

The Effect of Stress Coping and Social Support on Graduate Student Academic Stress During the Covid-19 Pandemic

M. Dinullah Akbar ¹

¹ *Ahmad Dahlan University*

Jl. Kapas 9, Semaki, Umbulharjo, Yogyakarta, Indonesia

DOI: [10.22178/pos.97-12](https://doi.org/10.22178/pos.97-12)

LCC Subject Category: BF1-990

Received 26.09.2023

Accepted 29.10.2023

Published online 31.10.2023

Corresponding Author:

dinulakbar15@gmail.com

© 2023 The Author. This article is licensed under a [Creative Commons Attribution 4.0](https://creativecommons.org/licenses/by/4.0/)

License 

Abstract. This paper wants to explain the effect of coping stress and social support on academic stress in postgraduate students while facing the Covid-19 pandemic. During the Covid-19 pandemic, doctoral students in Indonesia experienced academic stress. The prevalence of academic stress during a pandemic among postgraduate students has increased. This academic stress can cause emotional disturbances affecting students' professional competence. Efforts to deal with academic stress are coping with stress, and this method is used to deal with the stress of postgraduate students during the Covid-19 pandemic. Students try to manage the distance between demands (both from individuals and requests from the environment) with students' resources in dealing with stressful situations. Coping stress has a significant role in one's health status. A healthy physical and mental state can help students fulfil pressing academic and non-academic demands, especially during a pandemic. The social support received can make students feel calm, cared for, and loved, as well as develop self-confidence and competence. Social support is a valuable resource for individuals who experience stress and is the primary way to improve their quality of life and maintain a healthy mind and body. Based on this description, coping with stress and social support can overcome academic anxiety. Social support is part of coping with stress to deal with the academic pressure of postgraduate students during the Covid-19 pandemic in Indonesia.

Keywords: academic stress; coping stress; social support.

INTRODUCTION

The COVID-19 pandemic is a major disaster for all humanity in the world. The COVID-19 pandemic has not only had an impact on public health, especially death but has also affected the economy, education and social life of people in Indonesia. Based on data from the National Disaster Management Agency (BNPB), the number of positive patients infected with COVID-19 in Indonesia shows an increasing trend from 543,975 cases as of December 1 2020, to 743,198 cases as of December 31, 2020. As of April 22 2021, the number of optimistic residents for COVID-19 has reached 1.62 million people.

This pandemic has caused the government to implement a Large-Scale Social Restriction (PSBB) policy, which has implications for limiting community activities, including the economy, ed-

ucation and other social activities. Health protocols are still enforced by wearing masks, washing hands, avoiding crowds, limiting mobilization, and social distancing. Social distance means avoiding crowds and mass gatherings and keeping distance between people. The purpose of social restrictions or distancing is to prevent the widespread spread of COVID-19. Social distancing is very influential in preventing the spread of COVID-19. Still, the application of social distancing makes people unable to carry out their role as social beings because humans are social beings who interact with each other to fulfil life.

As a result of the COVID-19 pandemic, educational activities must experience adjustments. The social distancing policy causes changes in learning methods. Government policy stipulates that teaching and learning activities in tertiary

institutions are carried out by studying from home or not face-to-face, in the network, or online [1]. Learning methods like this are not commonly practised and make lecturers and students need to make more adjustments in dealing with new learning methods. Many students are not used to or familiar with online lectures. The online learning system depends on an internet network connection, so not all students can adapt to the online lecture system. The results of research [2] show that due to COVID-19, student independence has increased to carry out the learning process, from preparing to learn, designing devices (laptops, cellphones, Wi-Fi, headsets, etc.), and preparing applications such as Google Classroom, Edmodo, WhatsApp, Video Conference, Zoom and Email.

Lecturers upload learning content such as reading materials, learning videos, or material links available on the web to the learning applications used. Students also do assignments, and everything is delivered online. The independence of students to take online lectures does not always positively influence students. Still, the consequences of online courses cause panic in tertiary institutions, including lecturers and students [3]. The unpreparedness of universities partly caused this panic to implement online learning, such as the unavailability of budgets for purchasing applications and online devices. Not all students have the funds to complete the online learning process, and not all students can adapt quickly. Lecturers and students tend to have different levels of understanding in operating internet devices and networks (such as limited quotas constrained by internet networks, especially in villages).

According to [3], the obligation to study at home is a serious obstacle, especially for students from economically disadvantaged circles. They often complain about running out of internet quota packages. In addition, technology can build an instant attitude from its users. Students can be spoiled by quickly copying and pasting learning materials or lecture assignments.

Undergraduate students experience difficulties and panic in dealing with online lectures, which are also felt by students of the Postgraduate program (Master's program). According to the 2018 Higher Education Statistics, the number of master's program students in Indonesia is 300,257 (state and private), while in the province of Yogyakarta, there are 27,104 people. According to

[4], postgraduate study programs are stressful and challenging programs that can affect students' academic performance and physical and mental well-being. Academic demands on students who work on academic assignments have been shown to affect their mental health [5].

Research conducted by [4] stated that the prevalence of stress among postgraduate students was high. This can cause emotional disturbances that can affect students' professional competence. Academic-related stressors are the leading cause of anxiety in college students.

Based on the news quoted from the Pikiran-Rakyat.com website, approximately 40% of the 18-25-year-old group for 2 to 4 years is in a college environment, and most of them experience mental disorders. Based on this data, it can be said that tertiary institutions are the ideal place to identify mental health disorders. This data was disclosed by psychiatrist Dr. Teddy Hidayat in the "Training of First Response to Mental Disorders among Students (MHFA) held at Gedung Sate, Bandung City, on August 24, 2019".

According to [6], stress is a specific relationship between an individual and his environment that a person evaluates as demanding or exceeding his resources and endangering or threatening his health. Another definition of stress is a condition caused by the interaction between individuals and the environment, giving rise to perceptions of the distance between demands from situations in a person's biological, psychological, and social systems [7]. Another understanding explains that stress is a process that evaluates an event as threatening and dangerous for individuals responding to the event at the physiological, emotional, cognitive, and behavioural levels [8].

The COVID-19 pandemic has caused various psychological disturbances in China at the individual and community levels. At the individual level, people are more likely to experience fear of infection [9]. The COVID-19 pandemic health crisis causes psychological changes such as fear, anxiety, depression or insecurity. This disorder is felt by health workers, everyone who works in the medical field, and all citizens [9].

Many respondents stated that one of the causes of student stress during the COVID-19 pandemic was lecture assignments/learning assignments [10]. The results of another study conducted by [11] showed that delays in academic activities are positively related to symptoms of

student anxiety during the COVID-19 pandemic. Course assignments do not significantly affect student stress levels [12]. Authors [10] reported that 40.2% of respondents said that one of the causes of stress during the COVID-19 pandemic was not being able to meet loved ones, including college friends. In the COVID-19 pandemic situation, the cause of stress is because they cannot meet physically. The study also found that 55.8% felt stressed during the COVID-19 pandemic due to the online learning process, which was getting boring.

It is unknown when the COVID-19 pandemic will end, but efforts to reduce stress for postgraduate students are urgently needed. Social support is a valuable resource for individuals experiencing anxiety and the primary way to improve their quality of life and maintain a healthy mind and body [13]. Social support is an interpersonal relationship or encouragement from other people in the environment where assistance occurs. It involves aspects of attention, appreciation, information, emotion, appraisal and instrumental assistance that individuals obtain through interaction with their setting. Social support has emotional benefits or behavioural effects on recipients so that they can overcome the problems individuals face [14]. Social support is a protective factor against stress and is a source of well-being [15]. In addition, social support can also provide certainty, comfort, and a sense of being loved [7].

The COVID-19 pandemic is a problem faced by postgraduate students in Indonesia. This problem must be addressed, and a solution must be found. Apart from social support, coping with stress is a way to deal with the anxiety of postgraduate students during the COVID-19 pandemic. According to [16], dealing with pressure is when individuals try to manage the distance between demands (both from individuals and demands arising from the environment) and the resources individuals possess to deal with stressful situations.

Coping stress has a significant role in one's health status. Students' coping ability with stress is a protective factor for physical and mental health [17]. A healthy physical and mental state can help students fulfil pressing academic and non-academic demands, especially during the COVID-19 pandemic.

An individual's ability to handle stressful conditions or cope with stress depends on several sources. Sources that influence the ability to cope

with anxiety are internal resources and external resources. Internal resources for dealing with stress include optimism, psychological control, and self-esteem. In contrast, external resources include time, money, education, decent work, friends, family, life in general, positive events, and the absence of other stressors in life [18].

Social support and coping stress can help relieve student stress, especially during the COVID-19 pandemic. Understanding the relationship between social support and managing stress on the academic stress of postgraduate students in dealing with the COVID-19 pandemic needs to be done. Based on the description above, this paper wants to explain the effect of coping stress and social support on academic stress in postgraduate students while facing the COVID-19 pandemic.

METHOD

This writing method is based on literature studies in English and Indonesian research journals with a discussion design with data that supports the effect of coping with stress and social support on academic stress during a pandemic. Journal searches are carried out with the help of the internet, with keywords related to managing stress factors, social support, and academic stress during the pandemic.

RESULTS AND DISCUSSION

The 2018 Basic Health Research (Riskesdas) data shows that the prevalence of emotional mental disorders, as indicated by symptoms of depression and anxiety for those aged 15 years and over, reaches around 6.1% of the total population of Indonesia or the equivalent of 11 million people. Residents aged 15-24 years or student/student age who have a depression percentage of 6.2%. A significant rate of student depression is due to academic demands that exceed student adaptive abilities. The causes of stress (stress) most often felt by students are presentations, excessive academic loads, and lack of commitment to a time before exams [19].

Academic stress on students can cause a decrease in workability and academic achievement, and this occurs especially for all students, both male and female [20]. Students make efforts to cope with academic demands, and these efforts are referred to as dealing with stress [6]. Stu-

dents' ability to deal with anxiety effectively is considered a supporting factor in maintaining students' physical and mental health. This ability can help students complete academic and non-academic demands [17].

Authors [21] researched Coping with Stress in Working Students. The study results stated that one respondent out of the five respondents found that the source of stress was difficulty dividing time with the many tasks given, workloads and schedules that collided. It was not easy to get permission at work. The author [22] states that busy and challenging daily activities can cause stress for individuals. In the second respondent, apart from the perceived active factor, the family did not support him in carrying out all his tasks. It can be understood that the environment in which the individual is located, especially the immediate environment such as the family, is very decisive in providing support to deal with the pressures experienced by the individual. In respondent 4, stress is also caused by co-workers who show an attitude that is not happy or does not support them. For respondent 5, there are transportation constraints to attend campus and work and a lack of attention from the family.

The research by [23] concerning Coping with family stress in individuals at clinically high risk for psychosis shows that overall, when compared to healthy controls, individuals with CHR (clinically high risk) mostly have no difference in using coping strategies when involved in daily life. Such as problem-solving, emotion regulation, positive thinking, cognitive change, and distraction, but they are more likely to use disengagement strategies (i.e., avoidance, denial, wishful thinking) when coping with stress with parents. Engagement strategies are associated with higher perceptions of social support for advice and guidance. Disengagement strategies are associated with lower perceptions of family support and increased family tension. Letting go strategies are related to symptoms of anxiety and depression.

The study [24] stated that academic performance is the primary source of stress. Eighty-eight percent of students reported academic performance stress, followed by work responsibility stress, written by 83% of students. The main stressors in postgraduate medical training are related to academic pressure and performance. There were no significant differences in PSS and SRQ scores between the male and female residents, suggesting no gender differences in perceived stress and

self-reported psychopathology. An earlier study by Dyson and Renk reported similar findings. Another study reported the use of emotion-focused coping strategies in female students. This study also found no gender differences in coping with focused emotions. However, it was observed that dysfunctional coping strategies were used significantly more by male residents. Previous studies have reported that male students use more dysfunctional coping strategies, such as substance use, to deal with stress than their female counterparts. The students with a medical illness had statistically significantly higher scores of psychological stress and morbidity than those who were not ill. Stress can be an outcome or a predisposing factor in the cause of several diseases, such as hypertension, migraines, and headaches, as shown by studies. There is a significant correlation between perceived stress and self-reported psychopathology. This indicates that high perceived stress in these students tends to experience psychiatric morbidities such as anxiety and depression. Previous studies have reported that high-stress levels in medical residents lead to depressive symptoms and suicidal ideation. Various previous studies replicated this finding. It is hypothesized that stress-induced activation of the hypothalamic-pituitary axis causes changes in the neurotransmitters serotonin, dopamine, and norepinephrine, which result in anxiety and depression.

Another study conducted by [25] concluded that the prevalence of mental health problems in college students is increasing and is caused by academic, financial and social stressors. Lack of social support causes mental health problems. Researchers also examined the effect of different sources of social support on student well-being. Research has conducted an online survey of college students by measuring symptoms of depression (Patient Health Questionnaire (PHQ-9)), social support (Multidimensional Perceived Social Support (MPSS)), and quality of life (WHOQOL-BREF). The sample is 461 students (82% female, mean age 20.62 years). The prevalence of depressive symptoms is 33%. Social support from family and friends was a significant predictor of depressive symptoms ($p = 0.000^*$). Social support from family and friends significantly influences quality of life (psychological). Social support from other people and friends affects the quality of life (social relations). Sources of social support are a valuable resource for universities in maintaining students' mental health.

Authors [13] conducted the same research on social support. This study aims to determine parents' quality of life (QOL) and social support for children with congenital anorectal malformation (ARM) and the relationship between the two. The research design and method used was a cross-sectional study conducted at the Children's Hospital of Anhui Province, China, from January to June 2018. A total of 108 parents participated in this survey. QOL and social support were accessed using a shortened version of the World Health Organization Quality of Life Instrument (WHOQOL-BREF) and the Level of Social Support Scale (SSRS), respectively. Data analysis was performed using multivariate linear regression and canonical correlation. The results showed that older people's physical, psychological, and environmental scores were lower than in China's general population. Gender, monthly income, a combination of malformations, objective support, subjective support, and utilization of support are the main factors affecting the quality of life. Canonical correlation analyses in social support noted a positive correlation with the quality of life, and subjective support, the psychological domain, had the most considerable standardized factor burden in social support and quality of life. Conclusion: The quality of life of parents of ARM patients is not optimistic. More attention must be paid to increasing social support for ARM parents to improve their quality of life.

Several other research results show that social support received can make individuals feel calm, cared for, loved, self-confident, and competent. The author [26] also suggests that two main factors cause a person to provide social support to others, namely empathy and social values. An individual who can empathize with others will find it very easy to feel the feelings of the people around him and experience the emotional burden that others think. In addition, the soul of empathy with others is the main form of motivation in behaving and helping others. In his growth and development phase, an individual has established and instilled norms and values in developing his personality. These things are obtained from the family, society, and the environment. Based on these norms, individuals can become

individuals who can interact with their environment and develop a social life.

According to [27], there are six aspects of social support called "The Social Provision Scale", namely:

a) emotional attachment. This emotional attachment is usually caused by feeling comfortable/safe with others or sources who get social support. This kind of thing is often experienced and obtained from spouses, family, friends, and teachers who have harmonious relationships,

b) social integration by doing recreational things together. This kind of support gives the individual a sense of security, belonging, and belonging to the group;

c) there is recognition (reassurance of worth). Individuals who have achievements and succeed because of their skills and abilities will get appreciation or appreciation from others. Usually, this kind of support comes from the family and the environment in which the individual lives,

d) reliable dependability. This social support is a guarantee for someone with problems, and he thinks others can be relied on to help him solve his problems. Such support usually comes from the family,

e) guidance. The aspect of this type of social support is a social relationship that exists between students and teachers. And have a positive impact and allow the individual to get the information or advice needed to overcome their problems,

f) opportunity for nurturance. Understanding this aspect is essential in an individual's interpersonal relationships with other people and in the individual's feeling of being needed.

CONCLUSIONS

Based on the description above, it can be concluded that coping with stress and social support can overcome academic stress. Social support is part of coping with anxiety to deal with the academic pressure of postgraduate students during the COVID-19 pandemic in Indonesia.

REFERENCES

1. Pakpahan, R., & Fitriani, Y. (2020). Analisis pemanfaatan teknologi informasi dalam pembelajaran jarak jauh di tengah pandemic virus Corona-19 [Analysis of the utilisation of information

- technology in distance learning during the Coronavirus-19 pandemic]. *Journal of Information System, Applied Management, Accountibg and Research*, 4(2), 30–36 (in Indonesian).
2. Firman, F. (2020). *Dampak COVID-19 terhadap Pembelajaran di Perguruan Tinggi* [The Impact of COVID-19 on Higher Education Learning]. *BIOMA*, 2(1), 14–20 (in Indonesian).
 3. Kelana, I. (2020, April 8). *Covid 19 dan potret pembelajaran berbasis E-learning* [Covid 19 and a snapshot of E-learning based learning]. Retrieved from <https://news.republika.co.id/berita/q8gkaa374/covid19-dan-potret-pembelajaran-berbasis-elearning> (in Indonesian).
 4. Zegeye, A., Mossie, A., Gebrie, A., & Markos, Y. (2018). Stress among Postgraduate Students and Its Association with Substance Use. *Journal of Psychiatry*, 21(3). doi: 10.4172/2378-5756.1000448
 5. American College Health Association. (2023). *Publications and Reports: ACHA-NCHA III*. Retrieved from https://www.acha.org/NCHA/ACHA-NCHA_Data/Publications_and_Reports/NCHA/Data/Reports_ACHA-NCHAIII.aspx
 6. Folkman, S. (2013). Stress: Appraisal and Coping. *Encyclopedia of Behavioral Medicine*, 1913–1915. doi: 10.1007/978-1-4419-1005-9_215
 7. Sarafino, E. P. (2007). *Health Psychology: Biopsychosocial Interaction* (6th ed.). New York: John Willey & Sons Inc.
 8. Blonna, R. (2012). *Coping with stress in a changing world* (5th ed.). New York: McGraw-Hill Companies, Inc.
 9. Xiang, Y.-T., Yang, Y., Li, W., Zhang, L., Zhang, Q., Cheung, T., & Ng, C. H. (2020). Timely mental health care for the 2019 novel coronavirus outbreak is urgently needed. *The Lancet Psychiatry*, 7(3), 228–229. doi: 10.1016/s2215-0366(20)30046-8
 10. Livana, P. H., Mohammad, F. M., & Yazid, B. (2020). *Tugas Pembelajaran” Penyebab Stres Mahasiswa selama Pandemi COVID-19* [“Learning Tasks” Cause of Student Stress during the COVID-19 Pandemic]. *Jurnal Ilmu Keperawatan Jiwa*, 3(2), 203–208 (in Indonesian).
 11. Cao, W., Fang, Z., Hou, G., Han, M., Xu, X., Dong, J., & Zheng, J. (2020). The psychological impact of the COVID-19 epidemic on college students in China. *Psychiatry Research*, 287, 112934. doi: 10.1016/j.psychres.2020.112934
 12. Agustin, I. M., Hidayatullah, F., Aminoto, C., & Tau, K. (2018). *Faktor Eksternal Tingkat Stres Mahasiswa Keperawatan dalam Adaptasi Proses Pembelajaran* [External Factors of Stress Levels of Nursing Students in Adapting the Learning Process]. 172–181. Retrieved from <http://repository.urecol.org/index.php/proceeding/article/view/104/102> (in Indonesian).
 13. Li, J., Gao, W., Zuo, W., & Liu, X. (2020). Relationship Between Quality of Life and Social Support in Parents of Children with Congenital Anorectal Malformations in China. *Journal of Pediatric Nursing*, 53, e87–e92. doi: 10.1016/j.pedn.2020.02.037
 14. Cohen, S. (2004). Social Relationships and Health. *American Psychologist*, 59(8), 676–684. doi: 10.1037/0003-066x.59.8.676
 15. Camara, M., Bacigalupe, G., & Padilla, P. (2014). The role of social support in adolescents: are you helping me or stressing me out? *International Journal of Adolescence and Youth*, 22(2), 123–136. doi: 10.1080/02673843.2013.875480
 16. Lazarus, R. (2006). *Stress and emotion: A New Synthesis*. New York: Publishing Company, Inc.
 17. Yıldırım, N., Karaca, A., Cangur, S., Acikgoz, F., & Akkus, D. (2017). The relationship between educational stress, stress coping, self-esteem, social support, and health status among nursing students in Turkey: A structural equation modeling approach. *Nurse Education Today*, 48, 33–39. doi: 10.1016/j.nedt.2016.09.014
 18. Taylor, S. (2012). *Health psychology* (8th ed.). New York: McGraw Hill.

19. Bamuhair, S. S., Al Farhan, A. I., Althubaiti, A., Agha, S., Rahman, S. ur, & Ibrahim, N. O. (2015). Sources of Stress and Coping Strategies among Undergraduate Medical Students Enrolled in a Problem-Based Learning Curriculum. *Journal of Biomedical Education*, 2015, 1–8. doi: [10.1155/2015/575139](https://doi.org/10.1155/2015/575139)
20. Pascoe, M. C., Hetrick, S. E., & Parker, A. G. (2019). The impact of stress on students in secondary school and higher education. *International Journal of Adolescence and Youth*, 25(1), 104–112. doi: [10.1080/02673843.2019.1596823](https://doi.org/10.1080/02673843.2019.1596823)
21. Lubis, R., Irma N. H., Wulandari, R., Siregar, K., Tanjung, N. A., Wati, T. A, Puspita, M. N, & Syahfitri, D. (2015). *Coping Stress pada Mahasiswa yang Bekerja* [Coping Stress in Working Students]. *DIVERSITA*, 1(2), 48–57 (in Indonesian).
22. Shalvendy, G. (2006). *Handbook Of Human Factors And Ergonomics* (3rd ed.). New Jersey: John Willey & Sons.
23. Yee, C. I., Gupta, T., Mittal, V. A., & Haase, C. M. (2020). Coping with family stress in individuals at clinical high-risk for psychosis. *Schizophrenia Research*, 216, 222–228. doi: [10.1016/j.schres.2019.11.057](https://doi.org/10.1016/j.schres.2019.11.057)
24. Datar, M., Shetty, J., & Naphade, N. (2017). Stress and coping styles in postgraduate medical students: A medical college-based study. *Indian Journal of Social Psychiatry*, 33(4), 370. doi: [10.4103/ijsp.ijsp_59_16](https://doi.org/10.4103/ijsp.ijsp_59_16)
25. Alsubaie, M. M., Stain, H. J., Webster, L. A. D., & Wadman, R. (2019). The role of sources of social support on depression and quality of life for university students. *International Journal of Adolescence and Youth*, 24(4), 484–496. doi: [10.1080/02673843.2019.1568887](https://doi.org/10.1080/02673843.2019.1568887)
26. Myers, D. G. (2018). *Social Psychology* (12th ed.). New York: McGraw-Hill Education.
27. Rubin, Z. (Ed.). (1974). *Doing unto others: Joining, molding, conforming, helping, loving (The Patterns of social behavior series)*. New Jersey: Prentice Hall.