CHAPTER – I
INTRODUCTION

1.1 Self-Concept

Every individual exists in a constantly changing world of experience of which he is the center. It is his basic tendency and striving to know and understand himself as well as his environment. He reacts to his environment as he experiences and perceived it. Due to constant interactions with his environment, gradually the form of his ‘self’ is differentiated and developed. In this process, an integrated, organized and unique self-structure comes out. In this process, an integrated, organized and unique self-structure comes out. All his behavior is directed towards actualizing, preserving and enhancing this self-structure. That part of self-structure which the individual perceives as a set of specific and relatively stable self-characteristics formulates his self-concept.

Rogers, in his 1947 Presidential address to the American Psychology Association, noted that the ‘self’ had come back into Psychology. The concept of self had fallen into disrepute in Psychology, possibly due to the dominance of Behaviorism, but was coming back as a legitimate research concern by the late 1940s. Rogers (1951) defined self-concept as “an organized configuration of perceptions of the self which are admissible of awareness. It is composed of such elements as the perceptions of one’s characteristics and abilities; the perception and concept of the self in relation to others and to the environment; the
value qualities which are perceived as associated with experiences and objects; and goals and ideals which are perceived as having positive or negative valence.”

The extensive interest in self has a long history; theoretically the notion of the self can be traced back to the ancient Greeks. The formulation by Mead and Cooley (1934, 1902) provided a fruitful basis for empirical work; nevertheless the notion of the self-concept did not become a research concern until the 1940s.

Virtually all investigators agree that two distinct aspects of the self, first identified by philosopher James (1890) more than a century ago, emerge and become more refined with age. The first is the ‘I’ or the existential self. It includes the following realizations: That the self is separate from the surrounding world, can act on and gain a sense of control over its environment, has a private inner life not accessible to others, and maintains continuous existence over time. The second facet of the self is the ‘me’, a reflective observer that treats the self as an object of knowledge and evaluation by sizing up its diverse attributes. Self-understanding begins with the dawning of self-awareness in the second year of life (Lewis & Brooks, 1979) and gradually evolves into a rich, multifaceted view of the self’s characteristics and capacities over childhood and adolescence. ‘I’ and ‘me’ are intimately intertwined and influence each other.

The notion ‘self’ received utmost importance in Client-centered therapy, the pioneer of which was Carl R. Rogers (1951). According to him the best vantage point for understanding behavior is from the
internal frame of reference of the individual himself. Self-concept is the central construct of Roger’s theory. It may be conceived of as an organized gestalt comprising:

- The individual’s perception of himself and the values attached to them.
- The individual’s perception of himself in relation to other persons and the values attached to them.
- The individual’s perception of various aspects of the environment and the values attached to them.

According to Roger’s self-theory, self-concept is not self-awareness or consciousness. It is the conceptual gestalt concerning oneself which need not always be in awareness, but available to awareness. A person may not always be aware of his feelings or attitudes that may lie deep but on which he can fall back as and when he wants to use. Perceptions and values attached to the self modify from time to time. The individual’s behaviour and gratification of needs are normally consistent with his self-concept. When a strong need conflicts with a person’s self-concept, he might adopt devious measures to find gratification of his behaviour consistent with his self-concept. Maneuvering of perceptions to secure apparent consistency leads to maladjustment. Among the most influential works in stimulating research on self-concept was that of Snygg and Coombs (1949). They presented a method of predicting individual behaviour in specific situations, which assumed that an individual’s personal frame of reference is a crucial factor in his or her behaviour.
In particular, they declared the ‘phenomenal field’ that part which the individual experiences as ‘characteristic of himself.’ All behaviour is directed towards the goal of preserving and enhancing the phenomenal-self. It includes the self-concept and those aspects of life which are not a part of the ‘real-self’ but are in some way related to it: one’s family, career, home, school, clothing and the like. The environment that the individual perceives or notices is termed as the ‘phenomenal environment’.

The self arises in the course of interaction in a pre-existing symbolic environment; it is the most significant product of early socialization.

Mead (1934) says that “There is a social process out of which selves arise and within which further differentiation, evolution and organization take place. Discussion of the development of self must also include the views of Cooley (1902). According to Cooley, the self
is any idea or system of ideas with which is associated the appropriate attitude we call self-feeling. The self is the result of the individual’s imaginative processes and emotions as he or she interacts with others; it is reflected or ‘looking-glass self’ composed of three principal elements; “The imagination of our appearance to the other person; the imagination of his judgment of that appearance; and some sort of self-feeling such as pride” In simplest terms, according to Mead (1934), to have a self is to have the capacity to respond to, and direct one’s own behaviour. One can behave towards oneself as one can towards any other social object. One can evaluate, blame, encourage and despair about oneself; one can alter one’s behaviour. And in the process of observing, responding to, and directing one’s behaviour, one’s structure of attitudes towards self is changing. It is important to keep in mind that behaviour towards the self does not occur in a vacuum; one is behaving towards oneself in the context of interaction with others.

The International Encyclopedia of the Social Sciences (1968), describes self as a “Development formulation in the psychological makeup of the individual, consisting of interrelated attitudes that the individual has acquired in relation to his own body and its parts, to his capacities and to objects, which define and regulate his relatedness to them in ‘concrete situations and activities. The attitudes that compose the self-system are, therefore the individual’s cherished commitments, stands on particular issues, acceptances,
rejections, reciprocal expectations (roles) in interpersonal and group relations, identification”.

As Gordon (1968) has put it, “The self is a complex process of continuing interpretive activity – simultaneously the person’s located stream of consciousness (both reflexive and non-reflexive including perceiving, thinking, planning and evaluation, choosing etc) and the resultant structure of self-conceptions (The special systems of self referential meanings available to this active consciousness)”.

Self-concept is often described as a global entity; how people feel about themselves in general, but it has also been described as made up on multiple self-conceptions, with concepts developed in relation to different roles (Griffin, Chassin & Young, 1981; Burkitt, 1991; Rowan & Cooper, 1998). Thus self-concept may be generally and situationally specific. Strang (1957) has identified transitory or temporary self-concepts also, besides the overall basic self-concept. These ideas of self are influenced by the mood of the moment or by recent or continuing experience.

1.1.1 Self-esteem: The evaluative side of self-concept

Self-esteem represents how much a person likes, accepts and respects himself overall as a person; it includes the judgment we make about our worth and the feelings associated with those judgments. Knowing who you are and liking how you are represent two different things. Although adolescents become increasingly accurate in understanding who they are (their self-concept), this
knowledge does guarantee that they like themselves (their self-esteem) any better. The cognitive sophistication – increased accuracy in understanding themselves, allows them to differentiate various aspects of self-esteem, for eg an adolescent may have high self-esteem in terms of academic performance but lower self-esteem in terms of relationship with others (Feldman, 1977).

According to Rosenberg (1979), “a person with high self-esteem is fundamentally satisfied with the type of person he is, yet he may acknowledge his faults while hoping to overcome them”. High self-esteem implies a realistic evaluation of the self's characteristics and competencies, coupled with attitude of self-acceptance and self-respect.

Self-esteem ranks among the most important aspects of children’s social cognitive development. Children’s evaluations of their own competencies affect their emotional experiences and future behaviour and similar situations as well as their long-term psychological adjustment. Self-esteem originates early in life, and its structure becomes increasingly elaborate over years (Stipek et al, 1992).

1.1.2 The Determinants of Self-esteem

Researchers have studied the multifaceted nature of self-esteem by applying methods like Factor Analysis to children’s ratings of themselves on many characteristics. Harter’s (1990) findings revealed that before age 7, children distinguish how well others like them (social acceptance) from how “good” they are at doing things.
(competence). By 7-8 years, children have formed at least three separate self-esteem dimensions – academic, physical, and social, that become more refined with age (Marsh, 1990). Furthermore, school age children combine their separate self-evaluations into a general appraisal of themselves – an overall sense of self-worth. Consequently, during middle childhood self-esteem takes on a hierarchical structure as shown in the figure. With the arrival of adolescence, several new dimensions of self-esteem are added – close friendship, job competence, romantic appeal etc. that reflect salient concerns of this period.

Figure 1-2: Facets of Self-esteem (Shavelson et al., 1976)
For James (1890), global self-esteem reflects the ratio of a person’s perceptions of competence or success in discrete domains relative to the importance of success in these domains. Harter (1986) included the scholastic competence, athletic competence, social acceptance, physical appearance and behavioural conduct domains and found that competence (low discrepancy) in the domains deemed important is associated with high levels of self-esteem. There is number of evidence that discrepancy between actual and ideal self-concept clearly exert a powerful influence on self-esteem (Higgins, 1987; Simmons and Blyth; 1987; Tesser and Campbell, 1983).

Findings with adolescents also support the Cooley’s (1902) postulation that the origins of self-esteem lay in an individual’s perceptions of what significant-others thought of the self, which Mead (1934) termed as ‘perspective-taking skills’. Perspective taking improves greatly over middle childhood and adolescence. Consequently, older children are better at reading the messages they receive from others and incorporating these into their self-definitions. Adolescent who feels that he or she is receiving the positive regard of significant others (e.g. parents and peers) will express positive regard for the self in the form of self-esteem. With regard to the relative impact of different sources of social support on global self worth, Rosenberg (1979) has suggested a developmental shift, in that for young children, perceived parental attitudes towards the self are of almost exclusive significance, whereas among older children and adolescents, peer judgments gain increasing importance.
There is considerable consensus that physical appearance significantly contributes to self-esteem during adolescence (Harter, 1989; Simmons and Rosenberg, 1975). Although physical attractiveness clearly touted in our society (Elkind, 1984), it not only reflects societal emphasis on the importance of good looks, there may; be a more basic relationship between the outer self, reflected in the appearance, and the inner self, namely global feelings of self-esteem. Developmentally, physical capabilities represent the first sense of self to emerge moreover, from an early age the physical or outer self is a salient dimension that provokes evaluative reactions from others (Langlois, 1981), reactions that may well be incorporated into the emerging sense of inner self.

1.1.3 Changes in global self-esteem

Self-esteem once established does not remain stable throughout. In early childhood, it’s vary high then it drops over the first few years of elementary school as children start making social comparisons—that is judge their abilities, behavior, appearance, and other characteristics in relation to those of others (Stipek and McIver, 1989; Ruble et al, 1980). Once children enter school they receive frequent feedback about themselves in relation to their classmates. In addition they become cognitively better able to make sense of such information. As a result self-esteem adjusts to a more realistic level that matches the opinions of others as well as objective performance. Self-esteem undergoes change during adolescence;
longitudinal studies reveal gradual, consistent improvements in self-esteem over grades 7-12 (McCarthy and Hoge, 1982); there are several reasons for such gains:

- There may be increasing realism about the ideal self, reducing the real ideal discrepancy.
- Increased autonomy and freedom of choice over the adolescence years may also play a role. If the individual has more opportunities to select valued performance domains in which he or she is competent, self-esteem will be increased.
- Relatively increased role taking ability may lead the adolescent to behave in more social acceptable ways that enhance the evaluation of the self by others.

The rise in the self-worth suggests that for most young people, becoming adolescent leads to feelings of pride and self-confidence. A study of self-esteem in 10 industrialized countries showed that the majority of teenagers had an optimistic outlook on life, a positive attitude towards school and work, faith in their ability to cope with life problems (Offer, 1988).

The picture of change in self-esteem during early adolescence is less sanguine. Simmons and Blyth (1987) suggested a developmental readiness hypothesis for this, that children can be thrust into environments before they are psychologically equipped to handle the new social and academic demands.

With regards to timing of puberty, early maturing girls fare the worst; they are more dissatisfied with their body image, which exerts and
influence on their self-esteem. They do not fit the cultural stereotypes of female attractiveness and are not yet emotionally prepared to deal with social expectations (Peterson and Taylor, 1980).

Negative self-perceptions lead to more predictable behaviour than positive self-perceptions. Presumably, this happens because negative self views involve more tightly organized schemas than positive ones; as a result, someone with generally high self-esteem can interpret a success in a variety of ways, but someone with low self-esteem tends to over generalize the implications of a failure.

Credible feedback indicating that one has some of the characteristics of his or her ideal self is a positive experience, while feedback indicating the presence of undesired characteristics is negative. It also matters whether one’s “good” or “Bad” qualities are common or rare. The lowest level of self-esteem is found among those who perceive their liked characteristics to be quite common and their unlinked characteristics to be relatively rare.

1.1.4 Self-esteem and Social Comparison

Social comparison is a major determinant of how we evaluate ourselves. Depending on our comparison group, specific success and failures may contribute to high or low self-evaluation or be completely irrelevant.

Several lines of research help clarify some of the ways in which these complex social comparisons operate. When we compare ourselves to other, our self-esteem goes up; when we perceive some inadequacy in them – a contrast effect happens. When, however, the comparison is
with someone to whom we feel close, our esteem goes up; when we perceive something very good about them-an assimilation effect happens. In a similar way, a person who compare unfavorable within group members experiences lower self-esteem and increased depression much more than if the unfavorable comparison is with out-group members.

Self-esteem should not be considered as in immutable trait but rather the processes responsible for its potential change must be illuminated. Only by understanding these processes, the strategies to maintain or enhance self-esteem can be sought. Strategies implied by Harter’s research (1986) include valuing the individual’s areas of competence and discounting domains in which he is not competent, selecting social comparison groups that are more similar to the self, as well as interacting with peers who can provide support and affirmation that can be internalized in the form of positive regard for the self.

1.1.5 Measuring Self-Concept

The idea of self concept has been discussed in detail; but to be useful in science, an idea must have an objective referent: there must be a method of measuring it and a number of methods have been devised to measure or estimate the self concept. Though none of them captures the idea in its entirety, but most seem to catch enough of it to demonstrate that the self-concept is an important personality variable. All measurements of the self-concept include the idea of
desirability and undesirability. Desirability may be evaluated as an abstract social norm (something which the society values positively or negatively) or else in terms of the personal qualities of the subjects. Some widely used techniques to measure self-concept are: -

**Likert Type Scales:**

In tests using Likert-type scales, subjects are given a set of statements and asked to rate them on a five point or seven point scale such as seldom, occasionally, about half the time, for e.g.

I don't doubt my worth as an individual even if others do.

Very much like me     Like me       Uncertain        Unlike me      Very much unlike me

Q-Sort technique:

In the Q-sort method, subjects are given a set of cards (with statements of adjectives), which are to be placed in piles along some dimension such as “most like me” at the other. This technique lends itself particularly well to measuring discrepancy between the individuals perception of his real and ideal selves.

The Semantic Differential:

This technique was created by Osgood and his associates (1957) to measure the meaning of various phenomena to an individual. Each subject is to place a check in one of the seven spaces
for each dimension as per which of the paired (polar) adjectives is
closer to his or her self-concept, for e.g.

I am

Good -------------------------------------------------- Bad
Smart ----------------------------------------------- Stupid
Kind ----------------------------------------------- Cruel

The scale can be used to measure both the “real” and “ideal self”.

Checklist:

This method employs checklist of statement or adjectives and the
subjects are asked to check those, which apply to them or to their
ideal self.

Projective and open-ended techniques:

A number of projective and open-ended techniques have been
employed to study the self, including the Thematic Apperception Test
and Rorschach Test. The former involves ambiguous pictures about
which subjects are to write stories while the latter employs ten
standard inkblots in which subjects see various things. A test which is
relatively easy to administer, which requires relatively little time and
which lends itself to larger and smaller groups of subjects is the
Twenty-statements test (TST), sometimes called the “Who am I” test.
This measure was designed by sociologist in the symbolic interactions
tradition. The TST was developed by Kuhn and first systematically tested by Kuhn and Mc Partland (1954, 1968-76).

1.2 Adjustment

In psychology, adjustment is studied specially in abnormal psychology and also in social psychology. In our daily life there has been continues struggle between the needs of the individual and the external forces, since time immemorial. According to Darwin's theory of evolution those species which adapted successfully to the demand of the living survived and multiplied while who did not died. Therefore adaptation or changing of if oneself or one's surroundings according to the demands of external environment become the basic need for our survival. It is as true today with all of us as it was with Darwin's primitive species.

Adjustment generally refers to modification to compensate for to meet special conditions. In the dictionary the term adjustment means to fit, make suitable, adapt, arrange. Modify, harmonize or make correspondence. Whenever we make an adjustment between two things adapt or modify one of both to correspond to each other. For example wearing of cloths according to the requirement of the seasons is an example of the adjustment. Before understanding the adjustment as a process it is necessary to examine some of the definitions of adjustment given by the various research;
Adjustment is the established of a satisfactory relationship as representing harmony, conformance, adaptation or the like. (Webster, 1951)

Adjustment is the process by which a living organism maintains a balance between its needs and the circumstances that influence the satisfaction of these needs. (Shaffer, 1961)

Adjustment is the continuous process in which a person varies his behaviour to produce a more harmonious relationship between himself and his environment. (Gates and Jersild, 1948)

From these definitions it is clear that in every definition the needs are incorporated. One has to change one’s mode of behavior to suit the changed situation so that a satisfactory and harmonious relationship can be maintained keeping in view in the individual and his needs on the one hand and the environment and its influence on the individual in the other hand. Even Shaffer’s definition underlines one’s need and their satisfaction. Shaffer tries to maintain a balance between his needs and his capacities of releasing these needs and as long as this balance is maintained he remains adjusted. As soon as this balance is disturbed he drifts towards maladjustment. Gates and Jersield (1948) mentioned that adjustment is a harmonious relationship between individual and his environment. In view of all these facts it could be stated that adjustment is a condition or state in which the individual behavior conforms to the demands of the culture.
or society to which he belongs and he feels that his own needs have been or will be fulfilled. In this concern Arkoff (1968) had given an extensive definition of adjustment. He define adjustment is the interaction between a person and his environment. How one adjusts in a particular situation depends upon one's characteristics and also the circumstances of the situation. In other words, both personal and environmental factors work side by side in adjustment. An individual is adjusted if he is adjusted to himself and to his environment.

Examination of various definitions of adjustment reveals that adjustment can be interrelated as both process and the outcome of the process in the form of some attainment or achievement. When a poor child studies under the street light because he has no lighting arrangement at home he is said to be in the process of adjustment what he attain in term of success in his examination or the fulfillment of his ambition or pride in his achievement is nothing but the results of his adjustment to his self and his environment. In other words when adjustment is perceived as an achievement it means how the effectiveness with which an individual can function in changed circumstances and is, at such, related to his adequacy and regarded as an achievement that is accomplished as badly or well (Lazarus, 1976).

In some definitions of adjustment it was stated that the process of adjustment is continuous. If one observe that the process of adjustment starts at one's birth and goes on without stop till one's
death. In other words adjustment is something that is constantly achieved and re-achieved by us. Apparently, it appears that adjustment is a one way in process but in reality it is not. It is a two way process and it involves not only the process of fitting oneself in to available circumstances but also the process of changing circumstances to fit one's need. In this reference White (1956) commented excellently. White stated that the concept of adjustment implies a constant interaction between the person and the environment, each making demands on the other. Sometime adjustment is accomplished when the person yields and accepts conditions which are beyond his power to change. Sometimes it is achieved when the environment yield to the person activities. In most cases adjustment is a compromise between these two extremes and maladjustment is a failure to achieve a satisfactory compromise.

Researcher have made several attempts to measure the relationship between adjustment and other factors. For example the relationship between adequacy and social adjustment and adequacy of personal adjustment, has been investigated in the large number of studies. In moreno's study it was observed that how choice status or high rejection status is evidence that the adjustment of the subject is not good. A large number of studies search the relationship between the socio metric status of the individuals and adjustment. In these studies it was observed that the subjects low in social status make more unfavorable responses than the subjects high in social status (Baron, 1951)
In addition to the personal adjustment, a number of other personality characteristics have been investigated as correlates of social status. In present study anxiety was one of the factors of which effect on the adjustment was examined while considering the personality variables the researchers found that the high anxiety affect the adjustment.

To get adjusted in life, one has to be versatile individual for a simple reason that every individual has to face varied social situations which require different skills for satisfactory adjustment. Psychologist have pointed out and mentioned the characteristics of well-adjusted person which denotes that these skills need to be developed and one has to learn to keep control on the emotions. At the first place, an individual must be aware of his own strengths and limitations. He must respect himself and others also. It is necessary that he should have an adequate level of aspiration, if the aspiration is very high which can not be achieved even by hard work then the adjustment is likely to be hampered.

To be adjusted satisfactorily, it is necessary that the basic needs of the individual must be satisfied. Often it is seen that people develop critical or fault-finding attitude, in fact, one should learn to appreciate the goodness in objects, persons or activity. As far as possible, the observation should be scientific and objective not critical or punitive. There should be flexibility in behavior. Rigidity is likely to result in maladjustment. The individual must have the capacities to deal
with the other circumstances, in other words he must have courage to resist and fight odds. If the person is having a realistic perception of the world then there is possibility of satisfactory adjustment. In addition to this an individual must have a feeling of ease with his surroundings. Of course its very difficult to develop a balanced philosophy of the life but specially after maturation or during the late age one can have the established norms which could be treated as a balanced philosophy of life. No doubt one has to make special efforts in order to be well adjusted and successful in life.

1.2.1. Theoretical prepositions related to adjustment

After studying the nature of adjustment and the factors that are related to successful adjustment it is necessary to consider theoretical prepositions related to adjustment. It is necessary because some people adjust to their environment successfully; many others could not it means that there are some factors that help in satisfactory adjustment and the other factors that hinder the satisfactory adjustment. In order to understand that, it is necessary to examine some of the theories of models of adjustment.

One of the most famous views is too related to psych-analytic theory. It was Sigmund Freud (1938) who proposed this view. According to Freud human psyche consist of three layers, the conscious, the sub-conscious and the unconscious. It is the unconscious that hold the key to our behavior; it is this unconscious level which decides the individual adjustment and maladjustment to
his self and his environment. It contains all the repressed wishes, desires, feelings, drives and motives many of which are related to sex and aggression. According to Freud man wants to seek pleasure and avoid pain or anything which is not in keeping with his pleasure loving nature. A person's behavior remains normal and in harmony with himself and his environment to the extent that his ego is able to maintain the balance between the evil designs of his id and the moral ethical standard detected by his super ego. Freud suggested that adjustment or maladjustment should not be viewed only in term of what the individual may be undergoing at present and what happened to him in his earlier childhood is even more important.

Adler disagreed with the view expressed by Freud. He proposed that there is an inherent strong urge in all human beings to seek power and attain superiority. However, as a child one is helpless and dependent which makes one feel inferior and in order to makeup for the feeling of inferiority one takes recourse in compensatory behavior. Here there is a need of adjustment.

### 1.2.2 Models of Adjustment

- **Moral Modal**

This is one of the oldest view point about adjustment or maladjustment. According to this view adjustment should be judged in term of morality. Those who follow the norms are adjusted and those who violet or do not follow the norms are maladjusted. This view is not scientifically correct but in past it was respected much.
The Medico Biological Modal

According to this model genetic, physiological and biochemical factors are responsible for a person being adjusted or maladjusted to his self and his environment. Maladjustment according to this modal is the result of diseases in the tissues of the body, especially in the brain. Such diseases can be the result of heredity or damage acquired during the course of a persons life by injury, infection or hormonal disruptions arising from stress among other things. This model is still extant and enjoys credibility for rooting out the causes of adjustive failure in term of genetic influences, biochemical defect hypothesis, and disease in the tissues of the body.

Erich Fromms views

Fromm emphasized the need of security and felt that a a child one may feel the necessity for belonging to offset the fear of isolation and aloneness. The individual in his childhood may desire to live in his family, belonging to the members of the family and provided with love affection security. When he attains maturity he is impelled by an inner craving for freedom as a result he tries to escape from the very bonds which provided him his security he needed. In this kind of situation he may be confronted with the inner conflict of being dependent for the satisfaction of his needs. If the crisis dissolved the individual is satisfied and adequately adjusted but if the conflict retains then there is possibility of maladjustment.
The Socio Genic or Cultural Modal

This modal proposed that the society in general and culture in particular affects ones ways of behaving to such an extent that behavior takes the shape of adaptive or non-adaptive behavior turning one into an adjusted or mal adjusted personality. The society and culture to which one belongs does not only influence or shape ones behavior but also sets his standard for its adherents to behave in the way he desires. Individual, who behave in the manner that society desires are labeled as normal and adjusted individuals, while deviation from social norms and violation of role expectancy is regarded as a sign of maladjusted and abnormality.

The Socio Psychological or Behavioral Model

According to this model behavior is not inherited. Competencies required for successful living are largely acquired or learnt through social experiences by the individual himself. The environmental influences provided by the cultural and the social institutes are important but in the interaction of ones psychological self with ones physical as well as social environment which plays a decisive role in determining adjustive success or failure. Behavior whether normal or abnormal, is learnt by obeying the same set of learning principles or laws. Generally every type of behavior is learnt or acquired as an after effect of its consequences. The behavior ones acquired if reinforced may be learnt by the individual as normal as a result one may learn to consider responses which are labeled normal as abnormal. Not only
the normal or abnormal behavior is learnt but labeling of behavior as normal or abnormal is also learnt. In short the behaviorist model proposes that adjustment or maladjustment is acquired not inherent. Societal influences on the individual and vice versa should be taken into consideration for understanding adjustment or maladjustment of the individual with the self and environment.

1.2.3. Methods of Adjustment

In order to lead a healthy happy and satisfying life one has to learn the various ways of adjustment. The first one being coping with ones environment as effectively as possible. The individual has to safeguard his self against turning into a mal adjusted and abnormal personality. Psychologists have suggested different ways and methods which could be grouped into two categories. The first one is called Direct Method and the second one is called indirect methods. In the direct methods increasing trials or improving efforts is an important one. The second one refers to adopting compromising means. At times one has to withdraw and to be submissive and finally he has to make proper choice and decisions. There are indirect methods of achieving adjustment; infact direct methods are those methods which a person tries to seek temporary adjustment to protect himself for the time being against a psychological danger. These are purely psyche or mental devices that is why they are called as defence mechanisms. In these indirect methods all the defence mechanism suggested by Freud are incorporated.
1.2.4 Adjustment Problems among School Students

The term adjustment is often used as a synonym for accommodation and adaptation. Strictly speaking, the term denotes the results of equilibrium, which may be affected by either of these processes (Monroe, 1990). It is used to emphasize the individual’s struggle to along or survive in his or her social and physical environment.

Good (1959) states that adjustment is the process of finding and adopting modes of behavior suitable to the environment or the changes in the environment. Shafer (1961) emphasized that adjustment is the process by which a living organism maintains a balance between its needs and the circumstances that influence the satisfaction of these needs. Kulshrestha (1979) explained that the adjustment process is a way in which the individual attempts to deal with stress, tensions, conflicts etc., and meet his or her needs. In this process, the individual also makes efforts to maintain harmonious relationships with the environment.

In adjustment, the two crucial factors are the individual and the environment. In the study of the individual, the considerations are the heredity and biological factors, the psychological factors, and the quality of socialization given to him or her. Whereas, the environment includes all the social factors.

Every individual from the time he or she steps out of the family and goes to school makes to a long series of adjustments between the
whole unique personality and the environment. The ardent desire of each boy and girl to become an individual person having a healthy physique, a growing intellectual ability, a greater degree of emotional poise and increased participation in social groups, such characteristics enhance one’s personality. Even parents, teachers and other significant members of the society to which person belong will encourage this desire.

The school is the major socialization institution for any child. It is the child’s first contract with the world outside the house. For nearly 12 years a child spends 5 to 7 hours a day in the school. School is one the most important foundation pillars on which the child’s personality develops. Children learn proficiencies in various abilities like, learning process and homework, social communications, handling emotion, and the management of day to day interactions at home and school. In reality, the growing child is dependent on the immediate environment i.e. the house and the school to meet his growth needs. The concern, therefore” extends to how the school facilities can be enhanced and improved to meet the growth needs of the children. Several studies have been reported in the area of social, educational, health and emotional adjustment of school students of both sexes. Some studies try to relate adjustment with variables like intelligence, achievement, age, sex, socio-economic status, needs, anxiety, and security. Student’s reaction to frustration has also been studied. A few studies focused on the nature, causes, and extent of indiscipline among students. The relation between indiscipline and variables like
achievement, participation in co-curricular activities etc., were also examined. A review of the studies carried out in the field of adjustment as reported in the three surveys of educational research edited by Buch (1991) reveals that no systematic attempt has yet been made to develop a tool for the assessment of adjustment problems of school students.

1.3 Academic Anxiety

Anxiety is a mental feeling of uneasiness or distress in reaction to a situation that is perceived negatively. According to Cornell University, anxiety is similar to a messenger because it alerts your body when something is wrong or worth your attention. In other words Anxiety is a state of mind in response to some stimulus in the environment which bring in the feeling of apprehension or fear. When the person is exposed to the cause of anxiety the next time, the conditioning effect causes a repeat response and the person will try to avoid the cause.

All the responsibilities of being an academic brings with it a state of mind referred to as “academic anxiety”. This can be associated with almost all the tasks associated with academics i.e. starting from attendance to classes to the biggest cause of academic anxiety-exams! It does not stop there. Though students can be anxious about everything from their reading speed to their performance in gym class. Academic anxiety arises out of the apprehension or rebuke from teachers, parents and peers reading the failures of performing the
responsibilities of an academic properly. Developing a state of academic anxiety causes a decrease in attention span, concentration and memory which can result in having a negative effect on the performance of the individual (Robert Watson; 2009).

Academic anxiety afflicts students during school-related situations, and affected individuals frequently develop the problem due to developmental issues or their educational, family or genetic history. Though some level of anxiety is required for the person to take up all the responsibilities seriously but both high or too low level of anxiety has deleterious effects on academic performance which in turn may lead to more academic anxiety.

Academic anxiety is a common issue that students cannot ignore if they want to succeed in school. It often leads to problems concentrating while studying and remembering information while completing tests, which makes the student feel helpless and like a failure. If academic anxiety isn't properly addressed, it can have many serious and lasting consequences, such as causing a student to procrastinate, perform poorly on schoolwork, fail classes and withdraw from socializing with peers or pursuing activities that interest him.

A manageable level of academic anxiety is actually a good thing, according to Greenfield Community College. Moderate academic anxiety provides the motivation students require to exert effort completing assigned schoolwork and preparing to take examinations. Academic anxiety only becomes a problem that needs a solution when
the amount experienced grows so excessive that a student is no longer able to function productively.

1.3.1. Academic or Test Anxiety (Harris, Henry L.; Coy, Doris R; 2003)

Anxiety is a basic human emotion consisting of fear and uncertainty that typically appears when an individual perceives an event as being a threat to the ego or self-esteem (Sarason, 1988). In some instances, such as avoiding dangerous situations, anxiety can be helpful. However, when taken to extremes, it may produce unwarranted results. One of the most threatening events that causes anxiety in students today is testing. When students develop an extreme fear of performing poorly on an examination, they experience test anxiety. Test anxiety is a major factor contributing to a variety of negative outcomes including psychological distress, academic underachievement, academic failure, and insecurity (Hembree, 1988). Many students have the cognitive ability to do well on exams but may not do so because of high levels of test anxiety. Because of the societal emphasis placed on testing, this could potentially limit their educational and vocational opportunities (Zeidner, 1990).

1.3.2. Characteristics of Academic or Test Anxiety

Test anxiety is composed of three major components: cognitive, affective, and behavioural. Students who experience test anxiety from
the cognitive perspective are worriers lacking self confidence. They may be preoccupied with negative thoughts, doubting their academic ability and intellectual competence (Sarason & Sarason, 1990). Furthermore, they are more likely to overemphasize the potential negative results and feel helpless when in testing situations (Zeidner, 1998). Some students may feel the need to answer every question on the test correctly. When this does not occur they may think of themselves as being incompetent, thus fueling negative thoughts such as, "I knew I was not going to pass this test," "I know I am going to make a poor grade," or "Everyone knows I am not smart." In order for students to have the best opportunity for academic success, negative thinking must be minimized and controlled.

From the affective perspective, test anxiety causes some students to experience physiological reactions such as increased heart rate, feeling nauseated, frequent urination, increased perspiration, cold hands, dry mouth, and muscle spasms (Zeidner, 1998). These reactions may be present before, during, and even after the test is completed. In conjunction with the physiological reactions, emotions such as worry fear of failure, and panic may be present. When students are not able to control their emotions, they may experience higher levels of stress, thereby making it more difficult for them to concentrate.

Test-anxious students express anxiety behaviourally by procrastinating and having inefficient study and test-taking skills.
Zeidner (1998) contends that test-anxious students have more difficult time interpreting information and organizing it into larger patterns of meaning. In addition, some students may physically feel tired or exhausted during test administration because they do not have a healthy diet, have poor sleeping habits, and fail to routinely exercise.

1.3.3 Conclusions

Test anxiety is something that impacts students from all ethnic backgrounds and grade levels. Helping students learn to effectively manage such anxiety is a challenging task that requires a genuine team effort. Students, parents, teachers, school counselors, and school administrators must all find ways to be actively involved in reducing test anxiety. We live in a test-taking society and when students are anxious during tests, they are less likely to perform up to their academic potential.

1.3.4 Components of academic anxiety

Cornell University lists four main components of academic anxiety namely emotionality, study-skills deficits, task-generated interference and worrying which is discussed as following;

Emotionality is linked to biological signs, such as a fast heartbeat, nausea, sweaty palms and tense muscles.

Study skills deficits result from inadequate study techniques that trigger anxiety.
Task-generated interference is an outcome of unproductive behaviors that impede academic performance, such as spending too much time on questions you can’t answer.

Worry undermines academic success by distracting you from focusing on what needs to be done to perform well.

1.3.5. Causes

According to Cornell University, academic anxiety is the result of biochemical processes in the body and the brain that make your attention level increase when they occur. The changes happen in response to exposure to a stressful academic situation, such as completing school assignments, presenting a project in class or taking a test. When the anxiety becomes too great, the body recoils as if threatened, which is a normal fight-or-flight reaction.

1.3.6. Prevention

Greenfield Community College recommends teaching students who suffer from academic anxiety how to practice relaxation techniques to make their studying habits more effective. For instance, tell yourself at the beginning of the study session that you are alert, calm and open-minded. Cornell University suggests additional approaches, such as thinking about positive mental images during stressful academic situations and seeking counseling to learn better study techniques.
1.3.7. Anxiety and Academic Performance

Anxiety is your body’s way of telling you that there is something in the environment in need of your attention. It is basically a series of biochemical changes in your brain and body, such as an increase in adrenaline (causing your heart to beat faster) and a decrease in dopamine (a brain chemical that helps to block pain). These changes result in a state of heightened attention to the source of the anxiety. High levels of anxiety cause your body to prepare to fight or run away from the perceived threat -- commonly called the “fight-or-flight response.”

Anxiety is not a bad thing. It is true that a high level of anxiety interferes with concentration and memory, which are critical for academic success. Without any anxiety, however, most of us would lack the motivation to study for exams, write papers, or do daily homework (especially in classes we find boring). A moderate amount of anxiety actually helps academic performance by creating motivation. Academic anxiety has four components – worry, emotionality, task-generated interference, and study skills deficits. The methods of reducing anxiety depends upon which of following cause person experiencing:

1. Worry: Thoughts that prevent you from focusing on and successfully completing academic work. For example, predictions of failure, self-degrading thoughts or preoccupation with the consequences of doing poorly. Some effective techniques for managing this component include: using positive mental imagery, disputing negative and self-
defeating thoughts with more productive, realistic thoughts, and self-hypnosis.

2. Emotionality: Biological symptoms of anxiety. For example, fast heart-beat, sweaty palms, muscle tension. The most effective strategies for dealing with emotionality are muscle and breathing relaxation exercises.

3. Task-generated interference: Behaviors related to the task at hand, but which are unproductive and prevent successful performance. For example, constantly checking the clock during an exam, or spending a lot of time on a test question you cannot answer. Since these behaviors can take on many forms, the best management technique is to work with a study skills instructor or a counselor to identify the specific behaviors that cause problems and create a plan to reduce or change them.

4. Study skills deficits: Problems with your current study methods which create anxiety. For example, last-minute cramming resulting in not knowing answers to test questions, or poor note-taking during lecture resulting in confusion about a major assignment. Many students experience the first three components of academic anxiety as a result of study skills deficits. If this is the case, then your grades will not improve unless study skills are addressed. A study skills instructor can help you with this.
1.3.8. Impact of academic anxiety on academic achievement

Today, anxiety is a common phenomenon of everyday life. It plays a crucial role in human life because all of us are the victims of anxiety in different ways. Generally, anxiety can be either a trait anxiety or a state anxiety. A trait anxiety is a stable characteristic or trait of the person. A state anxiety is one which is aroused by some temporary condition of the environment such as examination, accident, punishment etc. Academic anxiety is a kind of state anxiety which relates to the impending danger from the environments of the academic institutions including teacher, certain subjects like Mathematics, English etc.

Anxiety is considered as a block to an activity. A person who suffers from anxiety may not be able to devote his full energy -in the performance of a task. It is, therefore, considered by many that anxiety interferes with the activity and so learning is impeded. This notion is, however, based on an erroneous understanding of the role of anxiety. In fact, anxiety might deter learning or might also stimulate it. Attention is a primary factor in learning. Attention may result because of desire for reward, desire to escape punishment, curiosity etc. but basic to attention is anxiety. Bugelski considers that the task of the teacher is of creating the necessary degree of anxiety. It is a difficult question to answer as how much anxiety is to be created, for
if the anxiety is too much, it would create a need to avoid the learning situation and too little anxiety would result in a lack of attention. Bugelski suggests that by arousing student's curiosity the anxiety is created because curiosity is a disguised form of anxiety. The children's curiosity must be aroused and they should be given initial task in which they are successful. Anxiety is a multi-system response to a perceived threat or danger. It reflects a combination of biochemical changes in the body, the patient's personal history and memory, and the social situation. As far as we know, anxiety is a uniquely human experience. Other animals clearly know fear, but human anxiety involves an ability, to use memory and imagination to move backward and forward in time, that animals do not appear to have. The anxiety that occurs in post-traumatic syndromes indicates that human memory is a much more complicated mental function than animal memory. Moreover, a large portion of human anxiety is produced by anticipation of future events. Without a sense of personal continuity over time, people would not have the "raw materials" of anxiety. Travers mentions that research has shown that in the learning of very simple responses, such as a typical conditioned reflex, the speed of learning is greater for high anxiety subjects than for low anxiety subjects. On the other hand, when the subjects are required to learn in a more complex manner which involves the selection of response from two or more that are available, then the reverse occurs; the high anxiety subjects learn at a lower rate than the low-anxiety subjects. Travers considers this situation to be consistent with that is known.
about motivation. He says that "if motivation is raised beyond a certain level, then too many responses are raised above the level at which they become available and confused behaviour results." This much of understanding attract the educationist to study more and more in it. Many studies have been conducted but in Gwalior-Chambal region of M.P. state, it will be a first stepping-stone in research work as beginner. (N. Rohen Meetei)

1.3.9. Academic Anxiety and Gender Difference

Anxiety amongst adolescent boys and girls is very common and natural. Be it about self, career, academics or any other issue, the youths undergo feelings of anxiety at some phase of their lives. Freud (cf. Baldwin, 1967) described adolescence as a period of sexual excitement, anxiety and sometimes of personality disturbance. Anna Freud characterizes adolescence as a period of internal conflict, psychic disequilibrium and erratic behaviour. Adolescents are on one hand egoistic regarding themselves as the sole object of interest and the center of the universe but on the other hand also capable of self sacrifice and devotion. Youth today are living in an increasingly anxiety ridden atmosphere (Nalini, 1997). They live in a world where nothing seems to be guaranteed with certainty and at the same time they are expected to perform at every front, the main being the academics. Adolescents often lack in academic motivation and performance, as their attention is divided among a lot many things especially at creating an identity for themselves. Once out of
elementary school, they find their teachers, parents, and peers putting a new emphasis on deadlines, academics and mastery of large amounts of information. Reddy (1989) conducted research to find out the adjustment and problem areas of many adolescents in the school and the results showed that most of the problems concentrated on academic anxiety followed by anxiety regarding their future. Verma and Gupta (1990) explored the causes of basic academic pressure burdening the school going adolescents. Results revealed that academic stress was caused due to examination system, burden of homework and attitudes of parents and teachers. This is a generation where everybody lives, breathes and eats competition. The all-pervasive competitive atmosphere, it social or academic, encourages adolescents to constantly compare themselves with their peers. Consequently their self-image is in a continual state of redefinition. Stress is partly created by parental pressure too when they expect the adolescents to perform and stand out among their peer groups. When they can’t rise up to that expectation or are in process of meeting it, adolescents suffer from frustration, physical stress, aggression, undesirable complexes and depression. Even in a recent research 40% of the students surveyed in Delhi felt that they are overwhelmed by examinations and want guidance. Those aspiring to get into professional college prepare for over a dozen entrance examinations apart from tuitions in the major subjects. Gender differences are observed amongst adolescents as far as academic anxiety is concerned. Boys are said to have more academic
anxiety as compared to girls. Traditionally it is the males who are supposed to be primary breadwinners and so boys are more concerned about doing well in academics to ensure better jobs. Also masculine self esteem is dependent on their ability to earn and provide for. Adolescent boys, who are establishing their identity and have reason to be worried about academics which is almost a ticket to their job aspirations (Kamla-Raj 2008).

1.3.10. Communication and conflict related to Academic anxiety; Peter Cowden

Anxiety is when a student experiences excessive and uncontrollable worry about future and past events, excessive concern about performing competently and significant self-consciousness. Students with anxiety often have negative views about their ability to cope with stressful academic situations. They believe that they do not have the skills necessary to cope with a particular threat (Wolfe, 2005). Therefore, they believe they don’t have control or are losing control over. Students with anxiety often misunderstood or exaggerated the importance of the situation. If the condition is not managed properly (e.g. cognitive behavioral therapy), it may lead to a slippery lope of self-fulfilling prophecy (Vanin, 2008).
1.3.11. Anatomy of Academic Anxiety

Everyone feels anxious at some time or another. Fear and worries are common in children, teenagers and adults. This is a normal part of development. For example, it is normal for a child to be afraid of the dark or monsters, but when the fear continues and the severity augments, there is reason for concern (Chansky, 2004).

Some people experience more anxiety than others, over events or things that may not realistically deserve an excessive amount of worrying. Anxiety is a normal reaction to stressful situation (Connolly, Simpson, & Petty, 2006). It allows people to react quickly and thus prevents people from becoming hurt in dangerous situations or perceived threats. Some people misinterpret events and tend to linger on their misinterpretation of those events, thinking them through over and over again.

In the school setting, anxiety is experienced often by students when being evaluated, such as when taking a test or giving a public performance. When test anxiety is severe, it can have significant negative effects on a student’s ability to perform at an optimal level. Huberty (2009) asserts that test anxiety overtime, tends to contribute to more pervasive underachievement. He describes the consequences of chronic test anxiety including lowered self-esteem, reduced effort, and loss of motivation for school tasks. Stowell and Bennett (2010) studied the effects of online testing on student exam performance and test anxiety, they found that students who experience high anxiety while writing tests in a classroom, were found to be less anxious when
taking an exam online. Thus, online testing and examining may be a great alternative.

A typical classroom consists of students from diverse families and cultures. Each family has diverse problems and issues that they are dealing with and each student has a distinct way of dealing with stress and emotions. Many times, anxiety initiates with such situations, within the home. Families go through events that may cause children a lot of pain and uncertainty. Children may not express themselves accordingly, which is when anxiety may show its first sign and presence. Anxiety occurs amongst many, yet children have the extra burden of carrying stress and confusion and not being able to express themselves properly or not feeling as if they are able to voice their feelings.

Causes of anxiety can be a result of biological and psychological factors that are intertwined in a complex manner. Academic anxiety is also associated with other emotional or behavioral disorders (Smith, 2009). Regardless of the cause or the type, academic anxiety can be managed. Teachers must be aware of the management strategies available such as positive reinforcement, clear directions, with examples, etc. will help students with academic anxiety perform better. Academic anxiety is often learned, which means they can be “unlearned”. For example, a child may learn to be afraid of something because his or her parent is afraid of that thing, thus a phobia may develop. Parents frequently pass their anxiety to their children (Weiten and McCann, 2007). Therefore, it is vital that teachers, parents, and
caretakers are knowledgeable and prepared to help students with academic anxiety overcome their challenges. Interesting, academic anxiety is not just experienced by students; Tummala-Narra (2009) found that anxiety is felt both by students and instructors. To enhance learning effectiveness, teachers are encouraged to identify anxiety-provoking situations and provide a supportive learning environment so that the learners can devote their complete working memory resources to the learning tasks. Anxiety consumes the resources of working memory, thus impeding on an individual ability to perform effectively. Not a lot of clinical research on academic anxiety because many people just pass it off as something normal that students experience (Cunningham, 2008).

- **Student with academic anxiety and his communication (interact with others)**

Children with academic anxiety often (withdrawn) choose to sit out of activities and not integrate in social activities with their classmates. They often complain of fatigue, restlessness, irritability, muscle tension, dizziness, nausea, stomachaches and headaches (somatic symptoms). They choose to avoid any form of situation where criticism may be involved and are constantly requiring reassurance (Foxman, 2004). Students who have academic anxiety also have a higher risk of developing depression, and often experience demoralization (Cunningham, 2008). Thus, academic anxiety can become extreme, and have negative effects of students’ well being.
Student with academic anxiety and Education Setting

According to Cowden (2009), some students with social anxiety are afraid to speak and interact within an educational setting. Within the classroom, these students will often daydream and their thoughts will be thoughts filled with anxiousness, concern and uneasiness (Spencer-DuPont, DuPont, & DuPont, 2003). For example, these students may have a difficult time to stay focus if they heard about a catastrophic situation in the news, or if they overheard their parents or peers discussing a real-life event which may have no impact on their lives, these children tend to dwell and focus their concern on these issues. By the time they refocus and concentrate on completing their work, their minds will be filled with new worries about their academic, the quality of their work, their performance in exams, sporting or musical events.

Humans experience social anxiety to different degrees and in different areas. For example, an actor may by loud and bold on stage, but shy in an interview. Most people experience social anxiety at some point in their lives, the degree to which it occurs will vary from person to person. Social anxiety could be genetic or passed down from parents, a chemical abnormality in the brain, or it could occur after a humiliating experience. For students with disabilities, it could be a combination. According to Fisher, Allen, & Kose (1996), students with disabilities function under higher levels of anxiety than students without disabilities. Situations that students without disabilities could categorize as enjoyable or fun, students with disabilities could see as
a situation that may end up becoming humiliating or awkward for them, which results in an escalation of anxiety. For example, in school when a teacher chooses to play a game where the students may have to come up in front of the rest of the class and write something on the board, or say something to their classmates, students with disabilities may view that to be an unfamiliar situation and become anxious or nervous and not want to participate. Students without learning disabilities view the situation as a chance to have fun in the classroom and get up and be able to move and have the attention on them.

Social anxiety could also come from the amount of time a student with disabilities is in the general education classroom. Some services pull out students with disabilities for only part of the day or for certain academic areas, in which they may need extra assistance and some services, may pull out students with disabilities for a majority of the day or most of the academic areas.

This results in students with disabilities that are only pulled out for part of the day to have a lower degree of social anxiety. The reason for that is because they are more comfortable around their peers and they are more familiar with the daily routine of the classroom, which leaves less of a chance for surprises or unexpected events that may cause the social anxiety. Students with disabilities also worry about failing in the classroom. According to Stein, & Hoover (1989), the increased demands of the general education classroom raises the opportunity for failure, which creates higher levels of anxiety. Everyone experiences
social anxiety to some degree about something during their lives. Students with disabilities often experience anxiety at higher degrees due to different situations, especially in the classroom, than students without disabilities. Social Anxiety Disorder varies from gender to ethnic background. Research estimates that 12% of the U.S. population meets the criteria for Social Anxiety Disorder with rates in other countries varying (Lee, 1999). Women are more likely to develop the disorder than men are. In other populations; however, the anxiety may present itself differently. Americans in many ways see the pursuit of their own personal goals as a sign of good mental health. As for other cultures, group goals are more important than individual goals. In cultures where the group is seen as more important than its individual parts, social anxiety disorders develop differently as people often become increasingly distressed about how they may affect others (Sanders, 2000). For students with special needs it has been found that as a result of feeling social anxiety they are more likely to have more difficulty in skilled social behavior. This leads to the students not having very many friends which they feel is a result of their personality rather than of their lower self-confidence and social anxiety. The extent of this can be seen in a study conducted by Bierman & Erath (2007), children varies from age 13-19 year olds with spina bifida, 31 (53 percent) had had no social contact with a friend of their own age for at least a month prior to the interview. Also, Anderson (1982) found that just 6 percent of the able bodied group
were leading limited or very restricted social lives, as against 29 percent of those with exceptionalities.

Overall, due to their lower self confidence as well as the social anxiety they face, students with special needs feel as though many students do not like them when many times it could be the uneasiness brought about by their lack of social skills (Best, 2009). It is important for students with special needs to be given increased opportunities for interactions with their peers so that they are able to thrive in social situations throughout their lifetime.

Anxious children may also be very quiet, compliant and eager to please (McLoone, Hudson, and Rapee, 2006). Therefore, their difficulties may be missed. These children feel as if they need to keep their peers happy and do not want to “burden” them with their fears or issues. They try to please others to avoid conflicts and in many situations, this may result in significant stress on themselves and on their mental state. They do so by often suffering in silence. Academic anxiety is distracting. For example, students who are preoccupying their minds with irrelevant things that do not pertain to the task at hand (Vassilaki, 2006). Thus, their energy is wasted when it could be used for task elaboration or to help improve their overall academic performance. Students with academic anxiety are self-preoccupying and lead to their own negative results.

Social anxiety continues to affect numerous special needs students throughout our educational system (Cowden, 2009). Students with learning disabilities are much more vulnerable to academic anxiety,
and will increasingly be accessing generic services (Bakala and Cooray, 2005). Some subjects, such as science, can be perceived by many as a difficult and challenging discipline. Students often choose to avoid science altogether or take only the bare minimum that they need to fulfil degree requirements (McCarthy and Widanski, 2009). Anxiety in language classes can also be overwhelming to some students. Research suggests that how students perceive themselves as language learners can affect both their level of anxiety in language courses and their achievement (Phillip, 2008).

1.3.12. Intervention for Students with Academic Anxiety

- **Teacher and a student with academic anxiety (School-based intervention)**

  Social anxiety causes individuals to fear situations. Many shy people feel so anxious when they are around others, that they start going out of their way to avoid any social situation. Many shy people avoid social situations altogether so they will not feel anxious and panic. By doing this, they will not have to worry about what they say sounding stupid, or most importantly, what others are thinking of them. Overall, because of these feelings, many shy people experience a lot of feelings of shame and embarrassment and negative self-criticism due to them looking down on their own social anxiety. Social anxiety can also be seen in students with special needs. They are more likely to face this social anxiety due to the low self-confidence they feel
about having exceptionality. For example, when an adolescent student with special needs does go into a social setting in which they fear such as a party, they will usually stand off to the side to avoid conversations. The downside to doing this though, is that many people are uneasy with social anxiety in others. They perceive shy people who avoid conversations or walk away quickly from social encounters to be rude or stuck up. These feelings can clearly be observed in an article written by Alm and Frodi (2008). Similar to how many people feel uneasy, these participants explained they feel stressed out by shy people and upon meeting, the conversation is usually boring and uninteresting. The participants explained that they feel stressed because the shy people do not always contribute to what they are thinking or feeling.

Consequently, these students with special needs miss out on socialization with their peers due to their own social anxiety. Similar to fearing situations such as parties, social anxiety can be experienced in children with special needs throughout the average school day. For example, a study conducted by Younger, Schneider, and Guirguis (2008) studied 227 children from the first, third, fifth, and seventh grades what behaviors characterize shyness in their peers. The categories of behaviours most frequently described by these children included the following: doesn't talk, stays by self, walks/runs away from others, looks away/avoids eye contact, and gets mixed up when talking/stutters. Overall, similar to the students in this study these behaviors exhibited by students with special needs, result in
increased loneliness. This is due to the fact that they do not have many friends due to their social anxiety and the awkwardness that others feel when around them. In the end, school may become a place of apprehension for shy children with special needs because they will have limited social interaction with other students their age. As a result of this, they believe their shyness is a negative trait which in turn lowers their self-esteem.

Children who are experiencing high levels of anxiety can be identified in the school setting. There are assessment tools such as a self-reporting questionnaire to screen which children may be at risk. These questionnaires are not to be used solely to diagnose children, but they are a good place to start. If a teacher detects that a child is over-anxious or upset, the parents should be notified and a conversation about this condition should occur. Many children who have academic anxiety tend to be very concerned about school grades and tend to express concern about every assignment and grade. Teachers may also spend time with the entire class talking about mistakes and how everyone makes them. Teachers may reassure that there will be plenty of opportunities to make up for marks and that the homework marks are not a direct reflection of the student’s academic success (Iconis, 2002).

Teachers can help the students who worry about the effectiveness of their performance, or who are overwhelmed and dwell on their stress, to turn that anxiety into a positive, and make it act more like motivation (Weiten and McCann, 2007). Teachers can create a calm,
comfortable test environment and to advise students if they are stuck on a question, to skip it and move on to other questions they do know, and come back to that question later, rather than waste their time.

Teachers should be conscious of this susceptibility in students because tests should measure what a student has learned and should not upset students to the point that they cannot demonstrate their newly gained knowledge.

Sze (2006) suggested a few strategies a teacher can use to include students with academic anxiety include: breaking up tasks into smaller more attainable chunks, which allows more opportunity for success more often, and therefore promotes positivity and encouragement.

Provides examples and specific steps to accomplish tasks; reduces assignment length so that students strive for quality rather than quantity (Sze, 2006). With practice, teachers will feel more comfortable learning about and using these techniques on a regular basis, and it will also allow students with anxiety to overcome some of their challenges at school which hinder their best performance.

LaBillois and Lagace-Seguin (2009) examine the relationship between a child’s ability to regulate their emotions and the teaching styles and anxiety of children. Preliminary evidence suggests that different teaching styles might be associated with different outcomes among children with varied regulatory characteristics. Other anxiety reducing strategies including the use of flash cards for students to synthesize information from texts and lectures and learn good study habits; and
to teach test-taking skills (Lagares and Connor, 2009). Teaching students to regulate their emotions is an important life skills for students suffering with academic anxiety.

Conflict management, communicating with diplomacy and tact, and active listening are just some of the skills that can be taught to use in combination to tailor solutions for individual students. Teachers can use collaborative learning more and more to promote student learning and reduce student’s anxiety associated to learning and testing (Ioannou and Artino, 2010).

Decrease anxiety involves relaxation (Albano, 2004). Teachers can keep their classroom from getting too noisy or out of hand. Students who have academic anxiety will be less distracted and less likely to lose attention. Thus, they will less likely focus on irrelevant things that do not matter to the task they have to complete. According to a study conducted by Kiluk, Weden, Culotta and Vincent (2009), results suggest that active sport participation may be associated with a reduced expression of anxiety or depression symptoms in children with ADHD.

1.3.13 Family and child with academic anxiety (Family-bases Intervention)

Anxiety causes individuals to fear situations. Many shy people feel so anxious when they are around others, that they start going out of their way to avoid any social situation. Many shy people avoid social
situations altogether so they will not feel anxious and panic. By doing this, they will not have to worry about what they say sounding stupid, or most importantly, what others are thinking of them. Overall, because of these feelings, many shy people experience a lot of feelings of shame and embarrassment and negative self criticism due to them looking down on their own social anxiety. Anxiety can also be seen in students with special needs. They are more likely to face this social anxiety due to the low self-confidence they feel about having an exceptionality. For example, when an adolescent student with special needs does go into a social setting in which they fear such as a party, they will usually stand off to the side to avoid conversations. The downside to doing this though, is that many people are uneasy with social anxiety in others. They perceive shy people who avoid conversations or walk away quickly from social encounters to be rude or stuck up. These feelings can clearly be observed in an article written by Alm and Frodi (2008). Similar to how many people feel uneasy, these participants explained they feel stressed out by shy people and upon meeting, the conversation is usually boring and uninteresting. The participants explained that they feel stressed because the shy people do not always contribute to what they are thinking or feeling. Consequently, these students with special needs miss out on socialization with their peers due to their own social anxiety.

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Parents and other family members can help in many ways as they may be educated about how to manage a child’s anxiety (Chansky, 2004). The family working in collaboration with the school is a very significant factor, as both the family and the school influence the child with anxiety level. Once the child has been assessed and parents and school have had the opportunity to discuss the situation, a plan can be initiated to assist this child. The school-family team is a great support system for a child living with anxiety, as it allows for common goals and strategies to be implemented with this child. Communication between home-life and school-life is key and is a great
way to ensure that the child’s health is being monitored, as much as possible. It is important that parents are positively involved in their child’s treatment of academic anxiety. Research indicate that direct parental behaviors can exacerbate anxious and avoidant behaviors in children (Albano, 2004). Taking this into account, and Sze (2006) teaching strategies, parents should also reward or encourage their child in dealing with their anxiety. Parents should also be in contact with their child’s teachers and keep the lines of communication open for any progress or important pieces of information about the student’s psycho-social progress.

1.3.14. Conclusions

Academic anxiety can negatively affect the achievement and performance as well as social and psychological development among children and adults. The road to recovery is a team effort. Teachers must be aware of academic anxiety and how it may affect their students. Students can experience academic and social success, provided that good supports are in place, whether in schools or at home or both. It is absolutely crucial that teachers, parents, guardian counselors, social workers, and health professionals are knowledgeable about academic anxiety and prepared to help students who suffer from them overcome their challenges and live happy, full lives. Teachers can be part of the healing process, and students with academic anxiety can not only perform better academically but also socially, physically, and mentally.