

राष्ट्रीय गांधी राष्ट्रीय युवा संस्थान
Ministry of Youth Affairs and Sports, Government of India
Institute of National Importance by an Act of Parliament No. 35/2013
संशोधन क्र. - 602/105



OPTIMISING POSITIVE STRENGTHS
THROUGH
LIFE SKILLS
Proceedings of the
4th International Conference on
LIFE SKILLS EDUCATION

4th International Conference on Life Skills Education
Optimising Positive Strengths through Life Skills

7th-9th December, 2012

Proceedings

International Conference on Life Skills Education
Optimising Positive Strengths through Life Skills

7th-9th December, 2012

Proceedings

Editors

A. Radhakrishnan Nair
Gautam Gawali
R.J. Solomon
A. Joseph Thiyagarajan



School of Life Skills Education and Social Harmony
RAJIV GANDHI NATIONAL INSTITUTE OF YOUTH DEVELOPMENT
Institute of National Importance by an Act of Parliament No. 35/2012
Ministry of Youth Affairs and Sports, Government of India
Sriperumbudur-602 105

in Collaboration with



University of Mumbai
Mumbai



KBP College
Mumbai



IALSE
Sriperumbudur

First Impression: 2012

© RGNIYD, Sriperumbudur

Proceedings of the 4th International Conference on Life Skills Education

ISBN: 978-93-82062-80-6

No part of this publication may be reproduced or transmitted in any form by any means, electronic or mechanical, including photocopy, recording, or any information storage and retrieval system, without permission in writing from the copyright owners.

DISCLAIMER

The authors are solely responsible for the contents of the papers compiled in this volume. The publishers or editors do not take any responsibility for the same in any manner. Errors, if any, are purely unintentional and readers are requested to communicate such errors to the editors or publishers to avoid discrepancies in future.

Editors

A. Radhakrishnan Nair
Gautam Gawali
R.J. Solomon
A. Joseph Thiyagarajan

Jointly Published by

School of Life Skills Education and Social Harmony
Rajiv Gandhi National Institute of Youth Development
Sriperumbudur, India

&

EXCEL INDIA PUBLISHERS

91 A, Ground Floor

Pratik Market, Munirka, New Delhi 110067

Tel: +91-11-2671 1755/ 2755/ 3755/ 5755 • Fax: +91-11-2671 6755

E-mail: publishing@grouppexcelindia.com

Web: www.grouppexcelindia.com

Typeset by

Excel Publishing Services, New Delhi-110067

E-mail: prepress@grouppexcelindia.com

Printed by

Excel Printing Universe, New Delhi-110067

E-mail: printing@grouppexcelindia.com

Stress Inoculation Training (SIT) in Improving Resilience and Coping Stress Repertoires among School Children— A Proposal for Practice

Bani Lekha Phukan¹ and Dr. K. Arockia Maraichelvi²

¹Ph.D. Research Scholar, Department of Human Development,
Avinashilingam Institute for Home Science and Higher Education for Women University,

²Assistant Professor, Department of Human Development,
Avinashilingam Institute for Home Science and Higher Education for Women University
E-mail: ¹phu.banilekha@gmail.com.

Abstract—The preexisting stressful situations of the school children take up a higher altitude while they face the competitive public exams of the Indian system of education. This critical situation gets worsened with the high and unrealistic expectations of the society in general and parents in particular, and the failure of coping mechanisms among teachers dealing with these children. So the proposed study doles out with the rationale of employing School Stress Inoculation Training Programme on a preventative basis to inoculate school children, their parents and teachers to future stressors and investigate its effect on stress coping repertoires and the well being of the school children. The Stress Inoculation Training (SIT) approach is designed to impart skills to enhance their resistance to stress and practice a repertoire of coping skills augmenting the capability to respond effectively in the present and future stressful situations. The key objective of the study is to prepare students, teachers and parents to respond more favorably to negative stress events by training them on effective coping skills even before stress exposure and assess its efficacy over the well being and performance of school children.

Keywords: Stress Inoculation Training, School Children, Coping Skills

INTRODUCTION

Stress is psychophysiological (mind-body) arousal that can fatigue body systems to the point of malfunction and disease (Girdano et.al, 1993). Stress is a meditational process in which stressors (or demands) trigger an attempt of adaptation or resolution that results in individual distress if the organism is unsuccessful in satisfying the demand. Stress response occurs at physiological, behavioural, and cognitive levels. Stress is more than just acute subjective or physiological activation and has its potentially most deleterious health effects when it becomes chronic (Wolfgang, 2005).

The term stress is to describe a process by which environmental demands (e.g., time pressure, novel or threatening events, industrial noises) evoke an appraisal process in which perceived demand exceeds resources and that results in undesirable physiological, psychological, behavioral, or social outcomes (Ditiskell and Salas, 1996). Evidence indicates that stress is a costly health-related issue, in terms of individual performance and wellbeing as well as productivity (Ilgen, 1990). Accordingly, a great deal of research has been conducted to examine interventions to reduce the negative outcomes of stress on the individual.

There are two types of stress; good and bad. The perception of an action or behavior can precipitate whether the stress is good or bad for them. For instance, if a student is presenting a speech in front of the class, the stress can be either good or bad. The apprehension and feelings of not being successful can create a flight syndrome that feels bad. However, if the student delivers the speech and realizes that everyone in the class is applauding and saying "good job," the bad stress can suddenly turn into good stress where the student feels pumped and invincible (Brobeck E, 2007).

When the term stress is related to children and adolescents, call it pressure, or call it great expectations-whatever its name, the result is the same - school stress. It starts as soon as kinder

garden. It turns play into competitive sport. It turns the joy of learning into a struggle to excel. It turns friends into social connection and charitable acts into a line on a resume. Today students are put in a position of feeling they just must not stop. They are put in an environment where they are not accepted for themselves but only for what they are going to achieve. All this builds stress. National Association of Adults commonly tells young people that the teenage years are the "best years of your life." The rosy remembrance highlights happy groups of high school students energetically involved at a dance or sporting event, and a bright-eyed couple holding hands or sipping sodas at a local restaurant. This is only part of the picture. Life for many young people is a painful tug of war filled with mixed messages and conflicting demands from parents, teachers, coaches, employers, friends and oneself. Growing up—negotiating a path between independence and reliance on others—is a tough business. It creates stress, and it can create serious depression for young people ill-equipped to cope, communicate and solve problems (Walker, 2002).

As of now, stress manifests from the change in an individual's thinking and their way of life style. Today individuals have changed in their perceptions and the way they interpret their life. Students in their teens are the ones who are going through the transitional phase, which is an intermediate of childhood and adulthood. During the teen years, a lot of biological, physical, mental and emotional changes are happening, as well as the changes in responsibility and role. In order to stabilize these changes the students are always confronted with problems and conflicts. For some students who are not capable of dealing with it, the changes will create stress and tension in them. If it is not dealt within the early stages, they may experience mental problems later (Newman, 2005).

Stressed children show signs of emotional disabilities, aggressive behavior, shyness, social phobia and often lack interest in otherwise enjoyable activities. Dawood (1995) found that students stress affects their academic performance. He further showed that the most frequently mentioned stressor by students was school and fear related stressor.

As of today in a competitive society, the stress levels among children have been going up dangerously due to the pressure of their academic or cultural activities. Not all children can cope with such high levels of expectation and parents do not seem to realize or accept that their children are under severe pressure says Elizabeth Vdakkekara, Child Psychologist and the Director of Thrani (The Hindu, 2003).

The present research had been collating information from various media outlets and research papers on the extreme result of stress among students (i.e.) student suicide in India, and found that the numbers are very disturbing and demand concrete solutions in terms of the way the society perceive and practice learning and education in India. Even though no concrete and/or current data available on this issue, the following statistics gives an alarming call for the researches related to student stress.

- In 2006, 5,857 students-or 16 a day-committed suicide across India due to exam stress.
- The study (conducted 10 years back) had found that 16 per cent of Mumbai students were depressed-that is two per cent more than the students in Boston. It also found that eight percent of these were suicidal today (ten years later) that the researchers say things could be worse.
- Statistics show that India has the highest suicide rate in the world, marginally behind China, but ahead of the west. Ninety-five to hundred people commit suicide in India every day. And of these a whopping 40 percent are in the adolescent age group.
- Crime records bureau figures show India's suicide rate has risen eight percent a year for 10 years. According to 2007 estimate, 45 percent of suicides involve people between 15 and 29. And WHO lists suicide among the top three causes of death in the age group of 15 - 35 years (CNN - IBN Report, January 13, 2010).

- The motive when students kill themselves is invariably academic pressure - this account for 99 percent suicide in the age group 12-18. But psychiatrists sought to assess why the trend has risen of late and put it down to one major reason-Exam results (Express India, January 10, 2010).

The well being of adolescents is largely the product of interactions among the multiple contexts in which adolescents are being embedded (Rensick *et al*, 1997). The figures above clearly indicates that in India there is heavy academic and social stress that results in negative emotional states and more internalizing problem (Verma, *et al*, 2002). In many studies of deliberate harm, academic stress was found to be associated with suicidal ideas and occurrence of deliberate self-harm (Krishnakumar *et al*, 2005, Verma *et al*, 2002; and Lai and Wong, 1992).

Perceived stress can be viewed as an outcome variable measuring the experienced level of stress as a function of objective stressful events, symptoms experienced and personality factors. The theoretical framework usually proposed for stress research involves a biopsychological model which includes environmental factors and individual processes of perception and coping with stress. There is recent evidence that perceived stress among adults is cumulative bio - response of chronic stress (McEwen, 1998). Early intervention of stress and its effects are reversible in many aspects. However, relatively little is known on perceived stress and any possible early accumulation of allostatic load in adolescent subjects. Studies have suggested the possibility of an early accumulation of allostatic load among children (Shaffer, 2009 and Evans, 2007). In India stress appraisal *per se* is not a well explored area especially among adolescents and therefore, the available literature is very meager. Stress studies done in India are mostly based on the objective measurement of stress. This is the point where the current research has gained significance.

In the preset day scenario, the school students when stepping into their ninth grade really face many challenges starting the day at 5'o clock in the morning shunting to tuition centres, school and home back late evening. Added to these difficulties the unrealistic expectations of the parents, the unimaginable home work and the tuition work in facing the competitive exams mounts up stress which at a particular stage takes the form of depression and thereby affecting the wellbeing of the children. Hence this study got its crux that the children before getting into their ninth grade should know how to promote the stress management strategies and get a cooperative family and school environment. With this context the Stress Inoculation Training will be designed and developed with the goal of putting a person almost instantaneously in a calm state. This doesn't mean a complete relaxed condition since many demanding situations won't allow that. The idea, however is to be able to step back and look at problematic circumstances in a realistic light without feeling too hassled. When a child is able to do this, he/she can make better decisions and his/her ulcer potential goes down.

High school years should be a great experience, but many demands and rapid changes can make them one of the most stressful times of life. Students today face increasing amounts of schoolwork, a rapidly changing curriculum, assignment deadlines and exams; they worry about selecting careers and post secondary programs, and they must balance schoolwork with sports, hobbies and social life. They have conflicts with parents, friends, and siblings; have to cope with unpredictable moods, concerns about appearance, fitting in with a peer group. Money is always a worry, as is dealing with issues of alcohol and drugs - and now there's a new fear of violence in and around schools. As if that wasn't enough, they have to deal with all this while undergoing rapid physical and emotional changes-and without the benefit of life experience. As SIT exposes the trainee to the various stressors and teaches them the general and specific coping skills and provides situations to practice those skills, it is considered to be a boon for the school children particularly when they are to undergo the gung ho public exams.

Stress Inoculation Training (SIT) emerged out of an attempt to *integrate* the research on the role of cognitive and affective factors in coping processes with the emerging technology of cognitive behavior modification (Meichenbaum, 1977). SIT has been employed on a treatment basis to help

individuals cope with the aftermath of exposure to stressful events and on a preventative basis to "inoculate" individuals to future and ongoing stressors. SIT is a flexible, individually tailored, multifaceted form of cognitive-behavioral therapy. Given the wide array of stressors that individuals experience, SIT provides a set of clinical guidelines for treating stressed individuals, rather than a specific treatment formula. A central concept underlying SIT is that of "inoculation" or "immunization," which has been used both in medicine and in social-psychological research on attitude change (Tucker-Ladd, 2005).

As the term *inoculation* implies, stress inoculation training is designed to impart skills to enhance resistance to stress. The objective of stress inoculation training is to prepare the individual to respond more favorably to negative stress events by training effective coping skills before stress exposure (Meichenbaum, 1993).

The stress inoculation training approach is defined by a three-stage training intervention. The first phase of training is a conceptualization or educational phase. The goal of this initial phase of training is to help the individual better understand the nature of stress and stress effects. The second phase of stress inoculation training focuses on skill acquisition and rehearsal. The primary objective of this stage of training is to develop and practice a repertoire of coping skills to reduce anxiety and enhance the capability to respond effectively in the stressful situation. The final phase of stress inoculation training, application and follow through, involves the application of coping skills in conditions that increasingly approximate the criterion environment. To enhance the transfer of training, trainees may engage in guided imagery or role-play that allows them to apply coping skills in a graduated manner across increasing levels of stress. Although specific stress inoculation training interventions differ according to the type of stress that is targeted by the training (e.g., speech anxiety, test anxiety, etc.) and the specific coping skills practice emphasized (e.g., role-playing, imagery), the common thread among stress inoculation interventions is that they share these three primary training components.

Therefore the present study views Stress Inoculation Training beyond the view of a class or subject to learn. This can be used by students as a platform, forum or lab to visit and revisit their emotions particularly stress, enhance their coping skills, share experiences and apply the coping skills to a variety of situations or stressors through a scientific outlook.

With this broad objective, this research teams up to design a SIT phase for 8th grade school children, thereby facilitating them to enhance resistance to stress.

OBJECTIVES OF THE STUDY

BROAD OBJECTIVES

Design and implement Stress Inoculation Training (SIT) programme specific to the current and future stressors of the selected children. Which in turn would facilitate enhanced resistance to stress

SPECIFIC OBJECTIVES

- Understanding the prevalence of stress and stress levels among school children of Coimbatore
- Investigating the various types of stressors contributing to increased level of stress
- Identifying the symptoms experienced by the school children and its spill over effects on their health and performance
- Compare and analyse the difference in stress levels, its triggers and symptoms among the selected private and government school children
- Compare and analyse the difference in stress levels of the parents and teachers of private and government schools and thereby study their influence on the stress level of the children.

- Designing modules for the teacher and parents of the selected students to mark the programme as a comprehensive one
- Assessing the effectiveness of the Stress Inoculation Training (SIT) on the wellbeing and performance of the selected trainee group

METHODOLOGY

The study will be conducted as follows

SELECTION OF THE AREA AND SAMPLE

Sampling is the process of selecting units (e.g. people, organizations) from a population of interest so that by studying the sample we may fairly generalize our results back to the population from which they were chosen (Trochim, 2006). Sampling for the present study was carried out in three stages namely a) selection of schools b) selection of respondents c) selection of experimental and control group.

Selection of Schools

Initially as a part of the research, 12 schools (both private and government) in and around Coimbatore with a radius of 5-15 kilometers were shortlisted from the four zones (3 schools in each zone). The criteria for the selection of schools were

- The schools should be 5-15 kilometers from the heart of the Coimbatore city.
- The schools should follow the Samacheer pattern syllabus of Tamilnadu government.
- The schools should be a higher secondary school.

The schools selected by cluster sampling comprised of both private and government schools. Out of these 12 schools, six schools extended their willingness and cooperation to be a part of the research. Hence all these six schools were selected for the data collection which comprised of 3 private and 3 government schools.

Selection of Respondents

The respondents for the present study comprised of the school children, their parents and teachers from all of the six schools selected in Stage II.

School Children: Eleven to fourteen years of age is considered to be the right time to inoculate every school child against the dreadful disease called "Stress". As the Indian educational system compels every child to undergo public exams at 10th and 12th standard for which the preparation starts during their 9th standard itself, the stress coping and its management strategies should be learnt before stepping onto the 9th grade.

Hence this study adopted the random purposive sampling technique by means of which all the 8th standard students enrolled in the six identified schools formed the first category of the sample accounting to 375 private school children (N_1) and 175 government school children N_2 (Total school children $N = 532$).

Parents of the Selected School Children: In today's scenario, majority of the parents are not emotionally available for their children or lack positive coping mechanisms themselves. Hence they very often spur stress in their offspring. Hence all the parents of the selected children constituted the second category of the sample, which encompassed 357 private school parents (P_1) and 175 government school parents (P_2) (Total parents $P = 532$). It has to be noted that the parent who spends more time with their children and helping in their daily chores are requested to fill up the forms. However for the children for whom the parents were not available due to various reasons, the

guardian filled up the form. [The hostel warden of 12 orphan children of government schools filled up their parental form].

Teachers of the Selected School Children: Teaching has now become a very demanding occupation with a lot of stresses for a teacher who has a lot of deadlines to meet and a lot of responsibilities to shoulder besides teaching a child what are in a text book.

Research has shown that along with serviceman, social workers and linguists, teachers have surfaced at the start of the new millennium as the most afflicted with rising stress. Most alarming is that 30% of all novice teachers are leaving the profession. Annual teacher turnover is higher when compared with turnover of all other occupations. A report in June 2002 issue of the School Principals showed that annual turnover of professions other than teaching averaged 11 percent while annual turnover for the teaching profession was 15.7 percent. The report further stated that high turnover coupled with the demographic trend of increased school enrolment has caused a severe shortage of school teachers.

Hence all the teachers dealing with the students of the 8th standard of these six schools were involved in the study. However a total of 87 teachers (T) (Private school $T_1=49$ and government school $T_2=38$) were involved in the study.

ETHICAL CONSIDERATION

As a matter of ethics the respondents, both children and their parents were informed about the research through a simple and clear consent form. The research participants (both children and their parents) were given the freedom to make an informed decision of whether to participate in the research. However all the children and parents with whom the investigator requested for their consent cooperated. The same concern was processed from the teachers involved in the study. However some teachers showed their unwillingness and hence were not involved in this study.

Selection of Experimental and Control Group

Selection of Schools for the Intervention Programme: Two schools were randomly selected using the lottery method from the identified six schools. The identified six schools were categorized as government and private schools, (i.e) 3 each. The first slip picked up in both the categories was considered to be the experimental group. Accordingly Stanes Higher Secondary School was identified as the experimental group under the private school and V.C.B. Higher Secondary School, Vellakinar under the government school.

Selection of Beneficiaries: The school identified for the intervention had 200 number of respondents (Stanes Higher Secondary school $n_1=118$ and Government Higher Secondary School $n_2=82$, Vellakinar) which is a huge number for the intervention programme. Thereby by means of purpose sampling method only one section of the 8th standard were considered as the experimental group in both the Government and the private school. The other sections are considered as the control group in order to decrease the bias.

CONSTRUCTION OF THE TOOLS

The present study called for the development of the following tools.

For School Children

Questionnaire to Elicit the General Background of the Selected Children: According to Kothari (2009), questionnaire consists of a number of questions printed or typed in a definite order on a form or set of forms. The investigator used the questionnaire as a tool for the collection of the general and personal profile of the children with relevance to age, sex, type of family, and the family background/profile.

Checklist to Assess the Stress Level of School Children: As locally suitable relevant scales for assessing the level of stress in children of this particular age were not available, an appropriate, situation based checklist was developed after review of literature and in consultation with experts. The check list was carefully formulated in such a way that it gives two important measures relevant to the study pursued.

1. Perceived stress level of the selected children
2. The causative factors of stress among these children.

Perceived Stress Level of the Selected Children

This checklist had a total of 75 items. The mode of response to each of the item is in the form of a forced choice (i.e.) either 'yes' or 'no', indicating complete agreement or disagreement with the proposed statement respectively. For the items numbered 54, 62, 64, 72, 73 the response 'yes' is indicative of no stress and 'no' for the presence of stress. For the remaining items, 'yes' provides clue for the presence of stress and 'no' for its absence. For scoring, one mark to be provided for the response indicating the presence of stress and zero for its absence. The checklist gives the total stress score based on which the levels of stress in children are divided into low, moderate, and high. The Table I present the classification of the stress levels of the school children with regard to the total scored.

Table 1: Grading the Levels of Stress among Children

Level of Stress	Range of Scores
Low	0-25
Moderate	25-50
High	51-75

The Causative Factors of Stress among These Children

The above said checklist is formed in such a way that the response identifies the stress inducing factors that are being perceived as stressors by the selected children. The total of 75 items is categorized into seven common stress triggers namely teacher, money, attitudes and feelings, school work, exam, parents and friends. The numbers of items were distributed among the seven triggers. The scores were summed up for each stressor and subjected to analysis in order to find out the order of prominence of the factors associated with the increased stress level of the selected school children.

Checklist to Analyse the Reaction Experienced and Behaviour Manifested Due to Stress/ Stress Indicator Scale

Increased level of stress among school children is shown through their different type of the reactions they experience and in turn manifested in their behavior. Normally stress gets associated with physiological, mental and behavioural symptoms. Hence a checklist of 50 items that could gauge the signs and symptoms shown by the selected children was framed. Each item was scaled as 1 (yes) and 0 (no). The total of 50 items were divided into three dimensions of signs and symptoms (physiological-17 items; mental - 18 items and behavioral-15 items). A total score was obtained from summing up of scores for each dimension and were compared for further analysis.

This tool was subjected to content validation. Subject experts from the fields of Education, Psychology and Human Development were identified to scrutinize the developed tool. The suggestions put forward by the experts were incorporated while developing the final version of the tool. The tool after content validation was subjected to translation into regional language to be used by the students of government school. Then a pilot study on 10 students from private schools (English version of the checklist) and 10 students from government schools (Tamil version of the checklist) was carried out to gain insight on the difficulty in comprehension and phrasing of the statements. Statements which were found to be difficult to comprehend were reworded/ rephrased.

PARENTAL STRESS INVENTORY

The inventory comprises of two parts.

1. General profile of the parent.
2. Parental stress scale.

General Profile of the Parent

The parent who spends more time with the selected child was requested to answer the stress scale. The general profile part of the stress scale elicits data on the age, sex, type of family, educational status, income and occupation of the parents.

Parental Stress Scale

A total of 18 statements were framed giving a count on the stress level of the identified parent. There are nine negative and nine positive statements for which the subjects were required to choose from a scale of five alternatives namely 'strongly disagree', 'disagree', 'undecided', 'agree' and 'strongly agree' relating to their feeling of being stressed on parenting on a 1 - 5 point scale. The higher the score indicate more stress. The nine negative statements were reverse scored and added with the scores of 9 positive statements to get the total score.

Higher the score indicates higher the stress of the parent. The maximum score is 90 and the minimum is 18. Based on the scores obtained by the parent, they were categorized into the following three levels of stress as indicated in Table - II.

Table 2: Grading the Levels of Stress among Parents

Level of Stress	Range of Scores
Highly stressed	61-90
Moderately stressed	31-60
Low stressed	18-30

This tool was also subjected to content validation and pilot study was conducted and the final version was circulated among the selected parents.

TEACHER STRESS INVENTORY

The teacher stress inventory comprised of five parts, as shown below

General Profile of the Teacher

The general profile part of the stress scale draws out data on the age, education qualification, position/staff grade, subject of specification.

Teacher Stress Test

A total of 15 statements was framed giving an estimate of the level of stress among the identified teachers. The mode of response to each of the item is in the form of a forced choice (i.e.) either 'yes' or 'no'. 'Yes' provides clue for the presence of stress and 'no' for its absence. For scoring, one mark to be provided for the response indicating the presence of stress and zero for its absence.

Teacher Stress Symptoms

There are two parts in this category, first part enumerates the general health status of the teacher 1 year ago and now, and the second part is about stress experienced last 6 months. The mode of response to each of the item is in the form of a forced choice (i.e.) either 'never', 'sometimes' or 'often'. 'Sometimes' and 'often' provides indication for the presence of stress and 'never' for its absence. For scoring, two marks to be provided for the response of 'often', one mark for 'sometimes' and zero for its absence(never).

Teacher Workload

This section deals with the workload of teachers at present and over the last year.

Factors Causing Stress

A total number of 36 statements were categorized with four different factors namely demand, control, relationships, role, change, support and each statement was scored as 1 for occasionally stressful, 2 for stressful, 3 for very stressful and zero for not applicable.

CONDUCT OF THE STUDY

Phase - I - Establishing Rapport

Before launching the study efforts had been made to establish rapport with the administrative personnel of all the 6 schools, the teachers working in these schools and the school children. Then after ensuring the complete cooperation from the administrators, principals, teachers, students and their parents they were involved in the study.

Phase - II - Collection of Primary data

Adequate data will be collected from the entire population sample (students, teachers and parents) of all the identified six schools through the tool selected for the purpose of identifying the stress levels of high school children. Also the tool constructed for recognizing the nature of stressors and the symptoms experienced will be administered. Simultaneously the inventory designed for parents and teachers also will be administered. The data thus collected will be statistically analysed to meet out the first five specific objectives of the study.

Phase - III - Identifying Experimental and control group

As already indicated the experimental and control group will be identified by purposive sampling technique, so that 40-50 children will undergo intensive training session for a period of 3 days. The remaining children will be the control group.

Phase-iv-Developing Stress Inoculation Training (SIT) Module

SIT will be a flexible individuality tailored multifaceted form of stress management program. The main goal of this inoculation program module is to enhance individuals coping repertoires and to empower them to use already existing coping skills.

As per the current study the SIT to be made comprehensive, constitutes three key elements as follows

The Student Based SIT Program

It will form the fulcrum of the *SIT* addressed to school children in three phases

Conceptualization Stage: the primary data on the nature of stress and the stress effects of the selected lot will be better realized. By taking into account of the various stressors (present and future), an instructional module on stress inoculation will be prepared and circulated to all the selected subsample to enable them to understand the various stressors and the ways to cope up with each stressor at different contexts.

Training Stage: vibrant training programme will be organized in sessions with experts from the corresponding field. Coping skills will be rehearsed through role play, vignettes, situation analysis etc.

Evaluation Stage: the efficacy of SIT will be found out after an inoculation period by readministering the same schedule identifying the stress level of school children. Also the stress

indicator scale designed to find out the in physical, social, behavioural and academic outcomes in the terms of signs and symptoms will be readministered.

Staff Wellness Program

It is critical that teachers and other school staff possess emotional wellness in order to manage their own lives as well as the lives of the children within their circle of influence. Hence the second part of SIT is to design a self learning module which will include overview of a teacher's responsibilities, causes of stress for teachers, methods of identifying stress and stressors, tips to be a Good Teacher and ideas to reduce or prevent stress. This module will be circulated among the teachers and after an inoculation period of 2 weeks the Teacher stress inventory will be readministered.

Parental Stress Buster Program

It becomes essential and rather imperative on the part of the parents to be highly supportive so as to make their child feel secure. Stress free parent alone could provide a positive home environment, which will not only strengthen the personality make up of their children, but also make them learn certain skills important for effective living. For this reason, a module will be designed constituting better understanding of their own child, disciplinary technique to be followed, communication skills, minimum expectations from their child and ideas to reduce prevent and cope up stress. After an inoculation period the parental stress inventory will be readministered.

Phase - IV - Finding out the Efficacy of SIT

The efficacy of SIT will be found out after an inoculation period by readministering the schedules designed to find out the stress level of school children, teachers and parents separately. Also the stress indicator scale designed to find out the modification in physical, social, behavioural outcomes will be readministered. Also their academic performance for the year before and after SIT programme will be considered.

REFERENCES

- Wolfgang.L(2005), "Stress Management from basic science to better practice", by sage publications, New Delhi-110017
<http://jenaisle.com/2011/03/16/the-four-levels-of-stress-which-level-are-you-in/>
- Brobeck E, Marklund B, Haraldsson K et al.(2007) Stress in children: how fifth-year pupils experience stress in everyday life. *Scand J Caring Sci* ; 21:3 9.
- Meichenbaum. D(1977), "Stress Inoculation Trining" by Pergamon Press, Canada
- Tucker-Ladd, C.E. (2005). Psychological self-help. Retrieved November 4, 2005, from <http://psychologicalselfhelp.org/>
- Driskell, J. E., and Salas, E. (Eds.). (1996). *Stress and human performance*. Hillsdale, NJ: Erlbaum.
- Ilgen, D. R. (1990). Health issues a t work opportunities for industry organizational psychology, *American Psychologist*, 45, 273-283.
- Newman (2005). Early life stress linked to Teenage Mental problems Oregon Health and Science University.
- Rensick (1997). "Adolescents from harm; findings from the national longitudinal study on Adolescent health" *JAMA*, 278:823-32.
- Verma (2005). "Effects on time and daily emotions". *International Journal of Behavioral Development* 2002, 26; 500 DOI
- Krishnakumar, P., Geetha, M.G and Gopalan, A.V (2005), Deliberate self-pononing in children, *Indian Pediatrics*, 42, pp. 582-586.
- Lai, Y.Y and Wong C.K (1992), Adolescent suicide attempts: A review, *J. Hong Kong Medicine Association*, 44, Pp.139 - 145.
- Shaffer, J.E (2009), *Adolescence*, McGraw Hill Boston, Pp.492 - 493.
- McEwen (1998). "Protective and damaging effects of stress mediators *The New England Journal of Medecine*,338, Pp.171-179.
- Tucker-Ladd, C.E. (2005). Psychological self-help. Retrieved November 4, 2005, from <http://psychologicalselfhelp.org/>
- Trochim, W.K (2006), Research methods knowledge base retrieved, 13th jan 2011 form, www.socialresearchmethods.net//k.b.
- Kothari (2007), *Research methodology*, New Age Publications, pp. 52-57.