

An-Najah National University

Faculty of Graduate Studies

**Stressors and Coping Strategies among General
Secondary Students in Governmental Schools in
North West Bank**

By

Khulud "Mohammed Hashem" Mansor

Supervised

Dr. Mariam Al-Tell

**This Thesis is Submitted in Partial Fulfillment of the Requirements for
the Degree of Master of Community Mental Health Nursing, Faculty of
Graduate Studies, An-Najah National University Nablus-Palestine.**

2017

Acknowledgment

I would like to thank "An-Najah National University" and Faculty of Graduate Studies. Special thanks to my supervisor Dr. Mariam Al-Tell for her guidance and support to complete this study. I would like also to thank the Ministry of Education and schools managers who provided help and facilities to complete this work. Great thanks for all students who participated in this study.

الإقرار

أنا الموقعة أدناه، مقدمة الرسالة التي تحمل العنوان:

Stressors and Coping Strategies among General Secondary Students in Governmental Schools in North West Bank

الضغوطات وطرق التأقلم معها لدى طلبة الثانوية العامة في المدارس الحكومية في شمال
الضفة الغربية

أقر بأن ما اشتملت عليه هذه الرسالة إنما وه نتائج جهدي الخاص، باستثناء ما تمت الإشارة إليه
حيثما ورد، وأن هذه الرسالة ككل، أو أي جزء منها لم يقدم من قبل لنيل أية درجة علمية أو بحث
علمي أو بحثي لدى أية مؤسسة تعليمية أو بحثية أخرى.

Declaration

The work provided in this thesis, unless otherwise referenced, is the researcher's own work, and has not been submitted elsewhere for any other degree or qualification.

Student's name:

اسم الطالبة:

Signature:

التوقيع:

Date:

التاريخ:

Table of Contents

Acknowledgment	iii
Declaration	iv
List of Tables	viii
List of figure	x
List of abbreviations	xi
Abstract	xii
Introduction	1
Problem Statement	3
Significance of Study	3
Aim of Study	4
Research Objectives	4
Research Questions	4
Hypotheses	5
Background	7
Definition of Stressors	7
Classifications of Stressors	8
Academic Stressors	9
Definition of Stress	10
Classifications of Stress	11
Stress Reaction	12
Psychological Theories of Stress	13
Theory of Emotion (James-Lange, 1920s)	13
Emergency Theory (Cannon-Bard, 1920s)	14
Theory of Emotion (Schachter-Singer, 1950s)	14

Theory of Cognitive Appraisal (Lazarus-Folkman, 1984)	15
Coping and Coping Strategies	17
Definition of Coping	17
Coping Strategies	18
Classifications of Coping Strategies	18
Education System in Palestine	21
Conceptual Framework	25
Transactional Model of Stress and Coping (Lazarus & Folkman,1984)	28
Framework of study	30
Literature review	31
Methodology	40
Study design	40
Setting and site	40
Study population	40
Sample size and Sampling method	41
Selection criteria	44
Data collection tools	44
Validity and reliability	48
Ethical consideration	49
Filed work	49
Scoring System	51
Statistical analysis	53
Dependent and Independent Variable	53
Conceptual and Operational Definitions	54
School Stressor Questionnaire (3SQ)	54

Brief Coping Orientation of Problem Experienced(COPE)	55
Results	60
Discussion	84
Conclusion	100
Recommendation	101
Limitations	103
References	104
Annexes	121
الملخص	ب

List of Tables

Table (4-1)	Distribution of study population among four cities	42
Table (4-2)	Distribution the sample size according to study branch and gender among four cities	43
Table (4-3)	The results of Cronbach alpha test	49
Table (5-1)	Distribution of percentage of students regarding their socio-demographic data	60
Table (5-2)	Distribution of percentage of students regarding their academic profile	61
Table (5-3)	Distribution of percentage of students regarding their receiving counseling from psychological and educational counselor	62
Table (5-4)	Distribution of percentage of students regarding their free time and use of it	62
Table (5-5)	Distribution of percentage of prevalence of stress among students	63
Table (5-6-1)	Distribution of percentage of students regarding the (ARS)	64
Table (5-6-2)	Distribution of percentage of students regarding the (Inter RS)	65
Table (5-6-3)	Distribution of percentage of students regarding the (Intra RS)	67
Table (5-6-4)	Distribution of percentage of students regarding the (LTRS)	68
Table (5-6-5)	Distribution of percentage of students regarding the (TRS)	69
Table (5-6-6)	Distribution of percentage of students regarding the (GSRS)	70
Table (5-6-7)	Distribution of mean and standard deviation for each stressor domain as reported by the general secondary schools students	71
Table (5-7)	Distribution of percentage of students regarding the coping strategies that used	72
Table (5-8)	Distribution of mean and standard deviation of the prevalence of stress among students in relation to gender and study branch using t-test	76

Table (5-9)	Distribution of mean and standard deviation of the domains of stressors among students in relation to gender and study branch using t-test	77
Table (5-10-1)	Distribution of mean and standard deviation of the domains of coping strategies among students in relation to gender using t-test	78
Table (5-10-2)	Distribution of mean and standard deviation of the domains of coping strategies among students in relation to study branch using t-test	79
Table (5-11)	Distribution of mean and standard deviation of the prevalence of stress among students in relation to the time left for exam using t-test	81
Table (5-12)	Distribution of mean and standard deviation of the domains of stressors among students in relation to the time left for exam using t-test	81
Table (5-13)	Distribution of mean and standard deviation of the domains of coping strategies among students in relation to the time left for exam using t-test	82

List of Figures

Figure (2.1)	James-Lange Theory of Emotion	14
Figure (2.2)	Cannon-Bard Theory of Emotion	14
Figure (2.3)	Schachter and Singer theory of emotion	15
Figure (2.4)	Theory of Cognitive Appraisal	17
Figure (2.5)	Map of Palestine	22
Figure (2.6)	Transactional Model of Stress and Coping	29
Figure (2.7)	Framework of study	30

List of abbreviations

ARS: Academic Related Stressor

COPE: Brief Coping Orientation of Problem Experienced

GSRS: Group-Social Related Stressor

Inter RS: Interpersonal Related Stressor

Intra RS: Intrapersonal Related Stressor

IRB: Institution Review Board

IRS: Intrapersonal and Interpersonal Stressors

LTRS: Learning & Teaching Related Stressors

SRS: Social Related Stressors

3SQ: Secondary School Stressor Questionnaire

TRS: Teacher Related Stressors

WHO: World Health Organization

WB: West Bank

PCBS: Palestinian Central Bureau of Statistic

PMOE: Palestinian Ministry of Education

PNA: Palestinian National Authority

Stressors and Coping Strategies among General Secondary Students in Governmental Schools in North West Bank

By

Khulud "Mohammed Hashem" Mansor

Supervised by

Dr. Mariam Al-Tell

Abstract

Introduction: Stress is considered one of the main parts of our modern life due to rapid changes in social, economic, political and cultural norms. Naturally, all humans cope with stressors by using productive and nonproductive coping strategies. This study is aimed at assessing stressors and coping strategies among general secondary students in governmental schools in the North West Bank. **Method:** A descriptive quantitative design was used to collect data from students from government secondary schools. A stratified random sampling method was used to select (39) schools followed by a simple random sampling method used to select (334) students. A self-reporting questionnaire, the Secondary School Stressor Questionnaire (3SQ), was used to collect data and identify stressors among secondary school students. Another self-reporting questionnaire, the Brief Coping Orientation of Problems Experienced (COPE) was used to identify methods in managing stress. **Results:** The rate of stress among females was higher than males (61.4% > 38.6%), and it was higher among the humanities branch students than the scientific branch students (69.2% > 30.8%) with no significant differences ($P > 0.05$). The (ARS) was the main domain of stressors it was higher among female and the humanities branch students

with significant differences ($P < 0.05$). The useful ("problem-focused" and "emotion-focused") coping strategies were mostly used by students, and the "less useful" coping strategies were used a "little bit". The results of the study indicated that there were no significant differences in the prevalence of stress among Nablus students in relation to the time left for the exam ($P > 0.05$), it also indicated that there were significant differences in (ARS) and (LTRS) when the time left for the exam is shorter ($P < 0.05$). In both cases, the "problem-focused" and "emotion-focused" coping strategies were used a "lot" at both times. **Conclusion:** The study concluded that almost all of the students have different levels of stress with different effects. The (ARS) were the main domains of stressor. These stressors caused moderate level of stress among students. "Religion" and "Planning" were the coping strategies that were used most by students. **It is the researcher's recommendation that schools** increase the role of psychological and educational counselors in schools to provide psychological support and debriefing for students, and to help them to decrease the negative effect of the Tawjihi exam when it cannot be eliminated.

Key words: Stress, Stressors, Coping Strategies, Secondary Schools, Students.

Chapter One

Introduction

Stress is one of the main parts of modern life. All people face different types of stress; workers, students, managers, and parents. Moreover, the same person may encounter more than one type of stress at the same time. Students may experience academic stress due to the prevalence homework and exams (Hussien & Hussien, 2006).

Stress is the body's response to environmental changes and occurs when environmental pressures exceed the capacity of a person to cope with them. The presence of stress may lead to physical, mental or emotional changes. A healthy lifestyle is an essential in any program to relieve stress and to combat the changes it causes (Elizabeth, 2003).

Adolescents nowadays face challenges in their lives that their parents and traditional educators didn't face when they were their age. The rapid changes in socio-cultural norms that occur in modern life might be one of the challenges that lead to stress (Frydenberg et al., 2004). In addition, Elizabeth (2003) noted that stress levels between students have been rising in a dangerous manner. Different factors such as academic pressure, learning large amounts of new information in a limited time and high expectations from parents lead to an increased level of stress. In the end, these factors may possibly influence the health of the students.

Moreover, according to Ahmed et al. (2013) the academic environment leads to symptoms, and outcomes of stress that are different

from nonacademic environment. In academic environment students' face many stressors such as academic overstrain, pressure to do well, pressure to achieve more than others, less free time, less time with their dear ones, and concern about the future. In some countries students even face serious financial problems that prevent them from continuing their education (Mikolajczyk et al., 2008). Also, the academic environment creates stressful situations which might have a negative effect on the mental and physical health and academic performance of the students (Ongori & Agolla, 2008; Agolla, 2009).

Childhood and adolescence is an important transitional period in the development of coping mechanisms for stress. So, the ability to cope with stress is considered a central feature of human development. Naturally all humans are confronted with threatening and challenging events in their daily life that need for action and readjustment (Compas et al., 2001).

Frydenberg et al. (2004) thought that successful coping mechanisms for stress include the ways in which individuals manage their emotions, think constructively, control and change their behavior, guide their autonomic arousal, and act on the social and nonsocial environments to modify or reduce sources of stress. So, adolescents might face problems in coping with stress, and they need new educational programs in schools to learn how to cope with stress and stressors.

1.1. Problem Statement

The school years are considered the hardest period in most people lives. Most students face different problems, challenges, obstacles and situations that can produce or increase stress. While, mild stress levels can encourage or motivate students to take action to improve their academic performance, severe stress levels or poor management of stress can lead to dangerous problems which could affect the academic performance of students. Therefore, this study aimed at assessing stressors and coping strategies among general secondary students in governmental schools in the North West Bank.

1.2. Significance of Study

Knowing the main stressors among general secondary school students will help in identifying how students perceive stress and how they cope with it in their daily life. The results of this study might help authorities, policy makers, teachers, parents and students. This study should be used in the form of suggestions and recommendations to take effective steps to reduce stressors among students, design programs for training teachers or psychological counselors to teach students how can manage their stressors, and help parents by including them in programs designed to instruct them how they can provide support for their children.

1.3. Aim of Study

This study is aimed at assessing stressors and coping strategies among general secondary students in governmental schools in the North West Bank.

1.4. Research Objectives

1. To find out the prevalence rate of stress among general secondary students in governmental schools in the North West Bank.
2. To find out the main domains of stressors as perceived by the general secondary students in governmental schools in the North West Bank.
3. To find out the level of stress as perceived by the general secondary students for each stressor domain in governmental schools in the North West Bank.
4. To find out the main coping strategies used by the general secondary students in governmental schools in the North West Bank.

1.5. Research Questions

1. What is the prevalence rate of stress among general secondary students in governmental schools in the North West Bank?
2. What are the main domains of stressors as perceived by the general secondary students in governmental schools in the North West Bank?

3. What is the level of stress as perceived by the general secondary students for each stressor domain in governmental schools in the North West Bank?
4. What are the main coping strategies used by the general secondary students in governmental schools in the North West Bank?

1.6. Hypotheses

1. There is no significant difference in the prevalence of stress among students according to gender.
2. There is no significant difference in the prevalence of stress among students according to study branch (i.e. Humanities or Sciences).
3. There is no significant difference in the domains of stressors among students according to gender.
4. There are no significant differences in the domains of stressors among students according to study branch.
5. There is no significant difference in the domains of coping strategies used by students according to gender.
6. There is no significant difference in the domains of coping strategies used by students according to study branch.

7. There is no significant difference in the prevalence of stress, stressors, and coping strategies among Nablus students in relation to the time left for the exam.

Chapter Two

Background

This chapter discusses the different definition of stressors, stress and coping strategies, in addition it presents different psychological theories that explained stress.

2.1. Definition of Stressors

Stressors are defined as *"objects, persons or situations that lead to the emergence of stress to an individual, as well as the triggering of his stress response system"* (Sincero, 2012a). McLeod (2010) defined a stressor as *"stimulus (or threat) that causes stress, e.g. exam, divorce, death of loved one, moving house, loss of job"*. Also, explains Hussien and Hussien (2006) stressors as factors or stimulators that produce psychological and physical stress. Moreover, Matthieu and Ivanoff (2006) referenced the definition of stressors developed by Everly and Latin (2002) who claimed that stressors were any actual or assumed event, situation, or stimulus that arouses or leads to begin the human stress reaction process.

In addition, Alawad and Slamah (2014) referenced Lazarus (1996) who, using to the Transactional Model of Stress, described stressors as *"demands made by the internal or external environment that upset balance, thus influencing physical and psychological well-being and requiring actions to restore balance"*.

Williams (2016a) defined stressors as *"events and stimuli that cause us to experience psychological stress"*. Stress also occurs when individuals encounter pressure or difficulties in coping with event or arousal.

2.2. Classifications of Stressors

Stressors are often classified into two main types: internal and external stressors. These types have been discussed in several studies (**Lin & Yusoff, 2013; Sincero, 2012a; Wills & Shiffman, 1985**). Internal stressors (emotional stressors) include anxiety, fear and personality traits, health; amount of sleep; suspiciousness; pessimism or feelings of helplessness. External stressors are includes family stressors (family role expectations), social stressors (challenges that faced on a daily life basis), change stressors (marriage), chemical stressors (using alcohol), disease stressors (health problems), environmental stressors (pollution).

Thawabteh and Qaisy (2012) have a different opinion toward stressors; they separated the stressors that were classified by **Weightman (1999)** into three main categories: sudden trauma, chronic stressors and daily hassles. The first category is sudden trauma and it described stress as stimulus that produce threats in personal life, so it is an independent variable produced from the human internal environment. The second one is chronic stressors described as response to the external environment, so it is a dependent variable which impacts on physiological, emotional and cognitive body functions. The last category is daily hassles, which

considered as the transactional approach which combines the two previous groups.

Moreover, **Matthieu and Ivanoff (2006)** pointed to opinion of **Everly and Latin (2002)** who discussed classification of stressors from another aspect. They explained two categories of stressors: psychosocial and biogenic. Psychosocial stressors occur when a person responds to stimulus or situations which they perceive as a threat. Biogenic stressors are thoughts, cognitions, or an appraisal of event is not necessary to cause the same physiological stress response.

2.3. Academic Stressors

The following studies indicated that school students and undergraduate students encounter many stressors in their daily life. Moreover, these studies revealed that major stressors are related to academic issues (**Xiao, 2013; Thoits, 1995; Cheng et al., 1993**). **Xiao (2013)** pointed to academic stressors that were explained by **Thoits (1995)** as academic demands such as environmental or social demands that push students to adjust their behavior. Also, **Cheng et al. (1993)** clarified academic stressors were normal events in a student's life that has an influence in their academic performance and mental health; so many academic stressors can be universal. Students from all cultures might feel stress due to stressors such as examinations, excessive homework, time issues, peer competition and other issues.

Moreover, most students encounter various stressors in the academic field. Hou et al. (2013) described some of these stressors like: excessive homework and exams; unclear assignments; maintaining good relationships with their teachers; limited time; coping with stressful classroom environments, waiting period for results of examination; inadequate available resources to cope with new learning environments; and facing pressure to develop adequate skills necessary for academic success.

2.4 Definition of Stress

Stress was defined by Webster dictionary as *"a physical, chemical, or emotional factor that cause's bodily or mental tension and may be a factor in disease causation"*, (" Stress", n.d).

The concepts of stress have been developed over years (Matthieu & Ivanoff 2006). Schuster et al. (2003) pointed to psychological stress that specifically defined by Lazarus (1966) in stress theory as a *"particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her wellbeing"*. Also, Lazarus and Folkman (1984) defined mental stress as *"a transaction, when the cognitive focus is on the relationship between the person and the environment, such as thinking about events in one's life and deciding if one has the personal resources to handle those events"*.

Hamaideh (2011) adopted the definition of stress from Lazarus and Cohen (1977) as *"any event in which environmental demands, internal demands, or both, exceed the adaptive resources of an individual or social*

system". Agolla and Ongori (2009) defined it as *"the perception of discrepancy between environmental demands (stressors) and individual capacities to fulfill these demands"*. Their study referenced Campbell's (2006) definition, who defined it as *"the adverse reaction people have to excessive pressure or other types of demands placed on them. Stress occurs when an individual is confronted by a situation that they perceive as overwhelming and cannot cope with it"*. Also, it was defined by Sincero (2012b) as *"the mismatch between the perceived obstacle and the perceived resources for coping with the "demands" of the obstacle"*.

Moreover, stress has been defined from another view as *"a biological and psychological response experienced on encountering a threat that we feel we do not have the resources to deal with"* (McLeod, 2010). And, it defined as *"a negative emotional, cognitive, behavioral and physiological process that occurs as a person tries to adjust to or deal with stressors"* (Bernstein et al., 2008).

2.5. Classifications of Stress

Stress is perceived in different ways and might have different meanings to different individuals. Bernstein et al. (2008) discussed stress from perceptions of individuals. Some of them perceived it as events or situations that produce different negative emotion or cause tension or pressure for them. Others perceived it as the reaction to present situations, which includes physiological, emotional and behavioral changes.

Based on the level of our response or our management to stressors we encounter, [Sincero \(2012b\)](#) classified stress as positive stress (eustress) and negative stress (distress). [Lehloo \(2012\)](#) clarified the meaning of positive and negative stress. Positive stress results from stressors that lead to an improvement in overall performance and productivity, such as increased self-esteem and creativity. Negative stress, meanwhile, is defined as the results of a poor attitude towards a stressor, such as poor time management and failure to effectively prioritize work responsibilities.

2.6 Stress Reaction

Stress reaction has been defined by the [psychology dictionary](#) as *"the abnormal or non-adaptive behavior which can be seen in response to stress. Stress causes dysfunction of various parts of the body or deviance from normal behavior,"* (["Stress reaction", n.d.](#)). [Hamaideh \(2011\)](#) pointed to stress reactions that are defined by [Folkman and Lazarus \(1991\)](#) as *"dealing with problems and situations or contending with them successfully"*. According to, [McLeod \(2009\)](#) stress arises when persons perceive an inconsistency between the psychological or physical demands of condition and the resources of biological, psychological or social systems available.

Moreover, [Bernstein et al. \(2008\)](#) believed that psychological reactions can manifest as alterations in emotions, thoughts and behaviors, while physical reactions occurs when a person encounters terrible accident or frightening event. In this case, a person will experience rapid breathing,

increased heart beating, and sweating, which is part of a general pattern known as the fight-or-flight syndrome. Often, physical and psychological reactions to stress occur with each other, especially when stressors become terrible. Also, one category of stress reactions can lead to other reactions. For example, feeling chest pain may lead to worrying about getting a heart attack

2.7. Psychological Theories of Stress

Many psychological theories of stress have evolved over decades, **Cherry (2016a,b)** and **Sincero (2012c)** believed that the psychological theories of stress gradually developed from theories of emotions: Theory of Emotion (James-Lange), Emergency Theory (Cannon-Bard), Theory of Emotion (Schachter-Singer), and Theory of Cognitive Appraisal. These theories focus on understanding what happens to the body during a stressful event, and what occurs in the psyche of an individual in the same time.

2.7.1. Theory of Emotion (James-Lange, 1920s)

The Theory of Emotion was developed in the **1920s** by James and Lange. The theory represents a physiological explanation for emotions. According to the opinion of James and Lange, the emotions, like fear, do not occur immediately after the individual perceives a stressor or any stressful situations; the emotion develops after the body's response to the stress and causes changes in the body such as increased heart rate, rapid breathing, or increase blood pressure. This means that the emotional behavior is not possible to occur unless it is connected to one's brain. For

example, *"suppose you are walking in the woods, and you see a grizzly bear. You begin to tremble, and your heart begins to race"*(Sincero, 2012c).

Event ==> Arousal ==> Interpretation ==> Emotion

Figure (2.1): James-Lange Theory of Emotion (Sincero, 2012c).

2.7.2. Emergency Theory (Cannon-Bard, 1920s)

Cannon-Bard proposed the Emergency Theory in the late 1920s. This theory took a neurobiological approach. Unlike James & Lange, Cannon and Bard believed that the emotional and physiological response to stress occur simultaneously. This means that when the individual perceives any stressful situation, they will develop physiological reactions (such as sweating, dilated pupils and rapid breathing) and experience the associated emotion simultaneously. For example, when the individual sees a snake, they will feel fear and begin to tremble (Cherry, 2016a).

Event ==> Simultaneous Arousal and Emotion

Figure (2.2): Cannon-Bard Theory of Emotion (Sincero, 2012c).

2.7.3. Theory of Emotion (Schachter-Singer, 1950s)

Schachter and Singer's theory of emotion, known as the "Two-Factor Theory of Emotion", was developed in the late 1950s. This theory represented a cognitive theory of emotion and focused on understanding how emotional states are determined by cognitive factors (Sincero, 2012c).

According to Schachter and Singer, when the individual is exposed to a stimulation event the physiological reactions occur and then the individual recognizes the cause of this reaction and labels it an emotion. For example, *"if you experience a racing heart and sweating palms during an important math exam, you will probably identify the emotion as anxiety"* (Cherry, 2016b).

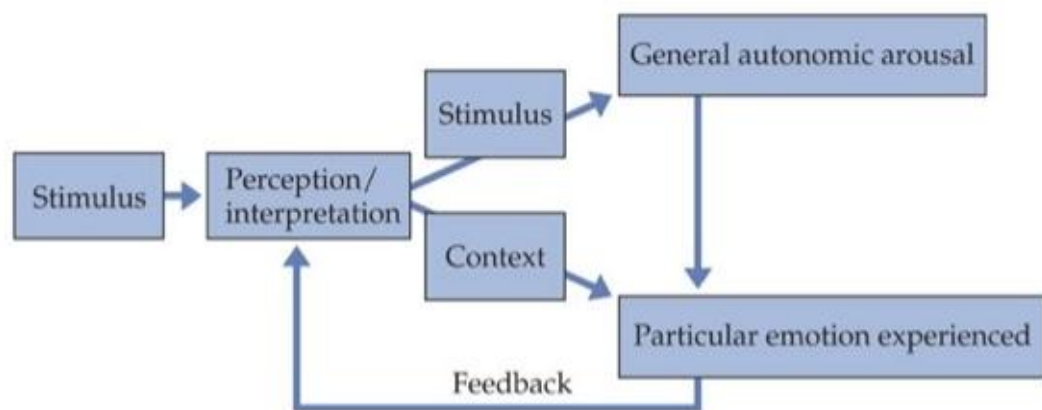


Figure (2.3): Schechter and Singer theory of emotion (Sincero, 2012c).

2.7.4. Theory of Cognitive Appraisal (Lazarus-Folkman, 1984)

The Theory of Cognitive Appraisal, suggested by Lazarus and Folkman in 1984, focuses on explaining the mental processes which influence the stressors (Sincero, 2012c). This theory is based on the research of Richard Lazarus into stress theory in 1966. Lazarus assumed that *"the interpretation of stressful events is more important than the events themselves"* (Lazarus, 1966). In addition, the cognitive appraisal theory was

clarified by Sincero (2012c) as follows: *"the cognitive appraisal occurs when a person considers two major factors that majorly contribute in his response to stress. These two factors are including: 1). the threatening tendency of the stress to the individual, and 2). the assessment of resources required to minimize, tolerate or eradicate the stressor and the stress it produces"*.

Alawad and Slamah (2014) described the model of stress for Lazarus and Folkman (1984) which included cognitive appraisal. The cognitive appraisal is divided into two stages: primary and secondary. *"The first level is primary appraisal, where an individual evaluates whether the situation is potentially detrimental, threatening or challenging. Then, if the situation is perceived as threatening, the individual enters into the secondary appraisal stage, examining the available resources for coping strategies"*.

Moreover, the Transactional Model of Stress and Coping was suggested by Lazarus and Folkman (1984). This model consists of two stages: firstly, cognitive appraisal that includes two levels, primary and secondary appraisal, and secondly coping, that includes two types: problem-focused coping and emotion-focused coping.

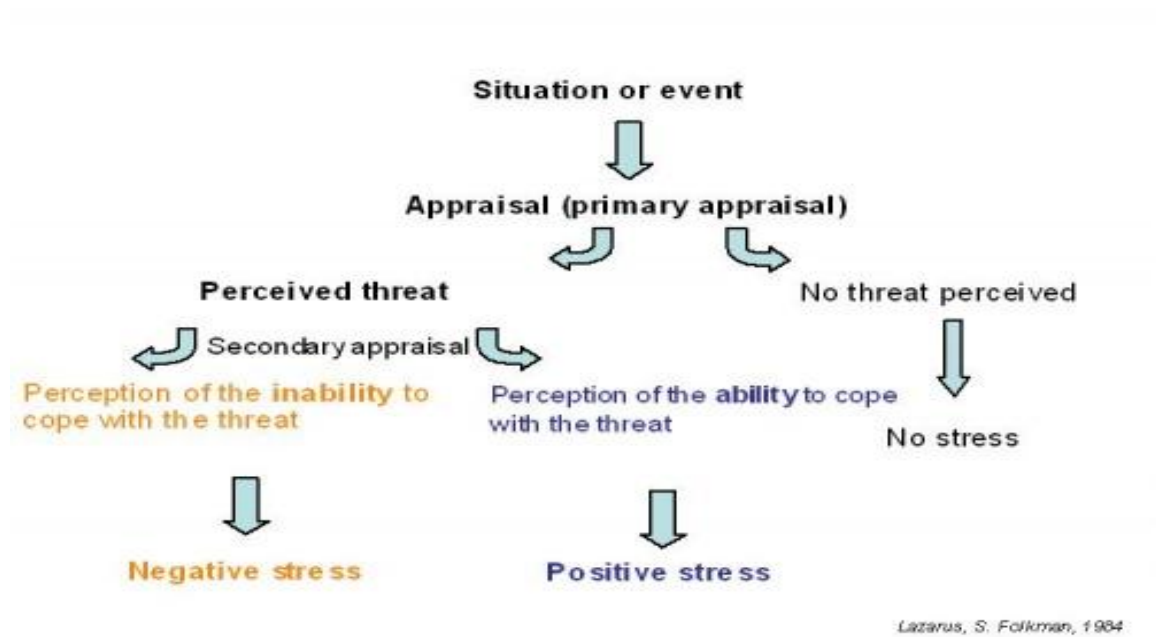


Figure (2.4): Theory of Cognitive Appraisal (Lazarus & Folkman, 1984).

2.8. Coping and Coping Strategies

2.8.1. Definition of Coping

The concept of coping defined from different aspect. Webster dictionary defined cope as *"to deal with and attempt to overcome problems and difficulties"* ("Cope", n.d). Lin and Yusoff (2013) use the definition of Wills and Shiffman (1985), who define coping as *"cognitive or behavioral responses that are used by people to handle stress"*. Sincero (2012d) pointed to the work of Lazarus and Folkman (1984), who defined coping as *"constantly changing cognitive and behavioral efforts to manage specific external and internal demands that are appraised as taxing or exceeding the resources of the person"*. In addition, it was defined by Carver and Connor-Smith (2010) as *"efforts to prevent or diminish threat, harm, and loss or to reduce associated distress"*.

Moreover, [Passer and Smith \(2007\)](#) describe coping with stress as a serious factor that has a significant impact on the people experiencing stress, and leads them to seek medical care or social support and accepting information of professionals.

2.8.2. Coping Strategies

Coping strategies are defined by the [psychology dictionary](#) as *"a behavior, sequence of behaviors, or mental process employed to satisfy a taxing or unfavorable scenario or in changing one's response to such a scenario"* ("[coping strategies](#)", n.d). Also, [Mi-Ran and Su-Jeong \(2015\)](#) pointed to coping strategies; it was defined by [Salovey and Mayer \(1990\)](#) as *"specific efforts, both behavioral and psychological, that people employ to master, tolerate, reduce, or minimize stressful events"*.

2.8.3. Classifications of Coping Strategies

There are many strategies for coping with stress such as avoidance, behavioral, and cognitive mechanisms; their efficiency depends on the type of stressor, the particular individual, and the specific circumstances ([McLeod, 2009](#)).

[Xiao \(2013\)](#) discusses three classifications of coping strategies identified by [Chen \(2004\)](#). Firstly, passive coping strategies include withdrawal, imagining, ignoring, waiting, and catharsis. The second classification is maintenance coping strategies which include self-

adjustment, self-restraint, and replacement. Thirdly, active coping strategies include problem-solving, seeking support, cognitive reconstruction, and comparison.

Coping strategies can be classified in different ways. Taylor (1998) builds upon the idea of Holahan and Moos (1987) who classified coping strategies into active and avoidant strategies. Active coping strategies are viewed as behavioral or psychological responses aimed to change the nature of the stressor or individual thought to become better at handling stressful events, and the avoidant coping strategies seem to be a psychological risk factor for adverse responses to stressful events. Examples of avoidant coping strategies are engaging in activities like alcohol use, or mental states like withdrawal that keep them from confrontation or treating stressful events.

Three types of coping strategies described by Carver et al. (1989), are categorized as the following: the first one is problem-focused coping and includes active coping, planning, suppression of competing activities, restraint coping, and seeking of instrumental social support. The second one is emotion- focused coping and contains seeking of emotional social support, positive reinterpretation (positive reframing), acceptance, denial, and turning to religion. The last category is coping responses that perhaps are the "less useful" and includes focus on and venting of emotions (venting), behavioral disengagement, mental disengagement (self-distraction), humor, and substance use.

Two general coping strategies are developed by Lazarus and Folkman (1984): Problem-focused coping and emotion-focused coping. The main goal in each of the two types is to maintain physical and psychosocial well-being.

1. Problem-focused coping

The problem-focused strategy was suggested by Lazarus and Folkman (1984), and described by McLeod (2009) in their study. This type of coping focuses on the stressor itself by trying to remove, reduce or adjust the reasons for stress, and including problem-solving, time-management, and obtaining instrumental social support. So, during this phase of coping, the individuals develop more skills to help them cope with other situations in the future. Also, Carver and Connor-Smith (2010) gave an illustrative example of this type: if layoffs are expected from a company or factory, the employees who use a problem-focused strategy will develop a plan which includes saving money, searching for new jobs, obtaining special training to enhance prospects, or working harder at the current job to reduce occurring layoffs.

However, a problem-focused coping strategy is not a successful method for all people, and cannot be used by all individuals, for example those unable to take control of an event or to understand an event as controllable (McLeod, 2009; Nes & Segerstrom, 2006).

2. Emotion -focused coping

The emotion-focused strategy proposed by Lazarus and Folkman (1984), and explained by McLeod (2009) aims to change the individual emotional response to the stressor by diminishing the negative emotion such as embarrassment, fear, and frustration that is associated with stress. It includes different responses, such as self-soothing, expression of negative emotion, and attempts to escape stressful situations (Carver & Connor-Smith, 2010). For example, emotion-focused coping is more likely used by pessimistic individuals who have negative expectations toward the future, while problem-focused coping is more likely to be used by optimistic people (McLeod, 2009; Nes & Segerstrom, 2006).

This method may be the only actual choice available when the source of stress is outside of the individual's control, and providing a short term solution. However, when individual delays dealing with the problem, this may produce negative effects on the person (McLeod, 2009).

2.9. Education System in Palestine

“Palestine was a common name used until 1948 to describe the geographic region between the Mediterranean Sea and the Jordan River. In its history, the Assyrian, Babylonian, Roman, Byzantine, and Ottoman empires have controlled Palestine at one time or another. After World War I, Palestine was administered by the United Kingdom under a Mandate received in 1922 from the League of Nations. The modern history of Palestine begins with the termination of the British Mandate, the Partition

of Palestine and the creation of Israel, and the ensuing Israeli-Palestinian conflict" (Baily, 2017).

"The Palestinian National Authority (PNA) is the Interim Self-Government Authority established in 1994 following the Gaza-Jericho Agreement governing the Gaza Strip and Areas A and B of the West Bank, as a result of the 1993 Oslo Accords. Following the 2006 elections and the ensuing conflict in Gaza between the Fatah and Hamas parties, its authority extended only in Areas A and B of the West Bank. Since January 2013, the Palestinian Authority controlled by Fatah has used the name "State of Palestine" in official documents" ("Palestinian National Authority", n.d)



Figure (2.5): Map of Palestine

The education system in Palestine is described according to the **Palestinian Ministry of Education (2015)**. The education system in Palestine is divided into two phases. The first phase constitutes the study in the basic phase from the first grade to the tenth grade in schools. In the second phase, the study in the general secondary schools includes two grades, the 11th grade and the 12th grade. Thus, the total number of study years in school is 12 years.

Also, students who have completed the study from the first grade in basic school to the second grade in secondary there are called regular students. These students can study any subject they wish, but depending on the choice of the branch in the 11th grade secondary. The study branches are the scientific branch; the humanities branch; the Commercial branch; the Agricultural branch; the Industrial branch; the Home Economics branch; the Hotel Service branch; and the Islamic Sharia branch.

At the end of the academic year in general secondary schools (Tawjihi), the students take examinations containing uniform questions for all students according to each study branch.

The Tawjihi is an important stage in determining students' future prospects, and it is considered a transitional period from school to university. In this period, many students expend vast efforts to achieve as highly as they can, and achieve their academic aims.

The Tawjihi is the gateway to studying in university. According to the university education system in Palestine, if a student fails the Tawjihi

exam, he/she cannot gain entrance to university. Also, if a student succeeds in the exam, he/she can not only gain admission to university, but can also choose the college, depending on his/her study branch and total mark in the Tawjihi exam.

Moreover, most universities determine certain grades, which students require in order to gain entrance to each faculty. For example, the student who wants to study at the Faculties of Medicine and Health Sciences requires a total mark in his or her Tawjihi exam of not less than 90%, and he /she must have studied the scientific branch. The same method is applied by other faculties.

In the Palestinian community, most students suffer from tension and stress due to the culture prevailing in society. The student, who achieves high marks, goes to University, and studies medicine, engineering or pharmacy is considered successful and deserving of the respect of his family and community. Meanwhile, the student who fails or does not achieve the high marks in the final exam (even if there is a valid reason why he/she faced difficult conditions in the exam), is considered by the community a failure, as this person has lost the best available opportunities in continuing their education.

Finally, the political, economic and social situation is not stable in Palestine, which affects the educational process and this is evident through the strike of teachers, which occurred in the middle of second semester 2016.

Conceptual Framework

The Transactional Model of Stress and Coping is the conceptual framework adopted in this study.

The Transactional Model of Stress and Coping (figure 2.6) was proposed by Lazarus and Folkman (1984), who states that *“stress is experienced when a person perceives that the demands exceed the personal and social resources the individual is able to mobilize,” this is called the transactional model of stress and coping* (Gunawan, n.d). In the fundamentals of this model, the transaction relating to stress is between the person and the environment. Stress may be in abundance or avoided completely, it depends on the amount of demands that a person is confronted with and the amount of resources that they have to deal with the demands (McLeod, 2009).

Steps of the Transactional Model of Stress and Coping for Lazarus and Folkman (1984):

1. Cognitive Appraisal

Cognitive appraisal includes two stages: primary and secondary appraisal, the two stages actually occur simultaneously, and there are times that secondary appraisal becomes the cause of a primary appraisal (Sincero, 2012d).

1.1 Primary Appraisal

Primary appraisal is considering the first step in appraisal, it is explained by Sincero (2012d) in the following way: *"an individual tends to ask questions like, "What does this stressor and/ or situation mean?", and, "How can it influence me?" According to psychologists, the three typical answers to these questions are: 1) "this not important", 2) "this is good", 3) "this is stressful". After answering these two questions, the second part of primary cognitive appraisal is to classify whether the stressor or the situation is a threat, a challenge or a harm-loss. When you see the stressor as a threat, you view it as something that will cause future harm, such as failure in exams or getting fired from a job. When you look at it as a challenge, you develop a positive stress response because you expect the stressor to lead you to a higher class ranking, or better employment. On the other hand, seeing the stressor as a "harm-loss" means that the damage has already been experienced, such as when a person has undergone a recent leg amputation, or encountered a car accident".*

1.2 Secondary Appraisal

The second step of appraisal discussed by Sincero (2012d) is to *"involve those feelings related to dealing with the stressor or the stress it produces. Uttering statements like, "I can do it if I do my best", "I will try whether my chances of success are high or not", and "If this way fails, I can always try another method" indicates positive secondary appraisal. In contrast to these statements like, "I can't do it; I know I will fail", "I will*

not do it because no one believes I can" and, "I won't try because my chances are low", which indicate negative secondary appraisal. Although primary and secondary appraisals are often a result of an encounter with a stressor, stress doesn't always happen with cognitive appraisal".

2. Coping

Coping includes two forms: problem-focused coping and emotional-focused coping (Lazarus & Folkman, 1984).

2.1 Problem-focused coping

This form of coping occurs when the individual has control over a particular situation and he knows how to manage the problem to gain a positive outcome (McLeod, 2009). It includes dimensions as active coping, planning, and suppression of competing activities, restraint coping, and seeking of instrumental social support (Carver et al., 1989).

There are four steps to manage stress by using problem-based coping: "1) *Define the problem*, 2) *Generate alternative solutions*, 3) *Learn new skills to dealing with stressors*, 4) *Reappraise and find new standards of behavior*" (Gunawan, n.d).

2.2 Emotional-focused coping

Alternatively, the emotional-focused coping form was explained by McLeod (2009). It happens when the individual has little control over a situation, and he is unable to find the source of the problem, so the individual begins to avoid particular situations, to distance himself from events, or even to seek emotional support from others. It includes dimensions as emotional social support, positive reinterpretation (positive reframing), acceptance, denial, and turning to religion (Carver et al., 1989).

Emotion-focused coping involves gaining strategies for regulating stress: "1) *Avoiding (I am not going to school)*, 2) *Distancing (yourself from the stress, 'it doesn't matter')*, 3.) *Acceptance (I failed that exam, but I have 4 other subjects)*, 4) *Seeking medical support*, 5) *Turning to alcohol*" (Gunawan, n.d).

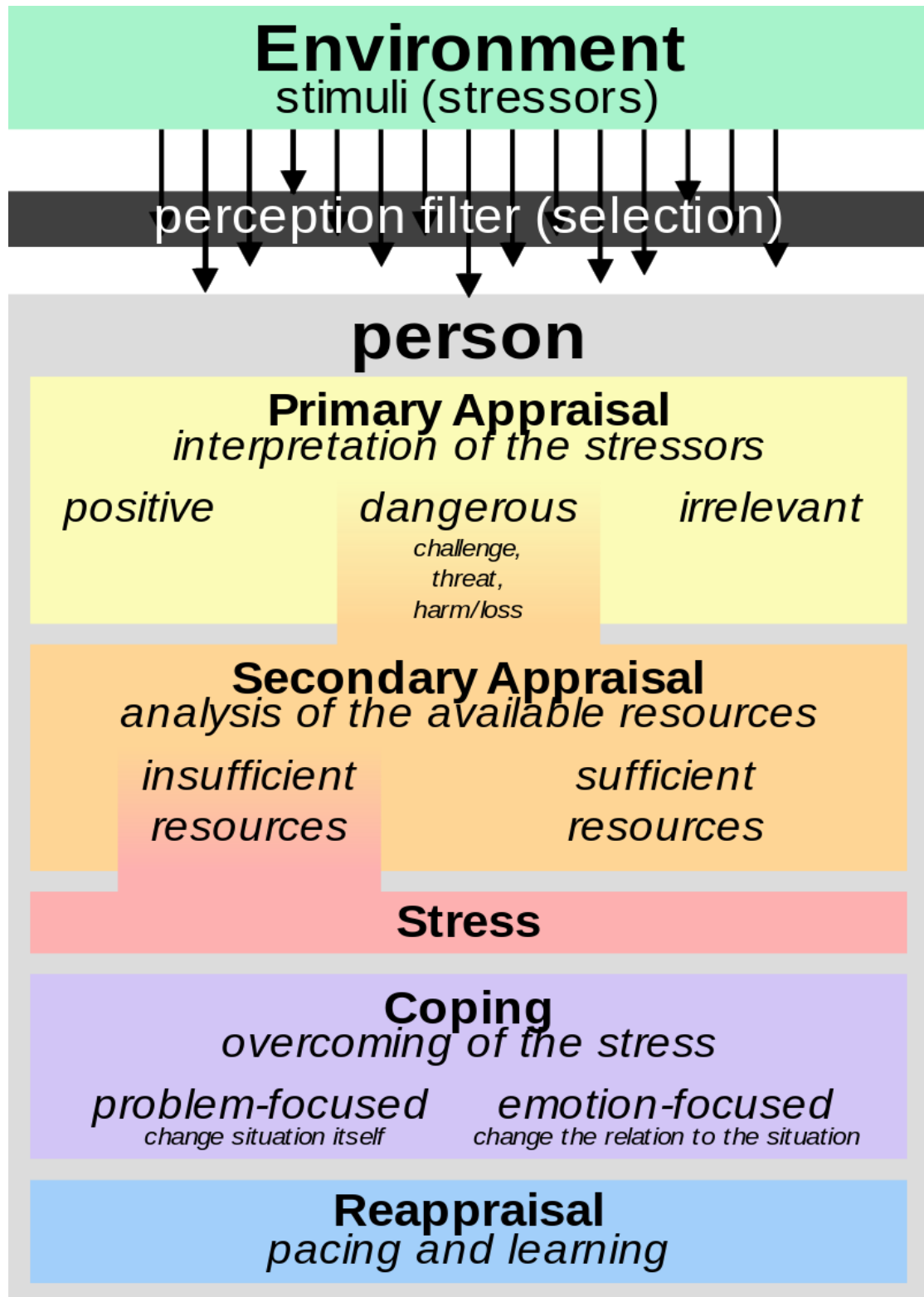
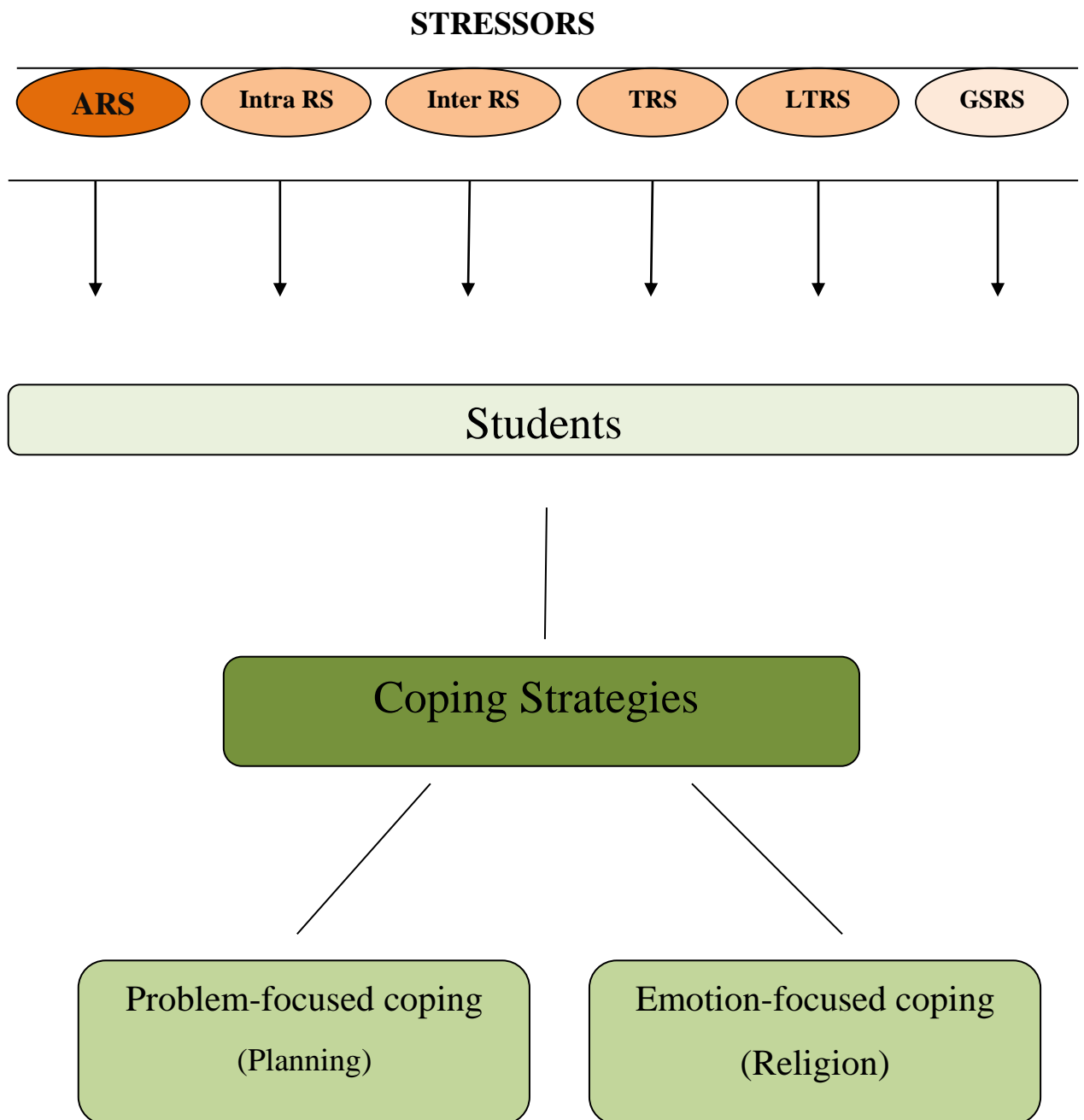


Figure (2.6): Transactional Model of Stress and Coping (Lazarus & Folkman, 1984).

Framework of study**Figure (2.7):** Framework of study

Chapter Three

Literature review

This chapter discusses different studies conducted in different countries around the world wide such as Arab and Islamic countries, European countries, American United States, and East Asian countries.

Moreover, all articles discussed in this chapter was found by using the electronic search engines ; Google Shcholar, Pubmed, and Hinari. The key words used in searching process were (stress, stressors, coping strategies, secondary schools, students, adolescents). All articles that related to prevalence stress, stressors and coping strategies among students or adolescents regardless type of school (governmental or private) have been selected considering the date of publishing between 2005 and up. One article with 2001 publishing date was used due to the strong relation with this study, and all articles related to stress among university students were excluded.

Al Gelban (2009) conducted a survey focused on assessing the prevalence of mental health symptoms among secondary-school girls in Abha City, Kingdom of Saudi Arabia. It showed that (16.3%) of girls was suffering from one or more symptoms of mental illness. The most common symptoms were phobic anxiety (16.4%), psychoticism (14.8%), and anxiety (14.3%). The less-common symptoms were obsessive-compulsive behavior (12.3%) and hostility (12.8 %).

Another study was conducted by Raheel (2014) among adolescent girls in Riyadh city, Kingdom of Saudi Arabia. It aimed to find out the coping strategies that are used by female students in secondary schools. The study showed that the respondents adopted different coping strategies, and most of them resorted to crying; listening to music; eating a lot; sitting alone or isolating; praying and reading the Quran; and getting into a verbal argument or a fight, but a few girls resorted to exercise or finding someone to talk and discuss their problem with. According to types of coping strategies, most of the girls depended on emotion-based coping mechanisms more than problem-solving mechanisms.

Stress, coping and social support in the adolescent years was a study performed by Hashim (2007) in Penang, Malaysia. The participants were selected from rural and urban areas with different races, gender and religions, and the average age were 16 years. One of the aims of this study was to identify the stressors and levels of stress related to everyday life of adolescents. The results concluded that (77%) of students faced problems related to academic issues, and this result was considered high when compared with problems relating to relationships at home (34%), and relationships at school (31%).

A survey conducted by Yusoff et al. (2011a) in Kota Bharu, Malaysia, aimed at describing the prevalence of stress, stressors and coping strategies among secondary school students, showed that (32.8%) of students felt distressed, and the major sources of stress were related to academic issues. In general religion, positive reinterpretation, use of

instrumental support, active coping and planning were the positive coping strategies most commonly used by the students, while denial, behavioral disengagement, and self-blame were the negative coping strategies most commonly used by distressed students.

Coping with stress was discussed by Shahmohammadi (2011) through his study, which aimed to examine how students were coping with stress at high school level, particularly at 11th and 12th grade. The students were selected from government schools in Tehran, Iran. Results showed that (26.1%) of students felt distressed, and the academic issues were the major stressors, specifically, fear of not getting a place in university, examinations, excessive homework, and an overloaded school timetable, among other issues. Moreover, the study indicated that the students managed distressed situations using mature methods; the major coping strategies that were used by the respondents were religion, active coping, positive reinterpretation, planning, and use of instrumental support.

A study was performed by Saffari et al. (2011) aimed at appraising the stressors, coping strategies and influential factors among Iranian male adolescents. In the study, the students were selected from government schools. The result concluded that mean value of perceived stress for students was 17.99 (SD=6.02), and the students were worried about the future and about academic issues. Also, the cognitive, or emotional, coping strategy was the most frequent coping style. In addition, it was found that the correlation between perceived and accumulative stress, and the

influential factors (accumulative stress, social resources, parent`s education and grade point average) were significant predictors of perceived stress.

Another classification for coping strategies was described by Deyreh (2012) in Iran. The aim of study was to survey the cognitive and affective coping strategies among high school students. It indicated that the students` reactions to stressors can be classified into two categories: cognitive and affective strategies. It showed that the participants who select cognitive strategy were more successful in dealing with stressful situations. In addition, the boys are more accepting of responsibility as a cognitive strategy than girls.

Also, a similar survey carried out by Lin and Yusoff (2013) in Melaka state, Malaysia, was aimed at assessing the prevalence of psychological distress, stressors and coping strategies among high school students and identifying causes of psychological distress between students. The study concluded that the prevalence of psychological distress between students was high (47.6%) and, those academic issues were the major sources of stress to the students. In addition, distressed students often used negative coping strategies such as self-distraction, self-blame, denial, use of instrumental support, venting of emotions, and behavioral disengagement.

A study presented by Wahab et al. (2013) in Malaysia, aimed at describing the prevalence of depression, anxiety and stress, and their association with stressors among secondary boarding school students.

Results concluded that the prevalence of anxiety was (67.1%), the prevalence of depression was (39.7%), and stress (44.9%). Also, all stressors (academic, interpersonal, intrapersonal, teacher, learning/teaching and social group) had a significant relationship with depression, anxiety and stress. Academic-related stress achieved a higher mean score.

In Hungary, a survey conducted by Piko (2001) aimed to explore the coping structure among adolescents, and to detect the possible gender differences in which dimensions of coping are more relevant correlates of psychosocial health. Results found that the adolescents used four coping factors: passive coping, problem-analyzing coping, risky coping, and support-seeking coping. The survey found that, passive and support-seeking coping were the most frequently used coping strategies among girls. It also found that the support-seeking coping proved to correlate more significantly to positive psychosocial health among boys. Moreover, in terms of psychosocial health for both boys and girls, the passive and risky coping factors played a negative role, and problem-analyzing and support-seeking coping factors played a positive role.

Stress and coping in adolescents is another study conducted by Hampel and Petermann (2006) in Bremen, Germany, that intended to investigate any differences in perceived interpersonal stress, coping with interpersonal stressors, and psychological adjustment among early and middle adolescents according to age and gender. Results showed that the fifth graders got lower scores on maladaptive coping strategies and externalizing problems, and reported more adaptive coping strategies when

compared with sixth and seventh graders. According to gender, the girls achieved a high score on maladaptive coping strategies and emotional distress, and got lower on distraction; also, girls perceived a high degree of interpersonal stress and used more social support when compared with boys. Moreover, problem-focused and emotion-focused coping were negatively related to emotional and behavioral problems, and perceived stress and maladaptive coping was positively associated with adjustment problems. When these relations were compared based on gender, they showed these relations to be stronger in females than males.

A study was carried out by Cocorada and Mihalaucu (2012) in Brasov, Romania, which focused on recognizing the coping strategies, used by adolescents in secondary school, and examined the differences regarding coping according to gender, age and locus of control. Results found that the positive strategies got highest mean scores in the sample; the main positive strategies used by participants were planning, reinterpreting, active coping, and seeking instrumental support. The negative strategies got the lowest scores, especially on behavioral disengagement and emotional discharge. In addition, it showed that there were differences regarding use of seeking emotional support, denial, emotional discharge and mental disengagement, according to gender, age and locus of control.

The impact of overloaded learning, attachment and coping styles on physical and psychological health among adolescent high school students was studied by Chraif and Anitei (2012) in Bucharest, Romania. The sample included students from both genders, aged between 16 and 18 years

old. Results showed that the positive coping styles, attachment to professor, attachment to colleagues, attachment to class and activities, homework overload, and extra activities overload are strongly associated with the poor state of students' mental and physical health.

Kinds of coping strategies that can use by high school students are explained by McCann et al. (2012) in the United States. This survey aimed at assessing whether problem-focused, emotion-focused, and avoidant coping strategies predict key outcomes for students. Four outcomes for students were examined: academic achievement, life satisfaction, positive feelings towards school, and negative feelings towards school. Results indicated that three coping styles are important in predicting different outcomes. The first result is the finding that problem-focused coping predicts academic achievement, life satisfaction, and positive feelings about school. The second result is that emotion-focused coping predicts negative feelings only, and the last one is that avoidant-focused coping predicts both positive and negative feelings about school.

Coping with negative emotion among adolescents is discussed by Arsenio and Loria (2014), a study aimed at assessing connections among adolescents' emotional dispositions, negative academic affect, coping strategies, academic stress, and students' academic performance. All students were selected from 12th-grade in high schools in the Northeastern United States. The results indicated that *"the greater negative academic affect and disengaged coping were related to lower students' academic performance, and disengaged coping mediates the connection between*

negative academic affect and students' academic performance. By contrast, higher academic stress was related to students' overall moods, negative academic affect, and disengaged coping; disengaged coping mediated the connection between academic stress and negative overall moods".

Academic stress and adjustment was surveyed by Hussain et al. (2008) in India, which aimed to examine the level of academic stress and adjustment among Public and Government high school students, and to identify the relationship between academic stress and adjustment. Results noted that academic stress was high among Public school students, while Government school students obtained high scores in the level of adjustment. Also, significant inverse relationships were found between academic stress and adjustment for both groups of students and for each type of school.

In Delhi, a study conducted by Watode et al. (2015) aimed to assess the prevalence of stress and stressors among school adolescents. The results indicated that (87.6%) of students has stress. (89.7%) of them were females and (86.4%) were males, showing \no significant difference between the genders. The major stressors among students were academic issues, issues with parents, teachers and friends, and the academic pressure was one of the major portents of the stress.

Regardless of the educational level of students, types of schools and educational system that followed in different countries, it was concluded that the students in all academic years were distressed, and the academic

issues was the main source of stress among students. In addition, students dealing with stressors by using different type of coping strategies according to their cultures, religions and other factors. Moreover, there were no studies conducted in Palestine tackling the same issue.

The limitations and gaps of these studies were in the setting, as all were conducted either in private sector only or in the government and some were implemented included rural areas only or urban areas which limited the generalization of the findings.

Chapter Four

Methodology

This chapter describes the methodology that was used to carry out this study, which included the study design, setting and site, study population, sample size and sampling method, eligibility criteria, data collection tools, validity and reliability, ethical consideration, fieldwork preparation, scoring system, and data analysis.

The only quantitative approach was used in this study due to limitations in time and resources, in addition limitation in generalization of the results of qualitative study.

4.1. Study design

A cross sectional descriptive design was used to achieve the aim of study, which is "assess stressors and coping strategies among general secondary students in governmental schools in the North West Bank".

4.2. Setting and site

The study was conducted in government/general secondary schools which were selected from four cities in the northern West Bank: Nablus, Jenin, Tulkarm, and Qalqilya.

4.3 Study population

The study population included all students at 12th grade (males and females from the two main branches of study, the scientific and humanities branches) with a total population of 4,277 which was distributed among

four cities in the following way: Nablus (2249), Jenin (593), Tulkarm (801), and Qalqilya (634) (table 4-1).

4.4. Sample size and sampling method

The sample size was determined to be 353 students based on a software calculation system, which considered the confidence level 95%, confidence interval 5% and total population of 4,277.

The proportional method was used to distribute sample size among four cities and among 39 schools according to study branch and gender as per (table 4-2).

A stratified random sampling method was used to select schools which participated in the study from all general secondary schools in the four cities. Also, a simple random sampling method was used to select students who participated in the study from each school.

Table (4 -1): Distribution of study population among four cities

City	Nablus				Tulkarm				Jenin				Qalqilya				Total	
No. of schools	21				6				7				5				39	
No. of students	2249				801				593				634				4277	
No. of students/ Branch	Humanistic		Scientific		Humanistic		Scientific		Humanistic		Scientific		Humanistic		Scientific		3010	1267
	1666		583		484		317		375		218		485		149		4277	
No. of students/ Gender	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	2601	1676
	1024	642	333	250	324	160	170	147	282	93	106	112	282	203	80	69	4277	

Table (4-2): Distribution the sample size according to study branch and gender among four cities

Name of city	Nablus				Tulkarm				Jenin				Qalqilya				Total			
	NO		%		NO		%		NO		%		NO		%		NO		%	
Sample size	185		52.4%		66		18.7%		49		13.9%		53		15%		353		100	
No. of students/ Branch	Humanistic		Scientific		Humanistic		Scientific		Humanistic		Scientific		Humanistic		Scientific					
	137		48		40		26		31		18		40		13		248	105	70.3	29.7
No. of students/ Gender	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M				
	84	53	27	21	13	27	14	12	23	8	9	9	23	17	7	6	200	153	56.66	43.34

4.5 Selection criteria

4.5.1. Inclusion criteria

- Students' ages ranged between 17-19 years
- Students were from both genders in 12th grade during study period.

4.5.2 Exclusion criteria

- All married female students who live in the house of their husbands.
- Non regular students.

4.6 Data collection tools

A self-reporting questionnaire was used to collect data, consisting of four parts as the following (**Annex 1**):

Part one: **Socio-demographic data**, consisting of 10 items (city, name of school, age, gender, religion, study branch, final average in 11th grade, private tutoring, how they spent free time, and whether student receives counseling from a psychological and educational counselor at their school).

Part two: **Prevalence of stress**, including one item to investigate the prevalence of stress among students.

Part three: **Secondary School Stressor Questionnaire (3SQ)**. The scale was developed by **Yusoff (2011)** which aimed to identify stressors among secondary school students, where his study conducted among adolescents in secondary school in Malaysia and aimed to determine the construct validity and the internal consistency of the (3SQ), he developed this scale

based on literature review, the face validity of the questionnaire was established through discussion with (30) medical students whereas content validity was established through discussion with experts from related field, then administered to (100) adolescents in a secondary school. The results noted that the total Cronbach's alpha value was (0.90), and the items were loaded into the six pre-determined hypothetical groups. The selection of this scale rather than other scale was due to similarities in religion.

The scale (3SQ) consisted of six domains representing 44 stressors. Each item on the questionnaire is a statement with five choices on a Likert scale, as following: "causing no stress at all", "causing mild stress", "causing moderate stress", "causing high stress" and "causing severe stress" with a scoring method of 0 to 4 respectively.

First domain: **Academic Related Stressor (ARS)**, which consists of 10 items (Q1, Q2, Q3, Q4, Q5, Q6, Q7, Q9, Q16, Q17).

Second domain: **Interpersonal Related Stressor (Inter RS)**, which consists of 12 items (Q11, Q22, Q25, Q27, Q28, Q29, Q30, Q31, Q32, Q38, Q39, Q41).

Third domain: **Intrapersonal Related Stressor (Intra RS)**, which consists of 7 items (Q8, Q14, Q15, Q23, Q24, Q40, Q42).

Forth domain: **Learning & Teaching Related Stressors (LTRS)**, which consists of 6 items (Q26, Q34, Q35, Q36, Q37, Q44).

Fifth domain: **Group-Social Related Stressors (GSRS)**, which consist 6 items (Q12, Q13, Q18, Q21, Q33, Q43).

Sixth domain: **Teacher Related Stressors (TRS)**, which consist 3 items (Q12, Q19, Q20).

Part four: **The Brief Coping Orientation of Problem Experienced (COPE)**. The scale was developed by Carver (1997), and is used to identify methods of managing stress. The scale selected rather than other scale due to it multidimensional coping inventory that suitable for people.

The scale included 14 domains represented by 28 coping methods. Each item is a statement with four choices on a Likert scale, as follows: "I haven't been doing this at all", "I've been doing this a little bit", "I've been doing this a medium amount", and "I've been doing this a lot" with scoring method 1 to 4 respectively.

First domain: **Self-distraction**, which consists of 2 items (Q1, Q19).

Second domain: **Active coping**, which consists of 2 items (Q2, Q7).

Third domain: **Denial**, which consists of 2 items (Q3, Q8).

Fourth domain: **Substance abuse**, which consists of 2 items (Q4, Q11).

Fifth domain: **Use of emotional support**, which consists of 2 items (Q5, Q15).

Sixth domain: **Use of instrumental support**, which consists of 2 items (Q10, Q23).

Seventh domain: **Behavioral disengagement**, which consists of 2 items (Q6, Q16).

Eighth domain: **Venting**, which consists of 2 items (Q9, Q 21).

Ninth domain: **Positive reframing**, which consists of 2 items (Q12, Q 17).

Tenth domain: **Planning**, which consists of 2 items (Q14, Q 25).

Eleventh domain: **Humor**, which consists of 2 items (Q18, Q 28).

Twelfth domain: **Acceptance**, which consists of 2 items (Q20, Q 24).

Thirteenth domain: **Religion**, which consists of 2 items (Q22, Q 27).

Fourteenth domain: **Self-blame**, which consists of 2 items (Q13, Q 26).

Regarding the substance use domain the following items: "I've been using alcohol or other drugs to make myself feel better" and "I've been using alcohol or other drugs to help me get through it" were replaced with: "I've been using smoking or hookah to make myself feel better" and "I've been using smoking or hookah to help me get through it". In Palestine the prevalence of cigarette smoking and hookah is much higher than using alcohol or other drugs among adolescent, as culturally, the use of alcohol or other drugs is not acceptable, unlike smoking. Approval has been taken from the author (**Annex 2**) about this modification.

The time of data collection was discussed with the administrator of public education in the Ministry of Education. It was determined in April/2016, due to the fact that the final exams are not mandatory, and many of students

prefer to stay home from school to study and prepare themselves for the Tawjihi examinations.

4.7 Validity and reliability

The questionnaire was translated to Arabic language then back to back translation was done by expert translator, and reviewed by panel of experts in academic field, 3 doctors in psychological field, one of them nurse doctor in community mental health field and the other two of them doctors in clinical psychology. There were no comments.

Pilot study:

A pilot study was carried out on a sample size of 10% (35 students) selected from government/general secondary school in Nablus, carried out on 4th- 6th October, 2015. It was conducted to determine the reliability of the data collection tool, to estimate the time required to complete the questionnaire, to assess the effectiveness of instructions that given for students, and to revise the method of data collection before starting the actual fieldwork. Based on the pilot study, nothing needed modifying, and the time required to filling questionnaire was 10-15 minutes. The piloting sample was excluded from the actual study sample.

The reliability coefficient Cronbach alpha was as following:

Table (4-3): The results of cronbach alpha test

Items	Cronbach alpha
Prevalence of Stress, (3SQ), and (COPE)	(0.924)
(3SQ) and (COPE)	(0.923)
(3SQ)	(0.922)
(COPE)	(0.801)

In addition, the total of cronbach alpha for original value of (3SQ) was (0.90) and ranged from (0.58-0.90) (Yusoff, 2011). Cronbach alphas for (COPE) ranged from (0.50-0.82) (Carver, 1997).

4.8 Ethical consideration

The study was approved by the institutional review board (IRB) (Annex 3) of An-Najah National University. Approval was obtained (Annex 4) based on a letter from the Palestinian Ministry of Education. An approval letter was obtained from both authors for 3SQ (Annex 5) and (COPE) (Annex 6). In addition, a formal consent form was signed by the parents of students who included in the study (Annex 7), and the students were informed that they have the right to refuse to participate, or withdraw at any time.

4.9 Filed work

The questionnaire was distributed to the students in the period between (3/4/2016 and 14/4/2016).

The total number of questionnaires distributed in four cities was (353), and the number of questionnaires retained was (334) with a response rate of (94.6%). For Nablus city the total distribution was (185) with response rate (97.3%) and (89.7%) at first and second distribution respectively.

Questionnaires were distributed in April 2016 over the course of two weeks, as per the following program:

The first visit was carried out in all schools at four cities in the period between 3/4/2016 and 8/4/2016, in which the objectives of study were discussed with school managers and students. In addition, instruction was given for students that the consent forms and questionnaires must be submitted to the school managers after completion. A phone number was left in schools if any students or parents wanted to ask questions about the study.

During the second visit which carried out in the period between 10/4/2016 and 14/4/2016, all questionnaires were collected from schools in the same order in which they were distributed, in order to give students enough time to complete the questionnaires.

Due to the teachers' strike that was conducted in the middle of the second semester, lasting from 15/2/2016 to 13/3/2016, and to ensure that the strike did not have an effect on the students' answers, the following steps were taken:

1) Questionnaires were distributed after 20 days of the end of strike to give teachers and students enough time to rearrange their affairs. Also, many important dates became clear during this period, such as the date of the end of the semester, date of final examination and the Tawjihi examinations, setting the compensation plan for students and identifying the topics that were deleted from the Tawjihi exam.

2) Questionnaires were distributed in four cities according to the following order. Qalqilya, Tulkarm, Jenin, and Nablus due to the fact that most schools in Qalqilya, Tulkarm and Jenin did not participate in the strike, while far more schools in Nablus took part in the strike.

To assess prevalence of stress, stressors, and coping strategies among Nablus students in relation to the time left for the exam and their gender/ study branch. The questionnaires were distributed at two different times. The first one was from 20/12/2015 to 26/12/2015, and the second time was from 3/4/2016 to 14/4/2016.

4.10 Scoring system

4.10.1 The Secondary School Stressor Questionnaire.

It consists of six domains representing 44 stressors, and the participants rated items based on the five-point Likert scale as following:

"Causing no stress at all" (0) point.

"Causing mild stress" (1) point.

"Causing moderate stress" (2) point.

"Causing high stress" (3) points.

"Causing severe stress" (4) points.

Mean score interpretations were as below:

0.00 – 1.00 = not causing any stress at all.

1.01 – 2.00 = causing low level of stress.

2.01 – 3.00 = causing moderate level of stress.

3.01 – 4.00 = causing very high level of stress.

4.10.2. The Brief Coping Orientation of Problem Experienced (COPE).

It consists of 14 domains representing 28 coping methods, and the participants rated items based on the four-point Likert scale as following:

"I haven't been doing this at all" (1) point.

"I've been doing this a little bit" (2) point.

"I've been doing this a medium amount" (3) points.

"I've been doing this a lot" (4) points.

Mean score interpretations were as below:

2.00 = haven't been doing this at all.

2.01 to 4.00 = have been doing this a little bit.

4.01 to 6.00 = have been doing this a medium amount.

6.01 to 8.00 = have been doing this a lot.

4.11 Statistical analysis

Data were analyzed by using Statistical Package for Social Sciences program (SPSS) to provide answers to the questions of the study including the following test.

- 1) Frequencies and percentages.
- 2) Mean, standard deviation and ranking.
- 3) Two- Independent t-Test.
- 4) Paired Sample t- Test.

4.12 Independent and dependent variable

Independent variables: Gender, Study branch.

Dependent variables: Prevalence of stress, Domains of stressors (3SQ), domains of coping strategies (COPE).

4.13 Conceptual and operational definitions

4.13.1 School Stressor Questionnaire (3SQ)

Concepts	Conceptual definition	Operational definition
(ARS)	"Academic related stressor is referred to any scholastic, university, college, school, educational or student events that cause stress on students. These include examination systems, assessment methods, grading methods, academic schedule, students activities related to academic events such as getting poor mark in examination, large amount of content to be studied, having difficulty to understand content, lack of time to do revision, learning context full of competition, and having difficulty to answer question given by teachers" (Yusoff, 2011, p. 100).	It include 10 items (Q1, Q2, Q3, Q4, Q5, Q6, Q7, Q9, Q16, Q17). Score given for each answer and put in 5 category as (0 = causing no stress at all, 1 = causing mild stress, 2 = causing moderate stress, 3 = causing high stress, 4 = causing severe stress), (Yusoff, 2011).
(Inter RS)	"Interpersonal stressor generally related to relationship between individuals such as verbal, physical and emotional abuse caused by other persons, and conflict with personnel, teachers, colleagues, and staff" (Yusoff, 2011, p. 100).	It include 12 items (Q11, Q22, Q25, Q27, Q28, Q29, Q30, Q31, Q32, Q38, Q 39, Q 41). Score given for each answer and put in 5 category as (0 = causing no stress at all, 1 = causing mild stress, 2 = causing moderate stress, 3 = causing high stress, 4 = causing severe stress), (Yusoff, 2011).
(Intra RS)	"Intrapersonal stressor generally related to relationship of one own self such as low self-esteem, high self-expectation to do well in study, feeling of incompetence and self-conflict" (Yusoff, 2011, p. 100).	It include 7 items (Q8, Q14, Q15, Q23, Q24, Q40, Q42). Score given for each answer and put in 5 category as (0 = causing no stress at all, 1 = causing mild stress, 2 = causing moderate stress, 3 = causing high stress, 4 = causing severe stress), (Yusoff, 2011).
(LTRS)	"Learning and teaching related stressor is referred to any events related to teaching or learning that cause stress on students. Dissatisfaction with the quality of education, the methods of teaching and learning, the supervision and feedback	It include 6 items (Q26, Q34, Q35, Q36, Q37, Q44). Score given for each answer and put in 5 category as (0 = causing no stress at all, 1 =

	systems, and recognition to work done as well as uncertainty of what is expected from the students were also perceived as stressors" (Yusoff, 2011, p. 100).	causing mild stress, 2 = causing moderate stress, 3 = causing high stress, 4 = causing severe stress), (Yusoff, 2011).
(TRS)	"Teacher related stressor is referred to the quality and competency of teachers in supervising and delivering their input to the students. Dissatisfaction with quality of teachers' supervision skills, teaching skills, lack of reading materials given and inappropriate assignment given to the students were also perceived as stressors" (Yusoff, 2011, p. 100).	It include 3 items (Q10, Q19, Q20). Score given for each answer and put in 5 category as (0 = causing no stress at all, 1 = causing mild stress, 2 = causing moderate stress, 3 = causing high stress, 4 = causing severe stress), (Yusoff, 2011).
(GSRS)	"Group-Social related stressor is referred to any form of group events and interactions, community and societal relationships that cause stress on students. It is generally related participation in group discussion, group presentation, others expectation to do well, leisure time with family and friend, working with publics, privacy time for own-self, working interruption by others" (Yusoff, 2011, p. 100).	It include 6 items (Q12, Q13, Q18, Q21, Q 33, Q 43). Score given for each answer and put in 5 category as (0 = causing no stress at all, 1 = causing mild stress, 2 = causing moderate stress, 3 = causing high stress, 4 = causing severe stress), (Yusoff, 2011).

4.13.2 Brief Coping Orientation of Problem Experienced (COPE)

Concepts	Conceptual Definition	Operational Definition
Self-distraction (mental disengagement)	Distracting self from thinking about the problem (Carver, 1997 & Litman, 2006).	It include 2 items (Q1 and Q19). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).

Active coping	Taking steps to eliminate the problem (Carver, 1997 & Litman, 2006).	It include 2 items (Q2 and Q7). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Denial	Refusing to believe the problem is real (Carver, 1997 & Litman, 2006).	It include 2 items (Q3 and Q8). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Substance use	Unhealthy or unproductive ways of coping with stress. These coping strategies may temporarily reduce stress, but these ways that compound the problem such as smoking, drinking too much, using pills or drugs to relax (Robinson, Smith, & Segal, 2015).	It include 2 items (Q4 and Q11). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).

Use of emotional support	Seeking sympathy from others (Carver, 1997 & Litman, 2006).	It include 2 items (Q5 and Q15). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Use of instrumental support	Seeking advice from others (Carver, 1997 & Litman, 2006).	It include 2 items (Q10 and Q23). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Behavioral disengagement	Giving up trying to deal with the problem (Carver, 1997 & Litman, 2006).	It include 2 items (Q6 and Q16). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Venting	Wanting to express feelings (Carver, 1997 & Litman, 2006).	It include 2 items (Q9 and Q21). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Positive reframing	Reframing the stressor in positive terms (Carver, 1997 & Litman, 2006).	It include 2 items (Q12 and Q17). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).

Planning	Thinking about dealing with the problem (Carver, 1997 & Litman, 2006).	It include 2 items (Q14 and Q25). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Humor	Making light of the problem (Carver, 1997 & Litman, 2006).	It include 2 items (Q18 and Q28). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Acceptance	Learning to accept the problem (Carver, 1997 & Litman, 2006).	It include 2 items (Q20 and Q24). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Religion	Using faith for support (Carver, 1997 & Litman, 2006).	It include 2 items (Q22 and Q27). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).
Self-blame	One of the most toxic forms of emotional abuse. It amplifies our perceived inadequacies,	It include 2 items (Q13 and Q26). Score given for each answer and put in 4 category as (1 = I haven't been doing this at all, 2 = I've been doing this a little bit, 3 = I've been doing this a medium amount, 4 = I've been doing this a lot), (Carver, 1997).

	<p>whether real or imagined, and paralyzes us before we can even begin to move forward (Formica, 2013).</p>	
--	---	--

Chapter Five

Results

This chapter presented the results and finding of study by illustrated the frequencies, percentages, mean, standard deviation and ranking. In addition two test used in this study two-independent t-test and paired sample t-test.

Table (5-1): Distribution of percentage of students regarding their socio-demographic data

Variables	Categories	Nablus		Jenin		Tulkarm		Qalqilya		Total	
		No	%	No	%	No	%	No	%	No	%
Age	17.00	103	30.8	27	8.1	36	10.8	32	9.6	198	59.3
	18.00	63	18.9	22	6.6	26	7.8	21	6.3	132	39.5
	19.00	0	0.0	0	0.0	4	1.2	0	0.0	4	1.2
	Total	166	49.7	49	14.7	66	19.8	53	15.9	334	100
Gender	Male	64	19.2	17	5.1	25	7.5	23	6.9	129	38.6
	Female	102	30.5	32	9.6	41	12.3	30	9	205	61.4
	Total	166	49.7	49	14.7	66	19.8	53	15.9	334	100
Religion	Muslim	165	49.4	49	14.7	66	19.8	53	15.9	333	99.7
	Christen	1	0.3	0	0.0	0	0.0	0	0.0	1	0.3
	Other	0	0.0	0	0.0	0	0.0	0	0.0	0	0
	Total	166	49.7	49	14.7	66	19.8	53	15.9	334	100
Study Branch	Scientific	46	13.8	18	5.4	26	7.8	13	3.9	103	30.8
	Humanities	120	35.9	31	9.3	40	12	40	12	231	69.2
	Total	166	49.7	49	14.7	66	19.8	53	15.9	334	100

Table (5-1) showed that (59.3%) of students were aged 17 years. (61.4%) of them were female. It also showed that (99.7%) of them were Muslim. (69.2%) of them studied in the humanities branch.

Table (5-2): Distribution of percentage of students regarding their academic profile

Variables	Categories	Yes		No		Total	
Private Tutoring	Received private tutoring	No	%	No	%	No	%
		222	66.5	112	33.5	100	%
	Gender	Male		Female			
		No	%	No	%	No	%
		82	24.6	140	41.9	222	66.5
	Study Branch	Scientific		Humanities			
		No	%	No	%	No	%
		76	22.8	146	43.7	222	66.5
	Type of Private Tutoring	Yes		No		Total	
		No	%	No	%	No	%
		222	66.5	112	33.5	334	100
		Lessons at home with special teacher	69	42.3	153	57.7	222
	Lessons with at home with group	15	53.1	207	64.9	222	100
Lessons with at a special center	168	67.5	54	32.5	222	100	
Final average in 11 th grade		No		%		334	100
	50%-60.9%	34		9.8			
	61%-70.9%	81		23.3			
	71%-80.9%	97		27.9			
	81%-90.9%	66		19			
	91%- more than	56		16.1			

Table (5-2) showed that (66.5%) of students reported that they received private tutoring, (22.8%) were from the scientific branch and (41.9%) were female. (67.5%) of them received private tutoring at special center, and (42.3%) of them received lessons at home with special teacher. Regarding to final average in 11th grade, (27.9%) of them obtained an average of (71%-80.9%), and (9.8%) obtained an average of (50% - 60.9%).

Table (5-3): Distribution of percentage of students regarding their receiving counseling from psychological and educational counselor

Variables	Categories	NO	%
Receiving counseling from psychological and educational counselor	Always	108	32.3
	Sometimes	11	3.3
	Never	215	64.4
	Total	334	100

Table (5-3) showed that (64.4%) of students reported that they didn't receive any counseling from psychological and educational counselor at their schools.

Table (5-4): Distribution of percentage of students regarding their free time and use of it

Variables	Categories					
	Yes		No		Total	
Free time	No	%	No	%	No	%
Sleep (nap)	131	39.2	203	60.8	334	100
Family visits	59	17.7	275	82.3	334	100
Going out with friends	113	33.8	221	66.2	334	100
Watching T.V	124	37.1	210	62.9	334	100
Using the internet and social media	243	72.8	91	27.2	334	100
Shopping	32	9.6	302	90.4	334	100
Practicing sports	91	27.2	243	72.8	334	100

Table (5-4) showed that (72.8%) of students reported that they spent their free time in using the internet and social media. (9.6%), (17.7%) of them were spent their free time in shopping and family visits respectively.

Table (5-5): Distribution of percentage of prevalence of stress among students

Categories	Gender						Study branch					
	Male		Female		Total		Scientific		Humanities		Total	
	NO	%	NO	%	NO	%	NO	%	NO	%	NO	%
I do not feel any stress	7	2.1	7	2.1	14	4.2	7	2.1	7	2.1	14	4.2
I have little bit of stress, but it doesn't affect my general functioning.	69	20.7	87	26.0	156	46.7	51	15.3	105	31.4	156	46.7
I have stress that affect my general functioning	41	12.3	98	29.3	139	41.6	36	10.8	103	30.8	139	41.6
I have too much stress	12	3.6	13	3.9	25	7.5	9	2.7	16	4.8	25	7.5
Total	129	38.6	205	61.4	334	100	103	30.8	231	69.2	334	100

Table (5-5) showed that (46.7%) of students reported that they "have little bit of stress, but it doesn't affect their general functioning", and ((4.2%)) of them reported that they "don't feel any stress". Results also showed that the prevalent rate of stress among female students was (61.4%). It also showed that the rate of stress among students who studied in the humanities branch was (69.2%).

Table (5-6-1): Distribution of percentage of students regarding the (ARS)

Demine	Variables	Classification	No	%	Mean \pm Std	Rank
(ARS)	Examination	causing no stress at all	6	1.8	2.80 \pm 1.11	2
		causing mild stress	44	13.2		
		causing moderate stress	77	23.1		
		causing high stress	89	26.6		
		causing severe stress	118	35.3		
	Getting behind revision schedule	causing no stress at all	69	20.7	1.56 \pm 1.20	10
		causing mild stress	107	32.0		
		causing moderate stress	86	25.7		
		causing high stress	43	12.9		
		causing severe stress	29	8.7		
	Too many learning content	causing no stress at all	11	3.3	2.68 \pm 1.07	4
		causing mild stress	41	12.3		
		causing moderate stress	73	21.9		
		causing high stress	126	37.7		
		causing severe stress	83	24.9		
	Difficult to understand learning content	causing no stress at all	22	6.6	2.50 \pm 1.21	6
		causing mild stress	58	17.4		
		causing moderate stress	63	18.9		
		causing high stress	111	33.2		
		causing severe stress	80	24.0		
	Get poor mark	causing no stress at all	11	3.3	2.74 \pm 1.15	3
		causing mild stress	42	12.6		
		causing moderate stress	83	24.9		
		causing high stress	83	24.9		
		causing severe stress	115	34.4		
	Test too frequent	causing no stress at all	40	12.0	2.15 \pm 1.28	8
		causing mild stress	69	20.7		
		causing moderate stress	88	26.3		
		causing high stress	74	22.2		
		causing severe stress	63	18.9		
	Lack of time to do revision	causing no stress at all	14	4.2	2.85 \pm 1.08	1
		causing mild stress	24	7.2		
		causing moderate stress	67	20.1		
		causing high stress	120	35.9		
		causing severe stress	109	32.6		
	Competitive learning environment	causing no stress at all	65	19.5	1.67 \pm 1.20	9
		causing mild stress	91	27.2		
		causing moderate stress	92	27.5		
		causing high stress	58	17.4		
		causing severe stress	28	8.4		
	Unfair assessment grading system	causing no stress at all	30	9.0	2.36 \pm 1.26	7
		causing mild stress	62	18.6		
		causing moderate stress	76	22.8		
		causing high stress	89	26.6		
		causing severe stress	77	23.1		
	Learning schedule too packed	causing no stress at all	27	8.1	2.51 \pm 1.24	5
		causing mild stress	46	13.8		
		causing moderate stress	78	23.4		
		causing high stress	94	28.1		
		causing severe stress	89	26.6		
	Total				2.38 \pm 0.71	

Table (5-6-1) represented distribution of percentage of students regarding the (ARS) as reported by them. It showed that the total mean score was (2.38 ± 0.71) , which indicated a **moderate level** of stress. It also showed that the **"lack of time to do revision"** and **"examination"** were the first- and second-ranked stressors, with a mean score of (2.85 ± 1.08) , and (2.80 ± 1.11) respectively, and percentage (68.5%), (61.9%) respectively, which indicated **high to severe level of stress**. It also showed that **"getting behind revision schedule"** ranked 10 with a mean score of (1.56 ± 1.20) , and percentage (52.7%) which indicates a **nil to mild level of stress**.

Table (5-6-2): Distribution of percentage of students regarding the (Inter RS)

Demine	Variables	Classification	No	%	Mean± Std	Rank
(Inter RS)	Lot of assignment	causing no stress at all	91	27.2	1.37± 0.14	12
		causing mild stress	100	29.9		
		causing moderate stress	84	25.1		
		causing high stress	44	13.2		
		causing severe stress	15	4.5		
	Inappropriate assignment	causing no stress at all	76	22.8	1.42± 1.12	11
		causing mild stress	118	35.3		
		causing moderate stress	80	24.0		
		causing high stress	43	12.9		
		causing severe stress	17	5.1		
	Conflict with peers	causing no stress at all	83	24.9	1.69± 1.33	9
		causing mild stress	74	22.2		
		causing moderate stress	82	24.6		
		causing high stress	53	15.9		
		causing severe stress	42	12.6		
	Verbal/physical abuse from friends	causing no stress at all	89	26.6	1.87± 1.47	7
		causing mild stress	54	16.2		
		causing moderate stress	64	19.2		
		causing high stress	63	18.9		
		causing severe stress	64	19.2		

	Verbal/physical abuse from teachers	causing no stress at all	61	18.3	2.30± 1.47	2
		causing mild stress	45	13.5		
		causing moderate stress	55	16.5		
		causing high stress	76	22.8		
		causing severe stress	97	29.0		
	Verbal/physical abuse from family	causing no stress at all	61	18.3	2.25± 1.46	3
		causing mild stress	50	15.0		
		causing moderate stress	61	18.3		
		causing high stress	68	20.4		
		causing severe stress	94	28.1		
	Conflict with family	causing no stress at all	51	15.3	2.35± 1.40	1
		causing mild stress	48	14.4		
		causing moderate stress	54	16.2		
		causing high stress	93	27.8		
		causing severe stress	88	26.3		
	Conflict with teachers	causing no stress at all	51	15.3	2.14± 1.34	5
		causing mild stress	60	18.0		
		causing moderate stress	81	24.3		
		causing high stress	74	22.2		
		causing severe stress	68	20.4		
	Unwillingness to school	causing no stress at all	95	28.4	1.62± 1.37	10
		causing mild stress	74	22.2		
		causing moderate stress	68	20.4		
		causing high stress	56	16.8		
		causing severe stress	41	12.3		
	Family desire to stop schooling	causing no stress at all	155	46.4	1.79± 1.80	8
		causing mild stress	15	4.5		
		causing moderate stress	13	3.9		
		causing high stress	47	14.1		
		causing severe stress	104	31.1		
	Interruptions by others during study	causing no stress at all	34	10.2	2.20± 1.27	4
		causing mild stress	74	22.2		
		causing moderate stress	83	24.9		
		causing high stress	76	22.8		
		causing severe stress	67	20.1		
	Crowded classroom	causing no stress at all	80	24.0	1.96± 1.46	6
		causing mild stress	55	16.5		
		causing moderate stress	64	19.2		
		causing high stress	66	19.8		
		causing severe stress	69	20.7		
	Total				1.91± 0.87	

Table (5-6-2) represented distribution of the percentage of students regarding the (Inter RS) domain. It showed that the total mean score was (1.91±0.87), which indicated **low levels** of stress. It also indicated that "**conflict with family**" and "**verbal/physical abuse from teachers**" were the first- and second-ranked stressors, with a mean score of (2.35±1.40), (2.30±1.47) respectively, and percentage (54.1%), (51.8%) respectively,

which indicated a level of stress ranging from **high to severe**. It also showed that the **"inappropriate assignment"** and **"lots of assignments"** were stressors that ranked 11 and 12 among stressors with a mean of (1.42 ± 1.12) , and (1.37 ± 0.14) respectively, and percentage (58.1%), (57.1%) respectively which indicates a **nil to mild level of stress**.

Table (5-6-3): Distribution of percentage of students regarding the (Intra RS)

Demine	Variables	Classification	No	%	Mean \pm Std	Rank
(Intra RS)	High self-expectation	causing no stress at all	73	21.9	1.61 \pm 1.23	6
		causing mild stress	90	26.9		
		causing moderate stress	94	28.1		
		causing high stress	45	13.5		
		causing severe stress	32	9.6		
	High expectation from other person	causing no stress at all	49	14.7	2.11 \pm 1.32	4
		causing mild stress	68	20.4		
		causing moderate stress	74	22.2		
		causing high stress	82	24.6		
		causing severe stress	61	18.3		
	Feel incompetence	causing no stress at all	40	12.0	2.14 \pm 1.24	3
		causing mild stress	65	19.5		
		causing moderate stress	87	26.0		
		causing high stress	89	26.6		
		causing severe stress	53	15.9		
	Talking about personal problem	causing no stress at all	127	38.0	1.14 \pm 1.14	7
		causing mild stress	88	26.3		
		causing moderate stress	73	21.9		
		causing high stress	34	10.2		
		causing severe stress	12	3.6		
	Afraid not getting place in university	causing no stress at all	45	13.5	2.58 \pm 1.39	1
		causing mild stress	33	9.9		
		causing moderate stress	55	16.5		
		causing high stress	85	25.4		
		causing severe stress	116	34.7		
	Study for the family's sake	causing no stress at all	97	29.0	1.81 \pm 1.50	5
		causing mild stress	59	17.7		
		causing moderate stress	53	15.9		
		causing high stress	60	18.0		
		causing severe stress	65	19.5		
	Self-negative thinking	causing no stress at all	35	10.5	2.47 \pm 1.35	2
		causing mild stress	53	15.9		
		causing moderate stress	69	20.7		
		causing high stress	72	21.6		
		causing severe stress	105	31.4		
	Total				1.98 \pm 0.75	

Table (5-6-3) represented distribution of percentage of students regarding the (Intra RS) domain. It showed that the total mean score was (1.98 ± 0.75) , which indicated **low level** of stress. It also showed that the item that ranked first among stressors was **"afraid of not getting a place in university"** with a mean score of (2.58 ± 1.39) and a percentage of (60.1%), indicating a level of stress ranging from **high to severe**. It also showed that **"talking about personal problems"** was the seventh-ranking stressor, with a mean score of (1.14 ± 1.14) , and percentage (64.3%) which indicates a **nil to mild** level of stress.

Table (5-6-4): Distribution of percentage of students regarding the (LTRS)

Demine	Variables	Classification	No	%	Mean± Std	Rank
(LTRS)	Lack of motivation learn	causing no stress at all	44	13.2	2.39± 1.35	1
		causing mild stress	44	13.2		
		causing moderate stress	70	21.0		
		causing high stress	88	26.3		
		causing severe stress	88	26.3		
	Lack of guidance from teacher	causing no stress at all	73	21.9	1.71± 1.26	4
		causing mild stress	77	23.1		
		causing moderate stress	89	26.6		
		causing high stress	63	18.9		
		causing severe stress	32	9.6		
	Lack of feedback from teacher	causing no stress at all	73	21.9	1.70± 1.21	5
		causing mild stress	77	23.1		
		causing moderate stress	89	26.6		
		causing high stress	63	18.9		
		causing severe stress	32	9.6		
	Uncertainty of what are expected	causing no stress at all	44	13.2	1.97± 1.23	2
		causing mild stress	83	24.9		
		causing moderate stress	89	26.6		
		causing high stress	74	22.2		
		causing severe stress	44	13.2		
	Lack of recognition of work	causing no stress at all	55	16.5	1.83± 1.25	3
		causing mild stress	87	26.0		
		causing moderate stress	91	27.2		
		causing high stress	60	18.0		
		causing severe stress	41	12.3		
	Giving wrong answer in class	causing no stress at all	117	35.0	1.13± 1.11	6
		causing mild stress	110	32.9		
		causing moderate stress	67	20.1		
		causing high stress	24	7.2		
		causing severe stress	16	4.8		
	Total				1.79 ± 0.78	

Table (5-6-4) represented distribution of percentage of students regarding the (LTRS) domain. It showed that the total mean score was (1.79 ± 0.78) , which indicated **low level** of stress. It also showed that the students reported that the **"lack of motivation learn"** was the stressor that ranked 1 among all stressors with a mean score of (2.39 ± 1.35) , and a percentage of (52.6%) which indicated **high to severe level of stress**. It also demonstrated that **"giving wrong answer in class"** was the stressor that ranked sixth, with a mean score of (1.13 ± 1.11) , and a percentage of (67.9%) which indicates a **nil to mild** level of stress.

Table (5-6-5): Distribution of percentage of students regarding the (TRS)

Demine	Variables	Classification	No	%	Mean \pm Std	Rank
(TRS)	Unable to answer the question	causing no stress at all	59	17.7	1.79 \pm 1.20	2
		causing mild stress	82	24.6		
		causing moderate stress	90	26.9		
		causing high stress	76	22.8		
		causing severe stress	27	8.1		
	Lack of teaching skills	causing no stress at all	49	14.7	2.22 \pm 1.33	1
		causing mild stress	52	15.6		
		causing moderate stress	74	22.2		
		causing high stress	92	27.5		
		causing severe stress	67	20.1		
	Lack of reading material	causing no stress at all	80	24.0	1.54 \pm 1.21	3
		causing mild stress	89	26.6		
		causing moderate stress	95	28.4		
		causing high stress	43	12.9		
		causing severe stress	27	8.1		
	Total				1.85 \pm 0.88	

Table (5-6-5) represented distribution of percentage of students regarding the (TRS) domain. It showed that the total mean score was (1.85 ± 0.88) , which indicated **low level** of stress. It also showed that the item that ranked 1 among stressors was **"Lack of teaching skills"** with a

mean score of (2.58 ± 1.39) , and percentage (27.5%) which indicated high level of stress.

Table (5-6-6): Distribution of percentage of students regarding the (GSRS)

Demine	Variables	Classification	No	%	Mean± Std	Rank
(GSRS)	Participant in group discussion	causing no stress at all	226	67.7	0.46± 0.76	6
		causing mild stress	70	21.0		
		causing moderate stress	31	9.3		
		causing high stress	6	1.8		
		causing severe stress	1	.3		
	Participant in class presentation	causing no stress at all	211	63.2	0.58± 0.95	5
		causing mild stress	80	24.0		
		causing moderate stress	19	5.7		
		causing high stress	17	5.1		
		causing severe stress	7	2.1		
	Lack of time with family and friends	causing no stress at all	35	10.5	1.94± 1.14	1
		causing mild stress	90	26.9		
		causing moderate stress	99	29.6		
		causing high stress	77	23.1		
		causing severe stress	33	9.9		
	Answering friend's question	causing no stress at all	187	56.0	0.70± 0.96	4
		causing mild stress	85	25.4		
		causing moderate stress	40	12.0		
		causing high stress	17	5.1		
		causing severe stress	5	1.5		
	Family desire to continue schooling	causing no stress at all	173	51.8	1.16± 1.43	2
		causing mild stress	45	13.5		
		causing moderate stress	43	12.9		
		causing high stress	35	10.5		
		causing severe stress	38	11.4		
Late to school	causing no stress at all	139	41.6	1.08± 1.15	3	
	causing mild stress	84	25.1			
	causing moderate stress	68	20.4			
	causing high stress	29	8.7			
	causing severe stress	14	4.2			
Total					0.99 ± 0.58	

Table (5-6-6) represented distribution of percentage of students regarding the (GSRS) domain. It showed that the total mean score was (0.99 ± 0.58) , which indicates that it **doesn't cause any stress at all**. It also showed that the **"lack of time with family and friends"** was ranked first among stressors with a mean score of (1.94 ± 1.14) , and a percentage of

(56.5%) which indicated **mild to moderate level of stress**. Also, it showed that the **"participant in group discussion"** was a low-ranked stressor with a mean score of (0.46 ± 0.76) , and percentage (67.7%) which indicated that it **didn't cause stress** for them.

Table (5-6-7): Distribution of mean and standard deviation for each stressor domain as reported by the general secondary schools students

Domains of stressors	Mean \pm Std	Level of stress
(ARS)	2.38 \pm 0.71	Moderate level of stress
(Intra RS)	1.98 \pm 0.75	Low level of stress
(Inter RS)	1.91 \pm 0.87	Low level of stress
(TRS)	1.85 \pm 0.88	Low level of stress
(LTRS)	1.79 \pm 0.78	Low level of stress
(GSRS)	0.99 \pm 0.58	Not causing any stress at all

Table (5-6-7) showed that the (ARS) was the main domain of stressors among students with a mean score of (2.38 ± 0.71) that caused moderate level of stress for them, and showed that the (GSRS) was the domain that didn't cause any stress among them with a mean score of (0.99 ± 0.58) .

Table (5-7): Distribution of percentage of students regarding the coping strategies that used

Demines	Variables	Classification	No	%	Mean ± Std	Total mean ± Std	Interpret ation	Rank
Self- distraction	I've been turning to work or other activities to take my mind off things	I haven't been doing this at all	30	9.0	2.53± 0.85	5.35± 1.47	doing this a medium amount	7
		I've been doing this a little bit	143	42.8				
		I've been doing this a medium amount	112	33.5				
		I've been doing this a lot	49	14.7				
	I've been doing something to think about it less, such as going to movies, w atching TV, reading, daydreami ng.	I haven't been doing this at all	30	9.0	2.82± 0.94			
		I've been doing this a little bit	93	27.8				
		I've been doing this a medium amount	118	35.3				
		I've been doing this a lot	93	27.8				
Active coping	I've been concentrat ing my efforts on doing something about the situation I'm in	I haven't been doing this at all	18	5.4	2.87± 0.87	5.799± 1.42	doing this a medium amount	4
		I've been doing this a little bit	99	29.6				
		I've been doing this a medium amount	125	37.4				
		I've been doing this a lot	92	27.5				
	I've been taking action to try to make the situation better	I haven't been doing this at all	18	5.4	2.92± 0.83			
		I've been doing this a little bit	76	22.8				
		I've been doing this a medium amount	152	45.5				
		I've been doing this a lot	88	26.3				
Denial	I've been saying to myself "this isn't real"	I haven't been doing this at all	18	5.2	2.02± 0.95	3.79± 1.51	doing this little bit	12
		I've been doing this a little bit	99	28.4				
		I've been doing this a medium amount	125	35.9				
		I've been doing this a lot	92	26.4				
	I've been refusing to believe that it has happened	I haven't been doing this at all	162	48.5	1.76± 0.90			
		I've been doing this a little bit	114	34.1				
		I've been doing this a medium amount	34	10.2				
		I've been doing this a lot	24	7.2				
Substance use	I've been using smoking or hookah to make myself feel	I haven't been doing this at all	253	75.7	1.45± 0.90	2.90± 1.77	doing this little bit	14
		I've been doing this a little bit	31	9.3				
		I've been doing this a medium	28	8.4				

	better	amount						
		I've been doing this a lot	22	6.6				
	I've been using smoking or hookah to help me get through it	I haven't been doing this at all	256	76.6	1.44±0.89			
		I've been doing this a little bit	29	8.7				
		I've been doing this a medium amount	27	8.1				
I've been doing this a lot		22	6.6					
Use of emotional support	I've been getting emotional support from others	I haven't been doing this at all	53	15.9	2.53±0.95	5.34±1.53	doing this a medium amount	8
		I've been doing this a little bit	107	32.0				
		I've been doing this a medium amount	116	34.7				
		I've been doing this a lot	58	17.4				
	I've been getting comfort and understanding from someone	I haven't been doing this at all	20	6.0	2.81±0.88			
		I've been doing this a little bit	107	32.0				
		I've been doing this a medium amount	123	36.8				
		I've been doing this a lot	84	25.1				
Use of instrumental support	I've been getting help and advice from other people	I haven't been doing this at all	33	9.9	2.84±0.94	5.63±1.74	doing this a medium amount	6
		I've been doing this a little bit	81	24.3				
		I've been doing this a medium amount	125	37.4				
		I've been doing this a lot	95	28.4				
	I've been trying to get advice or help from other people about what to do	I haven't been doing this at all	43	12.9	2.78±1.00			
		I've been doing this a little bit	82	24.6				
		I've been doing this a medium amount	112	33.5				
		I've been doing this a lot	97	29.0				
Behavioral disengagement	I've been giving up trying to deal with it	I haven't been doing this at all	151	45.2	1.77±0.84	3.52±1.36	doing this little bit	13
		I've been doing this a little bit	122	36.5				
		I've been doing this a medium amount	46	13.8				
		I've been doing this a lot	15	4.5				
	I've been giving up the attempt to cope	I haven't been doing this at all	162	48.5	1.74±0.86			
		I've been doing this a little bit	108	32.3				
		I've been doing this a medium amount	50	15.0				
		I've been doing this a lot	14	4.2				
Venting	I've been saying things to let my unpleasant feelings escape	I haven't been doing this at all	36	10.8	2.91±0.97	5.16±1.44	doing this a medium amount	10
		I've been doing this a little bit	67	20.1				
		I've been doing this a medium amount	122	36.5				
		I've been doing this a lot	109	32.6				

	I've been expressing my negative feelings	this a lot			2.25± 0.97			
		I haven't been doing this at all	36	10.8				
		I've been doing this a little bit	67	20.1				
		I've been doing this a medium amount	122	36.5				
		I've been doing this a lot	109	32.6				
Positive reframing	I've been trying to see it in a different light, to make it seem more positive	I haven't been doing this at all	18	5.4	2.94± 0.88	5.90± 1.43	doing this a medium amount	3
		I've been doing this a little bit	86	25.7				
		I've been doing this a medium amount	128	38.3				
		I've been doing this a lot	102	30.5				
	I've been looking for something good in what is happening	I haven't been doing this at all	19	5.7	2.96± 0.88			
		I've been doing this a little bit	80	24.0				
		I've been doing this a medium amount	130	38.9				
		I've been doing this a lot	105	31.4				
Planning	I've been trying to come up with a strategy about what to do	I haven't been doing this at all	10	3.0	3.00± 0.82	6.11± 1.35	doing this a lot	2
		I've been doing this a little bit	84	25.1				
		I've been doing this a medium amount	135	40.4				
		I've been doing this a lot	105	31.4				
	I've been thinking hard about what steps to take	I haven't been doing this at all	8	2.4	3.11± 0.79			
		I've been doing this a little bit	66	19.8				
		I've been doing this a medium amount	141	42.2				
		I've been doing this a lot	119	35.6				
Humor	I've been making jokes about it	I haven't been doing this at all	89	26.6	2.26± 1.00	4.70± 1.93	doing this a medium amount	11
		I've been doing this a little bit	115	34.4				
		I've been doing this a medium amount	83	24.9				
		I've been doing this a lot	47	14.1				
	I've been making fun of the situation	I haven't been doing this at all	72	21.6	2.44± 1.03			
		I've been doing this a little bit	108	32.3				
		I've been doing this a medium amount	88	26.3				
		I've been doing this a lot	66	19.8				
Acceptance	I've been accepting the reality of the fact that it has happened	I haven't been doing this at all	15	4.5	2.90± 0.85	5.793± 1.45	doing this a medium amount	5
		I've been doing this a little bit	94	28.1				
		I've been doing this a medium amount	134	40.1				
		I've been doing this a lot	91	27.2				

	I've been learning to live with it	I haven't been doing this at all	23	6.9	2.89±0.89			
		I've been doing this a little bit	85	25.4				
		I've been doing this a medium amount	131	39.2				
		I've been doing this a lot	95	28.4				
Religion	I've been trying to find comfort in my religion or spiritual beliefs	I haven't been doing this at all	18	5.2	3.05±0.91	6.30±1.61	doing this a lot	1
		I've been doing this a little bit	76	21.8				
		I've been doing this a medium amount	108	31.0				
		I've been doing this a lot	132	37.9				
	I've been praying or meditating	I haven't been doing this at all	17	5.1	3.24±0.90			
		I've been doing this a little bit	56	16.8				
		I've been doing this a medium amount	90	26.9				
		I've been doing this a lot	171	51.2				
Self-blame	I've been criticizing myself	I haven't been doing this at all	63	18.9	2.56±1.03	5.18±1.83	doing this a medium amount	9
		I've been doing this a little bit	91	27.2				
		I've been doing this a medium amount	107	32.0				
		I've been doing this a lot	73	21.9				
	I've been blaming myself for things that happened	I haven't been doing this at all	50	15.0	2.61±1.03			
		I've been doing this a little bit	117	35.0				
		I've been doing this a medium amount	77	23.1				
		I've been doing this a lot	90	26.9				

Table (5-7) represented distribution of the percentage of students regarding the coping strategies that have been used. It is indicated that the useful ("problem-focused" and "emotion-focused") coping strategies were mostly used by students, and the less useful coping strategies were used a "little bit" by them. It also shows that the "**religion**" and "**planning**" strategies were the domains of coping strategies that were **used a "lot"** by students with a mean of scores (6.30 ± 1.61), and (6.11 ± 1.35) respectively. It also showed that the other coping strategies ("**positive reframing**", "**active**

coping", "acceptance", "use of instrumental support", "self-distraction", "use of emotional support", "self-blame", "venting", and "humor") were used by students in "medium amount". The coping strategies that were used the least were "denial", "behavioral disengagement" and "substance use" (used a "little bit") with a mean of scores (3.79 ± 1.51), (3.52 ± 1.36), and (2.90 ± 1.77) respectively.

Results of the hypothesis:

The prevalence of stress, stressors and coping strategies among students in relation to gender and study branch were assessed in this study.

Table (5-8): Distribution of t-test of the prevalence of stress among students in relation to gender and study branch

	Variables	NO	%	Mean± Std	t	P. value
Prevalence of stress	Male	129	38.6%	2.4496±0.73910	-1.552-	.122
	Female	205	61.4%	2.5707±0.66504		
	Scientific	103	30.8%	2.4563±0.75117	-1.187-	.236
	Humanities	231	69.2%	2.5541±0.66944		

Table (5-8) illustrated the differences of the prevalence of stress among students in relation to gender and study branch by using Two-Independent t-Test. It showed that there were no significant differences in the prevalence of stress among students in relation to their gender or branch of study ($P > 0.05$).

Table (5-9): Distribution of t-test of the stressors among students in relation to gender and study branch

Domains	Variables	NO	%	Mean± Std	t	P. value
(ARS)	Male	129	38.6%	2.1326±0.70191	-4.060-	.000
	Female	205	61.4%	2.4385±0.65013		
	Scientific	103	30.8%	2.1660±0.68120	-2.773-	.006
	Humanities	231	69.2%	2.3892±0.67831		
(Inter RS)	Male	129	38.6%	1.8217±0.81034	-1.585-	.114
	Female	205	61.4%	1.9780±0.91763		
	Scientific	103	30.8%	1.6117±0.89423	-4.358-	.000
	Humanities	231	69.2%	2.0541±0.83991		
(Intra RS)	Male	129	38.6%	1.8527±0.70030	-2.566-	.011
	Female	205	61.4%	2.0697±0.78331		
	Scientific	103	30.8%	1.8738±0.72631	-1.809-	.071
	Humanities	231	69.2%	2.0359±0.76893		
(LTRS)	Male	129	38.6%	1.7261±0.75829	-1.227-	.221
	Female	205	61.4%	1.8341±0.79922		
	Scientific	103	30.8%	1.6602±0.75477	-2.067-	.039
	Humanities	231	69.2%	1.8514±0.79158		
(TRS)	Male	129	38.6%	1.8450±0.94009	-.153-	.879
	Female	205	61.4%	1.8602±0.84981		
	Scientific	103	30.8%	1.7702±0.88442	-1.161-	.247
	Humanities	231	69.2%	1.8918±0.88374		
(GSRS)	Male	129	38.6%	0.9457±0.56946	-1.151-	.251
	Female	205	61.4%	1.0220±0.60132		
	Scientific	103	30.8%	0.8819±0.52530	-2.305-	.022
	Humanities	231	69.2%	1.0418±0.61064		

Table (5-9) illustrated the differences of the domains of stressors among students in relation to gender and study branch by using Two-Independent t-Test. It shows that the mean scores of (ARS) and (Intra RS) in relation to gender were higher among females students (2.4 ± 0.6), (2.0 ± 0.7) respectively, with significant difference ($P<0.05$). It also indicates that the mean scores of the different domains of stressors ((ARS), (Inter RS), (LTRS), (GSRS)) in relation to study branch were higher among the humanities branch students (2.3 ± 0.6), (2.01 ± 0.8), (1.8 ± 0.7), (1.0 ± 0.6) respectively, with significant differences ($P<0.05$).

Table (5-10-1): Distribution of t-test of the domains of coping strategies among students in relation to gender

Domains	Variables	NO	Mean± Std	t	P. value
Self-distraction	Male	129	5.0543±1.47007	-3.038-	.003
	Female	205	5.5512±1.44628		
Active coping	Male	129	5.6279±1.49515	-1.754-	.080
	Female	205	5.9073±1.36705		
Denial	Male	129	3.8915±1.45903	.970	.333
	Female	205	3.7268±1.54143		
Substance use	Male	129	3.7984±2.27204	7.950	.000
	Female	205	2.3415±1.04341		
Use of emotional support	Male	129	5.1938±1.51594	-1.457-	.146
	Female	205	5.4439±1.53490		
Use of instrumental support	Male	129	5.3643±1.61989	-2.231-	.026
	Female	205	5.8000±1.80793		
Behavioral disengagement	Male	129	3.7209±1.43601	2.101	.036
	Female	205	3.4000±1.30834		
Venting	Male	129	4.8140±1.40183	-3.584-	.000
	Female	205	5.3854±1.42897		
Positive reframing	Male	129	5.6512±1.39559	-2.539-	.012
	Female	205	6.0585±1.44727		
Planning	Male	129	6.0465±1.29820	-.717-	.474
	Female	205	6.1561±1.39854		
Humor	Male	129	5.0310±2.01532	2.454	.015
	Female	205	4.5024±1.85140		
Acceptance	Male	129	5.7907±1.41793	-.027-	.978
	Female	205	5.7951±1.47428		
Religion	Male	129	5.7519±1.72767	-5.126-	.000
	Female	205	6.6488±1.43949		
Self-blame	Male	129	5.0930±1.90165	-.753-	.452
	Female	205	5.2488±1.80184		

Table (5-10-1) illustrated the differences among students in using coping strategies in relation to gender by using Two-Independent t-Test. It showed that the mean scores of "religion", "positive reframing", "use of instrumental support", "self-distraction", and "venting" strategies were higher among female than male students (6.64±1.43), (6.05±1.44), (5.80±1.80), (5.55±1.44), (5.38±1.42) respectively, with significant differences ($P<0.05$). It also showed that the "humor", "substance use", and "behavioral disengagement" were strategies used more by male students than female students with a mean of scores (5.03±2.01), (3.79±2.27), and (3.72±1.43) respectively and significant differences ($P<0.05$). In addition, it indicates that the mean scores of "planning", "active coping", "acceptance", "use of emotional support", and "self-blame"

strategies were higher among female students than male students (6.15 ± 1.39), (5.90 ± 1.36), (5.79 ± 1.47), (5.44 ± 1.53), (5.24 ± 1.80) respectively, without significant differences ($P > 0.05$). While the "denial" was strategy used more by male students than female students, with mean score (3.89 ± 1.45) and without significant differences ($P > 0.05$).

Results indicate that the ("problem-focused" and "emotion-focused") coping strategies were used more than the "less useful" coping strategies among females and frequently higher than males. They also show that the less useful coping strategies were used more frequently by males.

Table (5-10-2): Distribution of t-test of the domains of coping strategies among students in relation to study branch

Domains	Variables	NO	Mean \pm Std	t	P. value
Self-distraction	Scientific	103	5.2136 \pm 1.53169	-1.208-	.228
	Humanities	231	5.4242 \pm 1.44527		
Active coping	Scientific	103	5.7379 \pm 1.31329	-.527-	.598
	Humanities	231	5.8268 \pm 1.47010		
Denial	Scientific	103	3.4854 \pm 1.39230	-2.484-	.013
	Humanities	231	3.9264 \pm 1.54322		
Substance use	Scientific	103	2.6602 \pm 1.43864	-1.681-	.094
	Humanities	231	3.0130 \pm 1.90076		
Use of emotional support	Scientific	103	5.2524 \pm 1.64923	-.756-	.450
	Humanities	231	5.3896 \pm 1.47580		
Use of instrumental support	Scientific	103	5.3010 \pm 1.79779	-2.324-	.021
	Humanities	231	5.7792 \pm 1.70898		
Behavioral disengagement	Scientific	103	3.2816 \pm 1.16667	-2.178-	.030
	Humanities	231	3.6320 \pm 1.43515		
Venting	Scientific	103	5.2621 \pm 1.46167	.824	.411
	Humanities	231	5.1212 \pm 1.43649		
Positive reframing	Scientific	103	5.7670 \pm 1.35186	-1.139-	.256
	Humanities	231	5.9610 \pm 1.47538		
Planning	Scientific	103	6.0874 \pm 1.39401	-.237-	.813
	Humanities	231	6.1255 \pm 1.34707		
Humor	Scientific	103	4.5825 \pm 1.95300	-.784-	.434
	Humanities	231	4.7619 \pm 1.92230		
Acceptance	Scientific	103	5.5922 \pm 1.35355	-1.697-	.091
	Humanities	231	5.8831 \pm 1.48594		
Religion	Scientific	103	6.2524 \pm 1.62528	-.377-	.706
	Humanities	231	6.3247 \pm 1.61333		
Self-blame	Scientific	103	5.2816 \pm 1.89642	.616	.538
	Humanities	231	5.1472 \pm 1.81659		

Table (5-10-2) illustrated the differences among students in using coping strategies in relation to study branch by using Two-Independent t-Test. It shows that the "use of instrumental support", "denial", and "behavioral disengagement" were strategies used more by the humanities branch students than the scientific branch students, with a mean of scores (5.77 ± 1.70), (3.92 ± 1.54), and (3.63 ± 1.43) respectively, and significant differences ($P < 0.05$). It indicated that the mean scores of "religion", "planning", "positive reframing", "acceptance", "active coping", "self-distraction", "use of emotional support", "humor", and "substances use" strategies were higher among the humanities branch students than the scientific branch students with mean scores (6.32 ± 1.61), (6.12 ± 1.34), (5.96 ± 1.47), (5.88 ± 1.48), (5.82 ± 1.47), (5.42 ± 1.44), (5.38 ± 1.47), (4.76 ± 1.92), (3.01 ± 1.90) for each one respectively, and without significant differences ($P > 0.05$). It also indicated that "venting" and "self-blame" were strategies used more by the scientific branch than humanities branch students, with mean scores (5.26 ± 1.46), and (5.28 ± 1.89) respectively, and without significant differences ($P > 0.05$).

Results indicate that the "problem-focused" and "emotion-focused" coping strategies have been used more than the "less useful" coping strategies among the humanities branch students and frequently higher than the scientific branch student. It also shows that the "less useful" coping strategies ("venting" and "self-blame") were used more frequently by the scientific branch students.

Assessing the prevalence of stress, stressors, and coping strategies among Nablus students in relation to the time left for the exam.

Table (5-11): Distribution of t-test of the prevalence of stress among students in relation to the time left for the exam

	Time of exam	Mean± Std	T	P. value
Prevalence of stress	December	2.4458± .70070	-.883-	.379
	April	2.4940 ±.69410		

Table (5-11) illustrated the differences in the prevalence of stress among students in relation to the time left for the exam by using Paired Sample t-Test. It showed that there was **no** significant difference in the prevalence of stress among students in relation to the time left for the exam (*P values 0.379*).

Table (5-12): Distribution of t-test of the domains of stressors among students in relation to the time left for the exam

Domains/Time of exam	December	April		
	Mean± Std	Mean± Std	t	P. value
(ARS)	2.1108±.66076	2.3873±.69589	-6.115-	.000
(Inter RS)	1.9217±.88171	1.8384±.87327	1.728	.086
(Intra RS)	1.9544± .8340	1.9974±.74579	-.828-	.409
(LTRS)	1.6145±.79896	1.7430±.80917	-2.214-	.028
(TRS)	1.9719±.88337	1.8996±.86415	1.054	.294
(GSRS)	.8665±.57244	.9197±.54887	-1.296-	.197

Table (5-12) illustrated the differences of the domains of stressors among students in relation to the time left for the exam by using Paired Sample t-Test. It indicated that the mean scores of (ARS) and (LTRS) domains were higher when the time of the exam was shorter

($2.38 \pm .69 > 2.11 \pm .66$), ($1.74 \pm .80 > 1.61 \pm .79$) respectively, with significant differences (P values .000), (P values .028) respectively.

Table (5-13): Distribution of t-test of the domains of coping strategies among students in relation to the time left for the exam

Domains/Time of exam	December	April		
	Mean± Std	Mean± Std	t	P. value
Self-distraction	5.4096±1.48149	5.3133±1.43064	.793	.429
Active coping	6.0602±1.38695	5.8494±1.37782	1.759	.080
Denial	3.6566±1.47181	3.7831±1.50593	-1.062-	.290
Substance use	2.8554±1.71717	2.8916±1.70924	-.631-	.529
Use of emotional support	5.5723±1.44103	5.4337±1.37680	1.237	.218
Use of instrumental support	5.8012±1.69570	5.6747±1.64489	.959	.339
Behavioral disengagement	3.2651±1.29413	3.5301±1.41710	-2.166-	.032
Venting	5.3012±1.42050	5.2771±1.43390	.214	.831
Positive reframing	6.2590±1.40100	6.0964±1.38489	1.421	.157
Planning	6.3012±1.42901	6.1386±1.30224	1.380	.170
Humor	4.8614±1.84524	4.8253±1.90682	.323	.747
Acceptance	5.9337±1.45284	5.8072±1.43090	1.155	.250
Religion	5.9036±1.69215	6.1265±1.69195	-1.886-	.061
Self-blame	5.2711±1.74911	5.1024±1.74644	1.259	.210

Table (5-13) illustrated the differences among students in using coping strategies in relation to the time left for the exam by using Paired Sample t-Test. It showed that the "problem-focused" and "emotion-focused" coping strategies were used a "lot" at both times. According to the "problem-focused" strategy, the "planning" was used with higher mean score ($6.30 \pm 1.42 > 6.13 \pm 1.30$) when the time of exam was longer with no significant differences ($P > 0.05$), and the "active coping" was used with higher mean score ($6.0 \pm 1.38 > 5.84 \pm 1.37$) when time of the exam was longer with no significant differences ($P > 0.05$). Regarding the "emotion-

focused" strategy, the "positive reframing" strategy was used with higher mean score ($6.25 \pm 1.40 > 6.09 \pm 1.38$) when the time of the exam was longer with no significant differences ($P > 0.05$). The "religion" strategy was used with higher mean score ($6.12 \pm 1.69 > 5.90 \pm 1.69$) when the time of the exam was shorter with no significant differences ($P > 0.05$). It also showed that the "less useful" coping strategies "behavioral disengagement" was used a "little bit" both times with significant difference (P values .032), and the mean score ($3.53 \pm 1.41 > 3.26 \pm 1.29$) was higher when the time left for the exam was shorter.

Chapter six

Discussion

This chapter discuss the results of study in relation to other studies finding in Arab, Islamic, European and other countries. In addition, it discusses the similarities and differences results with other studies, also illustrated some rational of this differences.

6.1 Socio-demographic data.

The study results (table 5-1) indicate that less than two thirds of students (61.4%) were female and two thirds of them (69.2%) studied in the humanities branch. The results were consistent with statistics for PMOE (2015/2016) which reported that females constituted (58.1%) of the students who studied in 12th grade in government schools in the West Bank (WB). According to the Palestinian Central Bureau of Statistics (PCBS, 2014/2015), (57.6%) of students who studied in general secondary level were female. In addition, (50.2%) of the students in Palestine were female for the academic year (2011/2012) with rate (54.4%) at the secondary level (PCBS, 2013). According to PMOE (2015/2016) students who studied in the humanities branch in the West Bank reached (65.5%).

The results (table 5-1) also showed that approximately half of students (49.7%) were from Nablus, which supported the statistic of the PMOE (2015/2016) that reported that (15.8%) of students who studied in 12th grade in WB were from Nablus governorate.

6.2 Academic profile.

The findings (table 5-2) showed that two thirds (66.5%) of students received private tutoring, (22.8%) were from the scientific branch and (41.9%) were female. The results of study in countries of the Former Soviet Union by Silova and Bray (2006) reported that the rate of students who received private tutoring during their final year of secondary school ranged from (56%-93%). The results of other study in Jordan for (الحباشنة و النعيمي، 2007) showed that the rate of students who received private tutoring in 12th grade was (53.6%). It also showed that (84%) of students from the scientific branch and (78%) of students from the humanities branch received private tutoring. Moreover, most of the students who received this tutoring were male. The differences in results might be related to difference in time of conducting the studies.

It seems that more than half of students in different countries, including Palestine, and Jordan receive private tutoring, which might be due to different reasons, such as a high number of students in classroom at government schools or low economic status of teachers. There is a need for additional studies related to private tutoring.

6.3 Counseling and psychological advices.

The study results (table 5-3) showed that only one third of students (32.3%) received counseling at their schools. Other studies in American United State, like Kaffenberger and Seligman (2007) in United Stat, found that only one in five of students who need mental health services actually

receive the necessary services. In addition, the results of study by Dore (2005) found that 18-20% of students have mental health issues that may lead to life dysfunctions. These low rates in receiving counseling by students might be related to stigma toward psychological counseling, due to lack of confidence in counselors, or due to the lack of competence on the part of counselors. There is a need to increase the role of psychological and educational counselors in schools and there is a need for additional studies to investigate the factors that lead to the reluctance of students to request counseling.

6.4 Use of free time.

The results (table 5-4) indicated that more than two thirds (72.8%) of students spent their free time on the internet and social media. These results were in line with a study (Cao & Su, 2006), which showed that the rate of internet use among Chinese adolescents surveyed was (88%). These results might be related to internet and social media addiction among people in recent years, or to the use of the internet among adolescents as a method for psychological debriefing to decrease the number of stressors the encounter in their life. There is a need to study the relation between internet addiction and psychological stress among students or adolescents.

6.5 Prevalence of stress among students and the differences in relation to gender and study branch.

The findings of the study (table 5-5) (table 5-8) illustrate the prevalence rate of stress among students and the differences in the prevalence of stress among them in relation to gender and study branch.

The results (table 5-5) showed that (88.3%) of students have different levels of stress with different effects, and (7.5%) of them has too much stress. Other studies found that some differences in the prevalence of stress among secondary school students. Lin and Yusoff (2013) indicated that the prevalence of distress among students in Melaka, Malaysia was (47.6%). Yusoff et al. (2011a) found that the prevalence of distressed students in Kota Bharu, Malaysia was (32.8%). Moreover, the results of WHO (2001) reported that (20%) of the world adolescents have mental disorders or problems. The prevalence rate of stress among students in this study indicated that different levels of stress with different effects might be related to political, social and economic issues that affected the psychological health of students, or it might be related to the education system in Palestine, and most Arab countries, that aggravated the stress by requiring students' complete attention for the last year in secondary level, a year considered by many students to be the key to their future.

The results (table 5-5), (table 5-8) indicate that the prevalence rate of stress among females was higher than males (61.4%>38.6%) with no significant differences ($P>0.05$). It also showed that it was higher among

the humanities branch students than the scientific branch students (69.2%>30.8%) with no significant differences ($P>0.05$). These results are in line with the study by Watode et al. (2015) in Malaysia, which showed that the prevalence of stress among female students was higher than male (89.7% vs. 86.4%) with no significant differences. Another study by Yusuf et al. (2011a) which found that the prevalence of distress among Malaysian female was higher than male supports this. Also, Lin and Yusoff (2013) reported that there were no significant differences in distress among school students in Melaka state, Malaysia according to gender and study branch.

6.6 Domains of stressors.

The findings of this study (table 5-6; 1-7) showed that the main domains of stressors, as reported by students, was the (ARS) with mean score (2.38 ± 0.71) which indicated moderate level of stress. It also showed that (GSRS) was lowest domain, with mean score (0.99 ± 0.58), which indicated that it didn't cause any stress at all among students. These findings were similar to those found in the study by Wahab et al. (2013) which indicated that the highest domain of stressors among Malaysian school students was the (ARS) with mean score (2.3 ± 0.80). In addition, Yusoff et al. (2011a) found that the (ARS) was the major domain of stressors among secondary school students in different types of schools in Malaysia. Furthermore, Watode et al. (2015) reported that academic stressors were the greatest stressors among secondary school students in Malaysia with percentage (70%).

The study results (table 5-6; 1-6) also reported that the top ten stressors, in descending order, were the "lack of time to do revision", "examination", "getting poor marks", "too many learning content", "afraid not getting place in university", "learning schedule too packed", "self-negative thinking", "lack of motivation learn", "unfair assessment grading system" and "conflict with family" with mean score ranging from $(2.85 \pm 1.08$ to 2.35 ± 1.40). This indicates moderate level of stress, it also shows that six stressors in the top ten list were related to (ARS). These results were nearly identical to those found in the study by Lin and Yusoff (2013) which found that the rank of stressors, as reported by high school students in Malaysia, were "afraid of not getting university", "examination", "too many to be learnt", "getting poor marks", "lack of revision time", "high self-expectation", "getting behind revision schedule", "difficulties in understanding learning content", "unable to answer questions from teachers" and "competitive learning environment" with a mean score ranging from $(2.75 \pm 1.26$ to 2.15 ± 1.15) indicating a moderate level of stress. In addition, Shahmohammadi (2011) reported that the top ten of stressors among high school students in Iran were "afraid not getting place in any university", "getting poor marks", "lack of time to do revision", "examination", "difficulties in understanding learning content", "too many learning content", "tests are too frequent", "competitive learning environment", "too many assignments given by teachers" and "learning schedule is too packed", with a mean score for stressors ranging from $(2.57 \pm 1.01$ to 2.01 ± 1.10) indicating a moderate level of stress. The mean score for the stressor that ranked first was (3.02 ± 1.11) which indicates a

very high level of stress. Both of the studies above showed that seven stressors in the top ten lists were related to (ARS). These results were not surprising as the (ARS) domain was the main sources of stress among students which might be related to that the students main concern in their secondary school years is their future.

6.7 Domains of coping strategies.

The study results (table 5-7) illustrates the domains of coping strategies that have been used by students, it pointed that the main domains of coping strategies were "religion" and "planning" with a mean score of (6.30 ± 1.61) , and (6.11 ± 1.35) respectively which indicated that these domains used a "lot". While, the lowest domains that have been used a "little bit" were "denial", "behavioral disengagement" and "substance use" with a mean score of (3.79 ± 1.51) , (3.52 ± 1.36) , and (2.90 ± 1.77) respectively. These results were nearly consistent with study by Yusoff et al. (2011a) who found that the main domain of coping strategies that have been used a "lot" by Malaysian secondary school students was "religion" with a mean score of (6.29 ± 1.54) , while the "humor", "behavioral disengagement", "denial", and "substance use" were the lowest domains that were used with a mean score of (3.88 ± 1.56) , (3.58 ± 1.50) , (3.45 ± 1.40) , and (2.10 ± 0.62) respectively. Also, Shahmohammadi (2011) showed that the main domain of coping strategies that were used by high school students in Iran was "religion", followed by "active coping", "positive reinterpretation", "planning", and "use of instrumental support". In addition, Cocorada and Mihalaucu (2012) indicated that "planning", with

a mean score of (13.00 ± 2.59) , was the most used domain of coping strategies among Iranian adolescents in secondary school used "planning a lot" while the "behavioral disengagement", with a mean score of (7.12 ± 2.24) strategy was used a "little bit". These study results indicated that the students tended to use the useful ("problem-focused" and "emotion-focused") coping strategies in dealing with stressors more than the "less useful" coping strategies with some differences that might be related to differences in cultures, religions, life styles and other environmental factors.

Results of the hypothesis:

The findings of the study (table 5-9) illustrate the differences between the domains of stressors among students in relation to gender and study branch. It indicates that there was significant difference between gender and (ARS) (*P values .000*) with mean score was higher among female than male ($2.4 \pm 0.6 > 2.1 \pm 0.7$). These results were similar to the study by Lal (2014) which showed that the mean score of academic stress among female students in India secondary school was higher than male students ($136.01 \pm 10.58 > 132.30 \pm 11.84$) with significant differences. The results of the study were different from those found in the study by Prabu (2015) in Namakkal District of Tamil Nadu, India, who indicated that the mean score of academic stress among male students in secondary school was higher than female ($96.82 \pm 32.12 > 94.24 \pm 30.71$) with no significant differences ($P > 0.05$). These differences might be related to differences in cultures and population, or due to differences in the methods and tools used I then study.

There is a need for additional studies to investigate the differences between the domains of stressors among students in relation to different variables such as socio-economic factors or demographic area.

It also showed that there was a significant difference between gender and (Intra RS) (*P values .011*), with a mean score higher among females than males (2.0 ± 0.7 vs. 1.8 ± 0.7). A different study by (Shankar et al., 2014) discovered that the mean score for intrapersonal and interpersonal related stressors (IRS) among Caribbean medicine students was higher among females than males ($1.86 > 1.12$) with a significant difference (*P value 0.015*). These study results indicate that the (Intra RS) among females was high. This might be due to lack intrapersonal skills in dealing with stressors, such as low self-esteem, low self-expectation, feeling of incompetence, and lack of experiences.

The results in (table 5-9) also found that there were significant differences between study branch and different domains of stressors ((ARS), (Inter RS), (LTRS), (GSRS)) ($P < 0.05$) with mean scores were higher among the humanities branch students than the scientific branch students ($2.3 \pm 0.6 > 2.1 \pm 0.6$), ($2.0 \pm 0.8 > 1.6 \pm 0.8$), ($1.8 \pm 0.7 > 1.6 \pm 0.7$), ($1.0 \pm 0.6 > 0.8 \pm 0.5$) respectively. These results were not consistent with the study by Prabu (2015) in India, which indicated that the mean score of academic stress among secondary schools students who studied science was higher than students who studied art (98.11 ± 31.96 vs. 94.43 ± 30.18) with no significant differences ($P > 0.05$).

Another study by Shankar et al. (2014) found that the mean scores for (ARS) and social related stressors (SRS) among Caribbean undergraduate basic science medical students was higher than premedical students ($3.08 > 2.24$), ($1.83 > 1.26$) with significant differences, (*P value* 0.003) and (*P value* 0.038) respectively, and showed that there was no significant differences among them in relation to (IRS) and (LTRS).

These differences in results might be related to differences in cultures, perceptions of stressors among students and interpersonal or intrapersonal skills, or it might be due to a defect in the education system or learning methods. There is a need to direct schools teachers and students' families to encourage students to improve their intrapersonal and interpersonal skills. There is also a need for a plan to develop learning and teaching skills among teachers.

The findings of the study (table 5-10-1) indicate that there were significant differences between gender in using coping strategies like "religion", "positive reframing", "use of instrumental support", "self-distraction", or "venting" ($P < 0.05$), with mean scores higher among females than males ($6.6 \pm 1.4 > 5.7 \pm 1.7$), ($6.0 \pm 1.44 > 5.6 \pm 1.3$), ($5.8 \pm 1.8 > 5.3 \pm 1.6$), ($5.5 \pm 1.4 > 5.0 \pm 1.4$), and ($5.3 \pm 1.4 > 4.8 \pm 1.4$) respectively. It also indicated that there were significant differences in using coping strategies like "humor", "substance use", or "behavioral disengagement" ($P < 0.05$), with mean scores higher among males than females ($5.0 \pm 2.0 > 4.5 \pm 1.8$), ($3.79 \pm 2.2 > 2.3 \pm 1.0$), and ($3.72 \pm 1.4 > 3.4 \pm 1.3$) respectively. These results were different than the results in study carried

out by (Cocorada & Mihalauca, 2012) in Iran, who found that there were significant differences between gender in using coping strategies like "seeking emotional support", "denial" or "emotional discharge (venting)", with mean scores higher among females than males in secondary schools ($(M(f)=11.8>M(m)=10.46)$, $(M(f)=8.25>M(m)=7.37)$, and $(M(f)=9.4>M(m)=8.3)$ respectively. The study also found that the productive strategies got higher scores than nonproductive strategies.

Other studies found that there were significant differences between gender and other types of coping strategies. Matud (2004) showed that the Spanish female got higher mean scores than male in using "emotional" and "avoidance" coping styles ($13.19\pm6.25>11.55\pm5.69$), and ($10.09\pm3.11>9.02\pm3.19$) respectively, with significant differences ($P<0.001$). It also showed that the male got higher mean scores than female in using "rational" and "detachment" coping styles ($25.06\pm6.14>23.15\pm6.21$), and ($11.61\pm4.86>10.61\pm4.64$) respectively with significant differences ($P<0.001$). In addition, Gentry et al. (2007) indicated that the female students in Hawai'i tended to use "adaptive coping strategies" more than male students, with a mean score of ($3.17\pm0.85>2.91\pm0.86$) and significant differences ($P<0.001$), while the male students tended to use "maladaptive coping strategies" and "avoidance coping strategies" with higher mean scores than female students ($1.60\pm0.71>1.52\pm0.57$), and ($2.39\pm1.10>2.27\pm1.06$) and significant differences ($P<0.05$).

These results indicate that the "problem-focused" and "emotion-focused" coping strategies have been used more than the "less useful" coping strategies among females than males.

These differences might be related to differences in cultures, and the tools used to measure different types of coping strategies, or it might be due to the fact that Palestinians have been under occupation for a long period of time which has led to political, social and economic problems that affect peoples' life, especially youth and students.

The findings (table 5-10-2) show that there were significant differences between study branches and the "use of instrumental support", "denial", and "behavioral disengagement" strategies ($P<0.05$) with mean scores higher in the humanities branch students than the scientific branch students ($5.77\pm1.70>5.30\pm1.79$), ($3.92\pm1.54>3.48\pm1.39$), and ($3.63\pm1.43>3.28\pm1.166$) respectively.

A study by Shaheen and Alam (2010) indicated that there was a significant difference between stream of study in using "problem-focused" coping strategies ($P<0.001$) with a mean score higher among sciences students than arts students ($60.45\pm6.54>56.54\pm8.53$) in Aligarh, India. It also showed that there was a significant difference between stream of study in using "avoidance" coping strategies ($P<0.01$) with a mean score higher among arts students than sciences students ($28.99\pm6.08 >26.34\pm5.53$). It found that there was no significant difference between arts and sciences students in using "emotion-focused" coping strategies.

Results indicate that the ("problem-focused" and "emotion-focused") coping strategies have been used more than the "less useful" coping strategies among the humanities branch students than the scientific branch students. It also showed that the "less useful" coping strategies ("venting" and "self-blame") were used more frequently by the scientific branch students.

The findings of this study (table 5-11, 12, 13) illustrate the prevalence of stress, stressors, and coping strategies among students in relation to the time left for the exam.

The result (table 5-11) indicated that there was no significant difference in the prevalence of stress among students in relation to the time left for the exam (*p value 0.379*). Study results from a study performed by Langoski et al. (2015) pointed out that there was a significant difference in the academic trajectory of stress among Brazilian dental students at two different times with a higher rate at the end of the semester (*P value 0.004*). Abu-Ghazaleh et al. (2016) found that there were significant differences in prevalence of psychological distress among the same cohort of dental students at the University of Jordan during their fifth years of study (*P<0.0001*); the mean scores in fifth year were higher than those in first year ($1.8\pm0.5>1.2\pm0.5$). It also found that there were no significant differences in stress levels between gender. Zorah and Sun (2015), in their study among pharmacy students in University of Malaya, showed that the mean scores for Subjective Stress ($53.55\pm7.87>50.76\pm9.09$) and Total Stress ($49.26\pm6.13>48.62\pm6.10$) were higher at the middle of first

semester as compared to the beginning of second semester, with significant differences between them, while, Alawad and Slamah (2014) reported that there was no significant differences with respect to stress level among students in King Abdul-Aziz University in different year levels ($P>0.05$). Also, Niemi and Vainioma (2006) indicated that there were no significant differences in continuity of stress among undergraduate medical students during a six-year medical training in Finland, but there was a consistent increase of stress among students for both sexes.

The study results (table 5-12) show that there were significant differences in (ARS) and (LTRS) ($P<0.05$), with mean scores higher when the time left for the exam was shorter ($2.38\pm.69>2.11\pm.66$), and ($1.74\pm.80>1.61\pm.79$) respectively. These results are nearly identical to study results by Hearon (2015) in Florida state, who showed that there were significant differences in stressors among high school students over time ($P<0.001$). This study also showed that there was significant difference in stress over time due to academic requirements (3.55 ± 0.72 vs. 3.71 ± 0.69).

Different studies have assessed the differences in stressors among students across academic years. Khan et al. (2013) indicated in their study in Islamabad that the mean score of academic stress among universities students at the end of semester was higher than at the beginning of semester ($17.70\pm6.00>17.85\pm5.27$) with no significant difference (P values .87). Also, Zorah and Sun (2015) reported that the biggest source of stress among Malaysian pharmacy students was academic related stress followed by personal life issues, environmental factors and financial issues, and

showed that the sources of stress were similar between the middle of first semester (Time1) as compared to the beginning of second semester (Time2) with no significant differences.

These results indicate that the students complained more from stressors that related to academic and learning issues when the time left for the exam was shorter.

The results (table 5-13) show that there were no significant differences ($P>0.05$) in using "problem-focused" strategy. The mean scores for the "planning" and "active coping" strategies were higher when the time left for the exam was longer ($6.30\pm1.42>6.13\pm1.30$), and ($6.0\pm1.38>5.84\pm1.37$) respectively. It also showed that there were no significant differences ($P>0.05$) in using between strategies within the "emotion-focused" strategy; the mean score for the "religion" strategy was higher when time left for the exam was shorter ($6.12\pm1.69>5.90\pm1.69$), and the mean score in using "positive reframing" strategy was higher when time left for the exam was longer ($6.25\pm1.40>6.09\pm1.38$). It also showed that there was significant difference ($P<0.05$) in using "behavioral disengagement" strategy; the mean score was higher when the time left for the exam was shorter ($3.53\pm1.41>3.26\pm1.29$).

Few studies investigated the differences between coping strategies used among students in relation to time. Hearon (2015) illustrated that there were significant differences in using academic coping strategies by high school students over time ($P<0.01$) in Florida state. It also indicated that

the students tended to use the less productive coping strategies over time, including "substance use" (1.08 ± 0.29 vs. 1.17 ± 0.41), "reducing effort on schoolwork" (1.88 ± 0.73 vs. 2.07 ± 0.75) and "deterioration" (2.71 ± 0.80 vs. 2.88 ± 0.76). Another study in India by Deshpande and Chari (2014) showed that there were no significant differences between coping strategies used by dental and interns' students in relation to different variables such as gender, years of study and living arrangement. It showed that the main coping strategies used by them were "joking with friends and using humor", "seeking out friends for conversation and support", "trying to focus on the things which can be controlled" and "accepting the things which can't be controlled". In addition, Devonport and Lane (2006) indicated that there were no significant differences between the coping strategies used among undergraduate students over time in University of Wolverhampton, United Kingdom.

The results indicate that the "problem-focused" and "emotion-focused" coping strategies were used a "lot" both times. There is a need for additional studies to assess the prevalence of stress, stressors, and coping strategies among secondary students at the time of the Tawjihi exam.

Chapter seven

Conclusion, Recommendation, Limitation

7.1 Conclusion

1) The prevalence rate of stress is high. Almost all students experience stress, (88.3%) of students have different levels of stress with different effects, and (7.5%) of them have too much stress.

2) The prevalence rate of stress among females is higher than males (61.4%>38.6%), and it is higher among the humanities branch students than the scientific branch students (69.2%>30.8%) with no significant differences ($P>0.05$).

3) The main domain of stressors was the (ARS) which caused a moderate level of stress for students, and the mean scores of (ARS) and (Intra RS) were higher among females than males with significant difference ($P<0.05$).

4) The (ARS), (Inter RS), (LTRS), and (GSRS) mean scores were higher among the humanities branch students than the scientific branch students with significant differences ($P<0.05$).

5) The useful ("problem-focused" and "emotion-focused") coping strategies were mostly used by students, and the "less useful" coping strategies were used a "little bit".

6) The useful ("problem-focused" and "emotion-focused") coping strategies have been used more than the ("less useful") coping strategies

among females and the "less useful" coping strategies were used more frequently by males.

7) The useful ("problem-focused" and "emotion-focused") coping strategies have been used more than the ("less useful") coping strategies among the humanities branch students. The "less useful" coping strategies ("venting" and "self-blame") were used more frequently by the scientific branch students.

8) Cultural differences led students to use different coping strategies, the most one used in this study "Religion" which consistent with the Malaysian study, while, the most used by Romania students was the "Planning ".

9) There was no significant difference in the prevalence of stress among Nablus students in relation to the time left before the exam ($P>0.05$).

10) The (ARS) and (LTRS) mean scores were higher when the time left before the exam was shorter with significant differences ($P>0.05$).

11) The "problem-focused" and "emotion-focused" coping strategies were used a "lot" both times with no significant differences ($P>0.05$).

7.2 Recommendation

1) The PMOE must increase the role of psychological and educational counselors in schools to provide psychological support and debriefing for students.

2) The PMOE to develop a plan decrease (ARS) among students in all academic years.

3) The PMOE to redesign the academic system to focus on student capabilities, advancement, and proficiency in areas beyond academics.

4) Encourage students to improve their intrapersonal and interpersonal skills, and develop actual plan to improve the learning and teaching skills among teachers.

5) Direct all students to use "problem-focused" and "emotion-focused" coping strategies and avoid use the "less useful" coping strategies all the time.

6) Further studies are needed to:

➤ Investigate the factors that led to the students being reluctant to request counseling.

➤ Investigate that factors that led male students to use the "less useful" coping strategies.

➤ Investigate the relation between internet addiction and psychological stress among students or adolescents.

➤ Assess the prevalence of stress, stressors and coping strategies among private schools students compared to government schools students.

➤ Assess the prevalence of stress, stressors and coping strategies among general secondary schools students by using qualitative studies.

- Assess the differences between male and female students in relation to stressors and coping strategies from different variables such as socio-economic factors demographic area, and study branches not included in this study.
- Investigate the relationship between (ARS) and academic performance.
- Assess stressors and coping strategies among students at the time of the Tawjihi exam.
- Investigate the factors that led students to use private tutoring.
- Apply the same study among students who applied the new system of Tawjihi exams and make comparison between the results.

7.3 Limitations

- 1) It was difficult to collect data at the time of Tawjihi exam.
- 2) A teachers' strike took place during the data collection period.
- 3) A large study population requires a lot of time, effort and money; therefore, the study population was confined to cities.
- 4) The study was limited to two variables (gender and study branch) due to limited time and resources.
- 5) Qualitative study was not considered.

References

1. Abu-Ghazaleh, S.B., Sonbol, H.N., & Rajab, L.D. (2016). **A longitudinal study of psychological stress among undergraduate dental students at the University of Jordan. BioMed Central Medical Education**, 16(1), 1-6. doi:10.1186/s12909-016-0612-6.
2. Agolla, J.E. (2009). *Occupational stress among police officers: The case of Botswana Police Service. Research Journal of Business Management*, 2(1), 25-35.
3. Agolla, J.E., & Ongori, H. (2009). **An assessment of academic stress among undergraduate students: The case of University of Botswana. Educational Research and Review**, 4(2), 063-070.
4. Ahmed, U., Riaz, A., & Ramzan, M. (2013). *Assessment of stress & stressors: A study on management students. Interdisciplinary Journal of Contemporary Research in Business*, 4(9), 687-699.
5. Alawad, A.A., & Slamah, A.A. (2014). *The prevalence of stress among interior design and furniture students. European Scientific Journal*, 10 (23), 1857-7881.
6. AlGelban, K.S. (2009). **Prevalence of psychological symptoms in Saudi secondary school girls in Abha, Saudi Arabia. Annals of Saudi Medicine**, 29(4), 275-279. doi:10.4103/0256-4947.55308.

7. Arsenio, W.F, & Loria, S. (2014). *Coping with negative emotions: Connections with adolescents' academic performance and stress*. **The Journal of Genetic Psychology: Research and Theory on Human Development**, 175(1), 76-90.
8. Baily, K. (2017). **A brief history of Palestine**. Retrieved 2017, from <http://www.dummies.com/education/history/world-history/a-brief-history-of-palestine/>.
9. Bernstein, D.A., Penner, L.A., Stewart, A.C., & Roy, E.J. (2008). *Psychology* (8th ed.). **New York: Houghton Mifflin Company Boston.**
10. Cao, F. & Su, L. (2006). **Internet addiction among Chinese adolescents: Prevalence and psychological features**. *Child: care, health and development*, 33(3), 275-281.
11. Carroll, L. (2013). **Active coping**. In **Encyclopedia of Behavioral Medicine**. (pp.21-21). New York: Springer. Retrieved 2016, from https://link.springer.com/referenceworkentry/10.1007/978-1-4419-1005-9_1085
12. Carver, C.S. (1997). *You want to measure coping but your protocol's too long: Consider the Brief COPE*. **International Journal of Behavioral Medicine**, 4(1), 92-100.
13. Carver, C.S., & Connor-Smith, J. (2010). **Personality and coping**. **Annual Review of Psychology**, 61(1), 679-704.

14. Carver, C.S., Scheier, M.F., & Weintraub, J.K. (1989). *Assessing coping strategies: A theoretically based approach*. **Journal of Personality and Social Psychology**, 56 (2), 267-283.
15. Campbell, F. (2006). **Occupational stress in the construction industry**. Berkshire, UK: Chartered Institute of Building.
16. Cannon, W. B. (1927). *The James-Lange theory of emotion: A critical examination and an alternative theory*. **American Journal of Psychology**, 39, 10-124.
17. Chen, X. (2004). **Research on middle school students' academic stresses, coping strategies, and coping psychological mechanisms. Doctoral dissertation. Chongqing**: South-west Normal University.
18. Cheng, D., Leong, F.T.L., & Geist, R. (1993). *Cultural differences in psychological distress between Asian and Caucasian American college students*. **Journal of Multicultural Counseling and Development**, 21(3), 182-190.
19. Cherry, k. (2016a). **What is the Cannon-Bard theory?** Retrieved 2016, from <https://www.verywell.com/theories-of-emotion-2795717>
20. Cherry, k. (2016b). **Theories of emotions**. Retrieved 2016, from <https://www.verywell.com/theories-of-emotion-2795717>.

- 21.Chraif , M., & Anitei, M. (2012). **Overload learning, attachment and coping styles predictors of mental and physical health of teenage high school students in Romania. Procedia-Social and Behavioral Sciences**, 69, 1842-846.

- 22.Cocorada, E., & Mihalaucu, V. (2012). **Adolescent coping strategies in secondary school. Procedia-Social and Behavioral Sciences**, 33, 188-192.

- 23.Compas, B.E., Connor-Smith, J.K., Saltzman, H., Thomsen, A.H., & Wadsworth, M.E. (2001). *Coping with stress during childhood and adolescence: Problems, progress, and potential in theory and research. Psychological Bulletin Journal*, 127(1), 87-127.

- 24.Cope. (n.d.). **In Merriam-Webster Online. Retrieved December 30, 2016, from <http://www.merriam-webster.com/medical/cope>.**

- 25.Coping strategies. (n.d). **In Psychology Dictionary Online. Retrieved February 2, 2017, from <http://psychologydictionary.org/coping-strategy/>.**

- 26.Deshpande, A., & Chari, S. (2014). *Perceived sources of stress and coping strategies in dental students and interns. The Journal of Psychology*, 5(2),133-141.

- 27.Devonport, T.J, & Lane, M.L.(2006). **Cognitive appraisal of dissertation. Stress among undergraduate students.** The Psychological Record, 56(2), 259-266.
- 28.Deyreh, E. (2012). **Comparison between high school students in cognitive and affective coping strategies.** Procedia-Social and Behavioral Sciences, 46, 289-293.
- 29.Dore, M. (2005). Child and adolescent mental health. In G. Mallon & P. Hess (Eds.), Child welfare for the twenty-first century: **A handbook of practices, policies, and programs** (pp. 148-172). New York: Columbia University Press.
- 30.Elizabeth, V. (2003, Feb 24). **Concern over high stress levels among students.** The Hindu.
- 31.Everly, G.S., & Lating, J.M. (2002). **A clinical guide to the treatment of the human stress response** (2nd ed.). New York: Kluwer Academic.
- 32.Folkman, S. & Lazarus, R. (1991). **Coping and emotion. In stress and coping** (3red ed). In A. Monta and R. Lazarus (Eds.). New York: Colombia University Press.
- 33.Formica, M.J. (2013, Apr 19). Self-blame: **The ultimate emotional abuse. Psychology Today.** Retrieved 2016, from <https://www.psychologytoday.com/blog/enlightened-living/201304/self-blame-the-ultimate-emotional-abuse>.

34. Frydenberg, E., Lewis, R., Bugalski, K., Cotta, A., McCarthy, C., & Luscombe-Smith, N. (2004). **Prevention is better than cure: Coping skills training for adolescents at school.** *Educational Psychology in Practice*, 20, 117-134.
35. Gentry, L.A., Chung, J.J., Aung, N., Keller, S., Heinrich, K.M., & Maddock, J.E. (2007). *Gender differences in stress and coping among adults living in Hawai'i.* *Californian Journal of Health Promotion*, 5 (2), 89-102.
- a. Goldberg, D. (1978). **Manual of the general health questionnaire.** Windsor: NFER. Retrieved 2016, from http://svc019.wic048p.serverweb.com/ajp/vol_57/4/clin.pdf
36. Gunawan, J. (n.d). **Summary of Lazarus and Folkman's theory of stress, appraisal, and coping.** Retrieved 2016, from https://www.academia.edu/10130778/Summary_of_Lazarus_and_Folkman_Theory.
37. Habeeb, Kh. (2010). *Prevalence of stressors among female medical students.* *Journal of Taibah University Medical Sciences*, 5 (2), 110-119.
38. Hamaideh, S.H. (2011). *Stressors and reactions to stressors among University students.* *International Journal of Social Psychiatry*, 57(1), 69-80. doi: 10.1177/0020764010348442.

- 39.Hampel, P., & Petermann, F. (2006). *Perceived stress, coping, and adjustment in adolescents*. **Journal of Adolescent Health**, 38(4), 409-415.
- 40.Hashim, I.M.H. (2007). *Stress, coping and support in the adolescent years*. **Kajian Malays: Journal of Malaysian studies**; 25(1), 97-115.
- 41.Hearon, B.V. (2015). Stress and coping in high school students in accelerated academic curricula: **Developmental trends and relationships with student success**. Graduate Theses and Dissertations. Retrieved 2016, from <http://scholarcommons.usf.edu/etd/5495>.
- 42.Holahan, C. J., & Moos, R. H. (1987). Risk, resistance, and psychological distress: *A longitudinal analysis with adults and children*. **Journal of Abnormal Psychology**, 96(1), 3-13.
- 43.Hou, Z., A., Shinde, J., S., & Willems, J. (2013). *Academic stress in accounting students: An empirical study*. **Asian Journal of Accounting and Governance**, 4, 1-10.
- 44.Hussain, A., Kumar, A., & Husain, A. (2008). *Academic stress and adjustment among high school students*. **Journal of the Indian Academy of Applied Psychology**, 34(9), 70-73.
- 45.James, W. (1884). **What is an Emotion?** *Mind*, 9(34), 188-205.
- 46.Hussien, T., & Hussien, S. (2006). **Strategies for coping educational and psychological stress**. Amman: Dar Alfiker.

47. Kaffenberger, C., & Seligman, L. (2007). **Helping students with mental and emotional disorders.** In B. T. Erford (ed.) *Transforming the school counseling profession* (2nd ed.) (pp. 351-383). Upper Saddle River, NJ: Pearson.
48. Khan, M.j., Altaf, S., & Kausar, H. (2013). *Effect of perceived academic stress on students' performance.* **FWU Journal of Social Sciences**, 7 (2), 146-151.
49. Lal, K. (2014). *Academic stress among adolescent in relation to intelligence and demographic factor.* **American International Journal of Research in Humanities, Arts and Social Sciences**, 5(1), 123-129.
50. Langoski, J.E., Klipan, L.B., Bordin, D., Ferracioli, M.U., Pinto, M.H.B., & Fadel, C.B. (2015). **Stress among Brazilian dental students in different periods: Prevalence and perceptions.** *Psychology*, 6, 297-304.
51. Lazarus, R.S. & Cohen, J.B. (1977). **Environmental stress. In human behaviour and environment** (Volume 2). In I. Altman and J.F. Wohlwill (Eds.). New York: Plenum.
52. Lazarus, R. S. (1966). **Psychological stress and the coping processes.** New York: McGraw-Hill.
53. Lazarus, R.S., & Folkman, S. (1984). **Stress, appraisal, and coping.** New York: Springer.

54. Lehlou, I. (2012). **Positive stress, negative stress**. Retrieved 2016, from <https://adereoeducation.wordpress.com/2012/05/30/positive-stress-negative-stress/>.
55. Lin, H., & Yusoff, M. (2013). Psychological distress, ***sources of stress and coping strategy in high school students***. **International Medical Journal**, 20 (6), 1-6.
56. Litman A.J. (2006). The COPE inventory: **Dimensionality and relationships with approach-and avoidance-motives and positive and negative traits**. *Personality and Individual Differences*, 41(2), 273-284.
57. MacCann, C., Lipnevich, A.A., Burrus, J., & Roberts, R.D., (2012). **The best years of our lives? Coping with stress predicts school grades, life satisfaction, and feelings about high school**. *Learning and Individual Differences*, 22(2), 235-241.
58. Matthieu, M.M. & Ivanoff, A. (2006). **Using stress, appraisal, and coping theories in clinical practice: Assessments of coping strategies after disasters**. *Brief Treatment and Crisis Intervention*, 6(4), 337-348.
 - a. doi:10.1093/brief-treatment/mhl009.
59. Matud, M.P. (2004). **Gender difference in stress and coping styles**. *Personality Individual Difference*, 37(7), 1401-1415.
60. McLeod, S.A. (2009). **Emotion focused coping**. Retrieved 2016, from www.simplypsychology.org/stress-management.html#em.

61. McLeod, S.A. (2010). **What is the stress response.** Retrieved 2016, from www.simplypsychology.org/stress-biology.html.
62. Mikolajczyk, R. T., Brzoska, P., Maier, C., Ottova, V., Meier, S., Dudziak, U., Ilieva, S., & El Ansari, W. (2008). **Factors associated with self-rated health status in university students: A cross-sectional study in three European countries.** *Public Health*, 8, 215-225. doi: 10.1186/1471-2458-8-215.
63. Mi-Ran, K., & Su-Jeong, H. (2015). **Nursing students' emotional intelligences and coping strategies.** *Advanced Science and Technology Letters*, 88, 53-56.
64. Myers, D.G. (2005). **Stress and health: Exploring Psychology** (6th ed.). New York: Worth Publishers.
65. Nes, L.S., & Segerstrom, S.C. (2006). **Dispositional optimism and coping: A meta-analytic review.** *Personality and Social Psychology Review*, 10(3), 235-351.
66. Niemi, P.M., & Vainioma, P.T. (2006). **Medical students' distress-quality, continuity and gender differences during a six-year medical programme,** *Medical Teacher*, 28 (2), 136-141.
67. Ongori, H., & Agolla, J.E. (2008). ***Occupational stress in organisations and its effects on organisational performance***, *Journal of Managerial Psychology*, 8(3), 123-135.
68. Palestinian Central Bureau of Statistics. (PCBS). (2013). **Annual report. Palestine children—issues and statistics.** Child Statistics Series (No. 16). Ramallah-Palestine. Retrieved 2016, from <http://www.pcbs.gov.ps/Downloads/book1971.pdf>.

69. Palestinian Central Bureau of Statistics (PCBS). (2014/2015). **Palestinian Central Bureau of Statistics**. Retrieved 2016, from <http://www.pcbs.gov.ps/site/507/default.aspx>.
70. Palestinian Ministry of Education. (2015/2016). **Education system in Palestine**. Retrieved 2016, from <http://www.mohe.pna.ps/>.
71. **Palestinian National Authority**. (n.d), In Wikipedia. Retrieved April 18, 2017, from https://en.wikipedia.org/wiki/Palestinian_National_Authority.
72. Pargament, K. I. (2016). **Religion and coping with trauma**. In **Encyclopedia of Wikipedia**. Retrieved 2016, from https://en.wikipedia.org/wiki/Religion_and_coping_with_trauma.
73. Passer, M.W., & Smith, R.E. (2007) **Psychology: The science of the mind and behavior (3rd ed.)**. New York: Mc Graw-Hill companies.
74. Prabu, S. (2015). *A study on academic stress among higher secondary students*. **International Journal of Humanities and Social Science Invention**, 4(10), 63-68.
75. Psychosocial stressors. (n.d). In **Psychology Dictionary Online**. Retrieved February 4, 2016, from <http://psychologydictionary.org/psychosocial-stressor/>.
76. Piko, B. (2001). **Gender differences and similarities in adolescents' ways of coping**. *The Psychological Record*, 51(2), 223-235.

77. Raheel, H. (2014). *Coping strategies for stress used by adolescent girls*. **Pakistan Journal of Medical Sciences**, 30(5), 958-962.
doi:<http://dx.doi.org/10.12669/pjms.305.5014>.
78. Rahimi, B., Baetz, M., Bowen, R., & Balbuena, L. (2014). *Resilience, stress, and coping among Canadian medical students*. **Canadian Medical Education Journal**, 5(1), 5-12.
79. Robinson, L., Smith, M., & Segal, R. (2015). **Stress management**. Retrieved 2016, from <http://www.helpguide.org/articles/stress/stress-management.htm>.
80. Saffari, M., Ghofranipour, F., Mahmoudi, M., & Montazeri, A. (2011). *Stress, coping strategies and related factors in a sample of Iranian adolescents*. **Iran Red Crescent Medical Journal**, 13(9), 641-646.
81. Salovey, P., & Mayer, J. D. (1990). **Emotional intelligence. Imagination, Cognition and Personality**, 9, 185-211.
82. Sani, M., Mahfouz, M.S., Bani, I., Alsomily, A.H., Alagi, D., & Alsomily, N.Y., Madkhaly, .FM., Madkhali, R., Hakami, A.A.M., Hakami, A., Shaqraa Shaabi, Al Ebrahim, S., Mashiakhi, S.H., Ageel, B., & Asiri, S. (2012). *Prevalence of stress among medical students in Jizan University, Kingdom of Saudi Arabia*. **Gulf Medical Journal**, 1(1), 19-25.
83. Schachter, S., & Singer, J. E. (1962) Cognitive, social and physiological determinants of emotional states. **Psychological Review**, 69(5), 379-399.

84. Schuster, M., Hammit, E., Moore, D. (2003). **A theoretical model to measure the appraisal and coping response to hassles in outdoor recreation settings.** *Leisure Science*, 25 (2), 277-299.
85. Shaheen, F., & Alam, M., S. (2010). *Psychological distress and its relation to attributional styles and coping strategies among adolescents.* *Journal of the Indian Academy of Applied Psychology*, 36(2), 231-238.
86. Shahmohammadia, N. (2011). **Students coping with stress at high school level particularly at 11th & 12th grade.** *Procedia - Social and Behavioral Sciences*, 30(1), 395-401.
- a. Shankar, P.R., Balasubramaniam, R., Ramireddy, R., Diamante, P., Barton, B., & Dwivedi, N.R. (2014). *Stress and coping strategies among premedical and undergraduate basic science medical students in a Caribbean medical school.* *Education in Medicine Journal*, 6(4), 48-56. doi:10.5959/eimj.v6i4.287 www.eduimed.com.
87. Silova, I., & Bray, M. (2006). **Education in a hidden marketplace: monitoring of private tutoring.** Overview and country reports (pp. 13-15). New York: Open Society Institute.
88. Sincero, S.M. (2012a). **Knowing your stressors.** Retrieved Feb 3, 2016, from Explorable.com: <https://explorable.com/known-your-stressors>.

89. Sincero, S.M. (2012b). **What is stress?** Retrieved Jan 15, 2016, from Explorable.com: <https://explorable.com/what-is-stress>.
90. Sincero, S.M. (2012c). **Psychological theories of stress.** Retrieved Jan 31, 2017, from Explorable.com: <https://explorable.com/psychological-theories-of-stress>.
91. Sincero, S.M. (2012d). **Stress and coping mechanisms.** Retrieved Feb 4, 2016, from Explorable.com: <https://explorable.com/stress-and-coping-mechanisms>.
92. Stress [Def. 1]. (n.d.). **In Merriam-Webster Online.** Retrieved December 30, 2016, from <http://www.merriam-webster.com/dictionary/stress>.
93. Stress reaction. (n.d). **In Psychology Dictionary Online.** Retrieved February 4, 2016, from <http://psychologydictionary.org/stress-reaction/>.
94. Taylor, S. (1998). Coping strategies. Psychosocial Notebook. Retrieved 2016, from <http://www.macses.ucsf.edu/research/psychosocial/coping.php>.
95. Thawabieh, A.M., & Qaisy. L.M., (2012). *Assessing stress among university students.* **American International Journal of Contemporary Research**, 2(2), 110-116.

96. Thoits, P.A. (1995). *Stress, coping, and social support processes: Where are we? What next?* **Journal of Health and Social Behavior**, 35, 53-79. doi:10.2307/2626957.
97. Wahab, S., Rahman, F.N.A., Hasan, W., Hafiz, W.M., Zamani, I.Z., Arbaiei, N.C, Khor, S.L., & Nawi, A.M. (2013). **Stressors in secondary boarding school students: Association with stress, anxiety and depressive symptoms.** *Asia-Pacific Psychiatry*, 5 (SUPPL. 1), 82-89.
98. Watode, B.K., Kishore, J., & Kohli, C. (2015). *Prevalence of stress among school adolescents in Delhi.* **Indian Journal of Youth and Adolescent Health**, 2(4), 2349-2880.
99. Weightman, J. (1999). **Introducing organizational behavior.** **London: Longman.**
100. Williams, Y. (2016a). **What is a psychological stressor? - Definition & examples.** Retrieved 2016, from <http://study.com/academy/lesson/what-is-a-psychological-stressor-definition-examples-quiz.html#lesson>.
101. Williams, Y. (2016b). **Instrumental support: Definition & examples.** Retrieved February 20, 2016, from <http://study.com/academy/lesson/instrumental-support-definition-examples-quiz.html>

102. Wills, T.A., & Shiffman, S. (1985). Coping and substance use: **A conceptual framework**. In S. Shiffman and T.A. Wills (Eds.), Coping and substance use. San Diego, CA: Academic Press, (pp.3-24).
103. World Health Report. (2001). **Mental health: new understanding, new hope. Geneva: World Health Organization**. Retrieved 2016, from <http://www.who.int/whr/2001/en>.
104. Xiao, J. (2013). Academic stress, test anxiety, **and performance in a Chinese high school sample: The moderating effects of coping strategies and perceived social support**. Counseling and Psychological Service Dissertations. Paper 88.
105. Yusoff, M.S.B. (2011). *The validity and reliability of secondary school stressor questionnaire (3SQ) in identifying stressor among adolescents in secondary school*. **International Medical Journal**, 18 (2), 99-105.
106. Yusoff, M.S.B, Hamid, A., Rosli, N., Zakaria, N.A, Che Rameli, N.A, Abdul Rahman. N, Abdul Rahim, A., & Abdul Rahman, A. (2011a). *Prevalence of stress, stressors and coping strategies among secondary school students in Kota Bharu, Kelantan, Malaysia*. **International Journal of Students Research**, 1(1), 23-28.
107. Yusoff, M.S.B., Yen Yee, L., Heng Wei, L., Hon Meng, L., Xue Bin, L., Chin Siong, C., & Abdul Rahmin, A.F. (2011b). *A study on stress, stressors and coping strategies among Malaysian medical students*. **International Journal of Students' research**, 1(2), 45-50. doi: 10.5549/IJSR.1.2.45-50.

108. Zeidner, M., & Endler, N. S. (1996). **Handbook of coping: Theory, research, applications**. New York: Wiley.
109. Zoriah, A. & Sun, S.H. (2015). *Assessing stress among undergraduate pharmacy students in University of Malaya*. **Indian Journal of Pharmaceutical Education and Research**, 49 (2), 99-105.

(Arabic References) المراجع العربية

- 1- الحباشنة، ميسر خليل وعز الدين النعيمي، (2007)، استطلاع حول ظاهرة الدروس الخصوصية/ الاسباب والاثار التربوية المترتبة عليها. مجلة رسالة المعلم، (3) 45:

57-55

(Annex 1):Questionnaire In Arabic

الاستبانة



جامعة النجاح الوطنية

كلية الطب و علوم الصحة

التخصص/ماجستير تمرير الصحة النفسية و المجتمعية

تقوم الطالبة "خلود محمد هاشم هاشم منصور" بإجراء دراسة تهدف الى التعرف على "الضغوطات و طرق التأقلم معها لدى طلبة الثانوية العامة في المدارس الحكومية في شمال الضفة الغربية" و ذلك استكمالاً لمتطلبات الحصول على درجة الماجستير في تخصص تمرير الصحة النفسية و المجتمعية. لذا نرجو من الطلاب الكرام قراءة فقرات الاستبانة و الاجابة عن كل فقرة حسب ما ترونه مناسباً علماً ان المعلومات الواردة في الاستبانة سوف تستخدم لأغراض البحث العلمي فقط وستحاط بالسرية التامة .

شكراً على حسن تعاونكم

i. البيانات الديمغرافية والاجتماعية:

الرجاء وضع اشارة (X) في المربع حسب ما يتناسب مع وضعك.

- (1) مكان السكن : 1. نابلس ☐ جنين ☐ طولكرم ☐ 4. قفيلية ☐
- (2) اسم المدرسة :
- (3) الجنس : 1. ذكر ☐ 2. أنثى ☐
- (4) العمر :
- (5) الدين : 1. مسلم ☐ 2. مسيحي ☐ 3. غير ذلك ☐
- (6) الفرع الدراسي : 1. علمي ☐ 2. العلوم الإنسانية (أدبي) ☐
- (7) المعدل النهائي في الصف الحادي عشر :

50% - 60.9%

61% - 70.9%

71% - 80.9%

81% - 90.9%

91% - فما فوق

- (8) هل تأخذ/ي دروس خصوصية : 1. نعم ☐ 2. لا ☐

إذا كانت الإجابة (نعم) (ممكن اختيار أكثر من بند واحد)

أ- دروس خصوصية بالمنزل مع مدرس خاص.

ب- دروس خصوصية بالمنزل مع مجموعه.

ت- دروس خصوصية بمركز خاص.

- (9) كيف تقضي وقت فراغك ؟ (ممكن اختيار أكثر من بند واحد)

1. النوم (غفوة او قيلولة).

2. زيارات عائلية.

3. الخروج مع الأصدقاء .

4. مشاهدة التلفاز .

5. استخدام الانترنت وسائل التواصل الاجتماعي مثل الفيس بوك.

6. التسوق.

7. ممارسة الرياضة.

- (10) هل تقوم/ي بالتوجه للمرشد النفسي او التربوي في مدرستك للاستشارة واخذ النصيحة.

1. احيانا ☐ 2. دائما ☐ 3. ابدا ☐

ii. انتشار الضغط :

الرجاء قراءة هذه الفقرة التي تتعلق بتعريف الضغط ومن ثم الإجابة عن السؤال الذي يليها بوضع إشارة (X) في المكان المخصص لذلك.

الضغط : هو عبارة عن ردة فعل لجسم الشخص وعقله لشيء يحدث تغيراً في التوازن . يؤثر الضغط في عدة مجالات في الصحة العامة مثل عدم القدرة على التركيز، فقدان النوم بسبب القلق، عدم القدرة على اتخاذ القرارات، الشعور الدائم بالإجهاد، وعدم القدرة على التغلب على الصعوبات، فقدان القدرة على الاستمتاع بالنشاطات اليومية، عدم إمكانية مواجهة المشاكل ، الشعور بالتعاسة والإحباط، و فقدان الثقة بالنفس .

إلى أي مدى تشعر بأنك/ي تحت الضغط: الرجاء وضع إشارة (X) في المربع حسب ما يتناسب مع وضعك.

لا أشعر بالضغط.	<input type="checkbox"/>
أشعر بالضغط ولكن لا يؤثر على حياتي.	<input type="checkbox"/>
أشعر بالضغط و يؤثر على حياتي.	<input type="checkbox"/>
أشعر بضغط كبير .	<input type="checkbox"/>

iii. الضغوطات لدى طلبة المدارس الثانوية العامة:

يتكون هذا المقياس من (44) فقرة تصف الضغوطات في حياتك المدرسية والتي تتكون من عدة مصادر .

الرجاء وضع إشارة (X) لكل فقرة تصف شعورك بمقدار ما تتعرض له من ضغوطات.

الرقم	الفقرة	لا تسبب أي ضغوطات مطلقاً	تسبب ضغوطات خفيفة	تسبب ضغوطات متوسطة	تسبب ضغوطات كبيرة	تسبب ضغوطات كبيرة جداً
1.	الامتحانات.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	جدول لمراجعة الدروس التي اخذتها (خاص بالطالب).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	محتويات تعليمية كثيرة.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	صعوبة فهم المقررات أو المناهج.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	الحصول على علامات قليلة أو سيئة.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	الخضوع لاختبارات متكررة.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	قلة الوقت الكافي لمراجعة الدروس.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	التوقعات الشخصية او الذاتية عالية.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

					9. البيئة التعليمية التنافسية.
					10. عدم القدرة على الاجابة على أسئلة المدرسين.
					11. الواجبات الكثيرة التي يطلبها المدرسين.
					12. المشاركة في مناقشة جماعية.
					13. المشاركة في العروض التقديمية الصفية.
					14. التوقعات العالية من الآخرين.
					15. الشعور بعدم الكفاءة.
					16. نظام تقييم الدرجات غير العادل.
					17. جدول الحصص المدرسية مضغوط جدا.
					18. قلة وقت الفراغ الذي تقضيه مع العائلة والأصدقاء.
					19. قلة المهارات التعليمية لدى المدرسين.
					20. المواد المقررة غير كافية.
					21. الإجابة عن أسئلة الأصدقاء.
					22. الواجبات التي يطلبها المدرسين غير مناسبة.
					23. الحديث عن المشاكل الشخصية مع الاقران او الزملاء.
					24. الخشية من عدم القدرة على الحصول على مقعد جامعي.
					25. الصراع مع الأقران.
					26. قلة وجود الدافعية للتعلم.
					27. التعرض للإساءة اللفظية أو الجسدية من قبل الأقران.
					28. التعرض للإساءة اللفظية أو الجسدية من قبل المعلمين.
					29. التعرض للإساءة اللفظية أو الجسدية من قبل العائلة.
					30. الصراع مع العائلة.
					31. الصراع مع المعلمين.

					32. عدم الرغبة بالذهاب إلى المدرسة.
					33. رغبة العائلة في مواصلة الدراسة.
					34. قلة التوجيه والإشراف من قبل المعلمين
					35. قلة وجود التغذية الراجعة من قبل المعلم حول أدائك الدراسي.
					36. لست متيقنا أو متأكد من ما هو متوقع مني.
					37. قلة الثناء على أدائك.
					38. رغبة العائلة في ترك المدرسة.
					39. المقاطعة أو المداخلات من قبل الآخرين أثناء الدراسة.
					40. الدراسة من أجل إرضاء العائلة.
					41. الازدحام في غرفة الصف.
					42. التفكير السلبي تجاه نفسي.
					43. الحضور متأخرا الى المدرسة.
					44. أن تعطي إجابة خاطئة في الصف.

iv. طرق التأقلم مع الضغوطات:

يتكون هذا المقياس من (28) فقرة تصف طرق التأقلم مع الضغوطات في حياتك المدرسية.


الرجاء وضع علامة (X) لكل فقرة تصف كيفية طرق التأقلم لديك.

الرقم	الفقرة.	لا أفعل ذلك مطلقاً.	أفعل ذلك بصورة بسيطة.	أفعل ذلك بصورة متوسطة.	أفعل ذلك بصورة كبيرة.
1.	أقوم ببعض الأعمال والنشاطات وذلك بهدف إبعاد تفكيري عن أمور معينة.				
2.	أركز جهودي في عمل شيء يتعلق بالموقف الذي أنا به				
3.	أحدث نفسي أن هذا الموقف ليس حقيقياً.				
4.	أقوم بتدخين السجائر أو الأرجلة لك أشعر بتحسن.				
5.	أتلقي دعم عاطفي من الآخرين.				
6.	أتوقف عن محاولة التعامل مع الموقف.				
7.	أقوم بتصرف ما وذلك من أجل جعل الموقف أفضل.				
8.	أقوم بإنكار و عدم تصديق ما حدث.				
9.	أحدث نفسي بأمور تساعدني على إبعاد المشاعر السيئة				
10.	أحصل على نصائح ومساندة الآخرين.				
11.	أقوم بتدخين السجائر أو الأرجلة لتساعدني على تخطي الضغط.				
12.	أحاول رؤية الأمر من زاوية أخرى ولذلك لجعله أكثر ايجابية				
13.	أنتقد نفسي .				
14.	أحاول التوصل على استراتيجية أو خطة حول ما يجب عمله.				
15.	أحاول الحصول على راحة والفهم من قبل الآخرين				
16.	أتوقف عن التأقلم مع الموقف				
17.	أبحث أو أفكر عن شيء جيد في ما يحدث				

18.	أحاول إبداء بعض النكت حول الموقف.			
19.	أقوم بعمل أمور تقلل من التفكير في الموقف مثل الذهاب الى السينما، مشاهدة التلفاز، القراءة، أحلام اليقظة، النوم، والتسوق.			
20.	أقبل حقيقة ما حدث.			
21.	أقوم بالتعبير عن مشاعري السلبية.			
22.	أحاول العثور على الراحة في معتقداتي الدينية و الروحانية.			
23.	أحاول الحصول على نصيحة الآخرين ودعمهم.			
24.	أتعلم التعايش مع الموقف.			
25.	أفكر ملياً في الخطوات التي يجب علي أن أتبعها.			
26.	ألوم نفسي على ما حدث.			
27.	أقوم بالصلاة والتأمل.			
28.	أصنع بعض الأمور المضحكة في الموقف .			

128
Annex 2

٢٠١٦/١/٢١ Outlook.com - mns-khulud@hotmail.com

 Charles S. Carver 1/12/16
To: khulud mansor

that's fine. good luck in your work

Charles S. Carver
Department of Psychology
University of Miami
Coral Gables FL 33124-0751

305-284-2817
ccarver@miami.edu
<http://www.psy.miami.edu/faculty/ccarver/>

On Jan 12, 2016, at 2:55 PM, khulud mansor <mns-khulud@hotmail.com> wrote:

Hellow...

My name khulud Mohammed Hashem Hashem Mansor..

I am a student at An Najah National University in Palestine/ North West Bank

I study in the postgraduate program/community mental health of nursing.

I am doing scientific research; the topic of my study is Stressors and Coping Strategies among General Secondary Students in Governmental Schools in North West Bank

On 05/29/2015, You gave me approval to use (The Brief Coping Orientation of Problem Experienced) in my research.

I want to ask you regarding to item of Substance use (q4 and q11)...

(Q4) I've been using alcohol or other drugs to make myself feel better. (Q11) I've been using alcohol or other drugs to help me get through it.....

It will be replaced as...

I've been using smoking or hookah to make myself feel better.

I've been using smoking or hookah to help me get through it.

In my country, the prevalence of cigarette smoking and hookah is high and more than using alcohol or other drugs, as culturally use alcohol or other drugs is not acceptable as smoking in Palestine.

Thank you very much

<https://bay172.mail.live.com/?tid=cmhAXNr2-55RGWf9idZ18ltg2&fid=flinbox> 1/1

An - Najah
National University
Faculty of Medicine & Health Sciences
Department of Graduate Studies

بسم الله الرحمن الرحيم



جامعة النجاح
الوطنية
كلية الطب وعلوم الصحة
دائرة الدراسات العليا

IRB Approval letter

Study title:

Stressors and Coping Strategies among Secondary School Students in Governmental Schools in the North West Bank

Submitted by:

khulud mansor

Date Reviewed:


May 24, 2015

Date approved:

Jun 11, 2015

Your study titled: "Stressors and Coping Strategies among Secondary School Students in Governmental Schools in the North West Bank" with archived number 49/May/2015 , Was reviewed by An-Najah National University IRB committee & approved on Jun 11, 2015 .

Hasan Fitian , MD


IRB Committee Chairman,
An-Najah National University

State of Palestine
Ministry of Education & Higher Education
Directorate General Of General Education



دولة فلسطين

وزارة التربية والتعليم العالي
الإدارة العامة للتعليم العام

التاريخ: ٨٠ / ٨ / ٢٠١٥ م

الرقم: و/٢٦/٢٠١٥

السيد د. خليل عيسى المحترم
نائب عميد كلية الطب وعقود الصحة/ جامعة النجاح الوطنية
تحية طيبة وبعد،،،

الموضوع: تسهيل المهمة

الإشارة: كتابكم المؤرخ في 2015/10/4 م

الدرجة المنوي الحصول عليها: □ الدكتوراة □ الماجستير □ مشروع تخرج □ بحث خاص

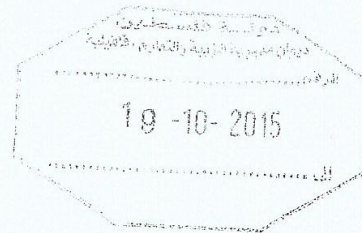
لا مانع من قيام الطالبة "خلود" محمد هاشم" هاشم منصور" بأجراء دراستها للميدانية بعنوان "الضغوطات وطرق التأقلم معها لدى طلبة الثانوية العامة في المدارس الحكومية" وتوزيع الإمتحانات المعدة لهذه الغاية على طلبة الصف المذكور، في مدارس مديريات التربية والتعليم (نابلس، وقلقيلية، وجنين، وطولكرم)، وذلك بعد التنسيق المسبق مع مديري التربية والتعليم فيها، على أن لا يؤثر ذلك على سير العملية التعليمية .
راجين تزويدنا بنسخة من نتائج الدراسة.

مع الاحترام،،،

خلود داود ناصر

خلود ناصر

مدير عام التعليم العام



نسخة/ الإدارة العامة للتخطيط التربوي المحترمين
نسخة/ الأخوة مديري التربية والتعليم المحترمين
(نابلس، وقلقيلية، وجنين، وطولكرم)
الرجاء تسهيل المهمة

نسخة / هـ

٤٠٥
خلود ناصر

Ramallah, P.O.Box (576) Ramallah, P.O.Box (576) Fax: (+970-2-969385) Tel: (+970-2-969-385)

131
Annex 5

2016/1/21

Outlook.com - mns-khulud@hotmail.com



Muhamad Saiful Bahri Yusoff (msaiful_bahri@usm.my) Add to contacts

To: Mohammed M. H. Hajhamad Cc: mns-khulud@hotmail.com

5 attachments (total 3.4 MB)

Outlook.com Active View



2015 CFA 3SQ v2.p...



ASEAN - Stress, Str...



Validity of 3SQ.pdf



3SQ scoring metho...



3SQ bilingual.docx

Download all as zip

Save all to OneDrive

Dear Sir,

Here are several documents related to 3SQ for your research purpose.

I wish you all the best in your scholarly activities.

Regards,

Dr Muhamad Saiful Bahri Yusoff,
MD, MScMED, PhD
Medical Education Department
School of Medical Sciences
Universiti Sains Malaysia
email: msaiful_bahri@usm.my
phone: +6097676553/6552
fax: +6097653370
website:

www.eduimed.com

www.saifulbahri.com

[http://www.researchgate.net/profile/Muhamad Saiful Bahri Yusoff/](http://www.researchgate.net/profile/Muhamad_Saiful_Bahri_Yusoff/)

<http://scholar.google.com.my/citations?user=Io8KzKAAAAAJ&hl=en>

Scopus ID: 35231876900

ResearcherID (ISI): H-3863-2011

<http://www.researcherid.com/rid/H-3863-2011>

https://bay172.mail.live.com/?tid=cmy5YO5gy15RGTO9ldZ1x5zg2&fid=flviOu_oSyp0qHgyhPJEaOFg2

1/3



khulud mansor

Categories

Move to

Sweep

Junk

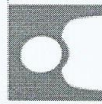
Delete

Reply

New

Search Archive

Re:



Charles S. Carver (ccarver@miami.edu) Add to contacts 5/29/15

To: khulud mansor

Folders

Inbox

Archive

Junk

Drafts 60

Sent

Deleted

New folder

I apologize for this automated reply. All measures I have developed are available for research and teaching applications without charge and without need to request permission; we ask only that you cite their source in any report that results. This also means please do not ask me to send you a letter authorizing the use of a scale, because this message is all I am going to send. Information concerning the measure you are asking about can be found at the website below. I think most of your questions will be answered there. If I know for sure that there is a translation of a scale published in a language other than English, that information can be found there. If no information is there about the language of your interest, that means I do not know of a published translation. You are free to do your own. If questions remain, do not hesitate to contact me. Good luck in your work. <http://www.psy.miami.edu/faculty/ccarver/CCscales.html>

Charles S. Carver
Department of Psychology
University of Miami
Coral Gables FL 33124

Fellow, Center for Advanced Study in the Behavioral Sciences
Stanford University

305-284-2817

ccarver@miami.edu

© 2015 Microsoft Terms Privacy & cookies Developers English (United States)

(Annex 7)

بسم الله الرحمن الرحيم

جامعة النجاح الوطنية



استمارة الموافقة على المشاركة بالبحث

أقر أنا ولي أمر الطالب/ة.....بأنني اطلعت على بيان مفصل عن
البحث المقدم من الطالبة:

(خلود محمد هاشم منصور).

في كلية التمريض-ماجستير الصحة النفسية في جامعة النجاح الوطنية.
وأوافق طواعية على مشاركة ابني /ابنتي في هذا البحث الذي يهدف الى التعرف على "الضغوطات
وطرق التأقلم معها لدى طلبة الثانوية العامة في المدارس الحكومية في شمال الضفة الغربية".
وانه تم إبلاغي أن المشاركة في البحث هي من خلال تعبئة الاستبيان المرفق فقط ، وانه لا يترتب
على عدم موافقتي على الاستمرار في المشاركة في البحث أي مضرة لابني/لابنتي.
مع العلم بأن المعلومات المأخوذة من الطلاب سوف تعامل بسرية تامة ولن تستخدم لغرض آخر
غير البحث العلمي.
كذلك يمكن للطالب/ة الانسحاب بأي وقت من المشاركة في الدراسة.

اسم المشارك/ة:

اسم الباحث : خلود محمد هاشم منصور

العنوان :

العنوان : جامعة النجاح الوطنية

التاريخ :

التاريخ :

التوقيع :

التوقيع :

Questionnaire in English Language

i. Socio-demographic data:

Please put the mark (x) as appropriate to your situation:

- 1) City : 1. Nablus ☐ 2. Jenin ☐ 3. Tulkarm ☐ Qalqilya ☐
- 2) Name of school : -----
- 3) Gender: 1. Male ☐ 2. Female ☐
- 4) Age : -----
- 5) Religion : 1. Muslim ☐ 2. Christen ☐ 3. Other ☐
- 6) Study branch: 1. Scientific branch ☐ 2. Humanities branch ☐
- 7) The final average in 11th grade :
 - ☐ 1. 50%-60.9%
 - ☐ 2. 61% -70.9%
 - ☐ 3. 71% -80.9%
 - ☐ 4. 81% -90.9%
 - ☐ 5. 91% - more than
- 8) **Do you use additional private tutoring:**
 1. Yes ☐ 2. No ☐

If your answer (Yes): (**You can choose more than one item**).

- ☐ A. Lessons at home with special teacher.
- ☐ B. Lessons with at home with group.
- ☐ C. Lessons with at a special center.

9) How do you spend your free time (You can choose more than one item)?

- ☐ 1. Sleeping (nap).
- ☐ 2. Family visits.
- ☐ 3. Going out with friends.
- ☐ 4. Watching T.V.
- ☐ 5. Using the internet and social media like face book.
- ☐ 6. Shopping.
- ☐ 7. Practicing sports.

10) Do you go to psychological and educational counselor in your school to receive counseling and advice?

1. Sometimes ☐ 2. Always ☐ 3. Never ☐

ii. Prevalence of stress:

Please read this paragraph relating to the definition of **stress** and then answer the question that followed put the mark (X) in the appropriate place.

Stress is the reaction of one's body and mind to something that causes a change in the balance of life (Myers, 2005). Stress affects general health such as being unable to concentrate; Loss of sleep over worry; Being incapable of making decisions; Feeling constantly under strain; Feeling unable to overcome difficulties; Unable to enjoy day-to-day activities; Unable to face problems; Feeling unhappy and depressed, and Losing confidence (Goldberg, 1978).

To what extent do you feel you are under stress?

- ☐ 1. I do not feel any stress.
- ☐ 2. I have little bit of stress, but it does not affect my general functioning.
- ☐ 3. I have stress that affect my general functioning
- ☐ 4. I have too much stress.

iii. The Secondary School Stressor Questionnaire (3SQ):

This scale consists of (44) items describing the stress in your school life from the various sources. Please put the mark (X) for each paragraph describing how you felt.

No.	Statement	causing no stress at all	causing mild stress	causing moderate stress	causing high stress	causing severe stress
1.	Examination					
2.	Getting behind revision schedule					
3.	Too many content to be learnt					
4.	Difficulties in understanding content that have been learnt					
5.	Getting poor marks					
6.	Tests are too frequent					
7.	Lack of time to do revision					
8.	High self-expectation					

9.	Competitive learning environment.					
10.	Unable to answer questions from teachers					
11.	Too many assignments given by teachers					
12.	Participant in group discussion					
13.	Participant in class presentation					
14.	High expectation imposed by others					
15.	Feeling of incompetence					
16.	Unfair assessment grading system					
17.	Learning schedule are too packed					
18.	Lack of free time with family and friends					
19.	Teachers lack of teaching skills					
20.	Insufficient reading material					
21.	Answering friend's question					
22.	Inappropriate assignments given by teachers					
23.	Talking personal problems with peers					
24.	Afraid of the possibility not getting place in any university					
25.	Conflict with peers					
26.	Lack of motivation to learn					
27.	Verbal or physical abuse done by peers					
28.	Verbal or physical abuse done by teachers					

29.	Verbal or physical abuse done by family					
30.	Conflict with family					
31.	Conflict with teachers					
32.	Unwillingness to go to school					
33.	Family desire to continue schooling					
34.	Lack of guidance and supervision from teachers					
35.	Lack of feedback from teacher					
36.	Uncertainty of what are expected from me					
37.	Lack of recognition to work done					
38.	Family desire to stop schooling					
39.	Interruptions by others during learning					
40.	Studying for the sake of family					
41.	Crowded classroom					
42.	Negative thinking toward own-self					
43.	Came late to the school					
44.	Giving wrong answer in class					

iv. The Brief Coping Orientation of Problem Experienced (COPE):

This scale consists of (28) items describing the coping methods in managing stress in your school life from the various sources. Please put the mark (X) for each paragraph describing your ways to adapt.

No.	Statement	I haven't been doing this at all	I've been doing this a little bit	I've been doing this a medium amount	I've been doing this a lot
1.	I've been turning to work or other activities to take my mind off things.				
2.	I've been concentrating my efforts on doing something about the situation I'm in				
3.	I've been saying to myself "this isn't real".				
4.	I've been using smoking or hookah to make myself feel better.				
5.	I've been getting emotional support from others.				
6.	I've been giving up trying to deal with it.				
7.	I've been taking action to try to make the situation better.				
8.	I've been refusing to believe that it has happened.				
9.	I've been saying things to let my unpleasant feelings escape.				
10.	I've been getting help and advice from other people.				
11.	I've been using smoking or hookah to help me get through it.				
12.	I've been trying to see it in a different light, to make it seem more positive.				
13.	I've been criticizing myself.				
14.	I've been trying to come up with a strategy about what to do.				
15.	I've been getting comfort and understanding from someone.				

16.	I've been giving up the attempt to cope.				
17.	I've been looking for something good in what is happening				
18.	I've been making jokes about it.				
19.	I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.				
20.	I've been accepting the reality of the fact that it has happened.				
21.	I've been expressing my negative feelings.				
22.	I've been trying to find comfort in my religion or spiritual beliefs.				
23.	I've been trying to get advice or help from other people about what to do.				
24.	I've been learning to live with it.				
25.	I've been thinking hard about what steps to take.				
26.	I've been blaming myself for things that happened.				
27.	I've been praying or meditating.				
28.	I've been making fun of the situation.				

جامعة النجاح الوطنية

كلية الدراسات العليا

الضغوطات وطرق التأقلم معها لدى طلبة الثانوية العامة في المدارس الحكومية في
شمال الضفة الغربية

إعداد

خلود" محمد هاشم" منصور

إشراف

د. مريم الطل

قدمت هذه الأطروحة استكمالاً لمتطلبات الحصول على درجة الماجستير لتخصص ترميز
الصحة النفسية المجتمعية، في كلية الدراسات العليا في جامعة النجاح الوطنية-فلسطين.

2017

ب

الضغوطات وطرق التأقلم معها لدى طلبة الثانوية العامة في المدارس الحكومية في شمال

الضفة الغربية

اعداد

خلود" محمد هاشم" منصور

اشراف

د. مريم الطل

الملخص

المقدمة: يعتبر الضغط (التوتر) أحد الجوانب الرئيسية في حياتنا المعاصرة نظرا للتغيرات السريعة في المعايير الاجتماعية والاقتصادية والسياسية والثقافية. جميع البشر يحاولون التأقلم مع الضغوطات باستخدام استراتيجيات المواجهة المنتجة وغير المنتجة. لهذا، هدفت هذه الدراسة إلى تقييم الضغوطات واستراتيجيات المواجهة بين طلاب الثانوية العامة في المدارس الحكومية في شمال الضفة الغربية.

منهج البحث: تم استخدام التصميم الكمي والوصفي، حيث طبقت الدراسة على طلاب تم اختيارهم من المدارس الثانوية الحكومية. استخدمت الطريقة العشوائية الطبقية لاختيار المدارس (39)، والعينة العشوائية المنهجية في اختيار الطلاب (334). جمعت البيانات من الطلاب باستخدام الاستبيان حيث شمل الاستبيان على (3SQ) كأداة لتحديد الضغوطات بين طلاب المدارس الثانوية، (COPE) أستخدم لتحديد الأساليب المتبعة في التعامل مع الضغوطات.

النتائج: معدل انتشار التوتر بين الإناث أكثر من الذكور ($61.4\% > 38.6\%$)، وبين طلاب فرع العلوم الإنسانية أكثر من طلاب الفرع العلمي ($69.2\% > 30.8\%$) مع عدم وجود فروق ذات دلالة إحصائية ($P > 0.05$). الضغوطات الأكاديمية (ARS) هي المصدر الرئيسي للضغوطات وكانت نسبتها أعلى بين الإناث و طلاب فرع العلوم الإنسانية مع عدم وجود فروق دلالة إحصائية ($P < 0.05$). استراتيجيات المواجهة الفعالة هي المستخدمة غالبا من قبل الطلاب والاستراتيجيات الأقل فعالية استخدمت بشكل قليل. كما اظهرت الدراسة انه لا يوجد فروقات ذات دلالة إحصائية في انتشار التوتر بين طلاب مدينة نابلس بالنسبة للوقت المتبقي لامتحان

($P > 0.05$)، كما اظهرت انه يوجد فروقات ذات دلالة إحصائية في (ARS)، (LTRS) عندما كان الوقت المتبقي لامتحان قصير ($P < 0.05$)، واستراتيجيات المواجهة الفعالة تستخدم من قبل الطلاب بشكل كبير في كلا الوقتين.

الاستنتاج: خلصت الدراسة ان غالبية الطلاب يشعرون بمستويات مختلفة من الضغط مع تأثيرات مختلفة. الضغوطات الأكاديمية (ARS) هي المصدر الرئيسي للضغوطات والتي تسبب مستوى معتدل من الضغط. "الدين" و "التخطيط" هي استراتيجيات المواجهة التي تستخدم بشكل كبير من قبل الطلاب.

التوصيات: هناك حاجة لزيادة أو تفعيل دور المرشد النفسي والتربوي في المدارس لتوفير الدعم والتفريغ النفسي للطلاب، مما يساعد على تقليل الأثر السلبي لامتحان التوجيهي عندما لا نستطيع إزالته.

