Relationship between Locus of Control and Examination Anxiety among First Year Medical Campus Students of Haramaya Univesity, Dire Dawa, Ethiopia

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Abstract: In this study an attempt is made to find out the relationship between locus of control and Examination Anxiety among the medical campus students of Haramaya University, Eastern Part of Ethiopia. To do so, co relational research design and a quantitative research method were employed. The sample consists of 106 medical campus students' boys and girls who were randomly drawn from various departments of medical campus. The locus of control was measured by using I-E locus of Control questionnaire by J.B. Rotter, the Examination Anxiety wasmeasured by Standardized Questionnaire by Dr. Madhu Agarwal and Varsha Kaushal. The major finding from the study revealed that the level of students' examination anxiety was low. Also, locus of the control of the majority of first year medical campus students' was internal than external. This implies that the successes or failures of students' resulted by their own behaviors possess. In addition, the finding from study portrayed that locus of control and examination anxiety is positively correlated. Moreover, as finding showed, there is the direct relationship between examination anxiety and age, sex of the respondents. Meaning level of students' examination anxiety influenced by their sex and level of age. On the other hand, the finding of the study represented that there is no relationship between examination anxiety and locality of students. Despite the fact that, the finding of the study cannot be generalized as it was conducted in one single area of the eastern part of Ethiopia. Further it is recommended that detailed study can be conducted in future. Suitable statistical analysis was used and results were discussed.
Keywords: Locus of Control, Examination Anxiety, Medical Students.

INTURDUCTION

Education transforms individuals into problem solvers who evince knowledge and are capable of utilizing the acquired knowledge to provide solutions to a wide range of problems. A good level of education confers on a student a corresponding high level of metacognitive skills which in turn helps the student to have a good knowledge of him as a cognitive processor, and knowledge of task and strategy variables necessary for effective learning [1].

However, sometimes, some students even at high educational level and with high level of metacognitive skills inexplicably fail to demonstrate the knowledge they have acquired during teaching and learning sessions. Such students attend classes, do their assignments but fail to perform in the days of reckoning (examinations) especially when the stakes are high. The students who have done all that is necessary but develop cold feet rather than confidence during examinations may be manifesting examination anxiety.

Examination anxiety is an uneasiness or apprehension experienced before, during or after examination because of concern, worry or fear of uncertainty. It was defined by Zeidner [2] as a set of phenomenological, physiological and behavioral responses that accompany concern about possible negative consequences or failure on an examination or similar evaluative situation. Itis a feeling that someone might have in a situation where performance really counts or where the pressure to do well is intense. Examination anxiety is not entirely bad. In fact a low level of Examination anxiety is normal and necessary among the students in order to maintain focus and togalvanize them into action preparing, plotting and perfecting strategies that will guarantee optimum success in the examinations. It is needed to motivate and help the students to stay mentally and physically alert [3]. However, high level of Examination anxiety is dangerous and can resultin emotional or physical distress, concentration difficulties and emotionalworries. It interferes with students' ability to prepare for and perform on Examination.

Locus of Control

For first time an idea of locus of control introduced by Julian Rotter [4] from his larger personality theory referred to as the social learning theory. The social learning theory states that one's personality is a result of the individual's interaction with his or her environment. Behavior cannot be viewed as an automatic response to stimuli, but an interaction of the individual's personal experiences and the environment. Rotter defined locus of control as a "generalized expectancy of internal versus external control over behavior outcomes. Locus of control was viewed as a cognitive expectancy which defined the individual's view of causal factors related to these outcomes [5]".

Internal locus of control (ILOC) is characterized by the belief that consequences are a result of one's own behavior. In other words, individuals who believe that their successes or failures result from their own behaviors possess an internal locus of control On the other hand, external locus of control (ELOC) is characterized by the belief that consequences are a result of fate, luck, or powerful others. In other words, individuals who attribute their successes or failures to something incongruent with their own behaviors possess an external locus of control. Moreover, Randy *et al*. [6].

Locus of control refers to a generalized expectancy that life events are contingent upon personal action, behavior, and ability. Locus of control can be described in terms of a continuum of internality and externality. One who is "internally oriented" feels control over the reinforcements received. Alternately, one who is "externally oriented" perceives no control of reinforces as powerful others, fate, chance, and luck control life events.

Examination Anxiety

The second variable of this study is Examination anxiety. Examinations are very important phenomena in schooling. Expectedly, students must take several Examinations in the course of their schooling as the results of such are essential for a number of reasons. For instance, the results are used to make important decisions about students and educational programs including determining levels of curriculum mastery, report card grades, grade level promotions, honours, and graduation [7]. Also, educators and policy makers use examination records to monitor students' learning progress and to assess the effectiveness of their instruction and identify ways to improve it [8].

Examination anxiety refers to worry, apprehension, palpitation, increase in pulse rate and other physiologic symptoms during the exam [7, 9]. TA negatively affects academic performance. According to Sarason and Sarason [10], high-Examination-anxious students express concern about the consequences of not performing at a satisfactory level on major exams and embarrassment at probable failure. Also, Examinationanxious college students, relative to their low-Examination-anxious counterparts, report suffering from poor mental health and psychosomatic symptoms [11]. Spielberger [11] reported that students who are high in Examination anxiety tendto have poor study habits and Examination taking skills.

The Relationship between Locus of Control and Examination Anxiety

Barlow's [12] model of anxious apprehension states those individuals who feelas if they have no control over external events that cause them anxiety or no control over their emotional or physical reaction to the stressor tend to have anxiety problems. A number of studies found that low perceptions of control over external threats and emotional and physiological reactions are related to increased levels of anxiety [13, 2]. Nunn [5] found significant and positive correlations between externality on the locus of control scale and trait anxiety as measured by the State-Trait Anxiety Inventory for Children [11].

The present study has been taken up with the following objectives.

- To identify the relationship between locus of control and examination anxiety among medical campus students of Haramaya University, Eastern Ethiopia.

To realize the above objective the following hypotheses are formulated:

- There will be relation between locus of control and examination anxietyamong medical campus students.
- There will be relation betweensex, age, locality and examination anxietyamong medical campus students.

Sample and Method

First year medical students were randomly selected from various departments of medical campus of Haramaya University, Eastern part of Ethiopia. The sample comprised 106 first yea medical students. Thesemedical students were met individually and were explained about the relevance of the study and were asked to give their frank opinions about the problems they faced and how they overcome. The subjects were given questionnaires i.e., I-E locus of Control questionnaire by J.B. Rotter, the Examination Anxiety was measure by Questionnaire by Dr. Madhu Agarwal and Varsha Kaushal [14] which was made some modification of statements and locally standardized.

RESULTS AND DISCUSSION

Both descriptive and inferential statistics procedures were employed to analyze the data collected by using I-E locus of Control standard questionnaire by

J.B. Rotter, the Examination Anxiety was measured by Standardized Questionnaire by Dr. Madhu Agarwal and Varsha Kaushal. The data obtained from the respondents were analyzed by using statistical package for social science (SPSS version 22) software was used to organize, analyze and interpret the collected data, since it was appropriate version to do the analysis. The collected data was encoded, tabulated and interpreted. Frequency, percentages, mean and deviation were used to analyze (Gay & other, 2009). For this study, a two-tailed Pearson correlation analysis and among the first year medical campus students of Haramaya University, Eastern Ethiopia. The Pearson's product moment coefficient (r) is the most often used and most precise coefficient. This coefficient may be calculated by converting the raw scores to sigma scores finding the mean value of their cross products(Best and Kahn,2006). It used to test whether a correlation was different from zero or a relationship exists(Gay,et al 2009)

General Characteristics of the Respondents
          Questionnaires were distributed to a total of 110 Harar health campus students. Of these 110 total number of questionnaires distributed to the sample respondents, 106 (96.36) were appropriately filled and returned.
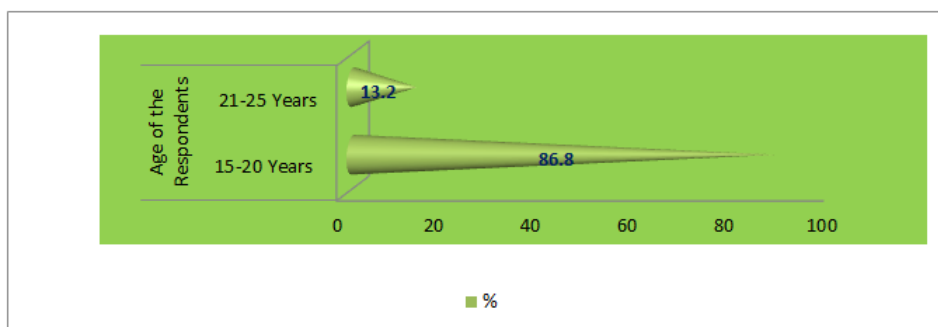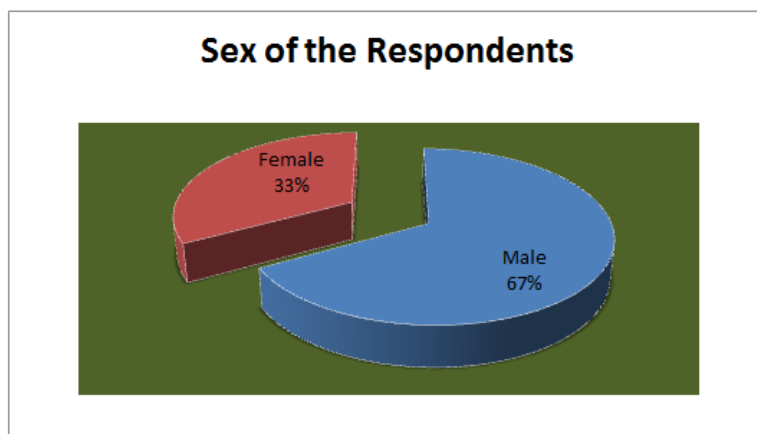

Fig-1: Age distribution of the Respondents

          As it is portrayed on the figure:1 of participant's agefrom 15- 20 years of individuals (86.8%). Moreover 13.2% of the respondents were aged between 21 -25 years. Therefore as we can understand from the statistics majority of the students were aged between 15 to 20 years.
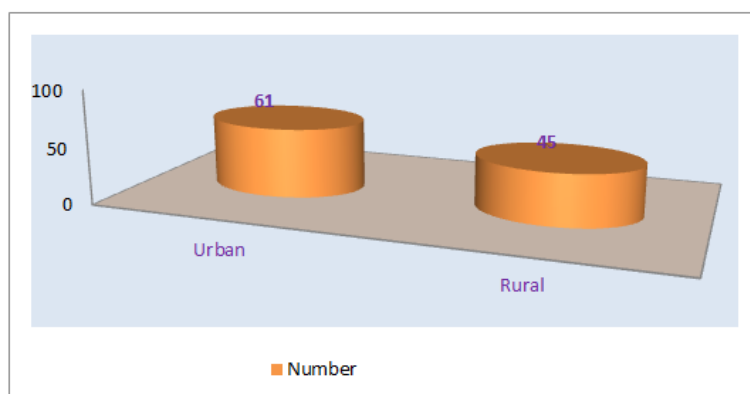
Set of the respondents

Fig-2: Sex of the respondents

          As it demonstrated on the figure 2 about sex of the respondents, 67% of the students were male and remaining 33% of the respondents were male. So, proportion of fresh students in Harar health campus dominated by male students.

Resident areas of the respondents

Fig-3: resident areas of respondents

As it displayed on the figure out of the total 106 numbers of sample students, 61 students came from urban areas and remaining 45 students came from rural areas. Majority of Haramaya university Harar health campus students came from rural areas.

Table-1: Descriptive statistics of Locus of control

Locus of control	Frequency	Percent	Mean	Std. Deviation
Internal	62	58.5	2.08	.980
External	44	41.5	2.55	1.109
Total	106	100.0	4.63	2.17

The table 1 shows that the students locus of the control (58.5%) and (41.5%) internal and external respectively. From this the greater number of students' locus of control was internal. In addition mean 2.08 and 2.55 and standard deviation .98 and 1.10 correspondingly strengthen above facts. Therefore, we can conclude that the locus of the control of the majority respondents in Haramaya university, first year medical campus students were internal than external. The implication of internal locus of the control on students, that the successes or failures of students' resulted from their own behaviors possess.

Table-2: Descriptive statistics of examination anxiety

Examination anxiety	Frequency	Percent	Mean	Std. Deviation	Variance
Extremely low	30	28.3	1.33	.479	.230
Low	33	31.1	1.30	.467	.218
Below Average	29	27.4	1.52	.509	.259
Average	12	11.3	1.67	.492	.242
Above Average	2	1.9	1.50	.707	.500
Total	106	100.0	1.42	.495	.245

Table: 2 portray the level of examination anxiety of the medical campus first year students as follows. (28.8%) and (31.1%) students were responded as level of examination anxiety extremely low and low respectively. In contrary, (1.9%) and (11.3%) students were reacted as level of examination anxiety above average and average correspondingly. The remaining (27.4%) student replied as they have below an average examination anxiety. Besides, indicated on the Table: 2, mean, std. deviation and variance also support the above details. So more than 60% of the students' were examination anxiety was low. All in all, we can conclude as level of the students' examination was low.

Table-3: Relationship between locus of control and examination anxiety

Locus of control and examination anxiety		Locus of control	Examination anxiety
Locus of control	Pearson Correlation	1	.218[*]
	Sig. (2-tailed)		.025
	N	106	106
Examination anxiety	Pearson Correlation	.218[*]	1
	Sig. (2-tailed)	.025	
	N	106	106
Examination anxiety and age of the respondents		**Examination anxiety**	**Age of the Respondents**
Examination anxiety	Pearson Correlation	1	.164
	Sig. (2-tailed)		.094
	N	106	106
Age of the Respondents	Pearson Correlation	.164	1
	Sig. (2-tailed)	.094	
	N	106	106
Examination anxiety and sex of the respondents		**Examination anxiety**	**Sex of the Respondents**
Examination anxiety	Pearson Correlation	1	.142
	Sig. (2-tailed)		.147
	N	106	106
Sex of the Respondents	Pearson Correlation	.142	1
	Sig. (2-tailed)	.147	
	N	106	106
Examination anxiety and locality of the respondents		**Examination anxiety**	**Resident locality of the respondents**
Examination anxiety	Pearson Correlation	1	-.060
	Sig. (2-tailed)		.540
	N	106	106
Resident areas of the respondents	Pearson Correlation	-.060	1
	Sig. (2-tailed)	.540	
	N	106	106

The first item of the Table:3 explains about relationship between locus of control and examination anxiety; its correlation is 0.218. Therefore it shows that there is a relationship between locus of control and examination anxiety and it positively correlated. Meaning if locus of controlinternal , level of examination anxiety will also high and vis-versa is true.

The second item of the Table: 3 portray relationship between examination anxiety and age of the respondents; its correlation is 0.164. So, it shows again there is positive correlation between examination anxiety and age of the respondents and it positively correlated. Accordingly we can say if the age of students increase, level of examination anxiety will also increase and vis-versa is again true.

The third item of the Table: 3 depicts relationship between examination anxieties and sex of the respondents and its correlation is 0.142. Hence it clearly indicates that there is a positive correlation between examination anxieties and sex of the respondents. So, examination anxieties and sex of the respondents have direct relationship and associated.

The last item of the Table: 3 shows relationship between examination anxiety and resident areas of the respondents and its correlation is -0.060. Its result is different from the rest above items. Therefore examination anxiety and resident areas of the respondents was negatively correlated and have on correlation.

CONCULUTION

This study tried to find the relationship between locus of control and examination anxiety among first year medical campus students of Haramaya Univesity, Dire Dawa, and Ethiopia. We have drawn conclusions from the analysis and discussion as locus of control and examination anxiety among first year medical campus students has positive correlation. One depends on another one. Moreover, there is positive relationship between level of examinations anxiety and age and sex of the respondents. By the same token, examination anxiety of the students isdepend on their age and sex. Finally, it is possible to conclude that no relationship between examination anxiety and students' locality i.e either they come from urban or rural areas. However, the findings of this study cannot be generalized as it was conducted in one medical campus of the Ethiopia Eastern part. Further it is recommended that detailed study can conducted in future.

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