

Effectiveness of Cognitive – Behavioral Management of Stress on Students' Homesickness

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Abstract *The present study aims to determine the effectiveness of Cognitive- Behavioral Stress Management on homesickness among university students. The study was conducted in a pre-test post-test experimental design. Two weeks after their arrival at the University dormitories, 225 freshman students completed the 33-item measure of homesickness, Homesickness Questionnaire (Archer et al, 1998). According to this questionnaire, 88 of the students were found to be suffering from homesickness (their scores were 1 SD beyond the average). From this population, 50 students were randomly selected and assigned to the intervention and control group. Subjects in the experimental group, undergone 10 sessions of cognitive-behavioral stress management Training. Subjects in the control group received no treatment. Data were analyzed using independent t test. There were no significant differences between the two groups in the pre-test result. However, after completing the stress management training, the experimental group showed significantly lower scores than the control group. Furthermore, two factors of homesickness (i.e. dissatisfaction with the university and strong attachment to home) which did not show any differences between the groups in the pre-test results, revealed significant reduction in the post-test results of the experimental group. The results of the present study show that cognitive-behavioral stress management training can be effective in alleviating homesickness and the problems that the students may encounter when they enter a new university environment.*

Keywords: *Homesickness, Stress Management, University Students.*

Introduction

Educational activities as one of important necessities of life lead to the separation of the individual from home and family and make them interact with other places, people and cultures for short or long periods of time. Such situations lead to issues or problems one of which is homesickness (Vingerhoets, 1997). Experiencing moderate degrees of homesickness is considered as an intrinsic and normal reaction to the separation from home and family. But if its severity exceeds the normal limit, the individual won't be able to adapt to the new environment and will experience deep loneliness, depression and increased physical problems (Fisher and Hood, 1988). Being far from home and family and familiar environment on the one hand, and tackling the pressures of the new environment on the other hand, will affect individual's behaviors and efficacy and result in homesickness (Fisher and Hood, 1987).

Researchers consider homesickness as a complex negative motivational, cognitive and emotional situation with recurrent thoughts about home, being separated from friends, tendency to return home and the familiar environment which is accompanied by depressive mood, psychosomatic symptoms and physical complaints (Benn, Harvey, Gilbert, and Irons, 2005; Karin, Nijhof, Rutger, and Engels, 2007).

Being far from home environment can be a stressful experience, especially for youngsters (Strobe, Vliet, Hewstone and Willis, 2002). Although many students don't express their homesickness (Vantilburg, Vingerhoets and VanHeck, 1999), homesickness is more common than it's expected to be, so that 50 to 80 percent of the general population have experienced it at least once in their lifetime. Also 60 to 70 percent of those who leave their town and country feel homesick. Beside this number, around 7 to 10 percent of them have felt so homesick that their daily activities have been disrupted (Fischer, 1981; Strobe et al; 2002; narrated by Ben, 2005; Vantilburg et al, 1999; Eurlings-Bontoke, Bronwers, Verschunr and Duijsens; 1998). Research has shown that there is homesickness among British, Chinese, American, Turkish and Australian students (Carden and Ficht, 1991; Fisher and Hood, 1987; Lu, 1990; and Burt, 1993). So, homesickness is a common phenomenon among students (Karin et al, 2007).

If homesickness is severe or chronic, it can be increasingly accompanied by many cognitive problems such as poor memory or poor concentration, it can lead to educational problems or even leaving the school (Burt, 1993; Fisher and Hood, 1988). So it seems necessary to investigate it.

Although investigating the homesickness has always been considered by researchers, a few empirical researches have been done in this field. Bordbar, Azad Fallah, Tabataba'ee and Samani (2009) have shown the effects of immunization and assertiveness training in decreasing homesickness in students. Results of the current studies in this field have confirmed the effectiveness of self-expression, assertiveness, stress resolution, training coping strategies (Eurlings-Bontoke, 2005; Vantilburg et al, 1999).

Stress management training according to cognitive behavioral method is a multidimensional approach in which various techniques such as relaxation, diaphragmatic breathing, meditation, recognizing negative automatic thoughts and cognitive distortions and replacing them with rational thoughts, training efficient coping, anger management, and expressionism is taught (Antony, Ironson and Schneiderman, 2007) and its efficacy in stress control, depression and anxiety has been proved, and research has shown that there is a close relationship between homesickness and depression, anxiety and stress (Vantilburg et al, 1999; Venolit, 2001), so it's expected that cognitive – behavioral management of the stress can be effective in decreasing homesickness. So, stress management training based on cognitive – behavioral method is the aim of current research and its main goal is to evaluate the effectiveness of the cognitive – behavioral management of the stress on homesickness and its components.

Method

Current study is done in pretest – posttest design using a control group in which 88 out of 225 male first year student completing homesickness questionnaire have been diagnosed as homesick. 50 of these students have been chosen on a simple random basis and placed either the experimental or control group. The experimental group received the stress control intervention, while control group received no intervention. Homesickness questionnaire (Archer et al, 1998) was used to investigate students' homesickness. This questionnaire contains 30 items which are graded based on Lickert's 5 degree scale and measure homesickness in two factors of "attachment to home" and "dissatisfaction with university". Cronbach's alpha coefficient of this questionnaire was calculated 0.9 for attachment to home and 0.82 for dissatisfaction with university. Correlation coefficient obtained by retest method was 0.81 for whole the test and 0.83 for attachment to home and 0.78 for dissatisfaction with university (Farhadi, 2004).

Pretest scores for the first two weeks of the entering to the dorm were collected. Then, the experimental group attended the stress management program based on cognitive – behavioral approach and after the intervention, posttest scores were collected. Stress management training program included 10 two-hour sessions during which skills like relaxation, diaphragmatic breathing, muscle relaxation, meditation, recognizing negative thoughts and cognitive distortions, replacing rational thoughts, effective coping training, anger management, and expressionism are taught (Antony, Ironson and Schneiderman, 2007). The data were analyzed by SPSS software and independent t-test to compare the two groups.

Findings

To determine the effectiveness of the anger management training on the control and experimental groups, we first calculated the scores of the two groups on homesickness variable in pretest and posttest stages. Then, according to the score difference between stages before and after the test, we used independent t-test to compare control and experimental groups. During the interval which experimental group was receiving stress management training, the control group didn't receive any kind of intervention.

Table 1: Results of independent t test to compare homesickness in experimental and control group

groups	Pre-test					Post-test					Subtraction results				
	mean	SD	t	df	P	mean	SD	T	df	P	mean	SD	t	df	P
experimental	93/76	15/35	0/018	48	0/98	77/5	12/88	-2/9	48	0/005	-16/24	5/66	-9/26	48	0/000
control	93/6	14/56				88/44	13/06				-5/2	3/78			

As the results of the table 1 show, mean scores of the experimental and control group weren't significantly different in the pretest stage, but after stress management training and comparing the results, independent t-test reveals a significant difference between homesickness scores of the two groups. The last value of the t-test for the effectiveness of the stress management training on homesickness is -9.26 which is significant in $P < 0.001$. In the other words, we can conclude that stress management training has had a significant effect on alleviating homesickness.

Table 2: Results of independent t-test: comparison between "attachment to home" and dissatisfaction" in experimental and control group

groups		Pre-test					Post-test				
		mean	SD	t	df	P	mean	SD	t	df	P
attachment to home	experimental	58/28	12/6	0/22	48	0/83	46/48	9/6	-2/54	48	0/014
	control	57/52	12/44				54/36	12/18			
dissatisfaction	experimental	35/48	5/41	-0/46	48	0/64	31/04	4/21	-2/36	48	0/022
	control	36/16	4/94				34/08	4/87			

The data on the table 2 also show that mean score of the control and experimental groups at pretest stage were not significantly different with respect to "attachment to home" and "dissatisfaction" variables, but after stress management training, independent t-test results suggest that there is a significant difference between these two groups with respect to the variables "attachment to home" and "dissatisfaction". The magnitude of independent t resulted from effectiveness of stress management training on "attachment to home" variable in posttest is -2.54 which is significant for $P < 0.05$. This value is -2.36 for "dissatisfaction with university" which is significant for $P < 0.05$. In other words, stress management training has affected both components of the homesickness significantly. These data suggest that stress management training based on cognitive – behavioral method has been significantly effective in alleviating students' homesickness.

Conclusion

Almost all nonnative students experience high levels of homesickness when entering the university which will diminish gradually. This finding is consistent with the findings of the previous researches (Fisher and Hood, 1987; Vantilburg and Vingerhoets, 2005; Ghanbari, 2006; Burt, 1993). High amount of homesickness can be explained by cutting the relationships from the previous environment and confrontation with demands and supplies of the new environment which is modifies gradually by time and familiarity of the individual with his new environment.

Findings suggest that stress management is effective on diminishing the homesickness in students which is explicable by the cognitive – behavioral strategies considered in stress management. Using behavioral strategies of stress management, such as relaxation and muscular relaxation, stress and anxiety can be reduced. Physical signals of the stress are recognized and by mastering the relaxation, which is inconsistent with stress, the anxiety and stress resulted from homesickness is alleviated.

Recognizing negative automatic thoughts and cognitive distortions and replacing them with rational thoughts which are trained in the fourth and fifth sessions have crucial role in reducing the depression. Depressive mood is one of outstanding characteristics of the people suffering from homesickness and feeling aimless and recurrent thoughts about death or suicide are also seen in homesickness (Vantilburg, 1997). Besides, homesickness is considered as a reactional depression to leaving home (Fischer, 1989; narrated by Vantilburg, 1997). So, it's expected that cognitive reconstruction which alleviates the depression is also effective on adjusting homesickness.

Training coping skills (during sixth and seventh sessions) as one of other techniques used to managing the stress enables individual to confront adaptively during which individual learns to develop their abilities and limiting constraints of the situation instead of helplessness, passiveness or thought rumination (Strobe, 2001) which is a more effective and efficient strategy against stress resulted from homesickness.

When individual becomes able to alleviate the stress and physical symptoms accompanied by stress using behavioral techniques, he/she gains more sense of control (Antony, Ironson and Schneiderman, 2007). Those who have more sense of control, use problem-oriented approaches more when confronting stressful situations such as homesickness (Strobe, 2002). As a result, they feel less homesick.

Finally, training expressionism and anger management skills enables students who feel alone and aren't able to communicate with others to expand their social network by facilitating social relations and improving its quality and as a result, receive more social support (Eurlings-Bontoke, 2005). Having social support in stressful situations also enables individual to experience less stress and cope more effectively and report less physical signals related to stress (Strobe, 2001). Findings of Bordbar et al (2009) and Ghanbari et al (2006) confirm this claim.

In summary, in stress management program, relaxation, diaphragmatic breathing, muscular relaxation, meditation, recognizing negative automatic thoughts and cognitive distortions, replacing them with rational thoughts, efficient coping training, anger management, and expressionism are taught (Antony, Ironson and Schneiderman, 2007) which leads to higher sense of control, self-efficacy, self esteem, adaptation and social support and all these factors lead to alleviation of anxiety, depression and social isolation and decrease homesickness.

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