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Knowledge of Meditation and Stress-Relieving Therapies for Reducing Anxiety Levels Among Secondary School Certificate Board Students

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Abstract: ***Anxiety is a state of persistent worry and tension, often triggered by uncertain future events and frequently accompanied by physiological symptoms. Adolescents, especially students appearing for S.S.C. board exams, experience high levels of academic stress. This descriptive study aimed to assess the knowledge of meditation and stress-relieving therapies among 10th-grade students in selected schools of Jamnagar city, Gujarat. A quantitative approach with a pre-test only research design was adopted. The study included 80 students selected through simple random sampling. Data were collected using a structured questionnaire assessing students' awareness of techniques such as meditation, breathing exercises, and other stress-reduction methods. The study found that while many students had basic knowledge, a significant portion lacked comprehensive understanding. There was a statistically significant association between knowledge levels and demographic variables such as age, prior awareness, and sources of information. Findings from the main study revealed better knowledge outcomes compared to the pilot study, indicating improved awareness due to participation. The study concludes that students demonstrated a willingness to learn, and there is a need to implement structured awareness programs in schools. Promoting such non-pharmacological interventions can play a key role in reducing exam-related anxiety and enhancing overall mental well-being***

Keywords: Meditation, Anxiety, S.S.C Board, Stress Relieving Therapies, WHO

1. Introduction

Anxiety is commonly associated with excessive fear, persistent worry, and related behavioural disruptions, as noted by the World Health Organization. It is characterized by a prolonged and distressing emotional state marked by uneasiness and tension. According to Barlow (2002), anxiety involves a continuous sense of apprehension about uncertain and potentially threatening future events. This emotional state is often accompanied by physical symptoms such as muscle tension, restlessness, and heightened alertness, making it difficult for individuals to relax or feel at ease.

2. Background of the Problem

1) Understanding Anxiety

Anxiety is the body's natural response to stress, manifesting as feelings of fear or apprehension about future events. While it's common to feel nervous before activities such as interviews or public speaking, anxiety becomes a disorder when these feelings are intense, last over six months, and interfere with daily functioning (Jacquelyn Johnson, 2003).

2) Types of Anxiety Disorders

There are various forms of anxiety disorders, each with distinct symptoms:

- **Generalized Anxiety Disorder (GAD):** Chronic worry without a clear cause.
- **Panic Disorder:** Sudden panic attacks with physical symptoms like chest pain and heart palpitations.
- **Social Anxiety Disorder:** Extreme fear of being judged in social situations.
- **Specific Phobias:** Irrational fear of specific objects or situations (e.g., heights, flying).
- **Agoraphobia:** Fear of being in situations where escape may be difficult.
- **Separation Anxiety:** Anxiety when separated from close individuals, not limited to children.
- **Selective Mutism:** Inability to speak in certain public settings despite speaking normally at home.
- **Medication-Induced Anxiety:** Anxiety triggered by drugs or withdrawal (Smitha Bhandari, 2023).

3) School-Related Anxiety in Students

School anxiety can arise due to factors such as bullying, performance pressure, or transitions like returning from vacation. Children may show symptoms like restlessness, frequent illnesses, avoidance behaviours, or social withdrawal. These symptoms can overlap with learning difficulties and depression (N. Simay Gokbayrak, 2022; Child Mind Institute, 2021).

4) Diagnosis of Anxiety

Mental health professionals conduct psychological evaluations to diagnose anxiety disorders. This involves assessing thoughts, behaviours, and symptoms using the DSM-5 criteria. Often, anxiety coexists with other conditions like depression, making diagnosis more complex (Mayo Clinic).

5) Meditation as a Stress-Relief Tool

Meditation is a practical method for managing anxiety. The process includes sitting comfortably, closing the eyes, deep breathing, scanning the body, observing thoughts, and returning focus to the breath. Research shows it reduces stress, enhances sleep, and improves emotional regulation (Vacayou.com).

6) Benefits of Meditation for Students

Regular meditation offers numerous advantages for students:

- Improved focus and academic performance
- Better time management and prioritization

- Higher self-esteem and confidence
- Enhanced interpersonal relationships
- Reduced anxiety and stress
- Improved sleep quality
- Greater clarity of thought and mental well-being
- Better handling of peer pressure
- Improved decision-making and discipline
- Enhanced sports and extracurricular performance

Apps like *Black Lotus*, developed by Om Swami, offer guided meditations and structured goal-setting using the RARE framework, aiding both students and adults in personal transformation

2.1 Statement of the Problem

A descriptive study to assess the knowledge regarding the meditation and stress relieving therapies to reduce the anxiety level among board students (S.S.C.) in the selected schools of Jamnagar city, Gujarat.

2.2 Objectives of the Study

1) To assess the level of knowledge regarding meditation and stress-relieving therapies aimed at reducing anxiety among S.S.C. board students in selected schools of Jamnagar city, Gujarat.
2) To determine the association between students' knowledge and selected demographic variables such as age, gender, previous exposure to meditation, and source of information.

2.3 Assumptions

1) It is assumed that S.S.C. board students may possess **inadequate knowledge** about meditation and various stress-relief therapies.
2) Students may not be fully aware of the **benefits and correct practices** of meditation in managing academic stress and anxiety.
3) Demographic variables such as **age, medium of instruction, and previous experience** with stress-relief techniques may influence the level of knowledge.

3. Method

3.1 Design and Settings

The research design serves as the blueprint for conducting the study, detailing the research approach, setting, sample size, sampling technique, tools, data collection methods, and analysis to address the research questions or test hypotheses. This study employed a **one-group pretest descriptive design** to assess the knowledge and practice related to meditation and stress-relieving therapies aimed at reducing anxiety levels among board students (S.S.C. and H.S.C.) in selected schools of Jamnagar city, Gujarat. According to Hunger, the research setting refers to the location and conditions where data collection occurs. The study was conducted at **Kalindi International School** and **Shree Saraswati Vidyalaya** in Jamnagar.

3.2 Sample Size and Sampling Techniques

According to Basavanthappa (2010), a sample population comprises all cases meeting specific criteria and accessible to the researcher as potential study subjects. Burns and Grove (2008) define sampling as the process of selecting eligible members from the target population. For this study, random sampling technique was employed to select the sample. The sample included students appearing for the 10th board examination at Kalindi International School and Shree Saraswati Vidyalaya who experienced anxiety. The sample size was 80 students who were present during data collection and willing to participate in the study.

3.3 Assessment Tools

The data collection tool consisted of two sections:

Section A: Collected socio-demographic data including age, gender, religion, and prior knowledge about anxiety.

Section B: Comprised 30 multiple-choice questions to assess knowledge about exam anxiety, including its introduction, definition, causes, signs and symptoms, management, and stress-relieving therapies. Each correct answer was scored as 1 point; incorrect answers scored 0. The maximum total score was 30, classified as:

Poor knowledge: 0–10
Moderate knowledge: 11–20
Good knowledge: 21–30

3.4 Validity And Reliability

Content validity refers to the extent to which the tool adequately covers the subject matter (Best & Kahn, 2001). The tool and teaching program were reviewed by five expert faculty members who assessed relevance, clarity, and appropriateness. Their feedback, along with pilot study results, informed necessary modifications. Reliability refers to the consistency and accuracy of the tool; a tool is considered reliable if it consistently produces the same results under similar conditions.

3.5 Data Collection Procedure

Permission to conduct the study was obtained from the principals and heads of the schools. The researcher made introductory visits to the classrooms to build rapport and establish trust with the students. Participants were assured of confidentiality and the voluntary nature of their involvement before administering the pretest questionnaire.

4. Result

The major findings of the study are presented under the following sections. The collected data were organized and presented accordingly:

Section 1: Frequency and percentage distribution of demographic variables of students

Section 2: Pre-test level of knowledge regarding meditation and stress-relieving therapies among S.S.C. board students

4.1 Demographic Data

Table 1: Frequency and Percentage Distribution of Demographic Variables. N=80

S. No	Demographic Variable	Frequency	Percentage
1.	AGE (IN YEAR):		
	14-15 YEARS	74	92.5%
	16-17 YEARS	6	7.5%
	18-19 YEARS	0	0
2.	GENDER:		
	MALE	30	37.5%
	FEMALE	50	62.5%
3.	RELIGION:		
	HINDU	78	97.5%
	MUSLIM	2	2.5%
	JAIN	0	0
	OTHERS	0	0
4.	NUMBEROF TRIES:		
	1st	79	98.75%
	2nd	1	1.25%
	3rd	0	0
	4th	0	0
5.	RESIDENT:		
	RURAL	3	3.75%
	URBAN	77	96.25%
6.	PRIMARY SOURCE OF INFORMATION:		
	SELF	17	21.25%
	FRIENDS	8	10%
	TEACHER	47	58.75%
	OTHER	8	10%
7.	PREVIOUS KNOWLEDGE REGARDING ANXIETY:		
	NO	10	12.5%
	LITTLE	27	33.75%
	FAIR	9	11.25%
	APPROPRIATE	34	42.5%
8.	WHAT WAS YOUR LAST ACADEMIC RANK?		
	1st TO 20th	69	86.25%
	21st TO 40th	7	8.75%
	41st TO 60th	2	2.5%
	61st TO ABOVE	2	2.5%
9.	WHICH AREA OF THE STATEMENT BEST DESCRIBES YOUR LIVING ARRANGEMENT?		
	LIVING ALONE	1	1.25%
	LIVING WITH PARENTS	77	96.25%
	LIVING IN HOSTEL	2	2.5%
	OTHER	0	0
10.	WHAT IS THE HIGHEST LEVEL OF EDUCATION YOU WANT TO COMPLETE?		
	BACHELOR'S DEGREE	5	6.25%
	MASTER'S DEGREE	37	46.25%
	DIPLOMA DEGREE	21	26.25%
	Ph.D. DEGREE	17	21.25%

Table 1 The majority of students were aged 14–15 years (92.5%), predominantly female (62.5%), and mostly from Hindu religion (97.5%). Nearly all (98.75%) were taking the exam for the first time, with most residing in urban areas (96.25%). Teachers were the primary source of information for 58.75% of students. About 42.5% reported having appropriate prior knowledge regarding anxiety. Most students (86.25%) ranked academically between 1st and 20th place. The majority (96.25%) lived with their parents, and 46.25% aspired to complete a master's degree.

4.2 Pre-Test Knowledge

Table 2: Pre test of knowledge regarding meditation and stress relieving therapies among 10th board students

Level of knowledge	Pre test	
	Frequency	Percentage
Poor (0-10)	56	70%
Moderate (11-20)	24	30%
Good (21-30)	0	0

Table 2.1: Pre test knowledge score as per knowledge level.

The pre-test data shows that 70% of students had poor knowledge, 30% had moderate knowledge, and none had good knowledge regarding meditation and stress-relieving therapies.

Pre-test level of knowledge regarding meditation and stress relieving therapies among S.S.C. board students.

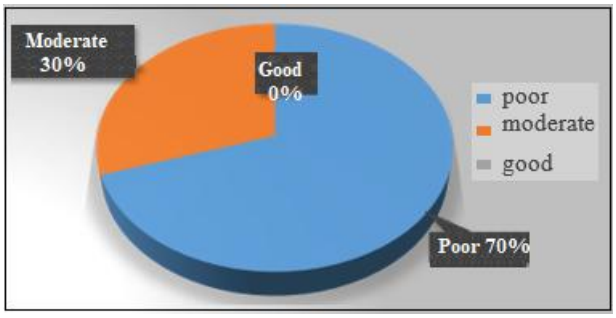


Table 2.2: Effectiveness of planned teaching program on knowledge on meditation and stress relieving therapies among S.S.C. board students, N=80

Level of Knowledge	Mean	SD
Pre test	9.41	6.91

5. Discussion

This chapter presents a detailed discussion of the study findings, interpreted through statistical analysis. The findings are discussed in relation to the study objectives and compared with findings from different settings.The present study aimed to assess knowledge regarding meditation and stress-relieving therapies to reduce anxiety among S.S.C. board students in Jamnagar district. A quantitative research approach was used, employing probability simple random sampling to select 80 students from three different schools. Data collection was conducted over two weeks using a validated questionnaire.

Objectives:

1) To assess knowledge regarding meditation and stress-relieving therapies to reduce anxiety among S.S.C. board students in selected schools of Jamnagar city, Gujarat. The pre-test knowledge assessment showed that 70% of students had poor knowledge, while 30% had moderate knowledge.
2) To find the association between knowledge and selected demographic variables such as age, gender, religion, residence, previous knowledge, and primary source of information among S.S.C. students in selected schools of Jamnagar.

6. Conclusion

The study was conducted to assess the knowledge of meditation and stress-relieving therapies among S.S.C. board students in Jamnagar using a quantitative research approach and a simple random sampling technique. Data were collected from 80 students.

Major findings include:

- Majority (92.5%) of students were aged 14-15 years.
- Female students constituted 62.5% and males 37.5%.
- Most students (96.25%) resided in urban areas, with only 3.75% from rural areas.
- Regarding prior knowledge of anxiety: 42.5% had appropriate knowledge, 33.75% had little knowledge, 11.25% had fair knowledge, and 12.5% had no prior knowledge.
- Teachers were the primary source of information for 58.75% of students, followed by self (21.25%), friends (10%), and others (10%).
- Religious distribution showed 97.5% Hindu and 2.5% Muslim students.
- Most students (98.75%) were in their first attempt of the board exam.

Association analysis:

The study also examined the relationship between students' knowledge and selected demographic variables such as age, gender, religion, residence, previous knowledge, and primary source of information.

7. Future Scope

The study can be replicated with a larger sample size and in different settings for more generalizable results Descriptive studies can be conducted to further assess knowledge regarding meditation and stress-relieving therapies. Knowledge about meditation and stress-relieving therapies can be demonstrated to students to enable them to share this knowledge with peers.

7.1 Nursing Administration

With the rapid advancement of healthcare technology and growing challenges, educational institutions and healthcare administrators have a responsibility to provide continuing education on meditation and stress-relief therapies for anxiety reduction among students. This will enable the organization of ongoing education programs, preparation of adequate learning materials, and development of policies, protocols, and standing orders related to health promotion and anxiety management.

7.2 Nursing Research

There is a need for extensive research in this field. This study opens avenues for: Developing innovative awareness programs, Creating and testing teaching materials, Setting up multimedia centres for educating students about meditation and stress relief. The findings highlight the current knowledge levels and the need for improvement, motivating further research in this area. This study can help researchers develop awareness modules and educational strategies on meditation and stress-relieving therapies.

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