

CHAPTER- V

SUMMARY AND CONCLUSION

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Adolescence is regarded as a period of, 'storm and stresses', due to the drastic physical, social and emotional changes, which affect them. Particularly, stress is associated with the transition to high school and higher secondary school. Especially, residential school pupils have higher stress as they are away from home. They also have heavy curricular and co-curricular activities, involving long working hours with little or no time for relaxation. Stress may affect self-efficacy, which in turn, will lower the academic achievement of the adolescents, leading to chronic stress. Thus, it is a vicious circle. Hence, management of stress is essential to enhance self-efficacy and academic achievement and to maintain the physical and mental health of adolescents.

In this action research on, 'Management of stress and enhancement of self-efficacy in adolescents through Positive Therapy', an effort was taken to help adolescents with high stress and low self-efficacy to manage their stress and enhance their self-efficacy through Positive Therapy. It is assumed that once the stress is brought down, their self-efficacy will improve, thereby improving their academic achievement.

The objectives of the study were as follows:

- To find out the causes of stress in selected adolescents.
- To identify the symptoms of stress in the sample.
- To identify the level of stress in the sample.
- To assess the level of self-efficacy of the sample.
- To find out the level of academic achievement of the sample.

- To study the relationship between stress and self-efficacy.
- To study the relationship between stress and academic achievement.
- To study the relationship between self-efficacy and academic achievement.
- To find out the effect of Positive Therapy in the management of stress.
- To find out the effect of Positive Therapy in the enhancement of self-efficacy.
- To find out the effect of Positive Therapy on academic achievement.

From Good Shepherd International School, Ooty, Tamil Nadu, 100 boys and 100 girls studying in X and XII standards were screened using the Case Study Schedule (Hemalatha Natesan, 2005), S.I. (Hemalatha Natesan and Nandini Menon, 2002) and General Self-efficacy (Ralf Schwarzer and Matthias Jerusalem, 1993).

Out of the 200 students, 150 students, 75 boys and 75 girls with 'Very High' / 'High' Stress and 'Low' Self-efficacy were selected to serve as the sample. There were 39 boys and 34 girls from X standard and 36 boys and 41 girls from XII standard. The sample was in the age range of 15 to 20 years. Boys and girls were matched in age, family income, type of family, level of stress and self-efficacy. The I, II and III Monthly Test marks of the students were converted into percentages and were taken for Academic Achievement Assessments I, II and III respectively.

The psychological intervention called, Positive Therapy (Hemalatha Natesan, 2004) was given to all the subjects. All the four strategies of Positive Therapy namely, Relaxation Therapy, Counselling, Exercises and Behavioural Assignments were applied. Relaxation Therapy involved 3 steps–Deep Breathing Practice, Relaxation Training and Autosuggestion.

The 3 exercises given were Tension Releasing Exercise, Smile Therapy and Laugh Therapy. Behavioural Assignments were given to instil positive thinking, courage, confidence and cheerfulness and to develop study skills, by developing a daily routine with good health habits. Relaxation Therapy, Exercises and Behavioural Assignments were given in batches of 7 to 8 students in a batch. Individual Counselling was given involving Rational Emotive Therapy, Thought Stopping, Symptom Stopping, Cognitive Restructuring and Assertiveness Training. Positive Therapy was given thrice a week, on alternate days, for eight weeks. The duration of each session was one hour.

To assess the effects of the intervention, all the subjects were re-assessed using the same tools twice, i.e., after 4 weeks of the therapy (Assessment II) and after 8 weeks of the therapy (Assessment III).

The experimental design used in this research was, ‘Assessment before and after treatment without control group’.

CONCLUSION

- ❖ The major causes of stress reported by the entire sample were heavy academic work pressure and strict rules and regulations. The other causes

reported by most of the sample were poor concentration, peer group pressure, inadequate place for study, sickness, distraction, class tests and constant family conflicts.

- ❖ The most common symptoms of stress reported by the sample were headache, irritability, worry, indecisiveness, pre-occupation with negative thoughts and fatigue.
- ❖ Initially, the entire sample had 'Very High' stress (95%)/'High' stress (5%). Hence the null hypothesis, 'The level of stress in adolescents is not high' is rejected.
- ❖ Initially, the entire sample had 'Low' general self-efficacy. Therefore, the null hypothesis, 'The level of self-efficacy in adolescents is not low' is rejected.
- ❖ Initially, majority of the sample had 'Low' academic achievement. Hence the null hypothesis, 'The level of academic achievement in adolescents is not low' is rejected.
- ❖ The correlations between stress and self-efficacy, stress and academic achievement and self-efficacy and academic achievement were low and not significant. Hence the three null hypotheses, 'There is no relationship between stress and self-efficacy', 'There is no relationship between stress and academic achievement' and 'There is no relationship between self-efficacy and academic achievement' are accepted.
- ❖ There was a significant reduction in the mean stress of the entire sample from 'Very High' before treatment (Assessment I), to 'High' after

treatment for 4 weeks (Assessment II) and to 'Low' after treatment for 8 weeks (Assessment III), proving the efficacy of Positive Therapy in the management of stress. Hence, the null hypothesis, 'Positive Therapy has no effect in the management of stress in adolescents' is rejected.

- ❖ There was a significant enhancement in the general self-efficacy of the entire sample from 'Low' level before treatment (Assessment I), to 'Moderate' level in Assessment II to 'High' level after treatment, (Assessment III), clearly indicating the beneficial effects of Positive Therapy in the enhancement of general self-efficacy. Hence, the null hypothesis, 'Positive Therapy has no influence on the enhancement of self-efficacy of adolescents' is rejected.
- ❖ There was a significant improvement in the mean academic achievement of the entire sample. From 'Poor' academic achievement (Assessment I before treatment) to 'Average' after administration of Positive Therapy (Assessment II and III). There was statistically significant mean difference in academic achievement between I and III and II and III Assessments. Hence, the null hypothesis, 'Positive Therapy has no influence on the academic achievement of adolescents' is rejected.

LIMITATIONS

- The research was conducted in a single residential school.
- The size of the sample was restricted to 150, as it was an action research, involving individual counselling.

RECOMMENDATIONS

- In all schools, counsellors should be appointed to facilitate optimum personality development in the students.
- As Positive Therapy is very effective in the management of stress and enhancement of healthy personality, all the counsellors, teachers, matrons, warden, doctors and nurses in residential schools can be trained in Positive Therapy.
- Positive Therapy can be given to all the students regularly to minimize their stress, anxiety and fear and to develop their potentialities to the optimum level.
- Individual counselling should be given to the students, to prevent poor health habits.
- Family counselling should be provided to help the students have conducive atmosphere at home.

SUGGESTIONS FOR FURTHER RESEARCH

- Longitudinal researches can be conducted on a larger sample in residential / non-residential schools applying Positive Therapy.
- Studies can be conducted to manage other variables such as anxiety, depression, inferiority, etc. and to enhance self-confidence, self-esteem, adjustment, etc. through Positive Therapy in adolescents as they are the future leaders of India.