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THE ASSOCIATION BETWEEN FAMILY VALUES AND
COPING SKILLS TOWARD DEPRESSION AMONG 3U11
STUDENTS OF FHPK FACULTY IN UNIVERSITY MALAYSIA
KELANTAN

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LIST OF SYMBOLS AND ABBREVIATIONS

Abbreviations	
WHO	World Health Organization
AFCS	Asian Family Characteristics Scale
NHMS	National Health and Mobility
SAD	Stress, anxiety and depression
SES	Socioeconomic Status
WBL	Work-based learning
COPE	Coping Orientation of Problem Experienced
DASS 21	Depression Anxiety and Stress Scale 21
SPSS	Statistical Package for the Social Science

CHAPTER 1

INTRODUCTION

1.1 INTRODUCTION

Chapter 1 will describe the background of study, a problem statement, a research question and research objective. Then, it will continue by the significant of study, the definition of terms and summary as a conclusion for the entire introduction chapter.

1.2 BACKGROUND OF STUDY

Depression is a chronically depressed state that affects daily functioning. According to studies, stressful life events like poverty, the loss of a loved one, physical illness, or abuse might increase the likelihood that someone will experience depression. The typical causes of it are a mix of biological, psychological, and environmental factors. Additionally, some people inherit the risk. (Lyn, 2019). University students face not only challenges related to independent living, but also academic challenges. Independent living refers to a variety of housing options that allow older individuals to live independently while using amenities and community resources. This predisposes them to depression, anxiety and stress, which are fairly common (Shamsudin, K et al., 2013). In addition to balancing the academic and social responsibilities of preparing for their professions, university students must adjust to a variety of psychosocial changes. Numerous studies have shown that depressive symptoms have an impact on students' academic achievement and performance in high schools, colleges, and universities.

Family values are the fundamental beliefs and principles that direct and govern how members of a household behave and engage with the rest of the community. It is the guiding principle upon which a family is built, and it is frequently passed down from generation to generation. Family values, particularly of the traditional variety, are fundamental tenets and beliefs considered to advance effective family functioning and bolster the social fabric. Family values include all conceptions of what constitutes and governs a family, and they are frequently passed down from one generation to the next. (Jolayemi, M, 2020).

Depression was common but dangerous mood illness, sometimes known as major depressive disorder or clinical depression. It exacerbates mental health issues to the point where it interferes with a person's ability to function on a daily basis, including sleeping, eating, and working. University students participating in the 3u1i industrial mode study program are also at risk for depression. A program of study with an industrial focus is the 3u1i Apprentice Program. Students will spend three (3) years in college concentrating on theory and one (1) year in the workplace gaining practical experience. Students will learn about business techniques through this curriculum, giving them the chance to keep working after they graduate. Because of this, sadness frequently affects university students who have to work after studying for a long time.

The prevalence of depression change every year among university students at the global level, developed countries, developing countries and Malaysia. Then followed by 3 factors related to depression among university students which is biological, psychological and social. In Malaysia, Sarawak had the highest prevalence of depression (20.9%), and the lowest is Melaka (3.8%). In the global, the prevalence of significant depressive symptoms among college students was 33.6% and the global prevalence of depression amongst medical students of 28.0%.

1.3 PROBLEM STATEMENT

The majority of college students today are prone to mental illness. If left untreated, depression has frequently been seen as a major contributing factor to suicide. In recent years, more university students have received a diagnosis of depression, treatment for it, and medication. It may be said that depression directly and deeply impacts both younger and older adults, making it a severe emotional issue for university students. It causes significant melancholy, feelings of guilt and worthlessness, lack of food and sleep, as well as a loss of interest and enjoyment in routine tasks. Depression thereby lowers a person's quality of life.

The World Health Organization (WHO) lists depression as the top cause of disability worldwide 7.5% of all years lived with disability in 2015 based on prevalence rates for student depression reported globally. Each year, depression is the leading factor in the over 800,000 suicides that occur. It was estimated that depression would affect 4.4% of people worldwide in 2015. According to the WHO, people who suffer from severe mental

illnesses such moderate to severe depression, bipolar disorder, schizophrenia, and other psychotic disorders often have a life expectancy that is 10 to 20 years lower than that of the general population (Organization for World Health, 2018). As a result, the purpose of this study is to investigate the relationship between coping mechanisms and familial relationships in relation to the problem of depression among university students.

1.4 RESEARCH QUESTIONS

- i. What is the prevalence of depression between 3u1i university students?
- ii. Is there any relationship encompasses family values and depression among 3u1i university students?
- iii. Is there any significant relationship between coping skill and depression among 3u1i university students?

1.5 RESEARCH OBJECTIVES

- i. To investigate the prevalence of depression encompasses 3u1i college students.
- ii. To investigate the correlations between family value and depression among 3u1i college students.
- iii. To investigate the correlations between coping skill and depression among 3u1i college students.

1.6 SIGNIFICANT OF STUDY

1.6.1 BODY OF KNOWLEDGE

Through this study, the researcher has found the gaps depression between college students. The importance in the study will enhance the body of understanding upon that element of a correlation with depression encompasses 3U1I college students. Therefore, this study will add more reading material and can be used by users who want to do more research about 3U1I students.

1.6.2 FUTURE STUDY

The coping skill found in this study can help them by preventing or treating depression. Students will take into coping skill in this study as measures that can be practiced by themselves against the problem of depression among these students.

1.6.3 3UII UNIVERSITY STUDENTS

This study can contribute to future studies for university students on the prevention for themselves from depression among them because there are many studies about the problem of depression among students but no one related to 3UII students.

1.6.4 UNIVERSITY COUNSELLOR

This study can contribute for university counsellor where it will convey this information to university students through a motivational program, talks, seminar and more. Indirectly, the counsellor can help students from any possibility of depression with prevention from initial stages.

1.7 DEFINITION OF TERMS

Malay Dass 21 is used to measure depression in order to calculate a depression score. Dass 21 is a self-report questionnaire that gauges one's degree of stress, anxiety, and depression. For each of those three negative emotional states, you will be given a severity grade at the end of the test: normal, mild, moderate, severe, or extremely severe (Ramli Musa et.,al 2007). A prevalent and dangerous mood condition, depression is often referred to as major depressive disorder or clinical depression. Depression causes a chronic sense of melancholy and hopelessness, as well as a loss of interest in previously appreciated activities. In addition to the emotional issues brought on by sadness, some people may have physical symptoms including persistent pain or digestive issues.

Depression must be diagnosed when symptoms last for at least two weeks. The following criteria are listed in the DSM-5 for diagnosing depression. A minimum of one of the symptoms must be either (1) a sad mood or (2) a lack of interest or pleasure, and the person must have five or more symptoms in the same two-week period. The DSM-5 includes a depress mood for the majority of the day, almost every day, significantly decreased interest in or enjoyment of almost all activities throughout the day, most days, significant weight loss when not on a diet, weight gain, a decrease or increase in appetite, slowing of thinking and reduced physical movement observable by others, not just a subjective feeling of restlessness or slowness, fatigue or loss of energy.

Brief Cope, also known as the Malay Brief Cope, is used to measure coping ability. In this study, coping skill are defined as the following: A, B, C, D, E, F, G, H, I, J, K, L, M and N. we divided the questionnaire's items into four categories based on the response. The term 'family value' in this study refers to the family value scales obtained using the 30 item Asian Family Characteristics Scale (AFCS). Asian Families are known for doing activities and exercising together, grinning because everything is peaceful in the family and helping one another. However, my paents don't understand me (Ramli Musa et. al, 2015).

1.8 SUMMARY

This study looked at how family values and coping mechanisms affected depression in 3u1i students. The research history of the current work is discussed. The issues that drove researchers to undertake this study and the importance of solving the problem for others are then covered in this chapter.

CHAPTER 2 LITERATURE REVIEW

2.1 INTRODUCTION

This chapter discusses the past literature related to the association between family values and depression among university students. Next, the discussion continues with a description of the research framework and hypothesis development.

2.2 3U1I PROGRAM

The Apprentice 3u1i program is an industrial mode study program. Students will follow learning for three (3) years at the university by giving focus on theoretical aspects and one (1) year in the industry to gain practical experience. Through this program, the students will be exposed to the practical industry that will give students the opportunity to continue working after graduation. The aim of this program is to instill an entrepreneurial spirit as well as academic and industry collaboration through a delivery approach Work-based Learning.

In addition, this program focuses on learning based on experience (experiential learning) which can effectively explore outside the campus or industry in addition to having the opportunity to acquire income while learning (learn and earn). This program is also an initiative under Leap 1 (Holistic Graduates, Entrepreneurial and Balanced) and Leap 7 (Innovation Ecosystem) in Malaysia Education Development Plan 2015-2025 (Higher Education, 2019). The advantage of the 3u1i Apprentice Program is getting the opportunity to improve practical and soft skills in a real work environment and gain direct experience from industry experience in a real work environment.

2.2.1 3U1I PROGRAM AT FHPK

For the first batch of 3U1I students was 16 persons only from the hospitality course. 16 students from the first intake were sent to a nearby McDonalds branch to undergo industrial training. Meanwhile, the second batch of this program was 90 persons from 3 departments which consists 30 persons from

wellness, tourism and hospitality. 90 students for the second intake were sent to a nearby company according to their departments.

2.2.2 EMOTIONAL STATUS OF 3U1I STUDENTS

2.2.2.1 BEFORE 3U1I PROGRAM

Before the students will be sent to industry, they will register an application for the 3u1i program and will be selected based on qualifications by the department coordinator. At this time, students may feel anxious and worried while waiting for the approval results to be released.

2.2.2.2 DURING 3U1I PROGRAM

During the program, students will feel excited and nervous to start industrial training and enter the world of work. Students will be assigned to industries determined by their respective departments.

2.2.2.3 AFTER 3U1I PROGRAM

After completing the 3u1i program, these students will feel relieved and happy that they have successfully completed a year of industrial training. Students also have the opportunity to continue working in the industry if accepted by the company.

2.3 DEFINITION OF THE DEPRESSION

Depression is a common mental disorder. The condition is thought to affect 5% of individuals worldwide. It is characterised by persistent dissatisfaction and a loss of interest or pleasure in formerly rewarding or pleasurable activities. It can also disrupt sleep and appetite. Tiredness and a lack of focus are common symptoms. Depression is a leading cause of disability worldwide, accounting for a considerable portion of the global sickness load. The repercussions of depression can be long-term or recurring, and they can have a major influence on a person's ability to function and live a fulfilling life.

2.4 THE PREVALENCE OF DEPRESSION

2.4.1 GLOBAL LEVEL

An estimated 3.8% of the world's population suffers from depression, including 5.0% of adults and 5.7% of persons over the age of 60. Approximately 280 million people worldwide suffer from depression. Depression differs from typical mood swings and quick emotional reactions to ordinary difficulties. If depression is regular from a moderate to severe level, it might be hazardous to one's health. (World Health Organization, 2021).

According to the study, there is a significant prevalence of depression symptoms among college students worldwide, with the respective percentage of 33.6%. The largest prevalence of depressive symptoms is found in lowermiddle-income nations (42.5%, 95%CI: 28.6%-56.3%), the Africa Region (40.1%, 95%CI: 12.3%-67.9%), and medical college students (39.4%, 95%CI: 29.3%-49.6%). Among first-year university medical students, the prevalence of mental illness has been reported to be moderate to severe/extremely severe (63.6% for depression and 78.4% for anxiety) (Abdallah & Gabr, 2014).

2.4.2 DEVELOPED COUNTRIES

In developed countries like Japan and the United Kingdom. Even though these were developed nations, from 2018 to 2022, depression among university students remained a concern in these nations. The prevalence ranged from 28.7% to 75% in the United Kingdom, with 75% being the greatest prevalence. (Chen & Lucock, 2022) Alsubaie et al., 2018. In contrast, Japan had a 95% prevalence rate and a 28.7% prevalence rate (Zhao et al., 2020, Nguyen et al., 2018).

2.4.3 DEVELOPING COUNTRIES

In developing nations like China and Egypt. According to Tariq, A.B.'s 2018 study, there was 53.6% of university students who reported having depression in Egypt in 2018. This number dropped to 51.30% in 2019 (Getinet Ayano, 2019), and 28.2% in 2020. (Gutema Ahmed, 2020). The prevalence of depression among

college students is low in 2021 at 30.6% (AA Mirza, 2021), while it is high in 2021 at 88.8% among undergraduate medical students at Benha University. (Hala Ali Abed, 2021). In 2022, low, at 17.1%, is the prevalence of depression among college students (Aziza Siraji, 2022) and Assiut University's Faculty of Medicine has a higher than average frequency of depression among university students, at 65%. (Gabal HA et al.,2022).

The prevalence of depression among Chinese university students is the following. In 2018, the prevalence is 49% (Qin Zhou,2018) and low to 32.74% for medical students in China (Ying Mao,2018) and another for Chinese university students, the frequency of depression was low at 28.4%. (Li Gao et al., 2018). In 2019, there were 38% more university students who reported having depression than in 2018. (Bob Lew et al.,2019). And in 2020, it dropped to 16.6%. (Fang Yang et al.,2020). Chinese college students experienced a high prevalence of depression in 2021, reaching 37% (C Wang et al., 2021), while nursing students experienced a high incidence of depression in 2021, reaching 67%. (Lei Ren et al.,2021). According to Jin et al. (2022), the prevalence of depression among college students was low at 27% for medical students and high at 62.91% for the University of Wuhan, China, in 2022. (Duan et al.,2022).

2.4.4 MALAYSIA

Among Malaysian collegians, past of cross-sectional study included 1023 college students (response rate 90.4%) found that almost 30% of responders were depressed, with 4.4% experiencing severe depression (Islam et al., 2018). In the National Health and Mobility Survey (NHMS) 2019 has stated, it's about 2.3% which are half a million people of the Malaysian adult has depression. People who live in the state of Wilayah Persekutuan Putrajaya was the highest percentages with (5.4%). In 2012, the percentage of depression among teenagers was 17.7% and it increase slightly to 18.3% in 2017. Sarawak had the high ranking percentage of depressed people (20.9%), followed by Selangor (22.6%) in the NHMS 2017. In the NHMS 2019, there shown the highest states which are Negeri Sembilan (5.0%), Perlis (4.3%), Sabah (4.0%) and Melaka (3.8%).

2.5 FACTORS ASSOCIATED WITH DEPRESSION

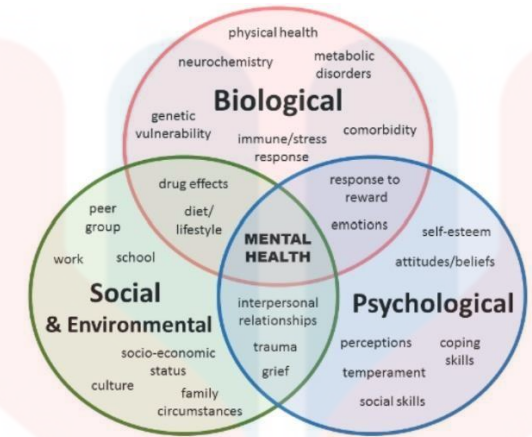


Figure 2.1: Biopsychosocial Model

2.5.1 BIOLOGICAL FACTORS

2.5.1.1 GENDER

Based on the previous studies, female students were found to be the most depressed from male students, though the dissimilarity was not likelihood. A research in Kenya found that females had a high ranking of percentages, however other research in this country revealed no significant gender difference (Islam et al., 2018). Females had a higher depression percentage in 2012, while males had a greater prevalence in 2017 (Wahab et al., 2020). Females experience depression more frequently than males (World Health Organization, 2017).

2.5.1.2 YEAR OF STUDY

Based on the previous study, it was found that there is significant association between gender and year of study toward depression level. Overall, female collegians in third-year collegians had a highest proportion of depression, while second year students had severe depression. Second-

year students are lead to depression than first year collegians. Fresher students are unlikely an encounter learning difficulties due to stress during the course for upcoming years. The other reason may be that seniors are more concerned regarding to their future job prospects (Islam et al., 2018).

2.5.1.3 PHYSIOLOGICAL FACTORS

Pyhsiological factors affecting depression among university students, including trauma, coping skill and self-esteem.

A traumatic event is defined as one that poses a threat of serious injury or death to oneself or others, and elicits feelings of intense fear, helplessness, or horror (Crerand & Magee, 2012). Trauma problems include sexual abuse, physical abuse, domestic violence between parents, suicides and so on. According to the World Health Organization (WHO), more than one third of the world's population has experienced childhood trauma (CT). Child trauma will lead to psychological problems in the long term (Hillis et al., 2004).

Coping mechanisms are behavioural and cognitive techniques used to deal with stressful situations, environments, and demands (S Blum, 2014). There are numerous ways to conceptualise strategies to cope, but there are five main categories: problem-focused coping, emotion-focused coping, social support coping, religious coping, and meaning-making coping. It was demonstrated that the adoption of cognitive coping mechanisms accounted for a sizable portion of the variation in symptomatology in both adolescents and adults (Carolyn M. Aldwin et al., 2004) Coping ability was linked to depression symptoms, according to earlier investigations. Coping mechanisms are so helpful in preventing depression. According to studies, child abuse is linked to depression, coping skills, and loneliness (Meiqi Wang et al, 2022).

Although the relative strength of the relationships between adolescents and adults varied, the general conclusions were the same: in both groups, cognitive coping skill catastrophizing, self-blame, rumination, and positive reappraisal were shown to play the most significant role in the reporting of psychopathology symptoms, emphasising the necessity of introducing prevention and intervention programmes at a young age which is around 10 to 19 of the adolescent age while for adults who are older than 19 years old. (Nadia Garnefski et al., 2022).

2.5.1.4 SOCIAL FACTORS

Social factor can cause depression among university students, negative family relationships, especially those with parents, can lead to stress, anxiety, and depression (SAD) in university students. Similar to the previous example, having a strict family who placed limitations on children's actions and activities can be a predictor of developing SAD throughout college years. Additionally, it has been demonstrated that being in a committed relationship protects female students from developing depression symptoms but not male students. It's interesting to note that students who were in committed relationships between male and female and reported drinking less alcohol than their friends who were not. (Mofatteh, 2020).

Socioeconomic status (SES) refers to a person's overall economic and social position in comparison to others, depending on factors such as income, education, and occupation, however, SES is more frequently used to refer to economic differences in society as a whole. Several studies have found that major depressive disorder and greater depressive symptomatology are more prevalent at lower socioeconomic status (SES) levels. (John W,2002). The development of mental health during the university years can be predicted by low family income and living in poverty. Even adverse early psychological experiences, which can have long-term detrimental consequences on students mental health when they enter universities can be ameliorated by higher family income.

According to study, a teen's likelihood of getting depression is influenced by a number of parental and family characteristics, including parental pathology, cognitive style, and family emotional climate. Teenage depression was significantly linked to being a girl and coming from a single-parent family, but less so to co-occurring psychotic or behavioural disorders. The relationship between family structure and depression is a difficulty for university students' mental health services. To promote future well-being and coping mechanisms, it is crucial to test young people for depression early on, especially university students who are admitted for psychiatric treatment and come from "at-risk" family types (Laukkanen, 2016). Chesla (2008) makes the case that family social support, including a network of friends and relatives that a person can turn to when they are having issues. Additionally, this family social support includes the assistance or support provided by family members and friends to improve the physical and emotional comfort of people going through difficult times.

Next, everyone will experience depression at work. If a person experiences a symptom of depression at work, they can experience a range of emotions, including sadness, anxiety, boredom, loss of motivation, trouble concentrating and unexpected crying. A teaching strategy called work-based learning (WBL) exposes students to actual workplaces where they can use their knowledge and expertise to advance their employability. A new paradigm for learning is being developed through a series of educational courses that integrate the workplace and the university. As a result of today's enhanced learning paradigm, a higher prevalence of university students is experiencing depression-related issues.

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The ability to engage and communicate with others is referred to as social skill. They encompass both verbal and nonverbal cues like body language, gestures, and facial and facial expressions. One influencing factor of depression is social skills (Cacioppo & Patrick, 2008; Seepersad,2014). It was shown that decreased social skills contribute to increased depression (Segrin & Rynes, 2009). The previous study also found that students in different years, showing different depression and social skills. Final year students have a higher level of depression and a lower level of social skill than from other years (Renk & Smith, 2007). In conclusion, social skill contributing as 21% to depression among university students.

2.6 CONCEPTUAL FRAMEWORK

We have proposed a framework to study family value and depression among university students, based on a previous literature review. Therefore, as seen below, the structure:

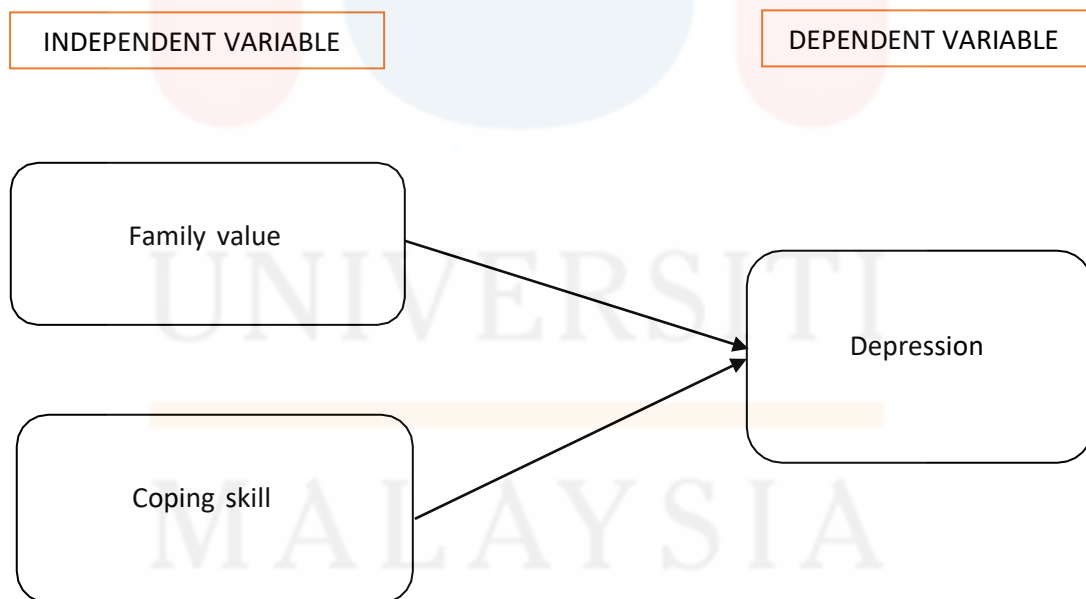


Figure 2.2: Conceptual Framework

2.7 RESEARCH HYPOTHESIS

The hypothesis of this study is to investigate if there are any correlations or links between dependent and independent variables. The following are the study's hypothesis:

H1: There is significant association between family value and depression among 3u1i university students.

H2: There is significant association between coping skill and depression among 3u1i university students.

2.8 SUMMARY

This second chapter has discussed the prevalence of depression as a dependent variable among university students at the Global level, Developed Countries, Developing Countries and Malaysia which shows that the problem of depression is increasing from 2018-2022. We can observe a variation in the prevalence of depression among college students. Then, followed by factors involving 3 aspects, namely, biological, psychological and social aspects that cause depression to university students. Next, the hypothesis and the last is the conceptual framework of this study which explains the dependent variable and independent variable which is very important for this study.

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CHAPTER 3

METHODOLOGY

3.1 INTRODUCTION

This chapter will describe about research design, population and sample size. Other than that, this chapter will also describe about sampling method, data collection procedure, a research instrument and data analysis. At the end of this chapter, there will be a summary of this chapter.

3.2 RESEARCH DESIGN

A research design often outlines the methods to be utilised for data collection, instruments to be used, how the equipment will be used, and the anticipated method of data interpretation. The plan, structure, and the method of study known as research design is created to obtain the results of the investigation while controlling variation. The purpose of this study is to ascertain how present standards and assumptions may be impacted by a relationship between a dependent variable and independent variable. This study makes use of a questionnaire into three sections, including part A on demographics, part B on family values & coping skill, and part C on depression among 3u1i students. The question in part A contains 4 questions regarding gender and courses taken, while part B contains 30 questions for family values and 16 questions for coping skill. There are 21 questions in Part C.

In this study, a cross sectional study was used, which is a sort of observational research that examines data on variables that were gathered at one particular point in time across a sample population or subgroup. The advantages of cross-sectional studies include the acquisition of data, the focus on a specific point in time and the detection of correlations between variables. Cross sectional studies frequently use survey methodologies to gather data since they are quick, easy, and fairly priced.

3.3 POPULATION

For this study, the target of respondents was 3U1I university students from UMK. This population has been chosen with a total of 90 people of 3U1I university students in FHPK faculty. The populations were under graduate students anyone who takes 3U1I program in three departments in the FHPK faculty which consists of wellness, tourism and hospitality course. 3U1I students are students who only study 3 years in the university and a year in industry. The students will be selected by the faculty coordinator based on qualifications after filling out the application where 30 students only from each department will be selected.

3.4 SAMPLE SIZE

Since the population for this study was 90 students, the researcher has found out the minimum of sample size were 73 people 3U1I university students in UMK from this 3 departments which we have known based on Krejcie and Morgan in the table 3.1 below:

<i>Table for Determining Sample Size of a Known Population</i>									
N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	100000	384

Note: N is Population Size; S is Sample Size *Source: Krejcie & Morgan, 1970*

Table 3.1: Krejcie and Morgan Table

3.5 SAMPLING METHOD

Probability sampling was utilised in the study because the researcher knew who the sample size was. Sampling is the process of picking members or subsets of a population in order to make statistical inferences and estimate population characteristics. The names of these 3U11 students can be obtained from the coordinator at their respective departments. The researcher can choose 73 out of 90 3U11 university students to study from that list.

A probability sampling technique includes convenient sampling, which is non-probability sampling is commonly used in clinical and qualitative research. This sample method frequently chooses clinical cases or participants from a locality, a database of medical records, an online resource, or a customer-membership list. The motivation of participants who take part in the research affects convenience sampling in qualitative research. This introduces bias due to motivation into the research. The urge to reinforce one's particular ideas, voice a dissatisfied point of view, or show interest in the research issue can all serve as motivation for participation. (Samuel J, 2021).

Convenience sampling is a common form of sampling found in population research and particularly in pre hospital and disaster research. Convenience sampling is popular because it is not costly, not as time consuming as other sampling strategies, and simplistic. When used to generate a potential hypothesis or study objective, convenience sampling is useful. Despite the limitations of convenience sampling, there are steps that can be taken to improve credibility of this popular and simple method. (Samuel J, 2021).

3.6 DATA COLLECTION PROCEDURE

To determine the prevalence of depression among 3U1i students of FHPK faculty in University Malaysia Kelantan, a questionnaire was given to the respondent using Google Form via WhatsApp, email or personal chat because it is simpler to the respondents. The rapid proliferation of social media, the researcher used Google Form and received responses from 3U1i university students. Furthermore, because researchers were attempting to get responders from 3U1i university students in a short period of time, Google Form is the only option to reach the team.

3.7 RESEARCH INSTRUMENT

A research instrument is a measurement tool, such as a questionnaire, test, or scale, that is intended to help the researcher collect data from study subjects on an important issue. Research tool information, such as the population it is intended for, the instrument's function, and the variables it measures. Depending on the type of research that was conducted, researchers might employ a variety of measurement techniques, including surveys, case studies, and questionnaires. Three sections make up this questionnaire (part A, part B and part C). The demography will be questioned in part A. A segment is a demographic profile of the market of respondent's gender, age, race and course attended. Part B focuses on all independent variables, namely family values and coping skill. While part C discusses the dependents variable which is depression among university students.

In part A, ask about respondent demographics, such as gender, age, race, and courses taken. The genders used in this research are male and female, as usual. The age range begins at 20 to 25 years of age. The race of the responders is the next element. The study included Malays, Chinese, Indians, and others in this aspect on the questionnaire. The respondent must sign to the others if they are not Malay, Chinese, or Indian. The courses that UMK students take are the next aspect.

Next, part B contains two independent variables (IV) which are family values and coping skill. Each variable is divided into 3 questions and the sum of all questions is

6. Family values are about Asian Family Characteristic Scale (AFCS). Asian families are different in a variety of ways. The religious upbringing practised by Asian society has a huge impact on family structure. It has been demonstrated that certain family members may choose to avoid difficulties by acting quietly, indifferently, or ambiguously. Asian households remain still stable despite substantial internal tensions. Traditional Asian family values such as religious rites and religious celebrations resulted in high factor loadings. In the Asian community, extended family is still a significant source of assistance for the family. Each member of the family needs to be aware of their status in the family structure. (Musa R et al.,2015).

Next, coping skill. Coping skill are situationally specific when used as solutions to a particular problem. This has caused the adoption of a strategy based on flexibility of coping in recent years, under the assumption that a single person can mix many coping skill, using either one or the other depending on the particular circumstance they are experiencing. (Eisenbarth, 2012). The Brief-COPE is derived of COPE (Coping Orientation of Problems Experienced) Inventory, a self-report questionnaire created to investigate a variety of coping responses, a condensed version of the COPE. It is currently one of the most popular and well-validated coping strategy measures available. In part C, discussed about the dependent variable (DV), which is depression among university students. The scale DASS-21 consists of 21 items specifically designed to assess the severity level of depression, anxiety and stress. And since a person who is under a lot of stress is graded as severely stressed while a person who is relaxed is graded as normal, it should appropriately measure each individual's level.

PART	CATEGORY/ITEMS	SOURCE (YEAR)
A	<u>GENDER</u>	
Demographic profile	Male	
	Female	

	<p style="text-align: center;"><u>AGE</u></p> <p style="text-align: center;">20-21 years old 22-23 years old 24-25 years old</p> <p style="text-align: center;"><u>RACE</u></p> <p style="text-align: center;">Malay Chinese Indian Other</p> <p style="text-align: center;"><u>COURSE ATTENDED</u></p> <p style="text-align: center;">SAH/SAP/SAW</p>	
B Independent variable	Family values (AFCS): Coping skill:	Ramli et al.,2015 Yusoff. M.S.B, 2011
C Dependent variable	Depression among 3u1i students	Albany, 2018

Table 3.2: Questionnaire items

3.8 DATA ANALYSIS

There was three analysis that will include in this data analysis which is a reliability test, descriptive analysis and inferential analysis. First, a reliability test is a measurement of how well a test evaluates a subject. It is intimately related to test validity. A reliability test can be thought of as accuracy, or how free of errors a measurement is. Test validity could be defined as the degree to which a test accurately assesses the hypothesised underlying construct. Instead of thinking of dependability as a test's consistent quality, it is more accurate to consider it has various degrees of the construct under investigation's dependability for various populations.

Cronbach's alpha is used to compute reliability coefficients for survey instruments that use Likert-style response sets. Higher values indicate greater dependability. The range of Cronbach's alpha coefficient is 0 to 1.0. Although the definition of an acceptable

Cronbach's alpha coefficient is debated in literature, there is a consensus that any alpha coefficient below 0.75 should raise concerns. Calculate reliability using even more conservative standardised alpha coefficient, if at all possible.

Cronbach's alpha	Internal consistency
$\alpha \geq 0.9$	Excellent
$0.9 > \alpha \geq 0.8$	Good
$0.8 > \alpha \geq 0.7$	Acceptable
$0.7 > \alpha \geq 0.6$	Questionable
$0.6 > \alpha \geq 0.5$	Poor
$0.5 > \alpha$	Unacceptable

Table 3.3: Cronbach's Alpha

In general, a score of more than 0.7 is usually acceptable. If the alpha level is high, the test items can be closely related. Yet another factor is the number of exam items. More objects can be used to create a larger object, whereas fewer components can create a smaller object. If the alpha is high, unnecessary questions may be indicated. A low alpha value can suggest that there aren't enough questions on the test. Alpha can improve by adding additional useful test items. Low values may also be the result of the assessment of multiple latent variables or poorly related test questions.

A type of data analysis called descriptive analysis helps to accurately describe, present, or summarise data points so that patterns that meet all of the data's requirements can develop. One of the most important steps in the analysis of statistical data is this one. It gives you a breakdown of the distribution of your data, helps you find errors and outliers, and makes it possible for you to see relationships between variables, providing a basis for future statistical analysis. Examples of descriptive methods include constructing quantile and mean tables, computing methods of dispersion like variance or standard deviation, and producing cross-tabulations or "crosstabs" that can be used to test a range of different hypotheses.

Inferential analysis comes last. Inferential statistics come in a wide variety, and each one is suitable for a particular research design and set of sample characteristics. To select the optimal statistical test for their experiment, researchers should refer to numerous texts on experimental design and statistics. However, the majority of inferential statistics are based on the notion that a test-statistic result is generated using a specific formula. The process of modeling the probability of a discrete result given an input variable is known as logistic regression. The most popular types of logistic regression models a binary result, such as true or false, yes or no, and so on.

Using multinomial logistic regression, events with more than two distinct possible outcomes can be modeled. When attempting to establish which category a new sample most closely resembles, classification problems are a good place to employ logistic regression as an analysis technique. Logistic regression is a helpful analytical method since cyber security involves classification difficulties, such as attack detection.

3.9 SUMMARY

The researcher gets a better know how of the look at as dictated through the research design, population and pattern, sampling technique, tool, and data evaluation after reading this chapter. The researcher might also discover ways to follow the research design and work, as well as different components, as a result of this observe. This chapter also defined how the questionnaire became created and the way it is probably utilized in this research. All of the elements of this study should therefore be able to be used in future research by the conclusion of this chapter. Lastly, after this chapter is finished, the researchers will start to develop the survey.

CHAPTER 4

RESULTS AND DISCUSSION

4.1 INTRODUCTION

This chapter contains the findings from an analysis of the information obtained from the distribution of a survey questionnaire, the involvement of 73 respondents of 3u1i students. This chapter shows the findings from reliability test, descriptive analysis, logistic regression analysis and the discussion based on the research objectives.

4.2 RESULT OF DESCRIPTIVE ANALYSIS

4.2.1 Demographic characteristic of respondents

Throughout this study, descriptive analysis had been used describe average mean of each statement in independent and dependent variable. In this part will discuss on the results from the data in Section A which is the demographic characteristics of respondents. The questionnaire was including the gender, ethnicity, age group, and course attendance among 3U1I university students of FHPK faculty in University Malaysia Kelantan.

Outcomes of respondents' demographic characteristics are shown in table 4.1. Majority of respondents were female 84.4% while male as at 15.6%. Most of the respondents were from age 24-25 years old (86.7%) and for the ethnicity are (37.3%) for the Malay. The last one is course attendances which is (35.6%) for the course SAS.



Variable	Frequency (n) / Mean	Percentage / Standard Deviation
Age (year)		
20-21	1	2.2
22-23	5	11.1
24-25	39	86.7
Gender		
Female	38	84.4
Male	7	15.6
Ethnicity		
Malay	33	73.3
Chinese	2	4.4
Indian	4	8.9
Others	6	13.3
Course		
SAS	16	35.6
SAP	14	31.1
SAH	15	33.3
Depression		
Normal	16	35.6
Mild	3	6.7
Moderate	8	17.8
Severe	4	8.9
Extremely Severe	14	31.1
Family Values	85.6	17.71
Coping Strategies		
Problem Based Coping	20.73	6.16
Emotion Based Coping	27.84	7.66

Table 4.1: Result of Descriptive Analysis

In gender, the total number of male respondents was 7 (15.6%) while 38 (84.4%) was female respondents. This shows that the female respondents recorded highest by answering the survey than the male respondents.

Majority ethnicity of respondents were Malay 33 (73.3%), Chinese 2 (4.4%), Indian 4 (8.9%) and others 6 (13.6%). The highest number of respondents were Malays which consisted of 33 respondents with 73.3%. The lowest were from Chinese which are 2 respondents with value of 4.4%.

Next is depression. Majority of respondent was normal which consisted of 16 (35.6%). Other than that, for the mild were 3 respondents (6.7%), moderate 8 (17.8%), severe 4 (8.95) and extremely severe 14 (31.1%).

In the age category, the age between 20-21 which consisted of 1 respondent with 2.2%. For the age 22-23 which were 5 (11.1%) and 24-25 had the highest number of respondents were 39 (86.7%).

4.3 RELIABILITY TEST

The amount to which measurements can be duplicated is defined as reliability. It is showing not only the degree of correlation but also the degree of agreement among measures. Reliability is represented mathematically as a ratio of true variance to true variance plus error variance (Koo & Li, 2016). Reliability is not a constant property of a test and is better thought of as different types of reliability for different populations at different levels of the construct being measured.

Variable	Cronbach's Alpha
Depression	0.933
Family Values	0.936
Coping Strategies	
Problem Based Coping	0.932
Emotion Based Coping	0.882
Avoidant Based Coping	0.787

Table 4.2: Result of Reliability Test

Test reliability refers to the extent to which a test measures without error. It is highly related to test validity. Test reliability can be thought of as precision; the extent to which measurement occurs without error. By comparing the amount of shared variation, or covariance, among the items that make up an instrument to the amount of overall variance, Cronbach's alpha is a method for evaluating reliability. The idea is that if the instrument is reliable, there should be a great deal of covariance among the items relative to the variance. Overall, based on this study, all the questions asked to the respondents are reliable which is above 0.75.

4.4 INFERENCE ANALYSIS (LOGISTIC REGRESSION)

Inferential analysis (logistic regression) was used because dependant variables was categorical and to measure the relationship between the independent variable: family values and coping strategies with the dependent variable: depression. Inferential analysis (logistic regression) was used to determine the relationship between independent variables and dependent variables.

Variable	P-value	OR	95%Confident Interval (CI)	
			Lower	Upper
Family Values	0.03*	0.95	0.91	0.99
Coping Strategies				
Problem Based Coping	0.62	1.02	0.92	1.13
Emotion Based Coping	0.03*	1.11	1.00	1.23
Avoidant Based Coping	0.01*	1.96	1.31	2.95

***P-Value <0.05**

Table 4.3: Inferential analysis (logistic regression)

This table shows that the relationship between family values and depression among 3u1i university students is negative. Family value shows a significant value with depression was 0.03. Next, the relationship between emotion-based coping and avoidance-based coping with depression among 3u1i university students was positive and shows a significant value with depression which was 0.03 and 0.01.

The relationship between problem-based coping and depression in 3u1i university students was not an association. Problem-based coping shows a non-significant value with depression which was 0.63 more than the mean value of 0.5.

4.5 DISCUSSION

4.5.1 Descriptive Analysis

This research shows the results of our study for the percentage of gender is 84.4% for women and 15.6% for men. This is because, the majority of FHPK faculty are more women than men who can take the time to answer the questionnaire. The second reason is that the majority of 3U1I students are many female students,

especially those who work in the spa field and we also know that nowadays there are more female students than male students who are in university.

While the percentage for age is 20-21(2.2%), 22-23 (11.1%) and 24-25 (86.7%) among students 3u1i. Based on previous studies, it shows equality in terms of gender (Nuran et al.,2008). Age also demonstrates similarities because many students have finished their education and have entered the workforce by the time they are 24 to 25 years old. The second reason is that STPM graduates who are between the ages of 24 and 25.

In this research, we have carried out our results for the percentage of ethnicity. The majority of 3u1i university students were Malay 73.3% because the students at University Malaysia Kelantan have many Malay students and the distribution of the population in Malaysia also has Malays. In our study, majority our respondent were Malay. However previous study, show majority of respondent was Indian among university students 45% (Keong et., al 2018). The reason of involvement ethnicity Malays in the 3U1i university student program was more than that of Indians, and Chinese who choose to study at university instead of being in industry for a long time. In addition, the majority of FHPK students are Malay compared to other races.

In this research, we have carried out our results for the percentage of course. The majority of students 3u1i university students were SAS 35.6%. Compared to previous studies showing the prevalence for course tourism and hospitality which is 50.5% and 25.7% among tourism and hospitality management internship students (Armah et., al 2021). The reason why not the same with previous study because 3u1i program not the same with internship and it's different study mode. The majority of students in this study from the SAS course they give response because they work less. Compared with students SAP and SAH has a lot of work. The other reason students SAS gave their support to take the time to answer the questionnaire because the title of the final year project was related and was done by the students from the SAS course themselves.

In this research, prevalence of depression was 64.4% among 3u1i students. Compared to the previous study, it shows the prevalence of depression was 53.9% among bachelor students (Wong et al., 2023). So, there is a differences between our study. This could be due to the population of previous studies were bachelor student

who are in the university meanwhile target population in the study were student in industrial placement. So, there might be the different environment exposure towards student. According to Naidu et al., 2019 student in industry maybe poor social support from their friends to express feelings because of pressure in the industry and limited time for personal pursuits compare to bachelor students that only stays in university which close with their friends to talk and has a lot time to go anywhere. Other than that, different workloads also can affect depression rates, for example students in industry got many job to do in a short period compared to students in university received few work in a long period which has been set (M Zehr & Korte,2020).

4.5.2 Reliability Test

Based on the result, the cronbach's alpha shows that overall of the questions that being asked to the respondent is reliable and acceptable. This is because all the results shown above 0.7 which is acceptable and the highest show the family values which is 0.936 that is excellent. Compared to the previous study, which is Ramli Musa, the reliabilities which is internal consistencies of BM DASS-21 were determined by looking at cronbach's alpha value for overall item which is very good 0.904. As the results shows for depression, anxiety and stress scales the value were 0.84, 0.74 and 0.79 respectively (Musa R et al., 2019)

4.5.3 Inferential Analysis

Based on the logistic regression, findings show that there is significant association between depression and family values. It is comparable to previous study conducted by (Musa R et al., 2019). The possible reasons could be both of the research are using same scale to measured which are Asian Family Characteristics (AFCS) and Depression, Anxiety and Stress Scale (DASS21). This could be due to in the AFCS, one of the domain we measure was family harmony which can support people emotion whether children, teenagers students. Other than that, we also measure domain of family conflict where low family conflict can cause less problems in the family. So, this has proven that family values was a protective factor which

mean the higher family values the lower depression rate. It will exist an opposite direction towards independent variable and dependent variable.

Based on the results, there was significance association between depression and emotion-based coping among 3U1i university students. This result was similar with the previous study conducted by Cummings et., al 2001. The possible reason is that both of these studies use the same scale to measure the level of depression, which through the DASS-21. In addition, emotion based-coping with 3U1i university students reported that students got support from friends and they also used many strategies to deal with emotions such as seeking professional help and talking to someone to find out something. So, this has proven that emotion-based coping is a risk factor which means that there is a parallel direction because the lower the emotion causes the lower level of depression. There will be parallel directions for the independent variable and the dependent variable.

Based on the result, there is a significant between depression and avoidant based coping which is 0.01 compared to the previous study by Muhammad Saiful Bahri Yusoff, when compared to other interns, those who used avoidant coping strategies like behavioural disengagement, denial, self-blame, and self-distraction were 1.62 to 7.73 times more likely to suffer all three burnout domains. From this study, it could be said that avoidant based coping is the most significant among all three domains and the results shows the same as the previous study. The study's substantial correlation of avoidant coping mechanisms with all burnout domains was one of its most startling findings. They discovered that self-distraction was used by 63.8% of interns as a coping method and that they were twice as likely to experience burnout while our study shows the percentages of 4.29% which is the lowest. The finding previous study conducted by Saiful Bahari was significant association between avoidant based coping strategies was turned out of example of emotion problem.

The results show that the p-value is not significant between depression and problem-based coping with 0.62 among 3u1i university students. It is comparable to previous studies conducted by Rathakrishnan et al., 2022. In this case, the same results for p-values above 0.05. The reason is because the university does not provide exposure from the beginning to reduce depression among students which causes the problem of depression among university students to increase. The study shows that it

is not significant because where the findings indicated problem-based coping with being negatively correlated with depression among 3U1I students of FHPK faculty.

4.6 SUMMARY

In short, chapter 4 discussed the data analysis used by researchers to analyze the collected data using reliability analysis, descriptive analysis and inferential analysis (logistic regression). This chapter also include the discussion based on the research objectives.

**CHAPTER 5
CONCLUSION**

5.1 INTRODUCTION

In this chapter, the researcher has discussed and examined the results that have been found in Chapter 4. In addition, the limitations of the study and recommendations for future studies are also discussed in this chapter. Overall, the researcher will draw conclusions about this study to the general public.

5.2 RECAPITULATION OF THE FINDINGS

In this study, the findings from the previous chapter 4 (Result and Discussion), which are based on the study's objectives, questions, and hypothesis, will be summarized.

Relationship encompasses family values and depression among 3u1i university students.

Research question 1 of this study asked about relationship encompasses family values and depression among 3u1i university students?

This is also to answer the first objectives and hypothesis.

RESEARCH OBJECTIVES (RO)	RESEARCH QUESTION (RQ)
To investigate the correlations between family value and depression encompasses 3u1i college students.	Relationship encompasses family values and depression among 3u1i university students.
H1: There is significant association between family value and depression among 3u1i university	

students.

Table 5.1: Research Objective 1 and Research Question 1

The results of hypothesis 1 in the previous chapter were reviewed to answer research question 1. In addition, H1 states that there is a significant association between family value and depression among 3u1i university students, it shows a negative relationship which is highly related to depression among 3u1i university students. The p value for family value is 0.000 which is less than the highly significant level of 0.03. Apart from that, there is a relationship between family values and depression among 3u1i university students. Therefore, H1 is accepted.

Relationship between coping skill and depression among 3u1i university students.

Research question 2 of this study asked about significant relationship between coping skill and depression among 3u1i university students.

This is also to answer the first objectives and hypothesis.

RESEARCH OBJECTIVE (RO)	RESEARCH QUESTION (RQ)
To investigate the correlations between coping skill and depression encompasses 3u1i college students.	Significant relationship between coping skill and depression among 3u1i university students.
H2: There is significant association between coping strategies and depression among 3u1i university students.	

Table 5.2: Research Objective 2 and Research Question 2

The results of hypothesis H2 in the previous chapter have been reviewed to answer research question 2. In addition, H2 states that there is a significant association between coping strategies and depression among 3u1i university students. From the findings, it shows that emotion based coping and avoidant based coping are positive related to depression among 3u1i university students compared to problem based coping showing that it is not related to depression among 3u1i university students. The p value for emotion based coping and avoidant based coping is 0.000 which is very significant 0.03 and 0.01. Meanwhile,

problem based coping shows not significant among depression 3U1i students, similar to previous study (Ramli Musa et., al 2007). Therefore H2 is accepted.

5.3 LIMITATIONS

There are several limitations for this study. First limitations was low response rate, we only got 50% response from the 3u1i students population which are only 45 persons over 90 persons response. After spreading the questionnaire to all 3u1i students, we have remind them to fill in the form and follow-up to three times through email and whatsapp.

Secondly is sampling method we use got limitations also. For this study, we have used convenient sampling method. For convenient sampling method, every 3u1i students will not get equal chance to be involved in the study. This could be due to there are different environment pressure at their work placement by courses. For example, students in hospitality industry are busy than student in wellness industry.

Last but not least is limitation of study design. Study design that we used was cross-sectional study which cannot provide causal relationship (cause and effect) between independent variables and dependent variable. Cross-sectional study only present the correlations between independent variables or and dependent variables.

- i. Association between family values and depression.
- ii. Association between coping skills and depression.

5.4 RECOMMENDATIONS

The first recommendation that can be suggested is for future study, change the data collection method from quantitative to qualitative. This is to make the future researcher not only use the questionnaire but they also can use the face-to face interview to make the data collection more easy. This is because if they only use the questionnaire, the percentage of respondent who answer the survey is quite low. Other than that, if the researcher communicate through telephone or face-to face, they will know the respondent behaviour.

Second recommendation is enlarge the target population. The researcher can enlarge it from 3u1i students to all the internship students at University Malaysia Kelantan. This will make it easier to collect data and increased the number of sample data. The researcher can

perform simple random sampling which this method has the advantages to represent study population.

Lastly for future study, the researcher will consider using other independent variable to investigate the relationship between coping mechanisms and familial relationships in relation to the problem of depression among 3U11 university students. In addition, the perception of 3U11 students who are being stress could be treated.

5.5 SUMMARY

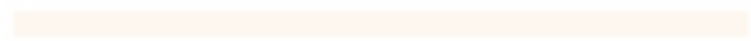
The main purpose of this research is to examine the relationship between family values and coping skills among 3U11 students. The independent variable is family values and coping skills and the dependent variable is depression. As stated in chapter 3, the total number of respondents was 73 3U11 students, but only 45 students cooperated to answer the distributed questionnaire. They consist of FHPK faculty where there are 3 different courses namely SAW, SAP and SAH.

After that, the researcher used SPSS (Statistical Package for the Social Sciences) to search for questionnaires that analyzed descriptive and inferential analysis. Concluding the results show a significant relationship between the independent variable and the dependent variable. Meaning, family values show significance among 3U11 depression students. Next, the relationship between emotion-based coping and avoidance-based coping with depression among 3U11 university students is significant but problem-based coping shows no significance with depression among 3U11 university students.

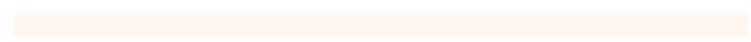
Summary of final results based on data analysis, all hypotheses (H1 and H2) stated are accepted. Limitations and recommendations during the conduct of this study also include those that can be used for further research.



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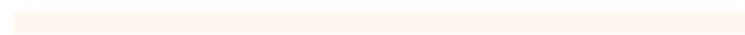
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APPENDICES

Family values:

1. exercise and carry out activities together
2. frequently visit our close relatives
3. do the house chores together during weekends
4. usually watch movies with family members
5. usually discuss whenever we have problems
6. smile because there is harmony in our family
7. fight over small or trivial matters
8. prefer keep our own problems to ourselves
9. keep our feelings to ourselves
10. my parents do not understand me
11. difficult for me to understand my family
12. they usually controls me
13. express love through hugging and kissing
14. help one another
15. often receive praises for each other
16. concerned the problems of each family member
17. respect our elders
18. family member fulfils his/her responsibilities
19. are usually self-centred or selfish
20. solve problems on our own
21. family members are isolated or isolate themselves
22. irresponsible and cause inconvenience to others
23. often raise our voices when discussing
24. retaliate when they are being reminded by others
25. knock the door and ask for permission before entering.
26. often engage ourselves in spiritual activities
27. celebrate festive seasons (Chinese New Year, etc) together
28. often discuss religious matters together
29. taught to respect other religious & cultural belief
30. always keep things tidy and organized

Coping skill:

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 alcohol or other drugs 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 alcohol or other drugs 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.

Depression among 3uli students:

1. I found it hard to wind down
2. I was aware of dryness of my mouth
3. I couldn't seem to experience any positive feeling at all
4. I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion)
5. I found it difficult to work up the initiative to do things
6. I tended to over-react to situations
7. I experienced trembling (eg, in the hands)
8. I felt that I was using a lot of nervous energy
9. I was worried about situations in which I might panic and make a fool of myself
10. I felt that I had nothing to look forward to

11. I found myself getting agitated
12. I found it difficult to relax
13. I felt down-hearted and blue
14. I was intolerant of anything that kept me from getting on with what I was doing
15. I felt I was close to panic
16. I was unable to become enthusiastic about anything
17. I felt I wasn't worth much as a person
18. I felt that I was rather touchy
19. I was aware of the action of my heart in the absence of physical exertion (eg, sense of heart rate increase, heart missing a beat)
20. I felt scared without any good reason
21. I felt that life was meaningless

