 15-25 (Normal Self -Esteem)	137	68.5	68.5	82.5
	Between 26-30 (High Self-Esteem)	35	17.5	17.5	100.0
	Total	200	100.0	100.0	

Table 8 shows the level of self-esteem among the respondents in the study. Only 14% of the respondents had a low level of self-esteem. 17.5% of the respondents had high self-esteem while 68.5% of the respondents had normal self-esteem. The finding shows that the presence of an anxiety disorder in a person does not necessarily mean the presence of low self-esteem.

#### 4.2 Discussions

The objective of this study sought to identify the types of anxiety disorders common among girls in selected Girls' secondary schools in selected public schools in Dagoretti North sub-County. The current study found out that GAD, panic disorder, social anxiety disorder, separation anxiety disorder, and school avoidance were all common among secondary school students in the sampled schools. 81.5% of the respondents had at least an anxiety disorder. This level is higher than the level of anxiety among students by a previous study by Andrews and Wilding (2004) which was done among university students. The study had reported an anxiety level of 40%.

Another study also had pointed out that the state of anxiety among learners led to decreased academic performance (Nelson & Harwood, 2011). The two sampled schools in this study were once academic giants but their academic performance has been declining over the last three years. The high level of anxiety may be among the causes of this academic decline. If the academic performance of these two schools improves, their anxiety levels will likely reduce (Sharma, 2016).

The findings on the anxiety disorders among secondary school students were also similar to those of a study done in India by Jain (2012) and Shakir (2014) which also reported that anxiety was negatively correlated with academic achievement among high school students. The findings concurred too with another study done in Lang'ata, Kenya (Syokwaa, Aloka, & Ndunge, 2014).

#### 5.0 Conclusion

The study found out that GAD, panic disorder, social anxiety disorder, separation anxiety disorder, and school avoidance were all common among secondary school students in the sampled schools. Over eighty percent of the respondents had at least an anxiety disorder. This level is higher than the level of anxiety among students by a previous study by Andrews and Wilding (2004) which was done among university students. The study had reported an anxiety level of forty percent.

#### 6.0 Recommendations

The rising levels of anxiety among secondary school students need to be addressed urgently because of the comorbidity of anxiety. Managing anxiety is most likely to lead to higher academic achievement. Secondary school students need to be psycho-educated on the self-management of anxiety.

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