

# Acute Social Stress Influences Cardiovascular and Emotional Reactivity among College Students



Kelly Cole, Hannah Gordon, Sophia Koné, Aeriel Lin, Catherine Pham, & Laurel M. Peterson, Ph.D. Bryn Mawr College

INTRODUCTION

- Stress, with acute symptoms affecting emotional distress and cardiovascular changes, has significant implications for wellbeing (Lehman et al., 2009).
- The Trier Social Stress Test (TSST) induces elevated selfreported stress, heart rate, and blood pressure (Allen et al., 2014).
- Field research extends TSST findings, demonstrating increased negative emotions and cardiovascular reactivity during student class presentations (Elfering & Grebner, 2012).



Our goal is to explore if a modified TSST will similarly affect undergraduates' cardiovascular reactivity and emotional stress; resulting in higher cardiovascular indicators and self-report stress compared to pre-stressor measures.

**METHOD** 

## **PARTICIPANTS:**

A convenience sample of 51 undergraduate students enrolled in laboratory courses at a historically women's college volunteered; no demographic information was collected to ensure anonymity.

Participants underwent two measurement sessions:

1. In the **pre-stressor** session, they self-measured baseline systolic and diastolic blood pressure, heart

rate, and stress emotions, reported using an adapted version of the Positive and Negative Affect

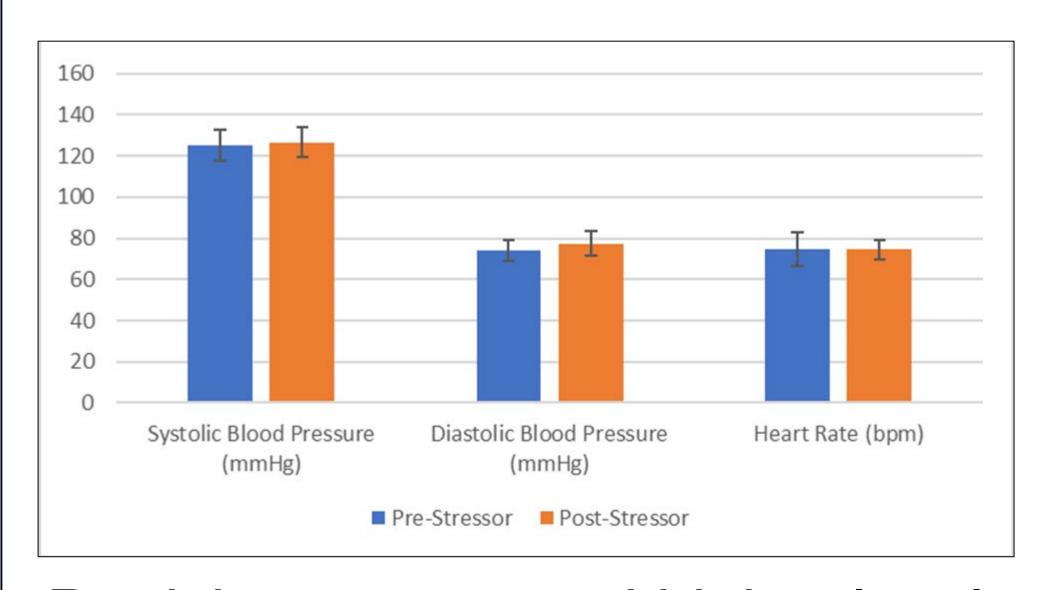


Scale (3 items,  $\alpha = .70$ ; Thompson, 2007).

2. In the **social stressor** session, participants experienced an adapted version of the Trier Social Stress Test (TSST) conducted via an audio recording only; cardiovascular and self-report stress ( $\alpha = .73$ ) were reassessed three minutes into the task.

#### RESULTS

- Paired samples t-tests were conducted using SPSS syntax to investigate any significant differences in the pre- poststressor sessions.
- Systolic blood pressure did not significantly differ post-stressor (M = 126.55, SD = 14.40) compared to pre-stressor (M = 124.94, SD =15.17; t(50) = -.79, p = .216, d = -.11; see figure).
- Diastolic blood pressure was higher post-stressor (M = 77.40, SD = 12.18) than pre-stressor (M = 10.18) 74.06, SD = 10.35; t(49) = -2.92, p= .003, d = -.41; see figure).
- Heart rate showed no significant difference post-stressor (M = 74.43, SD = 9.72) compared to pre-stressor (M = 74.71, SD =16.43; t(50) = .12, p = .452, d = .452.02; see figure).



 Participants reported higher levels of stress post-stressor (M = 4.06, SD = 1.14) than pre-stressor (M =2.95, SD = 1.18; t(50) = -8.20, p <.001, d = -1.15).

### DISCUSSION

- Diastolic blood pressure and selfreported stress were higher postsocial stressor compared to prestressor among undergraduates, aligning with past research (Allen et al., 2014; Lehman et al., 2009).
- Systolic blood pressure and heart rate showed no significant changes, possibly due to the less active social component in our adapted-TSST.
- The pre-post design limits causal inference, and external validity is constrained by the unique convenience sample of college students.
- Future research should utilize experimental designs and larger, more representative samples to enhance generalizability.
- The results of higher stress emotion and diastolic blood pressure from an acute stressor highlight the importance of promoting healthy coping in college.

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