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## Research Article

# EFFICACY OF STRUCTURED TEACHING PROGRAMME ON STRATEGIES FOR REDUCING TEST ANXIETY AMONG BSC NURSING STUDENTS AT A SELECTED COLLEGE IN BHOPAL

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### ABSTRACT

Nursing programs can be highly stressful, Test anxiety is a psychological condition in which a person experiences distress before, during, or after a test or other assessment to such an extent that this anxiety causes poor performance or interferes with normal learning. The Westside test anxiety scale had administered to 60 b.sc nursing students pre and post of structured teaching programme. The study concludes that the Nursing Students with test anxiety got reduction in test anxiety after giving Structured Teaching Programme. This study stress that there is a need of education programme and counseling for students to manage test anxiety.

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## INTRODUCTION

Anxiety is a basic human emotion consisting of fear and uncertainty that typically appears when an individual perceives an event as being a threat to the ego or self-esteem. In some instances, such as avoiding dangerous situations, anxiety can be helpful. However when taken to extremes, it may produce unwanted results. (Sarason, 1988).

Taking on new knowledge, roles, concepts and attitudes eventually leads to period of stress and dissatisfaction. Stress and recognition of impending stressors among nursing students were given a large extent of attention in the literature (Nicholl & Timmins, 2005). University students face challenges like adaption to new outset altering the routines and habits of life, also there is a great challenge and demand for success to achieve the highest level of academic performance which in turn can affect student performance and lead to situation of stress, depression and anxiety (Shamsuddin, Fadzil, Ismail, Shah, Omar & Muhammad, 2013). Undergraduate students have a great possibility of developing anxiety during examination. Anxiety disorders are rising among students (Leta, 2001). Recent studies on anxiety and related fields

showed that anxiety disorders are prevalent in American society. Test anxiety is one of these fields (Amiri-Majd & Shahmoradi, 2008). This form of anxiety most of the time tends to weaken students' test taking ability. Also, their ability to exhibit knowledge about the content in the course being evaluated decreases, consequently leading to poor performance in the test that in turn affects the test scores and overall grades (Markman, Balik, Bercovitz & Ehrenfeld, 2010)..

Most of the nursing students experience high level of anxiety during final exam even though their marks are good throughout the semester (Akbari-boorang & Aminyazdi, 2009). Driscoll Evans, Ramsey & Wheeler (2009) identified that nursing students have nearly double the rate for moderately high to high test anxiety in comparison to the general public and high school students. Nursing programs can be viewed as highly stressful settings. Nursing students are under pressure for taking various tests throughout their college and professional lives. Nursing students have clinical exams, which is highly stressful, that needs more preparation before facing the clinical exams (Mahat, 1998). In addition, nursing students are also under the stress that even a slight inaccuracy cause fatal effect to a

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patient as well as affect a student's own career (Driscoll *et al.*, 2009).

Nursing students experience higher levels of test anxiety than other, especially because of struggle to balance multiple works, career adjustment and family responsibilities with the long study hours that are required for success. Over time these stressor may put student in chronic stress (Beggs, Shields & Goodin 2011). Test anxiety affects 30% of all nursing students (Driscoll *et al.*, 2009). A technique that can be used as support and treatment that benefit to manage and reduce anxiety is progressive muscle relaxation (Mailloux, 2006). The activities acquired from religion or spirituality can also reduce anxiety (Stanley, 2012).

Most of the studies that assessed anxiety and stress among nursing students were carried out in western population. However, there are limited researches on test anxiety among nursing students in the Indian population. This area of research has a greater concern to be intensely studied to identify the locus of the impact of test anxiety on academic achievement among undergraduate nursing students in India..

### **Need For the Study**

Anxiety can affect each student in different ways; there are several symptoms that are quite common. Some of these are emotional, which include feelings of fear, disappointment, anger, depression, or helplessness. Other symptoms are more behavioral, ranging from fidgeting or pacing to substance abuse or other self-destructive behaviors. There are also physiological symptoms, which include fast heartbeat, feelings of nausea, headaches, sweating, and other disruptions in bodily functions. Finally, many people experience cognitive symptoms, such as negative thinking about oneself, racing thoughts, loss of memory and "blinking" out. (Ramson, 2005)

Test anxiety will begin to appear in the elementary grades, continue to increase with age and appears to peak during the college years. Test anxiety reduction findings are stronger with college students than with grade school students, but that may also be due to the fact that the college students are more ready to self-identify and seek assistance. Unfortunately, only a small portion of students seek treatment for test anxiety. Teacher referrals are very helpful in identifying students. (Fedrik, 2007)

This systematic review explores test anxiety among nursing students. Test anxiety affects 30% of nursing students and has detrimental effects on academic performance and student success. Significant effects of treatment are discussed, including hypnotherapy, aromatherapy, and relaxation. Test anxiety has multiple ramifications and is a determining factor in student success among this population. Nurse educators can have a significant impact on student outcomes by recognizing test anxiety, intervening early, and implementing effective, supportive strategies. (L.Shapiro, 2015)

A study was done to examine the factors affecting examination anxiety and aimed to increase schools understanding of this topic. The study was a school-based initiative, evaluating intervention strategies to help secondary pupils with the self-management of their examination anxiety. Data suggest that interventions using cognitive behavioral approaches combined

with relaxation helped pupils to improve their examination performance. Results encourage the view that school-based programs using mixed interventions may be effective in the prevention of excessive examination anxiety and in the improvement of examination performance if compared to single interventions, but show variations depending on the curriculum subject. (Evan, 2009)

Because of our educational and examination systems, parental and social demands and for the better career opportunities, students face pressure from others and self, to perform better in the examinations, which leads to examination anxiety. This examination anxiety is a form of performance anxiety. Examination anxiety itself is not bad because up to certain extent it energizes the individual and provides him/her motivation. This motivation and energy shape the efforts of an individual and he/she performs better. But when the examination anxiety is very high and exceeds the personal resources of the individual, it starts producing debilitating effect on the individual's performance and his/her mental health. In media, there are regular reports of suicide and deliberate self-harm by college students because of examination anxiety and academic stress. (Townsend, 2005)

## **MATERIALS AND METHODS**

### **Research Approach**

The research approach adopted for the study was Quasi-experimental approach.

### **Research Design**

In this study one group pre-test, post-test quasi-experimental design was adopted.

### **Variables of the Study**

1. **Demographic variables:** Age, sex, educational qualification, family income, type of family, religion, medium of instruction in 10<sup>th</sup> standard, place of living
2. **Study variable:**
  - a. Dependent variable: - Test anxiety among the Nursing Students.
  - b. Independent variable: - Structured teaching programme on strategies for reducing test anxiety.

### **Population**

Population is the B.Sc Nursing students in LN nursing college students in Bhopal.

### **Sample and Sample Technique**

According to inclusion and exclusion criteria 188 students are eligible. From the eligible population 60 samples (n=60) were selected by using simple random sampling technique of lottery method.

### **Inclusion Criteria**

The study includes

1. Both 1<sup>st</sup> and 2<sup>nd</sup> year Nursing Students at L.N Nursing College in Bhopal
2. Both male and female B.Sc. nursing students.
3. B.Sc. nursing students who are willing to participate.

**Exclusion Criteria**

1. B.Sc. nursing students who are absent at the time of data collection.
2. B.Sc. nursing students who are physically ill.
3. B.Sc. Nursing students age more than 20

**Data Collection Instrument**

**Section 1: Demographic data of the students**

This was used to collect information on age, sex, educational status, family income, type of family, religion, medium of instruction in 10<sup>th</sup> standard and place of living

**Section 2: Modified Westside Test Anxiety Scale**

This was used to collect and record the data on test anxiety of B.Sc. nursing students. Modified Westside Test Anxiety Scale was developed from Westside Test Anxiety Scale by Richard Driscoll. The Westside Test Anxiety Scale was modified because it consists only 10 items and there is no item regarding physiological symptoms of test anxiety.

The modified tool consists of twenty items in a statement form, with a five point rating scale in English. The scale is constructed to measure cognitive, psychological, social and physical impairment which is related to exam. All the questions are in a positive statement form.

The tool consists of 10 questions from cognitive aspect, 3 questions from psychological aspect, 2 questions from social aspect & 5 questions from physiological aspect. Each statement had five alternative responses. In this extremely carries 5 marks, high carries 4 marks, moderately carries 3 marks, lightly carries 2 marks, and not at all carries 1 mark. The test anxiety score is calculated by sum of scores of the twenty questions divided by 20. The maximum score is 5 and minimum score is 1.

**Testing of the tool**

**Content Validity**

Content validation is done by 4 experts in the field of nursing and 1 expert in the field of psychiatry. Based on the suggestion of experts, the tool was modified.

**Reliability**

The reliability of the instrument was analyzed by using split half method. The reliability is obtained as  $r = .81$ , it is highly desirable. No modification of the tool was made.

**Procedure of Data Collection**

Students were identified from 1<sup>st</sup> and 2<sup>nd</sup> year B.Sc. Nursing for the study from the L.N Nursing College, Bhopal. The data was collected from 01/07/17 to 31/07/17. Investigator obtained permission from the principal to conduct study over there. For that investigator had taken requisition letter from the principal, LN College of Nursing, Bhopal. After obtaining the permission investigator met the students and established rapport with them and provided psychological support for the students. The procedure was explained to the students. The students who met the inclusion and exclusion criteria were requested to participate in the study. The study group was selected by simple random sampling technique of lottery method. Thus 60 students were selected to participate in the study. After

obtaining a written informed consent from the B.Sc. nursing students for willingness to participate in the study, a demographic data sheet was given to the B.Sc. nursing students. Followed by Modified Westside Test Anxiety Scale was given to the students to assess the exam anxiety. After this procedure students were subjected to structured teaching programme for duration of 45 minutes. Post-test was done on 28th day following intervention. The same tool was used to assess the effectiveness of structured teaching programme.

**Statistical Analysis**

The data collected was organized and entered in the master sheet. Data was analyzed by using descriptive and inferential statistics

**Descriptive statistics**

Frequency and Percentage will be used to describe the distribution of B.Sc. nursing students according to demographic characteristics.

Mean, mean percentage and standard deviation will be used to assess the test anxiety of B.Sc. nursing students.

**Inferential statistics**

Paired ‘t’ test will be used to compare the pre and post-test scores.

**RESULT**

**Section 1** Distribution of demographic variables among B.Sc. nursing students

**Table 1** Frequency and percentage distribution of demographic variables among B.Sc. nursing students. (n=60)

Sl.No	Demographic variables	Frequency	Percentage (%)
1	Age in years		
	a. 17	6	10
	b. 18	19	31.67
	c. 19	28	46.67
2	d. 20	7	11.67
	Sex		
3	a. Male	12	20
	b. Female	48	80
4	Educational status		
	a. 1st Year B.Sc.	27	45.00
5	b. 2nd Year B.Sc.	33	55.00
	Family income (In Rupees)		
	a. Rs. 5000 and below	2	3.33
6	b. Rs. 5001 to 10,000	26	43.33
	c. Above Rs 10,000	32	53.33
7	Type of family		
	a. Nuclear	45	75.00
8	b. Joint	15	25.00
	Religion		
	a. Hindu	43	71.67
	b. Christian	4	6.67
9	c. Muslim	12	20.00
	d. Others	1	1.66
	Medium of instruction in 10th Standard		
10	a. English	46	76.67
	b. Hindi	14	23.33
	c. Others	0	0.00
11	Place of living		
	a. Urban	33	55.00
	b. Rural	27	45.00

The table 1 depicts that 6 (10%) of students were 17 years, 19 (31.67%) were 18 years, 28 (46.67 %) were 19 years and 7 (11.67%) were 20 years. With regard to sex, 12 (20 %) were males where as 42 (80%) were females. In relation to educational status, 27 (45%) were studying in 1<sup>st</sup> year B.Sc. and 33 (55%) were studying in 2<sup>nd</sup> year B.Sc. The family income of majority of respondents 32 (53.33%) were above 10,000, whereas 26 (43.33%) were between rupees 5001-10,000, 2 (3.33%) had rupees 5000 and below. The majority of respondents 45 (75%) belongs to nuclear type of family where as 15 (25%) belong to joint type of family. With regard to religion, maximum numbers 43 (71.67%) were Hindus where as 4 (6.67%) were Christians, 12 (20%) were Muslims and 1 (1.66%) were others. According to medium of instruction in 10<sup>th</sup> standard 46 (76.67%) were from English medium, 14 (23.33%) were from Hindi medium & none of them from other medium. In relation to place of living 33 (55%) were from Urban area where as 27 (45%) were from rural area.

**Section 2** Distribution of pre-test & post-test level of test anxiety among B.Sc. Nursing students

**Table 2** Frequency and percentage distribution of pre-test level of test anxiety among B.Sc. nursing students (n=60)

Level of test anxiety	Frequency	Percentage (%)
Comfortably low test anxiety	0	0
Normal test anxiety	4	6.67
High normal test anxiety	19	31.67
Moderately high test anxiety	17	28.33
High test anxiety	16	26.67
Extremely high test anxiety	4	6.67

The above table- 2 depicts the frequency and percentage distribution of pre-test level of test anxiety among B.Sc. nursing students, none of them had comfortably low test anxiety, 4 (6.67%) of them had normal test anxiety, 19 (31.67%) of them had high normal test anxiety, 17 (28.33%) of them had moderately high test anxiety, 16 (26.67%) of them had high test anxiety and 4 (6.67%) had extremely high test anxiety before structured teaching programme.

**Table 3** Mean, Standard Deviation, Mean Percentage of pre-test level of test anxiety among B.Sc. nursing students (n=60)

Sl. No	Aspects of test anxiety	Statements	Range score	Mean	SD	Mean%
1.	Cognitive aspect	10	20-44	32.92	6.01	65.84
2.	Psychological aspect	3	6-14	9.58	1.92	63.87
3.	Social aspect	2	2-10	5.93	1.85	59.3
4.	Physiological aspect	5	8-22	14.78	3.4	59.12
5	Overall aspect	20	43-83	63.22	10.34	63.22

Table 3 shows the mean, standard deviation, mean percentage of pre-test level of test anxiety among B.Sc. nursing students. The table shows the mean percentage of cognitive aspect is 65.84 with standard deviation of 6.01; mean percentage of respondents on psychological aspect is 63.87 with standard deviation of 1.92, mean percentage of respondents on social aspect is 59.3 with 1.85; mean percentage of physiological aspect is 59.12 with standard deviation of 3.4. The overall

mean percentage is 63.22 with standard deviation of 10.34 on pre-test test anxiety.

**Table 4** Mean, Standard Deviation, Mean Percentage of post-test level of test anxiety among B.Sc. nursing students (n=60)

Sl. No	Aspects of test anxiety	Statements	Range score	Mean	SD	Mean%
1.	Cognitive aspect	10	13-31	22.63	4.75	45.26
2.	Psychological aspect	3	4-11	6.53	1.61	43.53
3.	Social aspect	2	2-7	4	1.59	40
4.	Physiological aspect	5	7-15	10.43	2.3	41.72
5	Overall Aspect	20	28-58	43.6	7.82	43.6

Table 4 shows the mean, standard deviation, mean percentage of post-test level of test anxiety among B.Sc. nursing students. The result shows the mean percentage of cognitive aspect is 45.26 with standard deviation of 4.75; mean percentage of psychological aspect is 43.53 with standard deviation of 1.61; mean percentage of social aspect is 40 with standard deviation of 1.59 and mean percentage of physiological aspect is 41.72 with standard deviation of 2.3. Overall the result indicated that the pre-university college students scored mean percentage of 43.6 with standard deviation of 7.82 on post-test test anxiety.

**Section-3** Effectiveness of Structured Teaching Programme on strategies for reducing test anxiety among B.Sc. nursing students

**Table 5** Comparison of pre-test and post-test level of test anxiety among B.Sc. nursing students (n=60)

Test anxiety	Max. score	Respondents Knowledge		
		Mean	SD	Mean %
Pre test	100	63.22	10.34	63.22
Post test	100	43.6	7.82	43.6
Enhancement	100	19.62	5.34	19.62

Table 5 shows comparison of pre-test and post-test level of test anxiety among B.Sc. nursing students. The mean percentage of pre-test test anxiety is 63.22 with standard deviation of 10.34 and means percentage of post-test test anxiety is 43.6 with standard deviation of 7.82. The difference between pre-test and post-test mean percentage is 19.62

**Table 6** Comparison of mean and standard deviation of pre and post-test level of test anxiety among B.Sc. nursing students (n=60)

Aspects of test anxiety	Respondents Knowledge						Paired 't' test
	Pre test		Post test		Enhancement		
	Mean	SD	Mean	SD	Mean	SD	
Cognitive aspect	32.92	6.01	22.63	4.75	10.28	3.42	23.36***
Psychological aspect	9.58	1.92	6.53	1.61	3.05	1.69	13.99***
Social aspect	5.93	1.85	4	1.59	1.93	1.27	11.77***
Physiological aspect	14.78	3.4	10.43	2.3	4.35	2.17	15.53***
Overall aspect	63.22	10.34	43.6	7.82	19.62	5.34	28.47***

NS= not significant. S= Significant, \* p < 0.05 level, \*\* p < 0.01 level, \*\*\* p < 0.001 level.

The above table 6 shows mean standard deviation & paired t-test value on the four aspects of test anxiety in pre & post-test. Mean reduction of post-test score of cognitive aspect is 10.28, psychological aspect is 3.05, social aspect is 1.93 and physiological aspect is 4.35. The data indicated that post-test

score were significantly less than pre-test score  $t=28.47$  at  $p<0.001$  level. The results evidences that the post-test test anxiety is significantly less than the pre-test test anxiety. Hence research hypothesis  $H_1$  was accepted. The result indicated that the structured teaching programme was effective.

**Research Hypothesis  $H_1$ :** The post-test mean test anxiety will be significantly less than pre-test mean test anxiety among the B.Sc. nursing students.

**Find out the association between the level of post-test test anxiety & selected demographic variables among B.Sc. nursing students**

**Table 7** Association between post-test level of test anxiety and demographic variables of the B.Sc. nursing students (n=60)

Sl. No	Demographic variables	No	Low		Normal		High normal		Moderate		High		Extremely high		$\chi^2$ square
			No	%	No	%	No	%	No	%	No	%	No	%	
1	Age in years														
	a. 17	6	1	1.67	4	6.67	1	1.67	0	0	0	0	0	0	7.97
	b. 18	19	6	10	11	18.33	2	3.33	0	0	0	0	0	0	df 6
	c. 19	28	7	11.67	9	15	12	20	0	0	0	0	0	0	N.S
2	d. 20	7	2	3.33	2	3.33	3	5	0	0	0	0	0	0	
	Sex														
	a. Male	12	5	8.33	5	8.33	2	3.33	0	0	0	0	0	0	4.62
	b. Female	48	10	16.66	22	36.66	16	2.66	0	0	0	0	0	0	df 2 N.S
3	Educational status														
	a. 1st Year B.Sc.	27	5	8.33	19	31.67	3	5	0	0	0	0	0	0	15.34***
	b. 2nd Year B.Sc.	33	11	18.33	7	11.67	15	25	0	0	0	0	0	0	df 2 S
4	Family income														
	a. Rs 5000 and below	2	0	0	1	1.67	1	1.67	0	0	0	0	0	0	1.34
	b. Rs. 5001 to 10,000	26	5	8.33	13	21.67	8	13.33	0	0	0	0	0	0	df 4
	c. Above Rs 10,000	32	10	16.66	13	21.67	9	15	0	0	0	0	0	0	N.S
5	Type of family														
	a. Nuclear	45	8	13.33	23	38.33	14	23.33	0	0	0	0	0	0	7.92
6	b. Joint	15	8	13.33	3	5	4	6.67	0	0	0	0	0	0	df 2 S
	Religion														
	a. Hindu	43	11	18.33	18	30	14	23.33	0	0	0	0	0	0	
	b. Christian	4	1	1.67	1	1.67	2	3.33	0	0	0	0	0	0	3.32
	c. Muslim	12	4	6.67	6	10	2	3.33	0	0	0	0	0	0	df 6
7	d. Others	1	0	0	1	1.67	0	0	0	0	0	0	0	0	N.S
	Medium of instruction in 10th standard														
	a. English	46	16	26.67	24	40	6	10	0	0	0	0	0	0	27.31***
	b. Hindi	14	0	0	2	3.33	12	20	0	0	0	0	0	0	df 4
8	c. Others	0	0	0	0	0	0	0	0	0	0	0	0	0	S
	Place of living														
	a. Urban	33	7	11.67	15	25	11	18.33	0	0	0	0	0	0	1.17
b. Rural	27	9	15	11	18.33	7	11.67	0	0	0	0	0	0	df 2 N.S	

NS= not significant. S= Significant, \*  $p < 0.05$  level, \*\*  $p < 0.01$  level, \*\*\*  $p < 0.001$  level.

The table-7 envisages that  $\chi^2$  test was used to find out the association between post-test level of test anxiety and Demographic variables of B.Sc. nursing students. The variables such as educational status [ $\chi^2 = 15.34$ ,  $df=2S$ ], type of family [ $\chi^2 = 7.92$ ,  $df=2S$ ] and medium of instruction in 10<sup>th</sup> standard [ $\chi^2 = 27.31$ ,  $df=S$ ] were significant at 0.001 level i.e.  $p < 0.001$ . The rest of the socio-demographic variables were not significantly associated with post-test test anxiety. The results of Chi-square analysis indicated that there was significant association between post-test level of test anxiety and educational status, type of family & place of living of B.Sc. nursing students. So the research hypothesis  $H_2$  was accepted.

**Research Hypothesis  $H_2$ :** There will be significant association between level of post-test test anxiety and demographic characteristics of B.Sc. nursing students.

**DISCUSSION**

The major findings of the study and reviews them in relation to findings from the results of other studies. The aim of the study was to assess the effectiveness of structured teaching programme on strategies for reducing test anxiety among B.Sc. nursing students at selected nursing college in Bhopal

**The objectives of the study were**

1. To assess the pre-test level of test anxiety among B.Sc. nursing students at selected colleges.

2. To provide structured teaching programme on strategies for reducing test anxiety among B.Sc. nursing students at selected colleges.
3. To assess the post-test level of test anxiety among B.Sc. nursing students at selected colleges.
4. To compare pre and post-test level of test anxiety among B.Sc. nursing students at selected colleges.
5. To find out the association between the level of post-test test anxiety and selected demographic variables among B.Sc. nursing students at selected colleges.

**The Study Attempted To Examine the Following Hypothesis**

$H_1$ : The post-test mean test anxiety will be significantly less than pre-test mean test anxiety among the B.Sc. nursing students.

H2: There will be significant association between level of post-test test anxiety and demographic variables of B.Sc. nursing students.

### Major Finding of the Study

#### Demographic variables of the B.Sc. nursing students

Based on age: - According to age 10% of students were 17 years, 31.67% were 18 years, 46.67 % were 19 years and 11.67% were 20 years." Based on sex:- With regard to sex, 20% were males where as 80 % were females. Based on educational status:- In relation to educational status, 45% were studying in 1<sup>st</sup> year B.Sc. Nursing and 55% were studying in 2<sup>nd</sup> year B.Sc. Nursing. Based on family income:- The family income of majority of respondents 53.33% was above 10,000, whereas 43.33% were between rupees 5001-10,000, 3.33% had rupees 5000 and below. Based on type of family:- The majority of respondents 75% belongs to nuclear type of family where as 25% belong to joint type of family. Based on religion:- With regard to religion, maximum numbers 71.67% were Hindus where as 6.67% were Christians, 20% were Muslims and 1.66% were others. Based on medium of instruction in 10<sup>th</sup> standard:- According to medium of instruction in 10<sup>th</sup> standard 76.67% were from English medium, 23.33% were from Hindi medium & none of them from other medium. Based on place of living:- In relation to place of living 55% were from urban area where as 45% were from rural area.

In Pre test None of them had comfortably low test anxiety, 6.67% of them had normal test anxiety, 31.67% of them had high normal test anxiety, 28.33% of them had moderately high test anxiety, 26.67% of them had high test anxiety and 6.67% had extremely high test anxiety before structured teaching programme. In post test 26.67% had comfortably low test anxiety, 43.33% had normal test anxiety, 30% had high normal test anxiety and none of them had moderately high test anxiety, high test anxiety and extremely high test anxiety after structured teaching programme. The mean percentage pretest of cognitive aspect is 65.84 with standard deviation of 6.01; mean percentage of respondents on psychological aspect is 63.87 with standard deviation of 1.92, mean percentage of respondents on social aspect is 59.3 with 1.85; mean percentage of physiological aspect is 59.12 with standard deviation of 3.4. The overall mean percentage is 63.22 with standard deviation of 10.34 on pre-test test anxiety. Mean percentage of post-test level of test anxiety among B.Sc. nursing students. The result shows that the mean percentage of cognitive aspect is 45.26 with standard deviation of 4.75; mean percentage of psychological aspect is 43.53 with standard deviation of 1.61; mean percentage of social aspect is 40 with standard deviation of 1.59 and mean percentage of physiological aspect is 41.72 with standard deviation of 2.3. Overall the result indicated that the pre-university college students scored mean percentage of 43.6 with standard deviation of 7.82 on post-test test anxiety.

The mean percentage of pre-test test anxiety is 63.22 with a standard deviation of 10.34 and means percentage of post-test test anxiety is 43.6 with standard deviation of 7.82. The difference between pre-test and post-test mean percentage is 19.62.

Mean reduction of post-test score of cognitive aspect is 10.28, psychological aspect is 3.05, social aspect is 1.93 and physiological aspect is 4.35. The data indicated that post-test score were significantly less than pre-test score  $t=28.47$  at  $p<0.001$  level. It evidence that the mean post-test test anxiety was significantly less than the mean pre-test test anxiety.

Demographic variables such as the educational status [ $\chi^2 =15.34$ ,  $df=2S$ ], type of family [ $\chi^2 =7.92$ ,  $df=2S$ ] and medium of instruction in 10<sup>th</sup> standard [ $\chi^2 =27.31$ ,  $df=S$ ] were significant at 0.001 level i.e.  $p<0.001$ . The rest of the socio-demographic variables were not significantly associated with post-test test anxiety. The results of Chi-square analysis shows that there was significant association between post-test test anxiety and educational status, type of family & place of living of B.Sc. nursing students.

### CONCLUSION

There was a significant reduction in test anxiety after giving structured teaching programme on strategies for reducing test anxiety among B.Sc. nursing students. It also reveals that there was significant association between post-test test anxiety and demographic variables such as educational status, type of family & place of living. The rest of the socio-demographic variables were not significantly associated with post-test anxiety

#### Implications of the Study

After analyzing the gathered information, the researcher came to know that test anxiety is more in B.Sc. nursing students. Based on the outcome of the study following suggestions were made to the various field of nursing such as nursing practice, nursing education, nursing administration, nursing research etc.

#### Nursing Education

The study revealed that, there is increased level of test anxiety among B.Sc. nursing students. The nursing teachers can use the result of the study as an informative illustration for the students. It's today's need to involve test anxiety management in nursing curriculum at basic level, which will prepare nurses to address the issue of test anxiety and help for giving counseling in the clinical & community setting. The advanced nursing care aims in the provision of holistic care. So the nurse has to handle such problem in the community by identifying the high risk group who are prone to get test anxiety and teach them the effective prevention and management techniques of test anxiety to promote mental health of the group. Nursing personnel can contribute much for prevention of anxious events and can handle the situations by creating awareness in the community through school health programmes, camps and special programmes at colleges and mass media education.

#### Nursing Practice

Today, health care delivery system has changed from a care-oriented approach to promotion of health and prevention of illness oriented approach. So, it focuses mainly on primary prevention, which is aimed at health promotion. The nursing personnel come in contact with adolescents; he/she can support them to overcome the problem in a right way by coping with available resources and utilizing the professional help. This study stresses the involvement of nursing staff in planning and

conducting education programs and also there is need of student nurses to involve in the education programs. The nurses can give guidance and counseling.

### **Nursing Administration**

The main focus of nursing administration is to organize seminars, workshops and other educational programme by which knowledge towards the management of test anxiety among B.Sc. nursing students will increase. Nurse administrator can make a separate budget in each hospital to develop health teaching material in this regard & make accessible to the needy population. They also can start training of volunteers to provide specialized care for the adolescents with test anxiety

### **Nursing Research**

Nurses in developed countries conducted studies regarding test anxiety. In India very few studies have been conducted in this area. So the investigation has to be carried out on large scale to assess test anxiety of B.Sc. nursing students and also to enhance better management. This study enlightens that there is a need to continue the research on test anxiety among B.Sc. nursing students in their teachers and parents. This study motivates other investigators to conduct further studies regarding this topic to find out the variables responsible for causing test anxiety.

### **Recommendations**

In the light of findings listed above and from the personal experience of the investigator the following recommendations are offered.

- A regular programme and instructions can be implemented for the B.Sc. nursing students regarding test anxiety management.
- Special guidance and counseling programmes shall be initiated for the students with test anxiety.

### **Limitations**

1. The size of the sample was small to draw generalization.

2. The study was limited to the particular college in Bhopal
3. The study was limited only to the 1<sup>st</sup> & 2<sup>nd</sup> year B.Sc. nursing students.
4. The study was limited only to test anxiety of B.Sc. nursing students

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