CHAPTER - III

METHODOLOGY
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3.0 Introduction

The rationale of the present study on "Efficacy of Positive Therapy in Managing Anxiety and Enhancing Self-Esteem of X Standard Students" along with its objectives has been given in Chapter I. The present chapter is devoted to the description of sample, hypotheses, variables, design, tools and procedure of data collection. The details in respect of each of them are given in different captions.

3.1 Objectives of the Study

The objectives of this research study are operationalized as follows:

- To explore the existing negative emotions of students before and after Positive Therapy.
- To explore the existing level of anxiety of students before and after Positive Therapy.
- To explore the level of Self-esteem before and after Positive Therapy.
- To identify the self-esteem of students before and after Positive Therapy.
- To find out the influence, if any, of variables such as gender, locality, income of the family, education of father, education of mother, and order of birth of the student on anxiety of students before and after Positive Therapy.
- To find out the influence, if any, of variables specified on the self-esteem of students before and after Positive Therapy.
3.2 Hypotheses of the Study

The hypotheses framed for this research study are as follows:

1. There is no significant difference in the mean anxiety before and after Positive Therapy.
2. There is no significant influence of gender on negative emotions.
3. There is no significant influence of gender, locality, educational status of parents and the order of birth of the sample on anxiety management.
4. There is no significant difference in the mean self-esteem before and after Positive Therapy.
5. There is no significant influence of gender, locality, educational status of parents and the order of birth of the sample on self-esteem.
6. There is no significant relationship between self-esteem and educational status and income of their parents.

3.3 Sample of the Study

From T.A. Ramalingam Chettiar Higher Secondary School, Coimbatore, a total of 135 students studying in standard X were selected by using random sampling technique. Data for both pretest and posttest were collected from the same sample of students. Among these 135 students, 95 were boys and 40 were girls, 42 students were from rural area and 93 were from urban area. Pertaining to the education of fathers 19 were illiterate, 6 with primary education, 28 with middle school education, 47 with high school education, 21 with higher secondary education, and 14 with collegiate education. Among 135 mothers, 30 were illiterate, 16 mothers with primary education, 23 with middle school education, 41 with high school education, 17 with higher secondary education, and 8 of them with collegiate education. A sample of 40 families belongs to the income group between Rs.1000 and Rs.3000 per month. 66 families with income between Rs.3001 and Rs.6000, 22 families with income between
Rs.6001 and Rs.10000 per month and 7 families to the income category of more than Rs.10000 per month.

Table 3.1 presents the distribution of sample under various category.

Table 3.1

<table>
<thead>
<tr>
<th>S.No</th>
<th>Nature of the Sample</th>
<th>Size of the Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Boys</td>
<td>95</td>
</tr>
<tr>
<td></td>
<td>Girls</td>
<td>40</td>
</tr>
<tr>
<td>2</td>
<td>Locality</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>93</td>
</tr>
<tr>
<td></td>
<td>Rural</td>
<td>42</td>
</tr>
<tr>
<td>3</td>
<td>Educational Status of Father</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Illiterate</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Middle</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>47</td>
</tr>
<tr>
<td></td>
<td>Hr.Secondary</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Collegiate</td>
<td>14</td>
</tr>
<tr>
<td>4</td>
<td>Educational Status of Mother</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Illiterate</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Middle</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Hr.Secondary</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>Collegiate</td>
<td>8</td>
</tr>
<tr>
<td>5</td>
<td>Income of Family</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1000-3000</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>3001-6000</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>6001-10,000</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>&gt; 10,000</td>
<td>7</td>
</tr>
<tr>
<td>6</td>
<td>Order of Birth</td>
<td></td>
</tr>
<tr>
<td></td>
<td>First</td>
<td>51</td>
</tr>
<tr>
<td></td>
<td>Middle</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>Last</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>Single</td>
<td>25</td>
</tr>
</tbody>
</table>
3.4 Variables

The investigator attempted to study the level of anxiety and the self-esteem of students studying in standard X. Though a number of variables may contribute for anxiety and self-esteem, it is the responsibility of the researcher to identify the variables which have more impact on the dependent variable of the study. After eliminating the variables which are highly correlated with each other, the investigator selected gender of the sample (Boy, Girl), locality (Rural, Urban), the educational qualification of father [Illiterate, Primary Education (Class 1 to 5), Middle School Education (Class 6 to 8), High School Education (Class 9 & 10), Higher Secondary Education (Class 11 & 12), Collegiate Education (UG & PG Degree)], the educational qualification of mother [Illiterate, Primary Education (Class 1 to 5), Middle School Education (Class 6 to 8), High School Education (Class 9 & 10), Higher Secondary Education (Class 11 & 12), Collegiate Education (UG & PG Degree)] and income of the family (Rs.1000 to Rs.3000, Rs.3001 to Rs.6000, Rs.6001 to Rs.10000 and more than Rs.10000), and order of birth of the student in the family such as First child, Middle child, Last child and Single child, as the six independent variables for the study. The level of anxiety and the self-esteem were the dependent variables.

3.5 Design of the Study

The study aimed to collect information regarding the effect of positive therapy on the level of anxiety and the self-esteem of students studying in standard X. Since an experimental method is considered suitable for use in certain areas of educational research, especially in psychological related areas, and it is the most precise, planned, systematic and applicable for controlled observations, the investigator employed the experimental design for this study. To avoid extraneous variations resulting both from the passage of time and from the non-comparability of the test and control areas, the investigator...
selected the one-group, pretest-posttest \([O_1 \ X \ O_2]\) design from the available experimental designs, for his investigation.

Where,

'X' indicates the treatment (training through Positive Therapy)

'O_1' indicates Pretest (Pre-experiment Observation, i.e. observation before the treatment)

'O_2' indicates Posttest (Post-experiment Observation, i.e. observation after the treatment)

3.6 Description of the Positive Therapy Package

'Positive Therapy' (Hemalatha Natesan, 2004) is a package, which combines the Eastern Techniques of Yoga and Western Techniques of Cognitive Behaviour Therapy. This package aims at modifying negative thoughts, beliefs, emotions and behaviour by using a number of techniques. It is assumed that when negative thoughts are replaced by positive thoughts, the individual becomes more realistic and reasonable in his perception.

The Positive Therapy package includes four major techniques namely.

- Relaxation Therapy
- Counselling
- Exercises and
- Behavioural Assignments

3.7 Relaxation Therapy

This therapy aims to help people to have a relaxed state resulting in promotion of a positive attitude. During the sessions the subjects were asked to follow three steps:

3.7.1 Deep Breathing Practice

In deep breathing practice, the subjects were asked to sit erect, with the head straight, palms on the lap and feet placed on the floor, one foot apart.
With this position, they asked to breathe slowly for 4 counts (4 seconds) and breathe out gradually for 6 counts (6 seconds). This was repeated for 5 times with the subject’s eyes open and 5 times with the eyes closed.

3.7.2 Relaxation Training

The relaxation training was aimed at ensuring complete relaxation of the whole body from head to foot facilitating physical and mental relaxation.

In relaxation training, the subjects were asked to lie down flat on a mat with the head straight, lips slightly apart, hands comfortably placed on the sides, palms facing upwards and legs stretched with feet apart. The subjects were instructed to close the eyes and have a folded handkerchief placed on the eyes to ensure complete darkness. The following instructions were given:

“Breathe in slowly…… Breathe out gradually” (This is repeated three times).

“Now concentrate on the top of the head
Breathe in slowly…… Breathe out gradually…. Top of the head...
Relax” (repeated three times)

While giving instructions, the following suggestions were also given:

“Now the top of the head is light and relaxed, no thoughts, no fears, no worries, no stress, and no pain. Top of the head is light and relaxed. Top of the head is completely relaxed. Breathe in slowly… Breathe out gradually”.

Similar instructions were given to the other parts of the body in the order given below:

- Back of the head
- Forehead
- Eyes
- Mouth
- Neck and Shoulders
- Back
➢ Chest
➢ Stomach
➢ Hands and
➢ Legs

When the subjects were in the relaxed state i.e. the eyes were closed and they lay down without any movement, the following instructions were given:

➢ Inhale good health. Breathe out all the aches, pains and sicknesses from the body.
➢ Inhale happiness. Breathe out all the worries from the body.
➢ Inhale positive thoughts. Breathe out all the negative, useless thoughts from the body.
➢ Inhale strength. Breathe out all the weaknesses from the body.
➢ Inhale courage and confidence. Breathe out all the fears from the body.
➢ Inhale success. Breathe out failures and fears of failures from the body.
➢ Inhale love. Breathe out hatred and anger from the body.

3.7.3 Auto Suggestion

Auto suggestion in the exercise aims to help instill positive personality traits, such as courage, confidence, cheerfulness, optimism and so on and remove negative traits such as pessimism, low self-esteem, self-pity and so on.

The following auto suggestion was given when the subjects, who continued to be in the lying down posture, in a relaxed state:

“1 am healthy”
“1 am happy”
“I love everyone; everyone loves me”
“I am not afraid of anybody; God is with me”
“I am bold and confident”
“I can achieve what I want”
“I can face my problems boldly and solve them successfully”
“Today is an excellent day; I will enjoy every minute of this day”
“Thank you God for giving me all that I need - long life, good health, wealth, happiness, success and love”.

3.8 Counselling

Individual counselling was given using the following techniques:

- Rational Emotive Therapy
- Thought Stopping
- Cognitive Restructuring
- Assertiveness Training

3.8.1 Rational Emotive Therapy

The aim of giving Rational Emotive Therapy was to remove irrational beliefs by appealing to their reason. Rational Emotive Therapy helps the students to identify their irrational beliefs and fears and get rid of them.

3.8.2 Thought Stopping

During the session, the subjects were asked to identify the recurring negative thoughts, which disturb him/her. The common negative thoughts were as follows:

- “I cannot face my problems”
- “I am not intelligent”
- “I cannot study well”

Then the subjects were asked to close the eyes, breathe in slowly, deliberately get one of the negative thought (e.g. fear) and breathe out saying, ‘Stop’ (mentally) feeling that the thought has gone out of the body. The subjects were asked to strongly believe that the thought has gone out of the body. This practice was given three times.
3.8.3 Cognitive Restructuring

Cognitive Restructuring is considered as an important aspect after administering the ‘Thought Stopping’ exercise because it is necessary to replace the negative thoughts with self-enhancing positive thoughts.

In this, the subjects were asked to breathe in slowly for four counts, get one of the following positive thoughts and breathe out smilingly.

“I can face my problems boldly and solve them successfully”
“I am intelligent”
“I can study well”

3.8.4 Assertiveness Training

Assertiveness is the ability to stand up for one’s rights without offending the rights of others. For example, many of the students tend to develop poor health habits such as smoking, drinking, using drugs and so on. Due to their lack of assertiveness to say ‘No’ when they were offered cigarettes, they could not avoid smoking. So the subjects were given assertiveness training to say ‘No’ to such poor health habits. This training was aimed at fostering personality traits, such as, courage, confidence, optimism and the communication skills needed for assertiveness.

3.9 Exercises

An other important technique in positive therapy is exercise which has three components:

- Tension Releasing Exercise
- Smile Therapy
- Laugh Therapy

3.9.1 Tension Releasing Exercise

This exercise was aimed at helping students releasing negative emotions such as fear, anxiety, anger and worry. In this exercise, the subjects were asked to stand straight with one foot apart, close the palms and bring them towards
the chest, breathing in slowly; then breathe out forcefully through the mouth making a loud sound (Ha), simultaneously throwing down the hands sidewise, opening the palms. As the subject breathed out, each instruction mentioned below was given 5 times by the investigator loudly and the students were asked to repeat the same silently.

- “Tension goes out”
- “Fear goes out”
- “Anger goes out”
- “Anxiety goes out”
- “Worry goes out”

3.9.2. Smile Therapy

Smile not only changes the facial expressions, but also changes the mood of the person a cheerful one. Smile helps prevent negative emotions such as fear, anxiety, worry, anger etc. In Smile Therapy, the subjects were asked to say (Eee), with a broad smile, breathe in slowly through the mouth, with a sound (without involving vocal cords), close the mouth smilingly and breathe out gradually through the nose without any sound. The subjects were asked to enjoy the cool breeze entering through the mouth and feel the coolness spreading through the chest to the abdomen. This practice was given 10 times.

3.9.3 Laugh Therapy

In this, the subjects were asked to stand, bend down the back and head slightly, breathe in slowly, lifting up the head and back and start laughing loudly without any inhibition. The subjects were encouraged to make gestures, clap hands etc. This practice was given 5 times. Laughing helps to release the tension accumulated in the body.

3.10 Behavioural Assignments

The following assignments were given to the subjects to help them improve their Self-esteem:

- Have positive thoughts and positive attitude towards self, life and others.
Live in the present; concentrate on what you do and enjoy it.
Enjoy the company of your family members, teachers and friends.
Live in the present.
Follow good health habits.
Have some recreation like playing games and gardening.
Enjoy music.
Develop a sense of humour.
Practise the techniques of Positive Therapy daily, both in the morning facing east and in the evening facing west.
Pray to God.

3.11 Duration of the Therapy

The students were distributed in order to form groups. There were four groups with each group having 34 students. Seven sessions were allotted to each group to train on positive therapy. The time allotted per session was one hour. The type of positive therapy in the package and the duration of the exercises are given in table 3.2.

<table>
<thead>
<tr>
<th>Therapies and Duration for Each Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive Therapy</td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td>Relaxation Therapy</td>
</tr>
<tr>
<td>Counselling</td>
</tr>
<tr>
<td>Exercises</td>
</tr>
<tr>
<td>Behavioural Assignments</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>

From the table 3.2, it is evident that the positive therapy consisted of four major areas with 16 techniques. Relaxation Therapy includes 03 exercises. Counselling has 05 exercises. Under Exercise category there are 03
exercises, and in Behavioural Assignments there are 05 assignments, however a person needs to practise at least 05 exercises a day.

### 3.12 Selection of the Tools

Sukia & Mehrotra (1960) have pointed out that factual material or data unknown or untapped so far, which is essential for every study can be obtained from many sources. It is necessary to adopt or evolve a systematic procedure to collect essential data, adequate in quality and quantity. The instruments used to gather new facts are known as tools. Selection of the tool is an important ingredient of a successful research study. There are various tools available to collect the necessary data for a research study. A researcher can select an existing research tool if it is suitable for his study. In case, such tools are not available, it may be advisable to prepare necessary tools which are appropriate for the study. Since standardized tools relevant for the present study were available, the investigator adopted those tools for collecting data.

### 3.13 Description of the Tools

#### a) Manifest Anxiety Inventory

In the Indian context, the ‘Manifest Anxiety Inventory’ constructed and validated by Hemalatha Natesan (2004) is widely used to assess the level of anxiety. The Inventory has four parts. The first part has 13 statements with two alternatives, ‘Yes’ or ‘No’. These statements cover aspects related to physical symptom, for instance, ‘my muscles are stiff, my palm is wet’, ‘I used to get bad dreams’ etc.,. The second part has seven statement with two alternatives, ‘Yes’ or ‘No’. This part covers aspects related to mental or emotional symptoms such as ‘tension’, ‘feeling of dissatisfaction’, ‘ear’, ‘fear about future’, etc.,

The third part includes the statements with two alternatives ‘Yes’ or ‘No’, which are related to assess the state of emotional disturbance. For instance, ‘I cannot focus my attention’, ‘I cannot take decision’, ‘I cannot
complete my work on time' etc., Thus the Anxiety Inventory in total has 40
Negative statements with ‘Yes’ or ‘No’ alternative. (Appendix II). The subjects
had to choose any one of the two alternatives. The four parts of the inventory
were given as Anxiety Type I, Anxiety Type II, Anxiety Type III, and Anxiety
Type IV in the analysis section.

Table 3.3

<table>
<thead>
<tr>
<th>Scores</th>
<th>Level of Anxiety</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-8</td>
<td>Low</td>
</tr>
<tr>
<td>9-16</td>
<td>Moderate</td>
</tr>
<tr>
<td>17-24</td>
<td>High</td>
</tr>
<tr>
<td>25 and above</td>
<td>Very High</td>
</tr>
</tbody>
</table>

b) Self Esteem Scale

To assess the well-being of the subjects, the investigator used Rosenberg
Self-Esteem Scale developed by Florence Rosenberg (1965). The scale can be
used to assess Global Self-Esteem and it is one of the most widely used
Self-Esteem tests among psychologist and sociologist. This scale has 10
statements with six positive and four negative statements. It is a four point
scale with ‘Strongly Agree’ (SA), ‘Agree’ (A), ‘Disagree’ (D), and ‘Strongly
Disagree’ (SD).

The subjects were given instruction to use this scale in the following
manner. The statements are dealing with the general feelings about one self.
If the subjects strongly agree the statement then they were asked to encircle
‘SA’ (Strongly Agree). If the subjects “agreed” with the statement ‘A’ was
encircled. If the statement was “disagreed”, they were asked to encircle ‘D’ and
for Strongly disagree ‘SD’ was enriched.
Table 3.4

Assessment Schedule for Self-Esteem Scale

<table>
<thead>
<tr>
<th>Scores</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 05</td>
<td>Very Low</td>
</tr>
<tr>
<td>6-11</td>
<td>Low</td>
</tr>
<tr>
<td>12-17</td>
<td>Moderate</td>
</tr>
<tr>
<td>18-23</td>
<td>High</td>
</tr>
<tr>
<td>Above 24</td>
<td>Very High</td>
</tr>
</tbody>
</table>

3.14 Procedures Adopted During Treatment

After selecting the sample and finalizing the therapy package, the subjects were trained on the positive therapy for seven sessions, per session having one hour. After completing one session of training, each group underwent three practice sessions for twenty minutes and then they attended the next training session. Likewise they attended seven training sessions and twenty one practice sessions. The training and the practice sessions went on hand on hand. The table below presents the day order for training and practice session in a period of thirty days.
TABLE 3.5
Details of Training and Practice Session

<table>
<thead>
<tr>
<th></th>
<th>Group I</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>Training Session</td>
<td>Practice Session</td>
<td>Training Session</td>
<td>Practice Session</td>
<td>Training Session</td>
<td>Practice Session</td>
<td>Training Session</td>
</tr>
<tr>
<td>Mon</td>
<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
</tr>
<tr>
<td>Fri</td>
<td>Mon</td>
<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
<td>Mon</td>
<td>Tue</td>
</tr>
<tr>
<td>Thur</td>
<td>Mon</td>
<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
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<tr>
<td>Wed</td>
<td>Mon</td>
<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
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<td>Tue</td>
<td>Mon</td>
<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
<td>Mon</td>
<td>Tue</td>
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<tr>
<td>Mon</td>
<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
<td>Mon</td>
<td>Tue</td>
<td></td>
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<td>Tue</td>
<td>Wed</td>
<td>Thur</td>
<td>Fri</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The training session was held prior to actual classroom session. Students were motivated to be present half-an-hour ahead of school timings during training session. Care was taken to train and practise the positive therapy. After
the training session, the subjects were motivated to practise all the exercises. The investigator sought the assistance of volunteers, who were oriented by the investigator. During holidays, the students were asked to assemble for practice and dispose them after practice.

3.15 Data Gathering Procedure

The present study was experimental in nature and it was designed on the basis of pretest and posttest single group design. Therefore, the gathering of data both for the pretest and the posttest were done personally by the investigator under three phases.

In the first phase, the personal information of the sample such as gender, locality, educational qualification of father, educational qualification of mother, income of family, and the order of birth of the student in the family were collected by using personal information schedule.

In the second phase, the pretest was administered using Anxiety Inventory and Self-Esteem Scale. The following procedures were adopted for collecting data during pretest. They are summarized below:

- As soon as the subjects were selected, they were asked to assemble in a separate place.
- The investigator made a friendly talk with them for developing good rapport and confidence.
- He explained the purpose of the Anxiety Inventory and the Self-Esteem scale and the duty of the respondent.
- The students were asked to avoid, if they wish, writing their names on the inventory and on the scale.
- To avoid discussion among students, they were asked to sit with adequate distance between them.
- Students were asked to take their own time to fill the inventory and the scale.
After the above said procedures were adopted, the investigator first issued the Anxiety Inventory to the students and asked them to fill the inventory freely and frankly. After collecting all the filled response sheets, the investigator issued the Self-Esteem Scale to students for answering. The students were allowed to go out only after the completion of all the items in both the testing instruments.

In the third phase, the posttest was administered using the same Anxiety Inventory and Self-Esteem Scale. This test was conducted, one week after the successful completion of the therapy by the sample. The same procedures adopted for collecting data in pretest was adopted for this test also.

3.16 Data Analyses

In a research, the statistical treatment is an important aspect. The investigator employed parametric statistics to process the data collected from the sample. Students ‘t-test’, ANOVA, and ANCOVA were used to find out the difference between groups as per the classification of variables. A detailed analysis of data is presented in chapter IV.

Having described the methodology of study, the analysis and the interpretation of the research data are presented in chapter IV.
Students During Exercise

Plate 1: Girls During Exercise

Plate 2: Boys are being Taught Exercises by the Investigator
Laugh Therapy Session

Plate 3: Girls During Laugh Therapy

Plate 4: Boys in Laugh Therapy
Session with the Investigator
Training in Deep Breathing Exercise

Plate 5: Girls in Deep Breathing Exercise

Plate 6: Boys in Deep Breathing Exercise
Students During Relaxation Therapy

Plate 7: Girls in Relaxed State
(Investigator is seen observing)

Plate 8: Boys in Relaxed State
(Investigator is seen observing)