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RESEARCH ARTICLE

IMPACT OF SOCIAL SUPPORT AND SELF EFFICACY ON STRESS LEVELS IN STUDENTS OF SOUTH INDIA

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ABSTRACT

Introduction: Stress levels among university students has been associated with negative outcomes like poor academic performance and degenerations of personal relations. Higher self-efficacy and social support may act as a moderator of stress for students. Hence this study was conducted to assess the correlation between academic self efficacy, social support, and stress among the university graduate students.

Material and Methods: This survey was conducted among undergraduate students aged 18-22 years, of a dental school in India. Information regarding the socio demographic, social support, stress and self efficacy variables were collected from 250 students. Pearson correlation was used to assess the relation between academic self efficacy, social support and stress.

Results: Showed that academic self efficacy was moderately correlated with appraisal support (r = 0.40, p < 0.05), belonging support (r = 0.32, p < 0.05), self esteem support (r = 0.53, p < 0.01), total social support (r = 0.45, p < 0.05) and stress (r = -0.5, p < 0.01). Stress was moderately correlated with appraisal support(r = -0.45, p < 0.05) belonging support (r = -0.40, p < 0.05), self esteem support (r = -0.45, p < 0.05), total social support (r = -0.45, p < 0.05).

Discussion and conclusion: We found a consistent moderate negative correlation of social support with stress among all the students. Perceived self efficacy was found to be negatively associated with self perceived stress among all the students.

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INTRODUCTION

The once rare phenomenon of stress has become a commonplace in the present era. It can be righthfully said that stress has become a 'global issue' Jain and Bansal (2012). Nowadays people from all walks of life encounter stressful situations. Stressors are generally related to performance pressures in academics, professional and personal life. Higher education is no exception, multitude of responsibilities and performance pressures are the known stressors for the students. Acharya, (2003). (Bandura *et al.*, 1996) Stress has been defined

as a state of psychological arousal that results when external demands tax or exceed a person's adaptive abilities Zajacova, and Lynch, (2005). Stress can be attributed to external factors, internal factors, or an interaction between the two Dwyer (2001). Different people experience different magnitude of stress in face of similar stressors. So, it can be assumed that stress is a matter of person's perception, not all people are equally stressed. In recent years, much attention has been given to the stress levels among university students. It has been observed that higher stress levels have been associated with greater symptomatology, depression, lower well-being and test anxiety. Stress has been associated with negative outcomes like poor academic performance and degenerations of personal relations Dwyer (2001). Medical and dental students have been

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known to be highly stressed and this has been substantiated by literature. Several studies have shown that the stress encountered during dental education is more pronounced than during medical education. Jain and Bansal, (2012) and Acharya, (2003). Hermanson (1972) reported emotional illness ranked third among illnesses in dentists and Cooper et al. (1987) reported the dental profession is the most stressful of all health professions. Various factors like fear of facing parents after failure, full loaded day, and fear of failing course or year have been found to be the stressors among dental students Acharya, S. (2003). Kumar et al. (2009) reported the most important source of stress among Indian dental students was the academic component - grade competition and heavy workload of the course. Various factors have been found to be associated with stress of the students like the cognitive variable (self efficacy) and a social/affective variable (social support). Dwyer, (2001). Self-efficacy has been associated frequently with stress in students and is defined by Bandura (1986) as a belief in one's capability or skill to attain a particular goal or execute a particular behaviour. Bandura proposed that selfefficacy can explain, not only the choice or level at which an activity is pursued, but as well, the likelihood of successful completion of the activity. It is a multidimensional construct and varies according to domains of demands and therefore it must be evaluated at a level that is specific to the outcome domain Pajares (1996). Thus, in academic settings, one should measure academic self-efficacy, which refers to students' confidence in their ability to carry out such academic tasks as preparing for exams and writing term papers. Higher self-efficacy may act as a moderator of stress for university students. Both perceived stress and academic self efficacy are predictors of cumulative grade point averages, i.e. academic achievement Dwyer, (2001).

Besides self efficacy, other factor which affects stress among students is the social factor, especially the social support. Social support has been defined by Shumaker and Hill (1991) by making a distinction between structure, which refers to the existence and types of connections within a social network, and function, which refers to the types of resources provided. Adequate social support has been known to be associated with physical, psychological and emotional well being of people. More important than the actual presence of resources and help from other people during times of stress, is the perceived support. A person's expectations about interactions with significant others, particularly when a person is under stress, is precisely what is assessed in most measures of social support quest; interpersonal support evaluation list, social provisions scale or perceived social support from family and friends Dwyer (2001). Social support is known to buffer the effects of stress. Two prevailing models that are widely used in the stress and social support literature are the main-effect model and the stress-buffering model. Each has been found to be useful to explain how social support helps individuals under stress. As the stress-buffering model predicts, social support can mitigate some of the negative psychological and physiological responses of stress. Cohen and Wills (1985) With this background in picture it can be hypothesized that social support, academic self efficacy are related with low stress levels among the students. Hence this study was conducted

with aim to assess the levels of social support, academic self efficacy and stress among undergraduate students.

MATERIALS AND METHODS

A cross-sectional study was conducted among dental undergraduate students to investigate the influence of social support and academic self efficacy, on stress and academic performance. This survey was conducted among dental undergraduate students aged 18-22 years, of a dental school in south India, during January – February 2013. Students who were present on the day of study, willing to participate were included in the study. A convenience sample consisted of 250 dental undergraduate students belonging to 1st, 2nd, 3rd and final year. All the eligible students present on the day of examination were included in the study. A total of 200 students agreed to participate in the study and constituted final sample for the study

Methods of Data collection

Study Proforma

A self administered questionnaire was designed to assess the socio-demographic and self perceived social support, academic self efficacy, stress and academic performance characteristics of participants. The final questionnaire consisted of various sections to assess the socio-demographic details, social support and stress and self efficacy of the participants. It collected information regarding age, gender, education and occupation of their parents. Second section consisted of three sections for assessing self perceived social support, self perceived stress and academic self efficacy of participants. The social support questionnaire used the Interpersonal support evaluation list (ISEL). The ISEL-SF consists of 16 items drawn from the full scale. These four subscales are (a) Appraisal Support (AP) the perceived availability of someone to discuss issues of personal importance, (b) Tangible Assets Support (TA)—the perceived availability of material aid, (c) Belonging Support (BE)—the perceived availability of others to interact with socially, and (d) Self-Esteem Support (SE)—the perceived availability of others with whom one compares favorably. The ISEL-SF also yields an aggregate index of social support (TOT), ranging from 0 to 48, with higher scores indicating greater perceived social support. The ISEL-SF was used with options from a true-false response format to a 4-point rating scale (definitely true, probably true, probably false, and definitely false; scored 0-3). Payne et al. (2012). Next sections consisted of global self perceived stress measured using a single item question asking 'how stressed out do you feel?' with options rating from 0-10 (0= no stress to 10= extremely stressed). Spegman et al. (2007) Following section consisted of 21 items academic self efficacy scale. Each question had four options from strongly disagree to strongly agree (scores 1-4). This scale gives an aggregate score by adding responses of all the items. The average marks obtained by students in all the subjects for the particular academic year was calculated as aggregate and percentages. These records were obtained from the concerned institution with prior permission from the authorities.

Before commencing the study, an ethical clearance was obtained from the Kasturba Hospital Ethics Committee, Kasturba Hospital, Manipal (Enclosure). Permissions were obtained for the study from the head of the institution. A pilot study was conducted on 30 students to assess the validity (face, content) and reliability of the questionnaire. The reliability was assessed by measuring Cronbach's alpha and inter-item correlations. Test-retest reliability was calculated using Intraclass correlation coefficient (ICC). The validity was assessed by correlating all scales with each other. The students of 1st, 2nd, 3rd, final year BDS were briefed about the purpose of the study and invited to participate in the study. The students, who gave consent, were included in the study and were provided with self-administered questionnaires. Principal investigator was present on the day of examination to answer the queries regarding the questionnaires.

Statistical Analysis

Statistical analysis of the data was performed using Statistical Package for Social Sciences (SPSS) version 16.0. (Chicago, USA). Pearson correlation was used to assess the relation between academic self efficacy, social support and stress. A p-value of 0.05 was used as a cut-off level for statistical significance.

RESULTS

Total sample comprised of 200 students belonging to all the academic years of BDS in the dental school. All the students present on the day of scheduled examination and who willingly participated in the study were included in the analysis.

Table 1. Distribution of the participants according to Socio-demographic characteristics

Characteristics			No. of Participants (n)
First year	Gender	Males	18
(N = 74)		Females	56
	Nationality	Indian	59
	-	Foreign	15
Second year	Gender	Males	20
(N = 68)		Females	48
	Nationality	Indian	63
		Foreign	5
Third year	Gender	Males	19
(N = 76)		Females	57
	Nationality	Indian	74
	·	Foreign	2
Final year	Gender	Males	26
(N = 82)		Females	56
	Nationality	Indian	78
	•	Foreign	4

Table 2. Pearson correlation coefficients for total number of participants of 2nd, 3rd, and final year (total sample)

		Aggregate	Academic Self Efficacy	Stress
Social support	AP (Appraisal support)	0.034	0.400*	-0.455*
**	TA (Tangible assets)	0.134	0.123	0.072
	BE (Belonging support)	0.113	0.323*	- 0.400*
	SE (Self-esteem support)	0.121	0.533**	-0.454*
	Total Social Support	0.131	0.459**	-0.456*
	Stress	0.121	-0.511**	1
	Academic self efficacy	0.121	1	

^{** -} Correlation is significant at the 0.01 level (2-tailed). * - Correlation is significant at the 0.05 level (2-tailed).

Table 3. Pearson correlation coefficients for participants of 2nd year BDS

		Aggregate	Academic Self Efficacy	Stress
Social support	AP (Appraisal support)	0.134	0.500**	-0.505**
	TA (Tangible assets)	0.192	0.123	0.168
	BE (Belonging support)	0.108	0.423*	- 0.480**
	SE (Self-esteem support)	0.121	0.433*	-0.404*
	Total Social Support	0.130	0.450^{*}	-0.400*
	Stress	0.120	-0.551**	1
	Academic self efficacy	0.140	1	

^{** -} Correlation is significant at the 0.01 level (2-tailed). * - Correlation is significant at the 0.05 level (2-tailed).

Table 4. Pearson correlation coefficients for participants of 3rd year BDS

		Aggregate	Academic Self Efficacy	Stress
Social support	AP (Appraisal support)	0.100	0.500**	-0.515**
**	TA (Tangible assets)	0.150	0.423	0.168
	BE (Belonging support)	0.180	0.523**	- 0.430*
	SE (Self-esteem support)	0.430*	0.533**	-0.434*
	Total Social Support	0.550**	0.450^{*}	-0.400*
	Stress	0.120	-0.400*	1
	Academic self efficacy	0.440*	1	

^{** -} Correlation is significant at the 0.01 level (2-tailed). * - Correlation is significant at the 0.05 level (2-tailed).

Table 5. Pearson correlation coefficients for participants of 4th year BDS

		Aggregate	Academic Self Efficacy	Stress
Social support	AP (Appraisal support)	0.120	0.520**	-0.545**
	TA (Tangible assets)	0.170	0.123	0.168
	BE (Belonging support)	0.180	0.423*	- 0.450*
	SE (Self-esteem support)	0.500*	0.495*	-0.434*
	Total Social Support	0.514**	0.550**	-0.490*
	Stress	0.320	-0.440*	1
	Academic self efficacy	0.480*	1	

^{** -} Correlation is significant at the 0.01 level (2-tailed). * - Correlation is significant at the 0.05 level (2-tailed).

Table 6. Pearson correlation coefficients for participants of 1st year BDS

		Academic Self Efficacy	Stress
Social support	AP (Appraisal support)	0.420*	-0.505*
	TA (Tangible assets)	0.180	0.168
	BE (Belonging support)	0.455*	- 0.450*
	SE (Self-esteem support)	0.395*	-0.434*
	Total Social Support	0.560**	-0.480 [*]
	Stress	-0.400*	1
	Academic self efficacy	1	

^{** -} Correlation is significant at the 0.01 level (2-tailed). * - Correlation is significant at the 0.05 level (2-tailed).

Table 1 shows the distribution of the participants according to academic year (1st, 2nd, 3rd and final year BDS), gender and nationality. Table 2 shows the results of Pearson correlation coefficients for total number of participants of 2^{nd} , 3^{rd} , and final year. Academic self efficacy was found to be moderately correlated with appraisal support (r = 0.40, p < 0.05), belonging support (r = 0.32, p < 0.05), self esteem support (r = 0.53, p < 0.01), total social support (r = 0.45, p < 0.05) and stress (r = -0.5, p < 0.01). Stress was moderately correlated with appraisal support(r = -0.45, p < 0.05) belonging support (r = -0.40, p < 0.05), self esteem support (r = -0.45, p < 0.05), total social support (r = -0.45, p < 0.05)

Table 3 shows the results of Pearson correlation coefficients for participants of 2^{nd} year BDS. Academic self efficacy was found to be moderately correlated with appraisal support (r = 50, p < 0.01), belonging support (r = 0.42, p< 0.05), self esteem support (r = 0.43, p < 0.05), total social support (r = 0.45, p < 0.05) and stress (r = - 0.55, p < 0.01). Stress was moderately correlated with appraisal support(r = - 0.50, p < 0.01) belonging support (r = - 0.48, p < 0.05), self esteem support (r = - 0.40, p < 0.05), total social support (r = - 0.40, p < 0.05)

Table 4 shows the results of Pearson correlation coefficients for participants of $3^{\rm rd}$ year BDS. Aggregate marks were moderately correlated with self esteem support (r = 0.43, p< 0.05), total social support (r = 0.55, p< 0.01), academic self efficacy (r = 0.44, p<0.05). Academic self efficacy was found to be moderately correlated with appraisal support (r = 50, p < 0.01), belonging support (r = 0.52, p< 0.01), self esteem support (r = 0.53, p < 0.01), total social support (r = 0.45, p < 0.05) and stress (r = -0.40, p < 0.05). Stress was moderately correlated with appraisal support(r = -0.51, p < 0.01) belonging support (r = -0.43, p < 0.05), self esteem support (r = -0.43, p < 0.05), total social support (r = -0.40, p < 0.05)

Table 5 shows the results of Pearson correlation coefficients for participants of 4th year BDS. Aggregate marks were

positively moderately correlated with self esteem support (r = 0.50, p< 0.05), total social support (r = 0.51, p< 0.01), academic self efficacy (r = 0.48, p<0.05). Academic self efficacy was found to be moderately correlated with appraisal support (r = 52, p < 0.01), belonging support (r = 0.42, p< 0.05), self esteem support (r = 0.49, p < 0.05), total social support (r = 0.55, p < 0.01) and stress (r = - 0.44, p < 0.05). Stress was moderately correlated with appraisal support(r = 0.54, p < 0.01) belonging support (r = - 0.45, p < 0.05), self esteem support (r = - 0.43, p < 0.05), total social support (r = - 0.49, p < 0.05).

Table 6 shows the results of Pearson correlation coefficients for participants of 1st year BDS. Academic self efficacy was found to be moderately correlated with appraisal support (r = 42, p < 0.05), belonging support (r = 0.45, p< 0.05), self esteem support (r = 0.39, p < 0.05), total social support (r = 0.56, p < 0.01) and stress (r = -0.40, p < 0.05). Stress was moderately correlated with appraisal support(r = -0.50, p < 0.05) belonging support (r = -0.45, p < 0.05), self esteem support (r = -0.43, p < 0.05), total social support (r = -0.48, p < 0.05).

DISCUSSION

This study was carried out to assess the impact of self perceived social support, academic self efficacy on the self perceived stress and academic performance in a sample of undergraduate students in dental school of south India. Stress has been observed to be increasing every day among all the people same is the case with medical and dental professional. Dental students are among most stressed clinicians. Various studies have been conducted and it has been observed that academic component - grade competition and heavy workload of the course, etc are the major stressors among the students. We have not come across any study which has explored the variables which might be successful in buffering these individuals against stress and other psychosomatic symptoms

related to stress. Acharya, (2003) and Sanders (2002). Researchers have since long time believed that increased social support can play a role in blunting the effects of stress and related detrimental variables. They have focused their attention on stress buffering effect of social support on stress. It is hypothesized that social support acts as a positive agent in reducing negative effects of stress on various outcomes. The stress-buffering model can be depicted in five steps. First, a potentially stressful event must take place (Cohen et al., 2000; Cohen and Wills, 1985). Second, an individual appraises (evaluates) the demands of the potentially stressful event and whether he or she has the capabilities to handle the potentially stressful event (Cohen et al., Cohen and Wills). At this stage, if an individual does not appraise the potentially stressful event as demanding or perceives to have the capability to handle the event, then stress will not occur and progress through the stages will stop. However, if the potentially stressful event is appraised as demanding and he or she does not feel capable to handle the event, then the third stage in the process occurs; stress is perceived (Cohen et al.; Cohen and Wills). Fourth, individuals may respond to stress with negative psychological and physiological responses (Cohen et al.; Cohen & Wills). For example, individuals who are stressed may produce negative responses such as thinking they cannot handle the situation (psychological) and/or not take care of his or her body (physiological). Fifth, negative outcomes (such as illness or disease) may occur (Cohen et al.; Cohen & Wills).

The questionnaire used in this study was Interpersonal support evaluation list a designed to measure the perceived availability of four specific support resources: (a) tangible support, the perceived availability of material aid; (b) appraisal support, the perceived availability of someone with whom to discuss issues of personal importance; (c) support, the presence of others with whom the individual feels he/she compares favorably; and (d) belonging support, the perception that there is a group with which one can identify and socialize. The ISEL has been widely used and has a consistent reputation for affirming the stress-buffering model (Wills, 1991; Wills and Filer, 2000). In our study we found a consistent moderate negative correlation of social support with stress across all the academic years. This is consistent with the findings of study conducted by Dwyer et al. (2001) on a group of undergraduate students of Canadian university, Ghaith G (2002) in Lebanon students and Dzulkifli et al. (2009) in Malyasian students. A higher score on the ISEL was correlated with a significant stress-buffering effect. Delistamati et al. (2006) Similarly, the constructs of appraisal support (AP), belonging support (BE) and self esteem support (SE) were negatively correlated with the stress among all the students. Tangible support construct was insignificant in its correlation with stress. Among all the studies conducted on these parameters none have used ISEL for appraising the social support. One study which compared the psycho somatic symptoms of students with social support reported that tangible support is not associated significantly with outcome variables. This seems to be in accordance with the understanding that availability of material assets might not significantly affect the academic related stress the person faces. Delistamati et al. (2006) Self efficacy is the persons' confidence on his ability to accomplish the task assigned to

him or her. In academic settings this can be expressed as academic self efficacy. This has been found to be predictor of perceived stress and academic performance among students. High levels of self-efficacy are reliable predictors of academic achievement (Bandura et al., 1996). In present study perceived self efficacy was found to be negatively associated with self perceived stress among all the students across all academic years. This finding is in accordance with the study conducted by Newby-Fraser et al. (1997), Solberg et al. (1997). Similarly, academic self efficacy was inconsistently related to academic performance i.e the average marks. The relation was found to be significant among the students of 3rd and final year students. This finding was in accordance with the study conducted by Gore (2006), in which it was found that at the beginning of first semester of college, academic self-efficacy beliefs are relatively weak predictors of academic performance. Similarly, Zimmerman et al. (1992) found that students' efficacy beliefs for using self-regulatory behaviors (e.g., finishing homework, organizing schoolwork, and taking class notes) were related to their efficacy beliefs for academic achievement and their stated course grade goals.

In our study we found consistent effect of self perceived social support, academic self efficacy on perceived stress across all the academic years. Besides this the relation between social support and academic self efficacy with academic performance was observed in the later years of the degree schooling. For the first year students the academic performance was not assessed to eliminate the confounding factors of pre-university schooling as the students belonged to different backgrounds. Similarly this was a convenience sample; students of same university were assessed. This does not allow a cross comparison between different universities. It would be an interesting perspective to compare across different universities to get a better insight about the factors like college environment which in turn will affect the social support and stress. Comparison at various time points like before and after the yearly examinations can help us understand the trends in these above mentioned variables. Nevertheless this study is first of its type assessing the influence of social support, academic self efficacy on stress and academic performance of dental undergraduates. This study has provided the preliminary information on the inter relationships between all the variables - social support, stress, academic self efficacy, performance, and this can be used as a baseline on which similar studies in similar population can be conducted in the future.

Conclusion

Self perceived social support was negatively correlated with stress across all academic years. Appraisal support, belonging support and self efficacy support – constructs of social support were in negative correlated with stress. Academic self efficacy was negatively correlated with stress across all the academic years. Self perceived social support and academic self efficacy was positively correlated with the academic performance in 3rd and final year students. Studies comparing the social support across different universities can be conducted in the future. The stability of social support and academic self efficacy constructs during and after examinations and major academic events need to be assessed. Follow-up studies can be

conducted from the first year onwards and changes in the social support, academic self efficacy, stress and academic performance along with the personality can be assessed.

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