ANNEXURES
ANNEXURE – I

SRI RAMACHANDRA UNIVERSITY
(Established under Section 3 of the UGC Act, 1956)
Porur, Chennai - 600 116.

INSTITUTIONAL ETHICS COMMITTEE

CHAIRPERSON
Dr. RAJESWARI RAMACHANDRAN

MEMBER SECRETARY
Dr. B.W.C. SATHIYASEKARAN

MEMBERS
Dr. S.PARVATHAVARDHINI
Dr. C. UMA MAHESWARA REDDY
Dr. M. RAMESH
Dr. RAMYA R
Mrs. KANAN VERMA
Mrs. GRIJHA KUMARABU
Mr. P. MURIGAN - Legal Consultant

To
Ms. Virginia Mary V.
Principal
Sri Krishna CON
Madevapura Post: White Field Road
Bangalore

13.08.07

Dear Ms. Virginia Mary

REF: 07/Aug/59/40
Self esteem, study habits, Adjustments and Academic achievements seen among nursing students.

The Institutional Ethics Committee thank you for your submission of the above proposal and it has been discussed in its meeting held on 02.08.2007. The Institutional Ethics Committee approves the project subject to submission of Informed Consent Form after making appropriate revision and providing more information about the study. You are advised to be familiar with ICMR guidelines on Biomedical Research in human beings and also to adhere to the Principles of good clinical practice. You are required to submit the final report on the completion of study to the Institutional Ethics Committee. Wish you all the best.

Yours Sincerely,

(PROF.B.W.C.SATHIYASEKARAN)
Member Secretary

Note: Please quote MEC Reference number in all future communications.
From,

Prof. V. Virginia Mary,
Ph.D Nursing Student,
Sri Ramachandra University,
Porur, Chennai-116.

To,

The principal.
SRI SHANTHINI COLLEGE
O.F. NURSING............
ANGERE...OPPOSITE TO
SOB. REGISTRAR. OFFICE,
BANGALORE -

Respected Sir/Madam,

Subject: Requisition for permission to collect research data-reg

With reference to the above subject, I would like to bring to your kind notice that I am doing Ph.D in Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing Students. Hence, I request your kind self to permit me with your office order letter to do date collection on Self-Esteem, study habits, Adjustment and Academic Achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking you,

yours Sincerely,

[Signature]

Prof. V. Virginia Mary
Ph.D. Nursing Students
Sri Ramachandra University
Porur, Chennai-116.
From  
Prof. V. Virginia Mary  
Ph.D Nursing Student,  
Sri Ramachandra University  
Porur, Chennai- 116

To  
The Principal  
Sri Ramachandra University College of Nursing  
Porur, Chennai- 116

Respected Sir/Madam  

Subject: Requisition for permission to collect research data—reg  

With reference to above subject, I would like to bring to your kind notice that I am doing Ph.D Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing students. Hence, I request your kind self to permit me with your office order to do data collection on Self esteem, study habits, Adjustment and Academic achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking You,

yours Sincerely,

[Signature]

Prof. V. Virginia Mary  
Ph.D Nursing student  
Sri Ramachandra University  
Porur, Chennai-116
From,

Prof. V. Virginia Mary,
Ph.D Nursing Student,
Sri Ramachandra University,
Porur, Chennai-116.

To,

The principal,

Respected Sir/Madam,

Subject: Requisition for permission to collect research data-reg

With reference to the above subject, I would like to bring to your kind notice that I am doing Ph.D in Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing Students. Hence, I request your kind self to permit me with your office order letter to do data collection on Self-Esteem, study habits, Adjustment and Academic Achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking you,

yours Sincerely,

[Signature]

Prof. V. Virginia Mary
Ph.D. Nursing Student
Sri Ramachandra University
Porur, Chennai-116.
ANNEXURE – II (d)

From,

Prof. V. Virginia Mary,
Ph.D Nursing Student,
Sri Ramachandra University,
Porur, Chennai-116.

To,

The principal,
M.G. Ramayya Institute of Nursing Education & Research,
Maithripala Institute,
Bangalore-560126,
Karnataka...........

Respected Sir/Madam,

Subject: Requisition for permission to collect research data-reg.

With reference to the above subject, I would like to bring to your kind notice that I am doing Ph.D in Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing Students. Hence, I request your kind self to permit me with your office order letter to do date collection on Self-Esteem, study habits, Adjustment and Academic Achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking you,

yours Sincerely,

Prof. V. Virginia Mary
Ph.D. Nursing Students
Sri Ramachandra University
Porur, Chennai-116.
From
Prof. V. Virginia Mary
Ph.D Nursing Student,
Sri Ramachandra University
Porur, Chennai - 116

To
The Principal
Acharya College of Nursing
Bangalore

Respected Sir/Madam

Subject: Requisition for permission to collect research data—reg

With reference to above subject, I would like to bring to your kind notice that I am doing Ph.D Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing students. Hence, I request your kind self to permit me with your office order to do data collection on Self esteem, study habits, Adjustment and Academic achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking You,

yours Sincerely,

[Signature]
Prof. V. Virginia Mary
Ph.D Nursing student
Sri Ramachandra University
Porur, Chennai-116
From,

Prof. V. Virginia Mary,  
Ph.D Nursing Student,  
Sri Ramachandra University,  
Porur, Chennai-116.

To,

The principal,  
Maligie Institute of Nursing  
HMT, Sector-II  
Bangalore - 13.

Respected Sir/Madam,

Subject: Requisition for permission to collect research data-reg

With reference to the above subject, I would like to bring to your kind notice that I am doing Ph.D in Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing Students. Hence, I request your kind self to permit me with your office order letter to do date collection on Self-Esteem, study habits, Adjustment and Academic Achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking you,

Prof. V. Virginia Mary  
Ph.D. Nursing Students  
Sri Ramachandra University  
Porur, Chennai-116.
ANNEXURE – II (g)

From
Prof. V. Virginia Mary
Ph.D Nursing Student,
Sri Ramachandra University
Porur, Chennai- 116

To
The Principal
OXFORD COLLEGE OF NURSING
Begur road, Hoskogandur,
Bangalore- 560064.

Respected Sir/Madam

Subject: Requisition for permission to collect research data- reg

With reference to above subject, I would like to bring to your kind notice that I am doing Ph.D Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing students. Hence, I request your kind self to permit me with your office order to do data collection on Self esteem, study habits, Adjustment and Academic achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking You,

yours Sincerely,

[Signature]
Prof. V. Virginia Mary
Ph.D Nursing student
Sri Ramachandra University
Porur, Chennai-116

PRINCIPAL
The Oxford College of Nursing
1st Cross, Begur Road, Hoskogandur,
BANGALORE - 560 068
From,

Prof. V. Virginia Mary,
Ph.D Nursing Student,
Sri Ramachandra University,
Porur, Chennai-116.

To,

The principal,
M.G.G. Institute of Nursing
H.M.P. School
Bangalore - 12.

Respected Sir/Madam;

Subject: Requisition for permission to collect research data-reg

With reference to the above subject, I would like to bring to your kind notice that I am doing Ph.D in Nursing at Sri Ramachandra University, Chennai. My study populations are 2nd year GNM & B.Sc Nursing Students. Hence, I request your kind self to permit me with your office order letter to do date collection on Self-Esteem, study habits, Adjustment and Academic Achievements of subject in your esteemed institution. Your help is highly appreciable for our profession. Kindly do the needful and oblige.

Thanking you,

yours Sincerely,

[Signature]

Prof. V. Virginia Mary
Ph.D. Nursing Students
Sri Ramachandra University
Porur, Chennai-116.
LETTER SEEKING CONSENT FROM THE PARTICIPANTS

Dear Participant,

I, Prof. V. Virginia Mary, Ph.D (Psychiatric Nursing) Student of Sri Ramachandra University, Porur, Chennai conducting a research study on, “A nurse educator’s study on self-esteem, study habits, adjustment and academic achievements seen among nursing students”.

I kindly request you to participate in this study by answering the questionnaire given to you. The information obtained from you will be kept confidential and will be used only for the study purpose.

You are free to withdraw from the study at any time, if you do not like. Your kind co-operation will always be appreciated with deep gratitude.

Thanking you,

Yours Sincerely,

Prof. V. Virginia Mary
Ph.D Nursing Student
Sri Ramachandra University
Chennai - 116

CONSENT FORM

I, Mr/Ms/Mrs __________________________ hereby giving consent for the above said study knowing that all the information provided by me would be treated with utmost confidentiality by the investigator.

Signature of the Participant

Name:
LETTER REQUESTING EXPERTS OPINION AND SUGGESTIONS FOR
CONTENT AND TOOL VALIDATION

From
Prof V.Virginia Mary,
Ph.D student,
Sri Ramachandra University,

To:
                                                                                                           
Respected Sir / Madam,

Subject: requisition to validate the tool and its content

I, Prof. V.Virginia Mary, Ph.D (Nursing) student of Sri Ramachandra University request your kind self to validate my research tools and their content on the title “A Nurse Educator’s study on self-esteem study habits adjustment and academic achievement seen among nursing students”.

I also request you to certify your validation work in the enclosed format. I will be grateful to your honorable work.

Thanking you in anticipation,

Yours faithfully,

Prof. V.Virginia Mary

ENCLOSURES

1. Statement of the problem and objectives of the current study.
2. Number of tools,
   SECTION – I: Socio demographic data.
   SECTION – II: Standardized self-esteem inventory for adolescents.
   SECTION – III: Standardized study habit inventory for adolescents.
   SECTION – IV: Standardized adjustment inventory for adolescents.
   SECTION – V: First Year University / nursing board marks in percentage.
3. Description of the tools and their scoring key.
4. Content validity certificate.
LIST OF EXPERTS WHO VALIDATED THE TOOLS

1. Dr. Parthasarathi
   Professor,
   Department of Psychiatric Social Work,
   NIMHANS, Bengalur 41,
   Karnataka.

2. Dr. Ramachandra
   Professor cum Principal,
   College of nursing
   NIMHANS, Bengalur 41,
   Karnataka.

3. Dr. Kasthuri
   Professor cum Principal,
   Oxford College of nursing,
   Bengalur,
   Karnataka.

4. Dr. Muthulaxmi
   Professor cum Principal,
   P.P.G College of nursing,
   Saravanampatty,
   Coambatoore, 31
   Tamilnadu.

5. Dr. A. Somashekara Murthy
   Professor cum Principal,
   Ambedkar college of Education,
   Bengalur,
   Karnataka.

6. Dr. Muralidar.
   Professor,
   Department of Psychiatric Social Work,
   NIMHANS, Bengalur 41,
   Karnataka.

7. Dr. S.S. Prabhudeva
   M.S. Ramayha
   Institute of nursing education and research,
   MSR Nagar,
   Mathikare, Bengaluru 54.
ANNEXURE-VI

SECTION - I

Socio Demographic Data Sheet

Dear students,

Please read each item /statement carefully and give your appropriate response. All the information (response) given by you will kept confidential and used only for the study purposes.

Kindly answer all the questions.

I. Personal profile.
   1. Age (years)
      a. 18 Years
      b. 19 Years
      c. 20 Years
      d. 21 years and above.
   2. Gender / Sex
      a. Male
      b. Female.
   3. Your birth order in the family,
      a. First child
      b. Middle child
      c. Last child
      d. Precious child.
   4. Domicile
      a. Rural
      b. Urban
      c. Semi urban.
   5. Income of the family
      a. Below Rs.10,000/-
      b. Rs.10,001/- to Rs.20,000/-
      c. Rs.20,001/- and above.
   6. Religion
      a. Hindu
      b. Christian
      c. Muslim
      d. Any other (specify)
   7. Parents
      a. Both are alive
      b. Only one is alive
      c. Separated /divorced /living far from each other due to job
II. Family profile.

8. Number of siblings
   a. Nil
   b. One
   c. Two
   d. Three
   e. More than Three.

9. History of suicide in the family
   a. YES
   b. NO.

10. Whether are you suffering from any health problems?
    a. Yes
    b. No

11. Do you have chronic illness/disability?
    a. Yes
    b. No

12. Type of family
    a. Joint
    b. Nuclear
    c. Extended.

13. Size of the family
    a. Less than four
    b. More than four.

14. Age of mother
    a. Below 40 Years
    b. 41 to 50 Years
    c. 51 Years and above

15. Age of father
    a. Below 40 Years
    b. 41 to 50 Years
    c. 51 Years and above

16. Education of Mother
    a. No formal education
    b. Below 10th std
    c. Up to graduate
    d. PG and above
    e. Diploma/technical education

17. Education of Father
    a. No formal education
    b. Below 10th std
    c. Up to graduate
    d. PG and above
    e. Diploma/technical education
18. Occupation of Mother
   a. House wife
   b. Business
   c. Service (professional)
   d. Service (non professional)
   e. Skilled work
19. Occupation of Father
   a. House wife
   b. Business
   c. Service (professional)
   d. Service (non professional)
   e. Skilled work.

III. Academic profile.
20. Regularity in school /college attendance
   a. Irregular
   b. Regular
   c. Regularly Irregular
   d. Irregularly Regular
21. What is your academic performance level?
   a. Poor
   b. Below average
   c. Average
   d. Above average
   e. Excellent.
22. Percentage of marks obtained in the last (first) year exam
   a. 80% to 90%
   b. 70% to 80%
   c. 60% to 70%
   d. 50% to 60%
   e. Below 50%
23. What incentives did your parents offered to you for your performance in the last year exam?
   a. Nothing
   b. Outing
   c. Holiday trips
   d. Vehicle
   e. Dress
   f. Jewels
   g. Mobile phone
   h. Verbal appreciations
24. What is your level of expectations to achieve in second year final examination?
   a. At least pass (50%)
   b. Score 60%
   c. Score 70%
d. Score 80% and above  
e. No expectations.

25. What is your performance in the last year exam?  
   a. Excellent  
   b. Good  
   c. Fair  

26. What do your parents want you to achieve in this year’s final Exams?  
   a. At least pass (50%)  
   b. Score 60%  
   c. Score 70%  
   d. Score 80% and above  
   e. No expectations  

27. Have your parents clearly communicated their expectations to you?  
   a. Yes  
   b. No.  

28. Do you have the habits of reading journals/periodicals?  
   a. Yes  
   b. No  

29. If you plan to do post graduation in Nursing, will you prefer mental health nursing as specialization?  
   a. Yes  
   b. No  

30. Did you receive any counselling on academic achievements and study  
   a. Yes  
   b. No.  

IV. Social life profile.  
31. Have you attended any camp in the school days on self esteem and adjustment?  
   a. Yes  
   b. No  

32. If camps are attended, how many times?  
   a. One time  
   b. More than one time.  

33. What are the modifications you use to do to improve study activities  
   a. Stop watching T.V  
   b. Transferring your work to others  
   c. Keeping your room neat  
   d. Fresh up to study  
   e. Preferring silence / natural environment.  

34. When you don’t perform well in the examination at times; what were the reactions of your teachers?  
   a. They don’t bother  
   b. Scolded
c. Provided special classes
d. Informed parents
e. Insisted to come for study hours regularly
f. Any other (specify).

35. Where do you reside while studying nursing programme?
   a. Home
   b. Hostel
   c. Paying guest house
   d. Rental house
   e. Any other

36. After completion of your course, what is your future plan?
   a. Bed side Nurse
   b. Persuading for higher studies
   c. Government job
   d. Join in Armed Force / Railways
   e. Going Abroad
   f. Become a teacher
   g. Getting Married
   h. Nurse Administrator

37. Do you find social life among your Nursing classmates?
   a. Yes
   b. No.

38. Do you participate in social get together commonly with?,
   a. Males
   b. Females
   c. Both.

39. How do you rank yourself about your interactions with classmates?
   a. Freely socializing with no inhibitions.
   b. Friendly but with reservations
   c. Aloof

40. What do you want to achieve through your study period?
   a. Get in to good carrier
   b. Get good marks
   c. Personal satisfaction
   d. Enjoying to the maximum
   e. Meeting teachers and parents expectations

41. Which are the group activities would you like to participate?
   a. Educational trip
   b. Jolly tours
   c. Collective rebelling
   d. Group study
   e. Cultural activity
   f. Any other (specify)
A Standardised self–Esteem Inventory
(Dr. S. Karunanidhi - 1996).

INSTRUCTIONS:

Dear students, the list of statements is given below. These statements described how you generally feel and think about yourself and not how others think of you. There are no right or wrong answers. Please indicate your appropriate responses by placing the tick mark in appropriate columns using the following rating scale to express your feelings.

A = Always
M = Most of the time
S = sometimes
N = Never
<table>
<thead>
<tr>
<th>SL.NO</th>
<th>Statements</th>
<th>A</th>
<th>M</th>
<th>S</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I am Happy that I am talented</td>
<td></td>
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<td>2.</td>
<td>I am pleased with myself</td>
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<td>3.</td>
<td>I feel, that I have a good conscience</td>
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<td>4.</td>
<td>Other people, have high regard for me</td>
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<td>5.</td>
<td>I am happy, about my parents relationship</td>
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<td>6.</td>
<td>I feel good, because I am physically fit and healthy.</td>
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<td>7.</td>
<td>I do everything perfectly</td>
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<td>8.</td>
<td>I feel, inferior as I am a dull student</td>
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<td>9.</td>
<td>I respect myself</td>
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<td>10.</td>
<td>I feel unhappy, as I am unable to concentrate.</td>
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<td>11.</td>
<td>I feel, others give importance to me</td>
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<td>12.</td>
<td>I feel that I am not needed in the family</td>
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<td>13.</td>
<td>I like my physical features</td>
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<td>14.</td>
<td>I feel I cheat others</td>
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<td>15.</td>
<td>I like myself as I am intelligent</td>
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<td>16.</td>
<td>I feel I am worthless</td>
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<td>17.</td>
<td>I respect others as I respect</td>
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<td>18.</td>
<td>I feel inadequate to participate in group activities.</td>
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<td>19.</td>
<td>I am proud of my family</td>
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<td>20.</td>
<td>I feel inferior due to my physical appearance</td>
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<td>21.</td>
<td>I have complete control of my life</td>
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<td>22.</td>
<td>I am capable of passing the examination easily</td>
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<td>23.</td>
<td>I don’t like myself</td>
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<td>24.</td>
<td>I am confident as I have the ability to manage difficult situations</td>
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<td>25.</td>
<td>I am happy that many of my friends like my company.</td>
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<td>26.</td>
<td>I feel proud of my school</td>
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<td>27.</td>
<td>I worry as I am not an energetic person</td>
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<td>28.</td>
<td>I tell lies</td>
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<td>29.</td>
<td>I feel depressed when I fail in familiar tasks</td>
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<td>30.</td>
<td>I feel confident about myself</td>
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<td>31.</td>
<td>I feel bad because I am not disciplined</td>
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<td>32.</td>
<td>I feel nobody cares for me</td>
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<td>33.</td>
<td>I worry about my family’s economic conditions</td>
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<td>34.</td>
<td>I think I am capable enough to participate in sports.</td>
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<td>35.</td>
<td>I don’t have any bad habits</td>
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<tr>
<td>36.</td>
<td>I am pleased with myself if as I can think and act independently.</td>
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<tr>
<td>37.</td>
<td>I am happy about my conduct</td>
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<tr>
<td>38.</td>
<td>I think I am able to concentrate in spite of distraction</td>
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<tr>
<td>39.</td>
<td>I am worried about what others think of me</td>
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<tr>
<td>40.</td>
<td>I feel ashamed because of my parents’ occupation.</td>
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<tr>
<td>41.</td>
<td>I worry when I tire easily</td>
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<td>42.</td>
<td>I don’t break any rules</td>
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<td>43.</td>
<td>I feel that I am in-capable of studying</td>
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<tr>
<td>44.</td>
<td>I am not happy about myself</td>
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</tbody>
</table>
45. I feel that I am able to control my anger.
46. I feel happy that my friends help me.
47. I am ashamed about my parent’s education.
48. I feel I am a good looking person.
49. I think I have the ability to achieve with little effort.
50. I am happy about my education.
51. I feel I am honest.
52. I am afraid to meet the new people.
53. I feel happy as I born in my family.
54. I am worried about my skin complexion.
55. I have adequate ability to achieve something.
56. I am happy about the way I am.
57. I dislike myself when I leave any task in complete.
58. I am not embarrassed to express my opinion in a group.
59. I wish I was born in some other caste.
60. I worry about my inability to perform any physical activity.
61. I think I can complete tasks accurately and rapidly.
62. I am happy about myself.
63. I feel guilty when I tell a lie.
64. I feel hurt when others criticize me.
65. I feel happy about my childhood.
66. I am not satisfied with my study habits.
67. I am not confident enough to face the future.
68. I feel bad as I find it difficult to control my emotions.
69. I feel that my friends are rejecting me.
70. I am happy because my parents care for me.
71. I am confident of coping with disappointment.
72. I think that I have better memory.
73. I feel that I am doing activities which are immoral.
74. I feel I have trustworthy friends.
75. I appreciate myself when I am able to learn new skills quickly.
76. I think I am not able to do anything well.
77. I am a good person.
78. I am competent enough to master a skill.
79. I feel useless as I cannot perform well in difficult tasks.
80. I think I am able to understand ideas discussed in a group.
81. I feel I had more failure than success.
82. I feel I am a successful individual.
83. I feel that I can think positively.
SECTION - III

A standardised Inventory on Study Habits among Adolescents.
(B.V.PATEL, 1983)

INSTRUCTIONS:

Dear Students, list of statements is given below. These statements described how you generally follow various styles in preparing yourself for your academics. It is otherwise called as ‘study habits. Now you think about your actual habits you follow and not how others are following or have taught to you. There is no right or wrong answers. Please indicate your responses by giving tick ( ) mark in the given YES or NO columns to indicate your own habits.

<table>
<thead>
<tr>
<th>Sl . No</th>
<th>Study Habits</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I frame my own time table to study at home.</td>
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<tr>
<td>2.</td>
<td>I work according to my time table.</td>
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<td>3.</td>
<td>I study regularly in my study room.</td>
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<td>4.</td>
<td>I prepare almost all my subjects before going to school and read them again at home, whatever is done in the class.</td>
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<td>5.</td>
<td>I join tuition classes.</td>
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<td>6.</td>
<td>I read at place where and get disturbed by radio People’s children’s play, relatives, guest etc.,.</td>
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<td>7.</td>
<td>I cannot study well as I keep myself engaged in the domestic work.</td>
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<td>8.</td>
<td>I make note of important points during reading.</td>
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<td>9.</td>
<td>I use dictionary to look up meaning of new words.</td>
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<td>10.</td>
<td>I pay more attention to new words while studying</td>
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<td>11.</td>
<td>I take down detailed notes on what is being taught in the class room.</td>
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<td>12.</td>
<td>The doubtful points which arise during reading are depend to the subjects’ teacher of clarity.</td>
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<td>13.</td>
<td>I try to solve at once, the difficulties met with while reading.</td>
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<td>14.</td>
<td>I miss important points while taking notes in the class room.</td>
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<td>15.</td>
<td>I read annotations (guides) rather than text books.</td>
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<td>16.</td>
<td>I underline the important points in my text books while reading.</td>
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<td>17.</td>
<td>I pay more attention to the subjects in which I find difficult.</td>
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<td>18.</td>
<td>I devote more time to study subjects in which I am weak.</td>
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<td>19.</td>
<td>I give priority to studying the difficulty subjects.</td>
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<tr>
<td>20.</td>
<td>I read the same subject for a long time.</td>
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<td>21.</td>
<td>I study only that subject I am interested in and leave out the subject which I find uninteresting.</td>
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<tr>
<td>22.</td>
<td>I study with concentration.</td>
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<td>23.</td>
<td>I feel I don’t study at all.</td>
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<tr>
<td>24.</td>
<td>My mind goes astray when I read.</td>
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<tr>
<td>25.</td>
<td>I understand that I read but don’t remember it.</td>
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<tr>
<td>26.</td>
<td>In examination I think of the answers of the questions before.</td>
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<tr>
<td>27.</td>
<td>I get nervous at the time of examination</td>
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<td>28.</td>
<td>I read till late at night at the time of examination</td>
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<td>29.</td>
<td>I read class-notes at the time of examination.</td>
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<tr>
<td>30.</td>
<td>I don’t study regularly for I get important questions and suggestions at the time of examination.</td>
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<tr>
<td>31.</td>
<td>I do not prepare questions occurred (asked) at previous examination thinking that they would not be set again.</td>
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<tr>
<td>32.</td>
<td>I memorize definitions, maxims, formulas, etc; after understanding them.</td>
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<td>33.</td>
<td>I discuss the subjects read, with my friends</td>
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<tr>
<td>34.</td>
<td>I read while reclining on a bed.</td>
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<td>35.</td>
<td>I read aloud (loudly.)</td>
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<td>36.</td>
<td>I try to compare things learnt in one subject with those in another.</td>
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<td>37.</td>
<td>I ruminate over all things I read.</td>
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<td>38.</td>
<td>Before I start reading new lessons I briefly revise the lessons read.</td>
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<td>39.</td>
<td>After reading one paragraph, I at once review it mentally.</td>
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<tr>
<td>40.</td>
<td>I spent my leisure time at school in reading.</td>
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<tr>
<td>41.</td>
<td>I use books from the library.</td>
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<tr>
<td>42.</td>
<td>I read newspapers and other books too.</td>
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<tr>
<td>43.</td>
<td>I participate in the class room discussion.</td>
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<tr>
<td>44.</td>
<td>I answer the question asked by the teacher while teaching.</td>
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<tr>
<td>45.</td>
<td>I cannot progress in my studies due to my dislikes for certain teachers and subjects.</td>
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</tbody>
</table>
SECTION – IV

A Standardised Scale to Assess the Level of Adjustment among Adolescents.
(Singha And Singh - 1993)

Dear students, kindly read these instructions:

On the next pages there are 60 questions, covering your college problems, which have two alternative responses YES or NO. Read every question carefully and decide whether you want to answer with YES or NO. If your answer is YES, then cross (X ) the cell [ ] under YES. If your answer is NO, then cross (X) the cell [ ] under NO.

Remember your answer will not be told to any person. So please give the correct answer without hesitation. You may take your own time, but try to finish as soon as possible.

<table>
<thead>
<tr>
<th>S.NO</th>
<th>QUESTIONS</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Are you always afraid of something in your school or college?</td>
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<tr>
<td>2.</td>
<td>Do you avoid meeting your classmates?</td>
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<td>3.</td>
<td>Do you forget soon what you have read?</td>
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<td>4.</td>
<td>Suppose your classmates do something unreasonable unknowingly do you immediately get angry with them?</td>
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<td>5.</td>
<td>Are you of a shy in nature?</td>
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<td>6.</td>
<td>Are you afraid of examinations?</td>
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<td>7.</td>
<td>Do you worry your teacher scolding you for your mistakes?</td>
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<td>8.</td>
<td>Do you hesitate in asking a question when you don’t</td>
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<td>9.</td>
<td>Is it difficult for you to understand the lessons taught in the class?</td>
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<td>10.</td>
<td>Are you jealous of those friends whom teachers appreciate very much?</td>
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<td>11.</td>
<td>When some of your teachers are together, do you go there without any complex?</td>
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<td>12.</td>
<td>Can you note down the lessons taught in the class correctly</td>
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<tr>
<td>13.</td>
<td>Do you envy those classmates whom you think better than you</td>
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<tr>
<td>14.</td>
<td>Do you feel sometimes as if you have no friend in your school?</td>
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<td>15.</td>
<td>Do you yawn when lesson is taught in your class?</td>
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<td>16.</td>
<td>When you see, some students talking themselves, do you think they are gossiping about you?</td>
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<tr>
<td>17.</td>
<td>Are you satisfied with the method of teaching of teachers of this school?</td>
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<td>18.</td>
<td>Do you express your anger to others when you are not asked to come forward in any Programme in your school?</td>
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<td>19.</td>
<td>When some students are talking together, do you join them freely?</td>
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<td>20.</td>
<td>Do you think that the teachers in the school do not pay any</td>
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<tr>
<td>Question</td>
<td>Answer</td>
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<tr>
<td>-------------------------------------------------------------------------</td>
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<tr>
<td>21. Are you often sad and distressed in the school?</td>
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<tr>
<td>22. Do you like to join your classmates working together?</td>
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<tr>
<td>23. Are you satisfied with the progress in your studies?</td>
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<td>24. Do you feel the teachers neglect you?</td>
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<tr>
<td>25. Do you try to attract the attention of your teacher to yourself in the class?</td>
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<tr>
<td>26. Is it a burden lot you to study something?</td>
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<tr>
<td>27. Do you get yourself worked up and try to harm a student when he/she complains against you?</td>
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<tr>
<td>28. Do you often like to be alone?</td>
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<tr>
<td>29. Are you often dissatisfied with your school?</td>
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<tr>
<td>30. Are your teachers always ready to solve your problems concerning your studies</td>
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<td></td>
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<tr>
<td>31. Are you often dissatisfied with your teacher?</td>
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<tr>
<td>32. Do you establish a friendly relationship with the students in the school/college?</td>
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<tr>
<td>33. Do your teachers in the school praise you?</td>
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<tr>
<td>34. Do you try to rationalise your mistake?</td>
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<tr>
<td>35. Do you like to sit in the front seats in the class?</td>
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<tr>
<td>36. Do you often get less marks in examinations?</td>
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<tr>
<td>37. Do you present it when your teachers ask you a question in the class?</td>
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<tr>
<td>38. Do you have a friendly association with your fellow students?</td>
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<tr>
<td>39. Do you like the idea of having more holidays in the school?</td>
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<tr>
<td>40. Do you get wild when one of your classmates jokes with you?</td>
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<tr>
<td>41. Do you openly take part in the school assemblies?</td>
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<tr>
<td>42. Do you often quarrel with your classmates?</td>
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<tr>
<td>43. Do you sometimes go home before the school closes?</td>
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<tr>
<td>44. Do you take part in the school sports?</td>
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<tr>
<td>45. Do some of your teachers often keep on scolding you for the studies?</td>
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<tr>
<td>46. Do you often have doubt on others in school?</td>
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<tr>
<td>47. Are you shy of talking to the senior students in school?</td>
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<tr>
<td>48. Do you look at your teachers respectfully?</td>
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<tr>
<td>49. Do you show impertinence (arrogance) towards something good said by a class mate with whom you don’t get along well?</td>
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<tr>
<td>50. Do you have some intimate friends in this school?</td>
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<tr>
<td>51. Do you pay attention to the lesson being taught in the class?</td>
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<tr>
<td>52. Do you develop resentful feelings towards your teachers when you get less mark?</td>
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<tr>
<td>53. Are you always ready to help your classmates in every way?</td>
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<tr>
<td>54. Do you borrow books and magazines from the school</td>
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</table>
library and read them?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>55</td>
<td>Are you often afraid of meeting the senior students?</td>
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<tr>
<td>56</td>
<td>Do you enjoy irritating other students in the school</td>
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<tr>
<td>57</td>
<td>Do you take part in the debates?</td>
</tr>
<tr>
<td>58</td>
<td>Do you feel mentally depressed when you meet the senior students?</td>
</tr>
<tr>
<td>59</td>
<td>Do you lend your books or note–books gladly when your classmates ask for it?</td>
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<tr>
<td>60</td>
<td>Are you interested in the things regarding education?</td>
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</table>

SECTION – V

Academic Achievement through records maintained by the Institution

This section includes the Academic Achievement index. It consists of the marks scored in all the 1st year subjects’ final exams of theory and practical.

<table>
<thead>
<tr>
<th>Sl.no</th>
<th>Level of achievement</th>
<th>Score Range</th>
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<tbody>
<tr>
<td>1</td>
<td>Distinction</td>
<td>75% and above</td>
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<tr>
<td>2</td>
<td>First Class</td>
<td>65% -74%</td>
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<tr>
<td>3</td>
<td>Second Class</td>
<td>55% - 64%</td>
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<tr>
<td>4</td>
<td>Third Class</td>
<td>40%- 54%</td>
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<tr>
<td>5</td>
<td>Pass Class</td>
<td>Eligible (failed in less than 3 subjects)</td>
</tr>
</tbody>
</table>
## SCORING KEY FOR SELF-ESTEEM INVENTORY FOR ADOLESCENTS

<table>
<thead>
<tr>
<th>Item No</th>
<th>Always</th>
<th>Most of the time</th>
<th>Some time</th>
<th>Never</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>4</td>
<td>3</td>
<td>2</td>
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<td>2.</td>
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<td>4</td>
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<td>5.</td>
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<td>6.</td>
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<td>7.</td>
<td>4</td>
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<td>8.</td>
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<td>9.</td>
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<td>4</td>
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<td>11.</td>
<td>4</td>
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<td>15.</td>
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ANNEXURE - VIII

EVALUATION CRITERIA CHECKLIST FOR CONTENT VALIDATION OF THE FOLLOWING TOOLS.

a. Socio demographic data sheet
b. Self esteem inventory for adolescent (S.Karunanidhi, 1996)
c. Study habits scale (B.V.Patel, 1983)
d. Adjustment scale (Singh and Shah, 1993)
e. Academic Achievement (1-year marks percentage and class awarded by the respective examination board).

Instructions

The expert was requested to go through following evaluation criteria check lists prepared for validating the each tool content suitability for assessing, particularly the adolescent nursing students’ socio demographic characteristics, self-esteem, study habits, adjustment and academic achievement. There are 3 columns given in for responses and a column for remarks, kindly tick mark in the appropriate column and facilitate your remarks in the remarks column given.

Interpretation of columns

1. Meets the criteria - Column I
2. Partially meet the criteria - Column II
3. Does not meet the criteria - Column III
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ANNEXURE- IX

CONTENT VALIDITY CERTIFICATE

This is to certify that the research tool of Prof.V. Virginia Mary, Ph.D (Nursing) student of Sri Ramachandra University, working as the principal in East West college of nursing at Bengaluru, is validated by the undersigned on the research topic “A Nurse Educator’s study on self-esteem study habits adjustment and academic achievement seen among nursing students from selected Nursing Institutes at Bengaluru.

Signature of the Expert
With seal

Name :

Designation :

Department :

Place :

Date :
Information Guide to the Teachers on nursing students’ Self-esteem, Study-habits, Adjustment and academic achievement

Guide
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Mrs. Virginia Mary (Ph.D Candidate)
A critical issue concerning stress among nursing students is their learning experience. The related learning experience is a series of planned activities that would prepare students technically and professionally should they decide to pursue higher education in the health profession. Mental health and education are closely related with each other. For any type of education, sound mental health is the first condition. Having high level self-confident, developing good habits, good adjustment and achievements are part of the criteria of the mentally healthy person, which are considered as an essential criterion for the student group.

It is very important for the nurse educators to realize that the personality of each student nurses varies from each other. That includes abilities, talents, habits, preferences, weaknesses, moral qualities, interests, attitudes, thinking, manner of action and a number of other important qualities which vary from one person to another. These are exhibited in the form of physical, mental, emotional and temperamental make-up through behavior in the social experiences and adjustment to the environment.

Most of the nursing students are belonging to the adolescent age group only. With the shifting focus to the Indian adolescent, various additional dimensions involved to nursing students’ behavior during their student life. Very important dimensions; self-esteem, study habits, adjustment and academic achievements are highly weighing for success while earning their nursing degree or diploma programme. Not much organized research has been conducted with regard to these dimensions either on nursing students or through teaching faculties to develop and enhance these dimensions in them.

Considering the need and importance of enhancing high level self-esteem, developing good study habits, inculcating excellent adjustment and improving of academic achievement in nursing students, an informational booklet to the nurse educators was made. Based on the findings of the research study titled it was decided to include the information and strategies needed to develop improved self-esteem, study habits, adjustment and academic performance among nursing students.

This information guide consists of 4 sections. The first section, describe and discuss about the concepts, meaning and importance of self-esteem. The second section contains material on study habits. The third section consists of information about adjustment and fourth section outlines about achievement in academics. This guide could be used to generate ideas to improve critical thinking and as guidelines by teachers to bring out nursing students as well equipped individuals in this noble profession.

My immense thanks to my legend guide Dr.K.lalitha, professor and HOD of Nsg NIMHANS for valuable guide-ship. I express my heartfelt thanks to all the experts, who validated the content to prepare this “information guide to the Teachers on nursing students’ Self-esteem, Study-habits, Adjustment and academic achievement”. I host my sincere gratitude to my college management of East West Group of Institutions, my mother and father, and my children husband for having extended their support and co-operation.

V. Virginia Mary,
Ph.D candidate
Sri Ramachandra University
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SECTION-I

SELF-ESTEEM

“A positive self image and healthy self esteem Is
Based on approval, acceptance and recognition from others; but
Also upon actual accomplishments, achievements and
Success upon the realistic self confidence which ensues”.
(Abraham Maslow)

1.1. INTRODUCTION:

In India, Nurse Educators are not much consciously correlating the students’ self-esteem with their academic
behaviour. But there is a struggle to mould or channelize troublesome nursing students with big questions “How
can I help?” or “What should I do with this kind of students to bring an expected change?” But, general educationist
and researchers analyzed much about importance of self-esteem and its development. Self-esteem issues are
important throughout of the teen years. Our nursing students significantly encounter various challenges in learning
environment in acquiring theoretical and practical knowledge of nursing sciences with foreign language. Life skills
(WHO -1994) that make any person efficient, successful and satisfied, which help nursing students in learning
clinical skills, communication skills and interpersonal skills during their student life, which leads them to further
growth of self-confidence, self-reliance and self-esteem.

1.2. CONCEPT OF SELF-ESTEEM:

Self-esteem is a judgement; placed on the emotional, intellectual, and behavioural aspects of the self-
concept. This judgment (positive, negative, or neutral), is very subtle and is constantly present. This estimate is
ordinarily experienced by individuals, not in the form of aconscious, verbalized judgment, but in the form of a
feeling, that can be hard to isolate and identify because he experiences it constantly; it is part of every other
feeling, it is involved in his every emotional response” (Nathaniel Brandepn 1971).Based on this concept, the
information on emotional intelligence of an individual is important to the nurse educators to be aware in learning the
development of self-esteem of nursing students in this section (Sl.no-12.1 )

1.3. DEFINITION:

Stuart and Sundeen (1995) proposed self-esteem as an individual’s personal judgment of his own worth obtained
by analyzing how well his behavior conforms to his self ideal. The frequency with which his goals are achieved
will directly result in feeling of superiority (high self-esteem) or inferiority (low- self esteem). Building self
esteem is a process; Patience and Perseverance are important qualities of teachers and parents in building self esteem in students.

1.4. DEVELOPMENT OF SELF-ESTEEM: Self-concept begins in childhood is based on acceptance, approval and affiliation. Thus, it will be seen that there is a relationship between the childhood experiences and the formation of the self concept to shape further behaviour. It develops through individual’s interactions with other people and his or her environment. The self-concept is the integrated sum of self-image, self-confidence and self-esteem. Therefore, high self-esteem is critical during the turbulence of adolescence. Self-esteem is built upon the experience of success. It is a circular process. When individuals experience success, they grow in self-confidence. As self-confidence grows, they feel empowered to face new challenges. As they succeed in confronting each challenge, they develop the capacity to cope with whatever life throws their way. The key difference between self-concept and self-esteem is that the addition of feelings. Self-concept is self-understanding (who am I?). Self-esteem is self-evaluation.

1.5. TYPES OF SELF-ESTEEM:
A. Developmentally
2. Specific self-esteem refers to all round feelings of self-worth and self-confidence.

B. Quantitatively
1. High self-esteem refers to the capacity to see oneself valuable and competent, loving and lovable, having certain talents and worthwhile personality to share relationships with others.
2. Low self-esteem refers to Feelings of insecurity, embarrassment, failure and fear bounds inside of them.

C. Behaviorally
1. Positive self-esteem refers to optimistic behaviour
2. Negative self esteem refers to pessimistic behaviour

1.6. THE IMPORTANCE OF SELF-ESTEEM: Self-esteem can be seen when we look at the relationship between healthy self-esteem and physical and psychological wellness. Self-esteem and personality are closely related. Psychologists insist positive self-esteem is vital in development of a healthy personality. Nathaniel Branden calls self-esteem is “The immune system of consciousness”. It is believed to be the best single predictor of achievements. In the process of normal development there is always a discrepancy between self-image and ideal self. This discrepancy motivates people to change or to develop social, physical and academic skills.

1.7. HEALTHY SELF ESTEEM IS RELATED WITH:
- Creativity
- Rationality
- Flexibility
- Willingness to admit mistakes
- Openness
1.8. **THE FOUNDATION ELEMENTS OF HEALTHY SELF-ESTEEM** (Deborah and Plummer-2007)

Through observations and clinical experiences, experts have indicated seven key elements that form the foundations for social and emotional wellbeing and thereby lead to healthy self-esteem. The elements are as follows,

1.8.1 **Self-knowledge involves;**

- Understanding differences and commonalities between oneself and others.
- Understanding that one can sometimes behave in different ways according to the situations and having many aspects to one’s own personality.
- Developing and maintaining one’s own personal values.
- Developing a sense of personal history

1.8.2 **Self and others involves;**

- Understanding the joy and challenges of relationships: learning to co-operate with others, being able to see things from another person’s perspective and developing an understanding by observing another individual how to give respect and tolerate others in life.
- Developing and maintaining self-identity as a separate person while still recognizing the natural interdependence of relationships and developing a sense of one’s own familial / cultural story.
- Understanding own emotions and aware of the ways in which one can express them. For healthy self-esteem individuals need to develop a degree of emotional resilience so that they cannot overwhelm by their own emotions, and they can tolerate frustrations.
• Building healthy interpersonal relationships: it is back bone for all our social life, especially to develop therapeutic nurse patient relationship in nursing profession. Good IPR is essential for health and harmony in family, workplace and society.

1.8.3 Self-acceptance involves;

• Knowing own strengths and recognizing difficult areas and taking an interest to work on it. This includes accepting that making mistakes are natural and that gives chance to learn the best.
• Feeling OK about one’s own physical body.

1.8.4. Self-reliance involves;

• Knowing how to take care of own-self both physically and emotionally and developing an understanding that life is often difficult but there are many things that one can do to protect own-self.
• Building characters of independence and self motivation: being able to realistic assessments of my progress and believing that I have mastery over my life and can meet challenges as and when they arise.
• Reducing my reliance on other people’s opinions and evaluations.
• Able to stand up for rights (assertiveness): understanding this component is essential to be pushy and achieving things instead setback with shyness or furious and loosing the opportunities. It is defined as the ability to express one’s rights, thoughts and feelings in a way that respects the rights of others without becoming angry or guilty is assertiveness.

1.8.5. Self-expression involves;

• Understanding how an individual does communicate with each others, including learning to ‘read the signals’ beyond the word for successful alliance with others by expressing ones’ self fully and congruently.
• Developing creativity in self-expression and recognizing and celebrating the unique and diverse ways in which can express who he/she is.
1.8.6. **Self-confidence involves;**

- Knowing own opinions, thoughts and actions with add values and that he/she have the right to express them.
- Developing self knowledge and abilities to experiment with different methods of problem-solving and can be flexible enough to alter own strategies if needed.
- Being able to accept challenges and make choices.
- Being self-secure enough to cope successfully with the unexpected.
- People can able to think and to cope with the challenges of life, take their right to be happy, the feeling of being worthy; deserving entitled to assert our needs and wants to enjoy the fruits of their efforts.

1.8.7. **Self-awareness involves;**

- Developing the ability to be focused in the here and now rather than absorbed in negative thoughts about the past or future.
- *Learning to observe one’s own body and emotions and being aware of own feelings as they arise.*
- Understanding that emotional, mental and physical changes are a natural part of human life and that can be changed and developed according to one’s own choices.

1.9. **LOW SELF ESTEEM:**

Individual with low self esteem usually have negative self image and poor self concept, which hinder their ability to build relationships, to feel unthreatened, to feel successful to express their assertiveness, to deal with fear and other strong emotions and to share their own love with others. Lack of self-esteem and negative self-image are reflected in failure oriented people and those who downgrade themselves. Even without threats from others, children with low self-esteem tend to think of themselves as unlovable incompetent and unimportant.
1.9.1. Qualities of low self esteem individual:-

- Difficulty to learn
- Difficulty to grow and relate successfully
- **Feel unlovable, incompetent and unimportant**
- Feeling of insecurity, Embarrassment, failure and fear abound inside of them
- Feel anxious, distorted, depressed, fearful and very needy.
- low self dignity and respect, self work
- Poor mental health
- feeling inadequate
- social maladjustment
- low achieving in scholastic work
- Indulge in antisocial activities

After learning self-esteem variable, it is compulsory to understand an important component involved in self-esteem development is our emotion (happiness, fear, anger, affection, disgust, surprise lust sadness elation love frustration anxiety failure and achievement). I brief the element of emotion and emotional intelligence below for your better understanding.

1.10. **EMOTIONS:** are not simply something that we feel, they are a source of information for e.g ; mutual feeling of warmth and trust convey information about our level of friendship or affinity with another. Therefore an emotion is a strong feeling. It is a conscious stirred up state. This stirred up state leads to specific kinds of behaviour or overt responses. In emotional intelligence, psychological and physiological dimensions are involved. Everyone can learn the skills of understanding and managing emotions through experiences which they undergo and encounter with different situation in the environment.

Thus understanding emotions of self and others contributes towards building emotional intelligence individuals. Nursing students who are in caring profession needs to understand oneself and the clients’ emotional dimensions in different clinical settings. Developing emotional intelligence will help to enhance leadership abilities, enrich relationships; extend influence and expand the personal resources, and help to manage stressful situation.

1.10.1. **Definitions of emotional intelligence:** according to Mayor, Saloveys-1997 model; the ability to perceive and express emotions and regulate emotion in the self and others, Bar-On(1997) model; social competencies and cope with daily demands and pressures and Goleman-(2001) competency model; personal competencies such as: self-awareness and self-management and social competencies such as social awareness and relationship management.
1.10.2. DIMENSIONS OF EMOTIONAL INTELLIGENCE; by integrating the above models the main dimensions are:

a). Interpersonal dimension

1. Empathy: it is an essential element of the interpersonal component. It is broadly defined as the capacity of putting oneself in someone else's shoes.

2. Perceiving other’s emotions: able to perceive understand and help others to communicate their feelings effectively. This skill is essential to nursing students in the clinical achievements.

b). Intrapersonal:

b.1. Self awareness:- it means having a deep understanding of one's emotions as well as one's strengths and limitations and one's values and motives. It's a key stone of emotional intelligence on which other components such as self-management, social-awareness and relationship management are built.

b.2. Self-regulations; the ability to control one's impulses and to channel one's moods constructively. Self-regulation includes self-control, trustworthiness, conscientiousness and adaptability. Self-regulation of emotion, can be achieved by learning different emotions, avoiding emergency situation, developing positive thoughts about oneself and time management.

b.3. Self-motivation: is an emotional tendency that guides or facilitate reaching goals. It includes achievement drive, commitment, initiative and optimism. Individuals who are naturally motivated perform better at work and are more likely to meet their responsibilities. Self, family friends and colleagues and emotional mentor and environment are the sources for motivation.

1.11. FACTORS THAT AFFECT ADOLESCENTS’ SELF-ESTEEMS: Self-esteem is a relevant factor in an adolescent’s social life and self-worth. There are many factors that affect adolescents’ self-esteem. Parents, teachers, peers and Medias contribute to an adolescent self-esteem.
• **Physical image**: the concept of beauty is one of the major factors that affect an adolescent’s self-esteem.

• **Family support**: the encouragement and support from family can actively shape adolescent self-esteem.

• **Taking part in activities**: taking an active role in college activities encourages them to interact and mingle with other adolescents.

• **Get an idea of who you are**: knowing their own goal in life, likes and dislikes as well as clear idea of what they want to be in future and realizing own problems and finding options will build and reinforce the development of high self-esteem.

### 1.12. SIGNIFICANT OF BUILDING SELF-ESTEEM IN NURSING STUDENTS:

We know very well that nursing education is an exciting, challenging adventure that will demand much of nursing students in terms of time and energy. Nursing is a discipline comprising of knowledge from many related fields, the student nurses will be asked to learn to think critically, synthesis information and then apply it to situations involving live people. In short, self-esteem is an important personality aspect which has a direct bearing upon building confidence to help others. **Self-esteem is a fundamental motive. It is also called self-maintenance motive** (Tesser and Cambell 1983), **the motive for self worth** (Covington 1984) and **the self enhancement motive** (Kaplan 1970). *It has been identified by Maslow (1970) as one of the ‘proponent’ human needs.* Therefore nurse educators and teachers are having immense duty in developing students’ positive and high self-esteem.

### 1.13. THERE ARE RESEARCH EVIDENCES TO SHOW THAT:

- **Before enhancing self esteem of students, teachers must be aware of a self to be enhanced.**
  - One of the most startling of research findings is the conclusion that there is a correlation between students' self-esteem and teachers' self-esteem. Student of high self-esteem who is in regular contact with teacher of low self-esteem will gradually themselves develop low self-esteem with associated low attainment level (Burns 1982).
  - There is a positive correlation between self-esteem and students' changing attitude to be better with others and reducing in behavioral problems. Also found a positive correlation between self esteem and their academic achievement.
  - **Teachers can enhance self-esteem of students in three ways:** Through systematic group activities, individual self-esteem program and a positive ethos in the class room.

- All teaching should be carried out within a generally self-esteem enhancing framework. This means the teacher establishing a positive relationship with students in their care. Teachers in the class room should be aware of their own possible prejudices with regard to individual differences. Ensure to follow the below mentioned strategies with above mentioned rationales.
  - Spend much time with students in the laboratories, clinical and community to teach and supervise their learning and practical abilities
  - Pay more attention and feel that they are cared enough
  - Accept the students with their weak and show interest in them.
  - Don’t embarrass them either in class room or clinical areas
  - Ask them question that do not threaten them,
Choose and allot simple topics and clinical procedures for students that they do successfully.

- Have realistic expectations from them.
- Provide more opportunities in the clinical and community practices to gain experience that gives sense of learning through caring.
- Allow students to participate in your planning of curricular and curricular activities
- Trust the students and be trustworthy to them.
- Use physical exercises to release their tension.
- Tell the students interesting facts
- Use humor in building relationships with them.
- Convey caring feelings through touch.
- Make considered decision after evaluating all option and analyzing the probability of success.
- Provide classroom based activities that will help them understand how to match academic and educational effort to lifestyle expectations.
- Teach students to learn and practice communication, interpersonal and self management skills.
- Help students to learn to project into the future and understand the consequences of today’s choices and actions.

1.14. CONCLUSION:

We need to help our adolescent nursing students to gain a positive self image. When they feel good about themselves, they are more likely to succeed in things such as college, family life, marriage, extracurricular activities and in their job accomplishments. Build positive self-esteem in nursing students by learning and using your effective leading skills in students efficiently without embracing them.
SECTION I
Evaluative Question

1. What a person believes about himself or herself is known as,
   a) Self-Approval
   b) Self-Acceptance
   c) Self-Concept
   d) Self-Esteem

2. Self-esteem is a judgment and it is experienced by individuals in the form of
   a) conscious
   b) Verbalized
   c) Feelings
   d) Behavioural

3. When an individual achieves his/her goals it results in
   a) High self-esteem
   b) Global self-esteem
   c) Specific self-esteem
   d) Low self-esteem

4. The difference between self-esteem and self-concept is an
   a) Addition of thinking
   b) Addition of behaviour
   c) Addition of feeling
   d) Addition of expression

5. The behaviour that represents the positive self-esteem is known as,
   a) Superiority behaviour
   b) Inferiority behaviour
   c) Optimistic behaviour
   d) Pessimistic behaviour

6. Nathaniel Branden calls ‘self-esteem’ as
   a) Vital in healthy personality
   b) Immune system of consciousness
   c) Emotional intelligence
   d) Healthy relationship

7. When a person is able to stand for his/her rights is denoted as
   a) Aggressive behaviour
   b) Agitate behaviour
   c) Assertive behaviour
   d) Ambitious behaviour

8. Which element of healthy self-esteem lead individual to observe self-emotions and body?
   a) Self and others
   b) Self awareness
   c) Self acceptance
   d) Self expression

9. What a nurse educator should be aware of before enhancing self-esteem of a nursing
   a) Enhancing one Self
   b) Enhancing Colleagues
   c) Enhancing Clients
   d) Enhancing Parents

10. Which element of healthy self-esteem represents the IPR as a back bone?
    a) Self-knowledge
    b) Self and others
    c) Self-acceptance
    d) Self-examination
2.1. INTRODUCTION: In first section you have learnt about self-esteem, how to develop in nursing students and its importance in student life. Nursing education is engaged in an educational pursuit to provide complex nursing care that requires specialized skills and dynamic level of knowledge. If teachers present contents in style that motivate students’ preferred learning style and academic performance then success will improve. Information about learning styles provides a great deal of enlightenment about how styles can assist educators in maximizing students’ potential for success and assist the students in developing additional learning strength. Hence, knowing systematic ways of study styles or study habits is inevitable for nurse educators to inculcate those habits in nursing students. This chapter deals with nursing students’ study habits and your role in developing this.

2.2. MEANING OF LEARNING: Learning is both a complex concept and interactive process as an incredible amount of variability exists in acquisition of knowledge, skill, acquired abilities, specific aptitudes, interest, opinions, attitudes, values and virtues in any group of students. Meaning of learning style or study habit is the way of processing of information and comprehension. Learning styles are the way individuals concentrate, absorb, and retain new or different information or skills. Many studies have documented the correlation of learning style and academic success.

2.3. MEANING OF GOOD STUDY HABITS: In order to make learning effective, strategies of good study habits should be cultivated. Study is concerned with a planned programme to mastery of subject matter, which will not only enrich an individual’s life experience but it also develop desirable attitudes and interest in the student by inking the study activities, with interest in particular field of activity. It includes the possession of skills and abilities such as to read quickly and accurately, to observe and listen to communicate.

2.4. BASIC SKILLS FOR LEARNING:

1) Motivation and commitment: is a quality by which an individual works towards a goal or target, e.g if a student is particular about the end result despite difficulties he/she will change methods even if difficulty arises in reaching the goal.
2) **Concentration**: is the ability to attend to a task on hand with full attention / focus over a length of period resulting in active practice while learning the task.

3) **Memory**: is the ability to register and recall past sensory impressions, experiences and learned ideas (A student's ability to perform well in a situations like exams depends on his / her memory).

4) **Nutrition**: Nutrients are required for growth and development, learning, work and other several activities. Using different type of grains, pulses, vegetables and fruits to get amino acids, sugar, minerals and vitamins.

5) **Hygiene**: Developing habits of cleanliness are basic to good health. Poor health disturbs the learning ability; leads to absenteeism and drop out from educational environment in case of worsen conditions.

6) **Eustress**: examination anxiety is common. Anxiety /stress itself is not bad, if it is unable to recognize and cope with anxiety can be disasters.

7) **Time management**: it means planning and structuring of a day. Allocation of time for different subjects, household activities, leisure, play, self-care, entertainment, sleep and other miscellaneous activities over 24 hours.

8) **Good study habits**: study habits are the combination of ways in which study is done. It includes the pattern of reading, learning and note taking

9) **Skills for facing the examination**: preparing for examinations, by studying and learning the subjects then preparing for writing the answer to the questions efficiency to achieve success.

2.5. **COMMON STUDY DIFFICULTIES AND THEIR SYMPTOMS**: It will be pertinent to understand and evaluate common study difficulties before discussing the effective study habits. One of the most common difficulties is the absence of interest or drive. This could be due to various factors;

1. Because it has not been stimulated by teachers and parents,
2. Because of nutritional deficiency or numerous social activities or poor mental hygiene and emotional stress,
3. Poor knowledge on using resource materials such as dictionaries, encyclopedias and reference books.
4. Inability to judge the worth of facts that have been discovered and inability to draw inferences,
5. The habit of guessing widely and bluffing,
6. Inability to read effectively with comprehension.

2.6. **PRINCIPLES OF EFFECTIVE STUDY HABITS.** Better to learn the principles of effective study habits before understanding the methods of effective /good study habits. According to a Sanskrit Sloka “A student learns one forth from the teacher, one forth from own intelligence, one forth from classmates and one forth only with time”. According to me, it focuses on the role of the teacher in students’ learning. There are three characteristics of the learning process which are the basis of most principles and techniques of study.
2.6.1. **Self-active process:** The learner is physically and mentally active when learning anything. They learn only through their own effort and self-realization.

2.6.2. **Goal – directed process:** One, who has a clear purpose, learns better than one who does not have this purpose.

2.6.3. **Intellectual learning process:** implies learner’s interest in meanings and understanding. Only then the learner recognizes the relation that exists between the various aspects of the total learning situation. (For example; the student nurse who is caring the patient with colostomy should be able to understand the application of anatomy and physiology. They should also realize how altered body image influences the behavior of a person and need to change life style further).

2.7. **THE FACTORS AFFECTING THE STUDY HABITS OF NURSING STUDENTS:** After knowing the principles of effective study habits, you should think what are the factors affecting nursing students’ study habits. In nursing, students have a vast amount of knowledge obtained in a short period of time. This requires memorization of medical terms, calculation of medicine dosages and its mechanism of action, diagnosis of symptoms with psychopathology and pathophysiology and more. A variety of factors can affect the study habits of nursing students and their overall success in the nursing program.

2.7.1. **Learning Disabilities:** It’s important that nurse educators identify students with a learning disability and work with these students to ensure they obtain the required information and skills.

2.7.2. **Personal Life:** Many nursing students have families and other commitments outside of school/college. These factors can affect time and intensity of their studying causing distractions while they are trying to learn.

2.7.3. **Inadequate Clinical postings:** Clinical posting is necessary to practice procedures and techniques for hands-on training skills. Failure to provide adequate clinical learning experiences can negatively affect their study habits and progress in the nursing program.

2.7.4. **Improper Study Habits:** Not all nursing students have developed effective study habits. But nursing program requires them to study, and they aren’t sure how to do this efficiently. This can lead them using poor study techniques or habits. The nurse educators assist these students in learning effective study habits.
2.8. THE CAUSES OF POOR STUDY HABITS: you learnt factors which are affecting nursing students’ study habits in general, but specifically what are the causes of poor study habits of individual students should be known by the nurse educators to be more sharp in understanding particular student when he/she performs poor in academics. There are several causes of poor study habits of a nursing student:

- **Ignorance** - many students don’t understand how important education will be later in life, and they don’t think they need to work hard to succeed
- **Distraction** - many students think they can “multi-task” and study while they listen to the TV, videos, or music; while they chat; or while other things are going on
- **Poor Planning** - many students don’t plan ahead, and don’t leave enough time to study properly
- **Ineffective Studying** - Many students try hard, but don’t understand how to study properly.

2.9. HOW TO PREPARE STUDENT NURSES FOR A SUCCESSFUL EDUCATION IN NURSING.

For students who take up nursing education, the experience of nursing school /college can be overwhelming. The prospect of **memorizing and learning so many subjects, students often find it difficult to cope with their courses. Nursing educators can help by providing guidance and support.** Besides imparting information about effective study habits and techniques, educators can initiate programs that expose student nurses to real-life nursing situations so they can grow both personally and professionally. Below techniques of effective study habits have been furnished in detail.

2.9. I. LEARNING TO LEARN

a) **Path to effective learning is through knowing**

- Yours self
- Your capacity to learn
- The process you have successfully used in the past
- Your interest in and knowledge of the subject you wish to learn
b) Four steps to learn

- Begin with the past
- Proceed to the present
- Consider the process
- Build in review

c) Steps

- Reading, Solving problem, memorizing,
- Performing, or reciting, tutoring,
- Explaining to someone,
- asking question, reviewing,
- Summarizes, using information from various sources.

2.9.II. STUDYING: It can prepare to succeed in studies. Try to develop and appreciate the following habits:

- **Take responsibility for yourself:** Recognize that in order to succeed you need to make decisions about your priorities, your time, and your resources.
- **Center yourself around your values and principles:** Don't let friends and acquaintances dictate what you consider important.
- **Put first things first:** Follow up on the priorities you have set for yourself, and don't let others, or other interests, distract you from your goals.
- **Discover your key productivity periods and places:** Morning, afternoon, or evening? Find spaces where you can be the most focused and productive. Prioritize these for your most difficult study challenges.
- **Consider yourself in a win-win situation:** when you contribute your best to a class, you, your fellow students, and even your teacher will benefit. Your grade can then be one additional check on your performance.
- **First understand others, then attempt to be understood:** When you have an issue with an instructor (a questionable grade, an assignment deadline, etc.) put yourself in the instructor's place. Now ask yourself how you can best make your argument given his/her situation.
- **Look for better solutions to problems:** For example, if you don't understand the course material, don't just re-read it. Try something else! Consult with the professor, a tutor, an academic advisor, a classmate, a study group, or your school's study skills center.
- **Look to continually challenge yourself by improving the following aspects to study well.**
A. INCREASE CONCENTRATION;

- **control your study environment:**
  - Get a dedicated space, chair, table, lighting and environment.
  - Avoid your cell-phone or telephone.
- **Stick to a routine and efficient study schedule.**
- **Focus on your studies:** Before you begin studying, take a few minutes to summarize a few objectives, gather what you will need, and think of a general strategy of accomplishment.

- **Set Incentives after completing a task:** Create an incentive if necessary for successfully completing a task, such as calling friend, a food treat, a walk, etc. For special projects such as term papers, design projects, long book reviews, set up a special incentive.
- **Change topics:** Changing the subject you study every one to two hours for variety.
- **Vary your study activities:** Alternate reading with more active learning exercises. If you have a lot of reading, try the SQ3R method (Survey, Question, Read, Recall and Review) yourself or Ask your teacher for alternative strategies for learning.
- **Take regular, scheduled breaks that fit you:** Do something different from what you've been doing (e.g., walk around if you've been sitting), and in a different area
- **Rewards:** Give yourself a reward when you've completed a task.
- **You should notice improvement in a few days:** But like any practice, there will be ups, levels and downs.

B. CHOOSE TECHNIQUES TO IMPROVE MEMORY

- Use of acronyms **Acronym** is an invented combination of letter which is a cue to remember. E.g.: IPMAT for cell division Interphase, Prophase, Metaphase, Anaphase, Telophase.
- Use of **acrostic** which is an individual invested sentences E.g.: use of First letter of the sentence to remember.
- **Chaining investing story** to remember.
- Use of **key words** to remember.
- **Aspire** - A study strategy.
Create and study with flash cards, is a very effective study strategy. Flash cards are two side study aid that have a cue, a question and a concept’ on one side ‘Answer’ on the opposite side. Flash card is a cost effective, handy, for a quick review with words, pictures, illustrations.

C. STUDYING WITH MULTIPLE SOURCES.

The majority of our Nursing students are holistic learners. They learn more easily in they see the whole picture first then learn the detail as a part of the whole. It has been found that using multiple sources is most effective, if the Nurse educators are taught to use them properly. Teaching Faculties should enable the students to understand the subject content by using various strategies via,

- Lectures retiring Text books, Electronic medias,
- Such as Video program, Internet,
- Such as Website pages, Interviews and Biographies,
- Such as Eyewitness or Commentaries, Original source material,
- Such as Diaries, Documents, Minutes, Proceedings and Duplicate and Handouts,
- Such as Magazine Articles.

2.9. III. CLASSROOM PARTICIPATION

(a) Paying attention

- Read the previous lecture notes and read the course material.
- Prepare questions if there are any doubts’ regarding previous lecture notes.
- Resist distraction by active listening and note taking.
- Create a study mood by adopting attentive expression and posture.
- Shift your position every often in the seat keeps you alert.
- Form a tunnel between you and lecturer by keeping your attention on the lecturer, looking at his face & note what is being said
- Follow “Be out there” technique by neglecting what happens around & outside the classroom and focusing only on the lecturer.
- Follow “Be here now” technique by regaining concentration when distracted momentarily.
(b) Influencing teachers classroom communication;

Oh dear student! One day you will become a teacher like me. Have a courtesy and interest on your teacher who has come prepared to enrich your knowledge. It is a kind of respect you show on you as well as on your teacher. Hence you ask a good question to your teacher and respond with answers, because teacher will evaluate all your gestures.

(c) Taking notes during lectures:

A sincere student can develop his/her own note taking system and study strategy.

There are 05 ‘R’s of note taking suggested here:

1. Record
2. Reduce
3. Recite
4. Reflect
5. Review

- **R1** - Purchase *separate record notebook* with numerous pages for taking running notes while lecturing. In class, specifically note down the special points, new terminologies, vocabularies highlighting with marker pens. Note down lecturer’s new quotes or examples & capture the main ideas. Draw an overview structure or concept maps. Use words, pictures and graphs to note down information quickly.

- **R2** - After the class **keywords, phrases, questions has to be referred from text book**, website & other sources to for more understanding of the topic taken in a nut shell form for a brief reference.

- **R3** - **Recite** (talk aloud). A student should become like a talkative **to repeat** the learnt content in a loud manner during the study time. This technique helps the student to listen their own voice of content for better understanding and retaining of the matter. While reciting the content, you should create your own relevant examples.

- **R4** - **Reflect** (think over). The learnt content & concept has to be correlated and compared with the previously known knowledge. **Relate** the theory matter with diagrammatic representation.

- **R5** - Review the studied material points before going to the next reading of the same topic from the study material. Review the studied material once again before reading the new material. Review the content again just before the test preparation.

(d) Classroom discussion.

- Tell students not to be afraid to contribute their points during class room discussion with nurse educators/classmates.
- Insist nursing students while giving opinions, it should be based on book references, other readings, experts’ lecturer and their own experiences.
- To be more confident with their points, students should listen carefully what nurse educators and classmates are discussing.
- Students should be taught to introduce their opinion with quick and clear summary of the discussion.
- Tell students to keep their comments to the point.
They should not be a destructor with unnecessary points.

Students should be taught not to be hesitant to clarify their doubts during discussion.

They should utilize discussion classes for more comprehensive learning.

(e). A classroom must be a formal platform for both Teachers and Learners as in our country.

i). A good student should follow these etiquettes prior to the next class:

- Finishing home work.
- Reading Critically.
- Reviewing their previous lecture notes.
- Listing down difficult points to clarify with nurse educators.
- Being silent for a moment and gather the task to be done in the classroom e.g., test presentation.

ii). Educate that a responsible student should follow these in the classroom:

- Arriving on time for class; coming late is indication of disrespect by both student and teacher.
- Finding a good place in the classroom.
- Avoiding distraction; day dreaming, looking around the room, talking to a friend, passing notes and dozing.
- Listening and understanding the content while taking notes.
- Asking questions to clarify doubts.
- Making a list to do’ that includes Assignments, reviewing difficult concepts and doing group study.
- Seeking help from the classmate who has understood the content.

2.9. IV. READING SKILLS AS AN EFFECTIVE STUDY HABITS.

Teach students that they are as readers should know the following importance of KWL strategy.

Three steps: What do I know? What do I want to learn? And what did I learn?

- Students’ should not focus only on the teachers’ assignment or test portions. Purpose for reading should also to analyses the problems & finds the solutions.
- Organize the content of reading material in a signal words and main ideas in a sentences, highlighted phrases, headings and subtitles.
- Underlining the unfamiliar vocabularies to find the meaning from the dictionary.
Having an overview of number pages and paragraphs.
Having a determined mind to complete the reading as their own responsibility.
Group reading – A large portion of reading content has to be divided among like minded group members to make learning easier.
Scan the reading material for number of definitions, characteristics, examples, pictures, graphs and experiences of authors gives a clear cut picture about the given content.
Collecting related visual aids or pictures for the present reading content.
The reading content references have to be known to all the students.
Maintain a log book for reading every day.
Framing own questions out of the read chapter.
Reading aloud with many repetitions to improve the pronunciation and fluency of the difficult words.
Setting time not to be distracted for effective reading.
After reading the content student has to take a chance to present that to classmates in an informal way.

2.9. V. TEST PREPARATION.

At an attitude level: Dear nursing students! This is your time to be evaluated for your learnt knowledge. Taking test is the heart and soul responsibility of the student only as per the educational rules and regulations. Appearing for the test should not be the time pass and negligent attitude. Each and every test is a chance to evaluate your academic performance for further improvement. Preparing for the test should be the serious efforts by the students.

At Action level:
- Go through the test portions.
- Collect all the materials ready to read the given portions.
- A student should prepare a self mock question paper from the test portions.
- Estimate the hours you will need to study the material.
- Plan a schedule to read the test portion from difficult to easy topics.
- After reading the difficult portion write once for complete presentation.
- Finish your studying the day before the examination.
- Be confident and contented with your preparation.
- After the preparation keep the things Organized for next day.
- Pray for a moment & have a sound sleep to fresh up next day.

At Emotional level:-
- More students experience some level of anxiety during an exam.
• “Fear is a greatest sin”
• Anxiety diminishes the academic performance of the students.
• Hence building confidence is the essential basement for the anxious students.
• A student who perceives anxiety should analyze personal situations and skill as well as should get help from academic counselors and class guide.
• If your comprehension and language is poor you need to take extra effort than others to be competent in exams.
• Anxious student should work hard. Hard work yields successful outcome.
• During the time of test preparation if any unexpected family problems or your personal health problems arises, instead of becoming panic, take a logic decision regarding appearing for examination.
• Getting spiritual assistance is one of the strategies to build self confidence.

➢ Organizing for Test Tasking:-
• Begin reviewing early.
• Conduct short daily review session.
• Read text assignment before lecture.
• Review with the group.
• Conduct a major review early enough.
• Break up the study task into manageable chunks. (studying while you are mentally fatigue is usually a waste of time)
• Study the most difficult topic when you are alert.

2.9. VI. TAKING TEST:

When students are taking test they are demonstrating their ability to produce learnt knowledge. Successful test taking avoids carelessness.

➢ On the day before examination teach them
➢ Not to learn new things.
➢ To revise normally or relax completely.
➢ To gather examination equipments.
➢ To Go to bed early and get a normal night sleep.
- On the day of the examination students should
  - **Arrive early for exam**
  - Be comfortable but alert
  - Stay relaxed & confident [good attitude, avoid talking with others. If you feel anxious take deep breath to relax avoid anxiety and submitting them to god almighty for His blessings]
  - Read the direction carefully [read the question paper for directions carefully to avoid careless errors.]
  - Budget their time and Plan your answers.
  - Keep sense of priority.
  - Answer questions in a strategic order. [a). Selecting easy questions to their confidence to give answers, b). Organize the answer according the marks, c). Writing answers with main point high lighting, d). Should avoid write essay type answer for the short questions e). Broadly outline answer in sequence, f). Where ever pictures are necessary should illustrate with labels.]
  - After writing all the answers, it is must to review the number of questions and answers written with correct question number, heading and subheading.
  - Better to change answer to question if they made a mistake or misread the question.
  - Wise to check all answers till time is up.

2.19 SEVEN BAD STUDY HABITS SHOULD BE MODIFIED IN STUDENTS IMMEDIATELY:

- Studying at home

  Studying at home might be convenient and easy, but students are always going to be faced with some type of distraction. Instead of wasting study session, better is going to the library and find a quiet room or desk for studying.

- Listening music while studying.

  Although classical music increase spatial abilities and improve learning, Recent studies show that music may actually impair cognitive abilities and hinder memorization because of the changing words and notes in songs. Studying in silence or a little white noise will allow students to hear their own thoughts and concentrate.
- **Studying with friends.**

  No matter how much it helps to study with friends, it's probably not doing much good. Although this kind of study session can reduce stress and increase students' energy level, it may not be as effective as expected. Even if they are going to study with their "serious" friends, still need to review the material on their own.

- **Too much of night studies.**

  All night studies have shown to do very little good for test preparation or performance. The best way to avoid pulling all-nighters is to study ahead of time. Dedicating a few days a week (or more) to study and reviewing the material will reduce cram everything into head in one night.

- **Procrastinating.**

  Procrastination is something common behaviour doesn’t mean it’s OK to do. When students procrastinate studying, they run the risk of doing things halfway and not retaining as much information as they need to face the exam. If they have to pull frequent all-nighters or find themselves rushing to finish every essay or project, then they need to work on their time management skills and start studying earlier.

- **Not making an outlines.**
If students aren’t making outlines while studying or writing a paper, then their understanding isn’t efficient. There are many reasons to make an outline. It helps to keep track of large amounts of information, organize ideas, and present class material in a logical way. Instead of trying to reread textbook or write an essay from scratch, making an outline to organize learners’ thoughts and study more effectively.

- Highlighting the textbooks.

Reading a textbook and marking the pages with a neon highlighter is one of the least effective ways for students to remember content. Instead of colouring entire pages with highlighters and trying to reread the text, they should quiz themselves over the reading material. This will help students to retain more information and score higher on exams.

2.11. IMPORTANCE OF TIME MANAGEMENT FOR STUDENTS: Before discussing the time management let us critically look into the beautiful and fact full information about ‘TIME’;

‘Time is Slow, when we wait. Fast, when we are late. Delay, when we are sad. Short, when we are happy. Endless when we are in trouble. Long, when we feel bore. ‘Time is determined by our feelings and our psychological condition’.

Time management is a simple and practical technique of planning and structuring a day. This means allocation of time for different subjects, household work, leisure, play, self-care, entertainment, sleep and other miscellaneous activities over 24 hours. In today’s world there are more distractions for the students. Therefore, time management skills help to set up practical goals, to be organized and systematic, to take short breaks to relax and rejuvenate and avoid unnecessary activities.

Individual students can manage time by following steps;
- Looking into their daily time schedule: an hour to hour record will help student find out how time can be distributed to the daily activities.
- Organizing their time: make a list of tasks according to its priority; tasks can be listed as most important, important and routine. It is important that the list is looked at the end of the day to find out how the day was spent.
- Setting daily timetable with hourly time distribution: so every hour is given its due importance.
- Taking Breaks are important: students should be able to fix leisure activities to unwind between worm times.
- Organizing their place: keep things in their respective place to be organized.
- Avoiding unnecessary activities: learn to say no to useless works.
- Scheduling time for emergency: distribute daily work schedule.

2.12. **It Is Better To Highlight The Impacts Of Studying Alone And Group Study In This Chapter.**

If studying alone sounds boring, difficult or lonely. Think again, the advantage of studying on your own is that you can do it on your own time without having to plan around the schedules of others. Don't forget two heads are better than one. If you are not feeling too confident about a class or find it easier to learn by discussing study material, you may want to join a study group.

- **Benefits of group study,**
  - Learners receive immediate feedback from their peers.
  - Learning tasks can be shared.
  - Discussion and analysis of learning issues is more effective.
  - More learning resources are used.
  - Issues that learner may not have considered are introduced.
  - Learners gain support from their group members.

- **Disadvantages of group study,**
  - More distractions usually
  - Unless there is a strong leader, the session may not remain organized
  - Anxiety and negativity of group may be contagious.
  - Learners have little control over the pace of study in group.

2.13. **CONCLUSION:** The ultimate aim of a teacher is to assess the behavior of students; to develop their knowledge and enhance skills; to create a good relationship and to mould into a distinctive character by teaching good manners and right conduct. Nurse educators who implement rule and regulations to organize and maintain the orderliness of students and be the role model to show the passion for nursing profession as nurse educationist.
Section – II
Evaluative Question

1. Learning is known as
   a) Integrated process
   b) Intuitive process
   c) Interactive process
   d) Interesting process

2. The Learning style Process in a learner is
   a) Good study Habit
   b) Learning methods
   c) Information and comprehension
   d) Academic success

3. Which is the most common ‘studies related difficulty’ found among the Nursing students?
   a) The lack of teachers
   b) The lack of library books
   c) Lack of interest and drive
   d) Lack of parental support

4. What should a nurse educator provide students in difficulty of memorizing and learning many subjects?
   a) Special tutorial
   b) Guidance and support
   c) Special notes
   d) Simple exercises

5. When a student tries hard but do not understand how to study is called
   a) Ignorance
   b) Distractions
   c) Poor planning
   d) In-effective studying

6. How many R systems are mentioned in Note taking during class room lecture?
   a) 5R system
   b) 3R system
   c) 6R system
   d) 8R system

7. Which skill explains KWL strategy under effective study habits?
   a) Reading skills
   b) Studying skills
   c) Writing skills
   d) Classroom skills

8. Which preparation needs ‘Attitude, Action, emotion and organization’?
   a) Assignment preparation
   b) Test preparation
   c) Clinical preparation
   d) Extracurricular preparation

9. Which is very important act a student should do on the day of exams?
   a) Budgeting time
   b) Reviving studied material
   c) Stay relaxed and confident
   d) Arrive early for exam

10. What is essential to a student to be organised and systematic?
    a) Time management
    b) Money management
    c) Anger management
    d) Emotional management
SECTION – III

ADJUSTMENT

“Our civilization has evolved through the continuous adjustment of society
To the stimulus of new knowledge.”

John Boyd Orr

3.1. INTRODUCTION: in previous first and second sections we have seen importance of self-esteem and ways of improving study habits of nursing students for their student life as an adolescent is a period of great stress and strain. It has been called as ‘terrible teens’. Psychological distress and poor adjustment among a significant number of nursing students is an important issue facing nursing education. It’s mandatory for nurse educators to understand the need for good adjustment in nursing students’ academic life to achieve their academic goals and strategies to impart adequate adjustment and positive coping styles for effective academic performances.

3.2. MEANING OF ADJUSTMENT: the term ‘adjustment’ is the process of finding and adapting modes of behavior suitable to the environment or to change the environment. Adjustment can be viewed from two angles; first view ‘being adjustment as an achievement’ means how effective an individual can perform his/her duties in different circumstances such as military, education, business and other social activities. The second view is ‘adjustment as a process’ which is of major importance to teachers, parents and psychologists (Panda-2003).

3.3. DEFINITION: adjustment is defined as the process of finding and adopting modes of behavior suitable to the environment or the changes in the environment (C.V.Good-1959).

3.4. CONCEPT OF ADJUSTMENT: it is a two way process and involves not only the process of fitting oneself into available circumstances but also the process of changing the circumstances to fit one’s needs. The process of adjustment is continuous. Based on this process the concept of adjustment implies a constant interaction between the person and his environment. In most case adjustment is a compromise between these two extremes and maladjustment is a failure to achieve a satisfactory compromise (Robert. W.White 1956).

3.5. PREDICTORS OF ACADEMIC ADJUSTMENT:According to the organizing model, three major factors listed below predict academic adjustment. This model operationally define academic adjustment and success as the outcome of these variables as academic performance, social adjustment, and personal adjustment (Russell and Petrie (1992).

3.5.1. Academic factors;
(a) Aptitude and ability, (b)Study skills and test anxiety,(c) Academic motivation (d) self efficacy (e) Attribution.
3.5.2. Social/Environmental factors;

a) Life stress and social support,
b) Campus environment and work involvement,
c) Family variables and academic environment.

3.5.3. Personality factors; predictive of academic adjustment include

a) Personality measures,
b) Locus of control,
c) Self-esteem,
d) Trait anxiety.

3.6. CHARACTERISTICS OF A WELL ADJUSTED PERSON:

A well adjusted person is supposed to possess the following characteristics;

1. **Awareness of his own strengths and limitations;** a well adjusted person knows his own strengths and weakness and accept his limitations in others.
2. **Respecting himself and others;** an adjusted individual has respect for himself as well as for others.
3. **An adequate level of aspiration;** his level of aspiration is neither too low nor too high in terms of his own strengths and abilities.
4. **Satisfaction of basic needs;** he does not suffer from emotional cravings and social isolation. He feels reasonably secure and maintains his self-esteem.
5. **Absence of a critical or fault finding attitude;** he appreciates the goodness in objects persons or activities. He likes people, admires their good qualities and wins their affection.
6. **Flexibility in behavior;** he can easily accommodate or adapt himself to changed circumstances by making necessary changes in his behavior.
7. **The capacity to deal with adverse circumstances;** he has an inherent drive to master his environment rather than to passively accept it.
8. **A realistic perception of the world;** he holds a realistic vision and always plans thinks and acts pragmatically.
9. **A feeling of ease with his surroundings;** he feels satisfied with his surroundings and likes family school teachers and friends. Always feels enthusiastic in doing work.
10. **A balanced philosophy of life;** a well adjusted person’s philosophy is centered on the demands of his society culture and his own self so that he does not clash with his environment or with himself.
3.7. **MALADJUSTMENT**: It refers to the failure of the individual to adjust to the needs of self and demands of the environment. It can be judged from the behavior of an individual shown in a given situation. Thus the pattern of behavior is not conformity with the social and cultural pattern or within the range of the culturally permissible patterns at home or in the school/college or in the community is called maladjustment behavior. On the whole maladjustment refers to a disharmony between the personal and his environment.

3.8. **FACTORS CONTRIBUTING TO MALADJUSTMENT**:

- The physique and appearance
- Long sickness and personal inadequacies
- Parental attitude and broken home
- Poverty and illiteracy
- Acceptance of social values
- Class differences and religious practices
- Teacher and curriculum
- Classroom climate or unfavorable atmosphere in the school/college
- Rigid discipline
- Unfulfilment of need

3.9. **IMPACT OF MALADJUSTMENT AMONG STUDENTS**:

- Unmanageable in the home,
- Cause difficulties for the parents and siblings.
- Problem creators in the school/college
- Retarded in educational achievements, destructive and quarrelsome
- Shows socially immature behaviour,
- Emotionally disturbed or socially unacceptable or delinquent or psychologically instable,
- Require special educational treatment in order to develop their personal and educational readjustment.
3.9.1. SYMPTOMS OF MALADJUSTMENT:

The responses of a maladjusted person are inadequate and inappropriate unable to resolve his internal conflict partially successful in reaching his goals lack of insight and potentialities and leads to abnormal emotional responses.

The symptoms are as follows…,

- **Physical symptoms:** stuttering stammering scratching head facial twitching biting nails rocking feet and restlessness.
- **Habit disorders:** speech – stammering and defect in speech, sleep – night terrors walking or talking in sleep. Nail biting, indiscriminate, eating, physical symptoms like allergic conditions.
- **Behavioural disorder:** unmanageable – defiance disobedience, aggressiveness, destructiveness, cruelty, jealous, behaviour, stealing, and begging, truancy, violence, hyperactivity, negativism and sex disturbances.
- **Emotional symptoms:** excessive worry fear inferiority hatred extreme timidity persistent all anxiety conflict and tension.
- **Educational and vocational difficulties:** unusual response to school discipline, inability to concentrate and inability to keep jobs.

3.10. DIMENSIONS OF ADJUSTMENTS IN SCHOOL/COLLEGE STUDENTS.

Recently research study among school / college students explored 11 dimensions of individuals' adjustment (Joshi and Pandey 1964).

1) Health and physical development
2) Finance, living conditions and employment
3) Social and recreational activities
4) Courtship, sex and marriage
5) Social and psychological relations
6) Personal psychological relations
7) Moral and religious
8) Home and family
9) Future - vocational and educational
10) Adjustment to school and college work
11) Curriculum and teaching
3.11. PROBLEMS AND ADJUSTMENT OF ADOLESCENTS;

The following are some of the reasons why adolescent age becomes hard to deal with and harmonize.

a. The adolescents insecure status in the family and society where he/she is neither included in the childhood group as a child nor in the adult community as an adult resulting in an ‘Identity crisis’.
b. The rapidity with which changes are taking place in the adolescent – physical psychological and sexual make it difficult for them to cope with and adjust to.
c. A great desire for independence making them to turn down and help offered by parents and other adults to solve their problems.
d. High level aspirations, which are far from reality? Failure to reach these goals results in frustration and disappointment.
e. The changing social structure, instability of social norms value deterioration urbanization and rapid changes due to technological advancement pose challenging situations to the adolescent.
f. The major domains of adolescent problems include; Home, Social, Educational, Health and Emotional.

3.11.1. PROBLEMS RELATED TO HOME AND FAMILY: The family could be a major problem area to an adolescent. Disagreements with parents on various issues conflicts with grand parent’s dissatisfaction with the behavior of brothers and sisters are not uncommon incidents during adolescence. Problems related to the family include;-

a) Feeling of lack of understanding and love in the family
b) Problems related to financial matters.
c) Too much interference by parents in the in areas like choice of friends, manner of dressing behavior ect.,
d) Faulty and inconsistent parenting style,
e) Constant quarrelling and argument with siblings,
f) Nagging and criticism by parents,
g) Dissatisfied with the home atmosphere.
h) Lack of support and encouragement from families.

3.11.2. HEALTH PROBLEMS: A large part of the adolescents’ time is spent concentrating on problems pertaining to physical growth and health adjustment areas include,

a) Deviation from the developmental norms for height and weight
b) Lack of sleep
c) Chronic illness
d) Excessive tiredness
e) Physical defects
f) Over eating

g) Lack of appetite

h) Frequent headaches

i) Skin problems like pimples, freckles etc.,

j) General health problems

3.11.3. SOCIAL PROBLEMS:

Physical sexual emotional and mental transformations bring with them conditions for changes in the social and personal life of an adolescent. The changing value system and social structure create problems to an adolescent who is trying to fit in to an adult social world. The role confusion that the adolescent faces could lead to social maladjustment resulting in;

a) Avoiding meeting people in public places

b) Excessive shyness

c) Lowered self-esteem resulting in social maladjustment

d) Inability to make friends easily

e) Lack of confidence in social groups

f) Over sensitive to criticism

g) Inability to start conversations or take initiative to start any programme

h) Having difficulty in maintaining friendship

3.11.4. EMOTIONAL PROBLEMS:

Erratic emotional behavior is significant in adolescence. Extreme emotionality over which they have little control becomes a major problem during this age. Important psycho – social problems should be tackled successfully by the adolescent before they emerge into adulthood.

a) Getting emotionally weaned from parents

b) Accepting the realities of life and taking steps to meet the developmental tasks prescribed for them.

c) Getting proper and correct information and knowledge about sex so that they can manage their sexual life properly.

d) Developing an identity of their own is unique and separate from that of others.

e) Developing mature social relationships and interactions with other individual.

f) Finding and following values and norms which are socially accepted.

g) Controlling negative emotions by channelizing these emotions into creative avenues.

h) Striking a balance between being dependent on parents and leading an independent life.
3.11.5. EDUCATIONAL PROBLEMS:

Going to school and college is the occupation of children and adolescent. Since a large proportion of the adolescents' time is spent in the educational institute, it becomes a sphere for problems as well. The following issues seem problematic to the adolescent.

a) Choosing the right subjects
b) Finding it difficult to keep up with the progress in class.
c) Disagreement with classmates
d) Thought of giving up education, because of other distraction.
e) Problems related to study, concentration and memory.
f) Lack of interest and encouragement on the part of teachers.
g) Inability to write notes in class.
h) Unable to answer questions in class, because of being afraid to speak.
i) Being pushed in to courses (which they do not like) by parents.
j) Examination fears.

3.12. ADJUSTMENT PROBLES IN NURSING STUDENTS:

Stress and the identification of potential stressors among nursing students have received much attention in the literature. Nursing students have the same academic stressors as other college students (Seyedfatemi et al; 2007). Studies indicated that nursing students may be more prone to stress than other students. The following adjustment problems are literature based and practical observational based.

1. Nursing as a course requires a lot of time, effort, and money. Financial problem for the nursing student is not new. It is a big barrier or hindrance.
2. Another area of conflict is on schedules. Students should learn how to adjust their schedules.
3. The nursing course follows a very hectic schedule and includes a lot of activities among these are paper works, actual demonstrations, research as well as nursing related learning experience (or clinical duty). On the whole, nursing students should know how to cope with these various problems and to make the necessary adjustment.
4. Social adjustment particularly adjusting to university life and separating from family and friend
In addition, nursing students experience a clinical component, which is highly stressful. They have a large amount of preparatory work before their clinical assignments. They often must travel long distances to clinical postings and community and carry equipments. They must perform nursing procedures on patients that can cause serious harm to their patient, thus enhancing their fear of making mistakes. Amount of material to learn, examinations and lack of timely feedback from faculty are ranked as stressful by the nursing students were also identified by other populations (Beck and Srivastava 1991). In addition nursing students identified feelings of inadequacy in dealing with actually ill patients and difficulty in relationships with faculty. Nursing students have to devote long hours to study, were given multiple assignments, and lack of free time, timely feedback and faculty response to student needs. Finding new friends and working with people they did not know as interpersonal sources of stress. The most common intrapersonal sources of stress are “taking new responsibilities” The most common environmental sources is “being placed in unfamiliar situations” Common academic stressor is “increased class workload” Inadequate recreational facilities and overcrowded hostel accommodation. Inadequate clinical training opportunities and gab between theory and practical learning. 

3.13. NURSE EDUCATORS ROLE IN STUDENTS’ ACADEMIC ADJUSTMENT:
Although, students cannot avoid the above mentioned stressors their ability to adjust to demands and cope with these stressors are important in achieving success in the college or school academic and social environments. Planning and organizing effective student orientation program prior to new teaching and learning targets.
b. **Organizing Stress management programs** (teach how to remove or modify the power of stressors one currently faces).

c. **Teaching Life skill educations** (skills to make students efficient, successful, and satisfied should teach problem solving, decision making, creative thinking, critical thinking, communication, IPR, empathy, self-awareness, control of emotions, and control of stress).

d. Orienting students on differences between Assertive and aggressive behavior (teaching how to express one’s own rights, thoughts, and feelings in a way that respects the rights of others without becoming angry or guilty).

e. Assessing and observing personality change of students (symptoms of maladjustment).

f. **Assessing emotional intelligence** (to handle one’s own emotion and the ability to identify other’s emotions; perceived emotional intelligence deals with the intrapersonal competencies of the individual such as self-awareness, self-regulations, and self-motivation of one’s own emotion).

g. Planning and organizing recreational and extracurricular and co-curricular programs.

h. Special classes for students who are poor in studies.

i. Ongoing student’s guidance and counseling program
j. Teaching **Effective coping strategies** (adaptive coping strategies; awareness, relaxation, interpersonal communication with caring others, problem solving, music and sleep are attempt to maintain emotional and physiological balance called health)

k. **Non criticizing teachers' response** in students' evaluations
l. Showing interest in conducting students doubt clearing sessions.
m. Taking extra care for students who need to improve academics.
n. Help students to maintain sense of wellbeing.
o. Organize stress adaptation interventions program (teach how to better adjust or accommodate to negative stressors)
p. Organize stress absorbing interventions (teach how to prevent or delay the onset of symptoms and reduce symptoms intensity).
q. Good adjustment represents the interaction of a well integrated constellation of individual need in a series of situation appropriate to growth and development and learning needs.(Horrocks - 1962).

i) **ACCEPTANCE**, ii) **ACHIEVEMENT**, iii) **AFFECTION** iv) **APPROVAL** v) **BELONGING**

Therefore the following **psychological needs are important** to understand by the nurse educators in the nursing education programs......

- **Acceptance**: make them to feels secure that they are a worthy person in their teachers' eyes.
- **Achievement**: help to accomplish goals, token of status, respect or knowledge in the nursing program.
- **Affection**: students need to be loved by their teachers for their emotional support.
- **Approval**: students seek reward for their hard work and sincere submission of requirements.
- **Belonging**: students need to be helped to find their identity in class, clinical and hostel in a group.
- **Conformity**: need to teach them to like others dressing, behavior attitude and ideals.
vi) CONFORMITY vii) DEPENDENCE viii) INDEPENDENCE ix) MASTERY x) RECOGNITION

• **Dependence**: students always need emotional support, protection, care, encouragement, forgiveness and help from their nursing educators, parents, and peers.

• **Independence**: enable students to teach taking own decisions and to be self-reliant is essential in life.

• **Mastery**: teaching leadership and governing skill to influence behavior, feelings and ideas of others.

• **Recognition**: recognize student’s talents and uniqueness in learning behavior and appreciate them.

• **Self-realization**: encourage students to learn and comprehend nursing subjects to perform to the best of their ability in theory and practical exam.

• **To be understood**: have empathetic rapport with students when they have personal problems with affection and concern.

3.14. **CONCLUSION**: and university, students’ stressor is inevitable. Some stress is motivating, whereas too high level interferes with learning. Thus academic stressors cover the whole area of learning and achieving, as well as adjusting to a new environment, in which a great deal of content must be assimilated in a seemingly inadequate period of time. Moreover, excessive stress may lead a student to drop out of college.
SECTION – III
Evaluative Questions

1. In Which stage of human being the word “adjustments” is more prominent?
   a) Childhood
   b) Adolescent
   c) Adult hood
   d) Geriatric

2. An individual performing his/her duties effectively a in different circumstances is known as
   a) Adjustment as an achievement
   b) Adjustment as a process
   c) Adjustment as circle
   d) Emotional adjustment

3. Which is in more demand while facing Problems in our environment?
   a) Recognition
   b) Coping
   c) Planning
   d) Decision

4. When an individual takes an action in dealing with the stressor is called
   a) Emotional focused coping
   b) Problem focused coping
   c) Approached oriented coping
   d) Avoidance oriented coping

5. the most important area that requires teachers’ attention is
   a) Not submitting assignments
   b) Late to clinical
   c) Absenteeism
   d) Crying spells

6. Which one is the maladjustments symptom of emotion?
   a) Inferiority
   b) Stealing
   c) Begging
   d) Excessive eating

7. Which one is the predictive of academic adjustments in the personality factor?
   a) Attribution
   b) Life stress and social support
   c) Self esteem
   d) Work involvement

8. When an individual shows flexibility in his/her behaviour is a character of
   a) Suggestive person
   b) Submissive person
   c) Socialized person
   d) Well adjusted person

9. Which one occupy the1st place in adjustments problems of adolescents?
   a) Educational problem
   b) Emotional problem
   c) Family problem
   d) Social problem

10. What to teach to make Nursing students efficient, successful and satisfied individual
    a) Life skills
    b) Communication skills
    c) Interpersonal skills
    d) Coping skills
SECTION- IV

ACADEMIC ACHIEVEMENTS

“Confidence and hard work is, the best medicine to kill the Disease called failure. It will make you successful person”.

Dr. Abdhul Kalam

4.1. INTRODUCTION: earlier sections highlighted about nurse educators’ roles in understanding and inculcating the essentials of positive or high self esteem, methods of enhancing good study habits and ensuring good adjustment among nursing students for their ultimate academic achievements. Failure of students in educational system is a matter of grave concern for all people including parents, educators, and educational administrators. Why does a student fail? Does he/she fail due to low general mental ability? Or due to poor achievement in the previous year or faulty study habits? Or has poor understanding? Or has any behavioural problems or less interested in study? Is cause of his failure associated with socio-education background or some personality dimensions? A close look reveals the answers to many questions which are not yet very clear. **Failure is a kind of wastage in the field of education.** It's mandatory for Nurse Educators to view issues in students' failure and our role in enhancing academic achievement meticulously. Let us read this unit to understand the overall facts in a nutshell.

4.2. MEANING OF ACADEMIC ACHIEVEMENT: is the outcome of education — the extent to which a student, teacher or institution has achieved their educational goals. Academic achievement is commonly measured by examinations or continuous assessment but there is no general agreement on how it is best tested or which aspects are most important — procedural knowledge such as skills or declarative knowledge such as facts. The way that academic performance is measured is through the ordinal scale of grade point average (GPA) as class rank and grade is the best index. **Academic standards are the benchmarks of quality and excellence in education such as the rigor of curricula and the difficulty of examinations.**

4.3. EFFECT OF STRESSORS ON STUDENTS’ ACADEMIC ACHIEVEMENT: Much research has been done correlation of many stress factors that college students’ experience and the effects of stress on their GPA. Such stress factors are named as “academic situational constraints” by Hatcher and Prus (1991).

It takes a lot more than just studying to achieve a successful college career. Different stressors such as time management, financial problems, sleep deprivation, social activities, and for some students even having children, can all pose their own threat to a student's academic performance.
Failure or academic year repletion in different educational stages is quite common. Repetition is itself commonly followed by drop-out. *Repetition contributes more to wastage than does drop-out.* Hence, it is apparent that failure in educational pursuits is common in almost all parts of the world. It is the responsibility of Nation, nursing institutions and nurse educators to take necessary steps to prevent failure or wastage to ensure the students' academic success.

4.4. EFFECTS OF ACADEMIC FAILURE: failure in academics is a colossal problem. Candidates and their parents, teachers and well-wishers become grievously disappointed as soon as the results turn out to be unfavorable. This affects the aspiration of the individual as well as that of the society, causes burden of a huge wastage of labour, money and the resources.

4.4.1.) INDIVIDUAL EFFECTS;

a) Frustration; repeating arrear exams or stagnation lead the student to drag on learning. Every one wants recognition and appreciation but failure forfeits such recognition and appreciation for his activities. Frustration may lead the student to hostility and aggression.

b) Suicide; failure in examination is a major cause of mental imbalance. As per the NCRB (2012) statistics, in India, the percentage of suicide due to failure in examination rate has been increased as evident; 2010-1.8%, 2011-1.8% and in2012-1.9%. The unsuccessful students in the examination seem to lose their mental balance, suffer much from inferiority complex and find much more difficult to adjust themselves to the normal environment of the society and some even commit suicide. It was asserted that *failure in examination is also a major cause of suicide among students.*

c) Anti-social activities; academic failures sometimes found to deviate from the normal way of living. Failures become older than their class-mates thus they find it difficult to adjust to their college environment, and feel rejected by the school and the society and sometimes a sense of deprivation also develops. All these lead the student to some anti-social activities.

4.4.2). SOCIAL EFFECTS;

a) Wastage; academic failure or stagnation is an important national problem. Due to the grade repetition of the failed students there is wastage of human learning, the labour of the teachers, school buildings and equipment and the expenditure incurred by the guardians for the student.

b) Stagnations; it is associated with certain home and school factors. it is recognized as a great evil in the educational system. One study revealed the causes as poor attendance due to the indifference of parents, the
failure of the school to adjust its hours and vacations to local needs, inefficient teaching, defective methods of examination and faulty curriculum.

4.5. FACTOR AFFECTING ACADEMIC ACHIEVEMENTS

I can say that there is no meaning if we don't discuss the factors affect or influence our students' academic achievement in this section as a nurse educator. The concepts "learning styles" and "critical thinking" in the nursing literature, were lacking in commonly accepted models in nursing education. (Andreou, Papastavrou and Merkouris-2013). No various investigations have explored numerous factors which are found responsible for academic success or failure. Such factors seem to come under two general heads: 1. Intellectual and 2. Non-intellectual as described below...

4.5.1. Intellectual: In case of students, intelligence is the ability to learn and succeed in school/college education. As per Singh (1976) highly intelligent student is bound to be a high achiever even if he/she is subjected to unfavorable conditions. Intelligence test has been used frequently to examine student's accomplishment in various academic examinations.

4.5.2. Non-intellectual: intelligence or scholastic aptitude, necessary for academic achievement, must be possessed by the students along with some favorable non-intellectual variables. The more favorable such non-intellectual factors are the higher would be the academic attainment. Some of the specific non-intellectual variables are as follows.

a. Personality variable: Recently, researchers have shifted their attention from academic achievement to the broader concept of college adjustment. It includes social and personal aspects of the students' college experience such as, motivation to learn, willingness to take action to meet academic demands, a clear sense of purpose, and general satisfaction with the academic environment are all personality traits recognized as important parts of academic adjustment (Baker & Siryk, 1984, 1989).

b. Persistence: students of superior intelligence may also fail or achieve poorly if there is lack of perseverance in them. 'Lack of persistent work at difficult task’ is a prominent reason for low marks for all the groups of students with poor scholarship. Hence persistence appears to have significant role in the academic achievement of the students.
c. **Motivation:** scientific studies have observed that the high achievers have a high need for academic achievement and they take it as a challenge. Their level of aspiration is high. In contrast, moderate to low achievers have a low level of aspiration and their needs are mostly connected with the avoidance of failure. *Students’ motivation has significant and positive correlation with academic achievement.*

d. **Educational and vocational goals:** definite educational and vocational goals are conducive to high scholastic achievement. Goals are expected to have certain motivational effects on the performance of the students. High achievers are more future-oriented in their fantasies and imaginations and less concerned with immediate gratifications. Students are chiefly guided by the definite goals in their reasoning, thinking, and academic behaviour. High achievers select vocation in which they can excel.

e. **Socio-economic status:** Higher the socio-economic status better the educational facilities available, together with more intellectual stimulation. It influences students’ attitudes, interests’ values, motivations and thus his academic accomplishment. Low socio-economic students poor in academic achievement due to poor study habit lack of proper teaching facilities in the educational campus.

f. **Social behaviour:** Even by fulfilling some important variables like intelligence, persistence educational goals socio-economic status, a student may not achieve the expected result if he fails to adjust or behave properly in the school or college environment. Whether he/she is accepted or rejected by classmate and his attitude or relationship with his teachers are matters of importance in his achievement.

g. **Individual differences:** besides the factors discussed above, some other individual factors tend to have significant association with the students’ educational achievements are age, sex, race, health marital status, interest, attitude, study habits, adjustment, learning environmental conditions, residential condition, extra-curricular activities, peer relationships and Mental curiosity.

h. **The effects of perceived social support** from the university and outside contributors like family, friends and mentors can make a huge impact on a student’s success. Support such as emotional, academic, and financial are tremendous factors in the success of a college student.

i. **Nutrition and health:** good food and healthy mind and body are essential to college students. Most students are just learning to live on their own, and learning and finding the time to cook and eat imbalanced nutrients leads to unhealthy living and causes academic hindrance. (Hammer et al, 1998).

j. **The effects of sleep on students’ GPA.** (Kelly, Kelly, and Clanton-2001) The study found that people who were considered to be long sleepers reported higher GPAs. Sleep deprivation cause shortened attention span and also increasing the number of errors students make on tests.
k. **Full time or part time job** and also maintain focus on academic studies can be perceived as stressful. Being exhausted from working the night before can cause a poor attendance record and also give a student less time to study, resulting in a poor academic performance.

l. **Class attendance**: It can be related to stress factors and it is having a major influence on academic performance, even to the point of some professors using it as a requirement to pass a student and great indicator of a student’s overall GPA.

m. **Ability**: reading and language ability, motivation, concentration and preparation for class, life stress, and self-monitoring/use of study strategies were found to be direct effects on academic achievement.

n. The importance for faculty to use **teaching methods** that foster deep learning instead of surface learning approaches, to improve the quality of student learning and academic performance.

o. Students need to have **high self-efficacy** for achieving educational requirements with higher grades and demonstrate greater persistence than students with low self-efficacy.

p. **Academic self-concept** of students was found to be a better predictor of success than were any other cognitive predictors. Students who believe in their ability to perform the task associated with college academics have also been shown to be academically successful (Lent et al. 1986).

q. **Lack of physical activity or Exercising too much** can influence academic performance. Exercise specifically increases **executive brain** functions such as attention span and **working memory**.

r. **Family Factors**: A considerable degree of agreement exists among sociologist, psychologist and educators that family dynamics affects students’ academic achievement. Review of literatures concluded that divorce does negative impact on academic achievement of students. In standardized test like Aptitude and achievement tests also proven in many studies that students in one parent homes score lower than from two –parent homes. Therefore, family structure played an important role in determining both grade and achievement (Shinn 1978). **Family variables affecting college adjustment**, psychological separation-individuation received the greatest attention in the early literature. Findings with college students indicate that a positive relationship does exist between parental attachment and adjustment to college life (Soucy & Larose, 2000).
4.6. TEACHERS AND ENHANCEMENT OF ACADEMIC ACHIEVEMENT:

Although many personal, family, and neighborhood factors contribute to a student's academic performance, a large body of research suggests that—among school/college-related factors—teachers matter most. Many researchers examined and evaluated the critical relationship between teacher effectiveness and student achievement. I pronounce prominently that we teachers in teaching profession should critically analyze how our personal and professional characteristics and efficacies are influencing learners' academic performances. Read the below mentioned points which are pooled out of reviewed of research based and stipulated roles of a teachers.

4.6.1. 'Teaching and student outcomes are positively connected' and that 'an increase in teacher's teaching experience was associated with an increase in student achievement' (Treka (1994). Anderson (1997) Concluded that the experience increases teacher effectiveness and accountability.

4.6.2. It has been proven that teacher's expectations ('Pygmalion effect') had played a prominent role in improvement of students' academic performance even students with disrupted family structure. (Rosenthal and Jacobson 1968).

4.6.3. Teachers should have personal knowledge of each student and be more attentive to the differences and therefore customize the lesson to insure that all students were successful. Follow the criteria that influence students' achievement;

- Alignment of instruction,
- Appropriate sequence of instruction,
- Appropriate materials,
- Monitoring of student performance and attendance,
- Interacting with students in at-risk situations,
- Having an intervention plan in place,
- Having a campus wide program of action, and the campus rating attribute.

4.6.4. Creating a classroom context in which **students are highly motivated**, especially when students are not motivated. Student's perceptions of the teachers' actions were more important for influencing motivation than the teacher's real actions themselves.

4.6.5. **Personal qualities of teacher** are the most significant factor affecting student achievement. Teacher behaviours such as; teacher enthusiasm, level of explain to understand lessons of difficulty, teacher voice volume and inflection, teacher use of inquiries, and teacher use of positive feedback have definite influence on students' academic (Ortiz (1997).

4.6.6. Gavlick (1996) proposed a model postulating a relationship between **faculty research activity**, instructor behaviours; and student achievement is advanced, based on two causal models, one linking research activity and instructional effectiveness and another validating student evaluation **as** good indicators of instructional effectiveness, as measured by student achievement.

4.6.7. Schrage (1995) said, “Uninspired teachers should watch more innovative colleagues and accept their constructive suggestions”. Nurturing a pedagogical culture of collaboration should lie at the heart of efforts to improve teachers’ accountability.

4.6.8. Stone (1995) defined the term **empowerment** as it applies to teachers and to students. He suggested the foundation needed for empowering includes respect, validation, and success. He also discussed the characteristics of ownership, choice, decision-making, intrinsic motivation, responsibility, independence, risk taking, collaboration, and self-evaluation as factors involved in empowerment.
4.6.9. **Value based education**: the word value is derived from the Latin root, “valerie” meaning to be strong and vigorous. To be of value is to have a certain virtue. **A teacher has to influence the students’ values during the class interactions, tutorial house and counselling room.** An understanding of the attitudes emotions feelings, values and motives of the pupils is equally importance (Bhaskara Rao 2007).

4.6.10. **Students’ ‘background knowledge’**: Learning of new content by the student is depends on factors such as the skill of the teacher, the interest of the student, and the complexity of the content. The researches and theorist refer to what a person already knows about a topic as “background knowledge.” They confirmed that there is a relationship between background knowledge and academic achievement (Association for supervision and curriculum development-2004).

4.7. **ATTRITION IN NURSING:** Dear colleague, I mention this important issue in this section because we may neglect or not mind for those students who leave nursing course. It is a silent questionable remark to our profession. Research reported that 25% of students leaving course is due to academic and personal reasons. California nursing Board (2005)

4.8. **TIPS FOR NURSING STUDENTS:** with teaching and administrative experience as well as passing a student life during my training period in this noble nursing profession would like to disseminate additional tips for our nursing students to be academically excellent students in below illustrated points.

1. Student should select study area free from distractions because studying is paramount.
2. Study actually (not studying just).
3. Learn to say NO to friends when time need to offered to studies.
4. Pay more attention to difficult classes.
5. Every day study subjects because learning medical terms, techniques, nursing care, and clinical procedures are not easy to learn overnight.
6. Set aside enough time for care plan writing since it need time for referring books and class notes for writing appropriate nursing care with rationale.
7. Study with break time.
8. Learn to make flash cards for tough process, procedures pathophysiology and psychopathology to make easy to remember.

9. Remember that destiny is in our own hands; ultimately you are responsible for your own success/failure.

10. Be with group for studying new and tough subjects.

11. Should not give up if failure comes better to evaluate where to improve and how to take action and prove you in achieving the exam.

12. Try with hard work because arrear system is there even if failure comes once, instead loosing self-confidence.

13. Don’t be notorious candidate in negative aspects it reflects in the faculty meeting and report goes to parents.

14. Take care with interest and creativity in writing your assignment, care plan case studies drug book and lab records.

15. Don’t be late to clinical.

16. Avoid participating in strikes and mass bunks.

17. To avoid stress do exercise, have good food, enough sleep, social support system and team sports.

18. Be active participator in college/school cultural programs and sports eve break boredom.

19. Be pushy in class to clear your doubts because it is your rights.

20. Give importance to class and clinical attendance. Avoid spending time for movie, cell phone talk or SMS, net surfing and sleeping in hostel during class hours.

21. Follow infection control procedures in the clinical duty to protect self and patient.

22. Give more attention to learn allied health science subjects (microbiology, biochemistry, pharmacology, Anatomy and physiology which gives strong foundation for FON, Med&Sur and all nursing subjects understanding perfectly.

23. At last I firmly say keep all your own books until complete your course. Don’t sell it because it will be useful for immediate reference and brush-up theoretical and practical knowledge.

4.9. CONCLUSION: Teaching in Nursing is a vital role in the dynamic structure and function of preparing the nurses of the future for teaching and clinical careers. Faculty must be trained to look forward and teach in new methods, diversity of students, curriculum development, redesigning of health care systems, and information and technology advances are just a few of the growing challenges are facing by those who choose to be an instructors.
SECTION- IV

EVALUATIVE QUESTION

1. What term is given to the ‘failure’ in the field of Education?
   a) Poor Achievement
   b) Wastage
   c) Shameful
   d) Disappointment

2. Which is the best index of academic performance?
   a) Grade point Average
   b) Grade placement
   c) Ranking
   d) Levels

3. When Repetition by the arrear students contributing to
   a) Wastage
   b) Drop-out
   c) Elimination
   d) Burden

4. Which is the most common cause for suicide among students?
   a) Love failure
   b) Academic failure
   c) Achievement failure
   d) All the above

5. Which is the Individual effect of Academic Failure?
   a) Long absenteeism
   b) Anti-social activities
   c) Wastage
   d) Stagnations

6. Which variable is significant and proved positive correlation with students’ academic achievement?
   a) Persistence
   b) Socio economic status
   c) Educational goals
   d) Motivation

7. Which factor will mainly influences Nursing students GPA (grad point average)?
   a) Ability
   b) Teaching methods
   c) Class attendance
   d) High self efficiency

8. What knowledge is essential to a teacher to influence students Academic Achievement?
   a) Teaching methods
   b) Subject matter
   c) Individual student’s differences
   d) Class room behavior

9. Which one a teacher should influence during students guidance and counselling session?
   a) Interest
   b) Adjustments
   c) Coping
   d) Values

10. What are the most commonly lacking concepts in Nursing Literature?
    a) Learning styles and critical thinking
    b) Self - empowering
    c) Research and critical analyses
    d) Supportive literatures search.
KEY TO THE QUESTIONS

SECTION - I- SELF-ESTEEM
   d) Self- Esteem
      d) Behavioural
         a) High self-esteem
         c) Addition of feeling
         c) Optimistic behaviour
         b) Immune system of consciousness
         c) Assertive behaviour
         b) Self awareness
         a) Enhancing one Self
         b) Self and others

SECTION – II- STUDY HABITS
   c) Interactive process
   c) Information and comprehension
   c) Lack of interest and drive
   b) Guidance and support
   d) In-effective studying
      a) 5R system
      a) Reading skills
      b) Test preparation
      d) Arrive early for exam
      a) Time management

SECTION- III- ADJUSTMENTS
   b) Adolescent
      a) Adjustment as an achievement
      b) Coping
      b) Problem focused coping
      b) Late to clinical
      c) Absenteeism
      a) Inferiority
      c) Self esteem
      d) Well adjusted person
      b) Emotional problem
      a) Life skills

SECTION- IV- ACADEMIC ACHIEVEMENTS
   b) Wastage
      a) Grade point Average
      a) Wastage
      b) Academic failure
      b) Anti-social activities
      d) Motivation
      c) Class attendance
      c) Individual student's differences
      d) Values
      d) Supportive literatures search.
SUMMARY

Irrespective of the academic programs or the teaching position every member of nursing faculty, as an nurse educator are the key resources in preparing a nursing workforce that will provide quality care to meet the health care needs of our population. The main aim of this information guide is to provide scientifically valid information to the nurse educators about what is an essential in teaching and learning process of nursing profession.

Our nursing students are significantly encounters various challenges in learning environment in acquiring theoretical and practical knowledge of nursing sciences. Self-esteem is an important personality aspect which has a direct bearing upon the adjustment, study habit and academic achievements. Information about learning styles can assist educators in maximizing students’ potential for success and assist the students in developing additional learning strength. Hence, knowing systematic ways of study styles or study habits is inevitable for nurse educators to inculcate those habits in nursing students.

Nursing students have the same academic stressors as other college students and need to adjust more academically, because they more prone to stress than other students. High level tress is believed to affect nursing students’ health and academic functions. If stress is not dealt with effectively, negative coping behaviors dominate students. Nursing education covers teaching curriculum, and outcome evaluation. Instructors need comprehensive and contemporary guidelines to meet the day-to-day challenges in enhancing students’ academic performances towards success.

This information guide may be useful to nurse educators because, it is imperative to nursing students to develop and possess high self-esteem, good study habits, adequate adjustment for excellent academic pursuits in both classroom and clinical learning. In order to achieve these, educators have to improve their own knowledge, attitude and skill in enhancing self.
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11. **Association for supervision and curriculum development** (2004,)“Building background knowledge for academic achievement” – research on what works in school, by premium publications in USA .


16. **Janice Rattray** (2006), “Predictors of academic performance in a cohort of pre-registration nursing students” Bottom of Form University of Dundee, School of Nursing and Midwifery, 11 Airlie Place, Dundee DD1 4HJ, United Kingdom.
Poster presentation on Hildegard Peplau’s interpersonal theory for case illustration.
M. S. RAMAIAH INSTITUTE OF NURSING EDUCATION AND RESEARCH,
Bangalore - 560 054

National Conference
on Theory Application in Nursing Practice

Certificate

This is to certify that V. Virginia Mary has participated in the scientific deliberation at the National Conference on "Theory Application in Nursing Practice, Bridge the Gap; Shape the Future" organized by M. S. Ramaiah Institute of Nursing Education and Research, Bangalore-54 on 16th & 17th February, 2008.

Sri. B.R. Prabhakara
Patron

Mrs. Prathilha Swamy
Organising Secretary

Prof. S.S. Prabhudeva
Chairman - Organising Committe
Organized a Workshop on “Challenges of Administrators in the Current Scenario” at East West College of Nursing on 22/03/2010, in Bengaluru.
ORGANISED
BY
P.G.STUDENTS & STAFF
UNDER THE LEADERSHIP OF
Prof Mrs. V. VIRGINIA MARY
PRINCIPAL,
EAST WEST COLLEGE OF
NURSING
BANGALORE

WORKSHOP
ON
“CHALLENGES OF NURSE
ADMINISTRATORS IN THE
CURRENT SCENARIO”
22-MARCH-2010
PROGRAMME SCHEDULE
8.30 am - 9.00 am : Registration
9.00 am - 10.00 am : Inauguration by Sri C. N. Ravikiran, Secretary East West Group of Institutions.
10.00 am - 10.30 am : Breakfast

SCIENTIFIC SESSIONS
10.45 am - 11.30 am : Dr. B. K. RAGHAVAN Principal, East West College of Management
Topic : Significance and scope of administration and its role in the modern society.
11.40 am - 12.25 pm : Dr. SATISH, R.M.O, NIMHANS
Topic : Challenges of administrators in the current scenario.
12.35 pm - 1.15 pm : Dr. K. LALITHA
Prof. & HOD Nursing, NIMHANS
Topic : Nurse administrator as a liaison officer between education and clinical service sector.
1.15 pm to 2 pm : Lunch
2 pm - 2.45 pm : Dr. S. S. PRABHUDEVA
Principal, M.S.R.I.N.R.
Topic : Talents and skills of nurse
2.45 pm - 3.30 pm : Prof. Mrs. V. VIRGINIA MARY
Principal, East West College of Nursing
Topic : Innovative approaches in addressing the challenges of nurse administrator.
3.30 pm to 4 pm : Coffee Break
4 pm - 4.30 pm : Mrs. A. KANIMOZHI
Associate Professor
Topic : Emerging trends in Curriculum administration.
4.30 pm - 5.00 pm : Prof. Mrs. JYOTHI. M. S.
Principal, Sri Jayadeva Institute of Nursing Science, Tumkur.
Topic : Strategies of financial administration.
5.00 pm - 5.30 pm : Mrs. VASANTRA KUMARI
Asst. professor
Topic : Administrative skills for the clinical nurse specialist.
5.30 pm - 6 pm : Valedictory function Presided By :
Ms. B. Purushotham, Administrator, East West Group of Institutions.

Best Wishes
ANNEXURE - XIII

Paper presentations on:

- “Innovative Approaches In Addressing The Challenges Of Nurse Educators”
- “Effectiveness of Teaching Programme on Emotional Quotient of Adolescent and Academic Achievement of Students”.
- “Alcohol Abuse Disorders and Its ill effects At Symposium on Drug Abuse”,

EAST WEST COLLEGE OF NURSING
BANGALORE - 560 091.

Certificate

This is to Certify that

Mr. / Miss. ..............

Prof. (Mrs.) V. VIRGINIA MARY ..............

Attended one day State Level Workshop titled

“Challenges of Nurse Administrators in the Current Scenario”

On 22nd March 2010 as a Speaker / Delegate, Organised by

PG Students & Staff of East West College of Nursing, Bangalore.

Signature of the Secretary

[Signature]

Signature of the Chairperson

[Signature]
INDIAN SOCIETY OF PSYCHIATRIC NURSES (ISPN) & NARAYANA COLLEGE OF NURSING
8th NATIONAL LEVEL CONFERENCE
6th - 8th, March, 2010

Theme:
Community Mental Health Nursing

NARAYANA COLLEGE OF NURSING
CHINTHAREDDYPALEM, NELLORE
PSYCHO SOCIAL RESPONSE OF DISASTER AFFECTED POPULATION

I. Immediate reaction (with in 24 hours)
   1. Tension, anxiety, panic, stunned, dazed, restlessness, agitation, crying and with draw

II. Within days to week after disaster
   Being fearful, vigilant, worried, sadness, repeated flash backs, weeping, guilt feeling

III. After about three weeks of disaster
   Restlessness, feeling panicky, sadness, isolated and with drawn behavior

MENTAL DISORDERS AFTER A DISASTER:
Acute stress reaction, Bereavement and grief mental disorders, alcohol and drug abuse, post traumatic disorder, physical symptoms.

GENERAL PSYCHOSOCIAL MEASURES TO ENHANCE THE EMOTIONAL WELLBEING OF DISASTER AFFECTED PEOPLES:
   • Provide uncomplicated and accessible information
   • Encourage recreational activities for children
   • Encourage to do group activities like prayers.
   • Ensure equitable distribution of relief aid
   • Encourage team members to actively participate in the grieving
   • Motivate community leaders to participate in group discussion
   • Encourage people to share their feelings

INTERVENTION DURING THE POST DISASTER RECONSOLIDATION PHASE:
1. General psycho social measures
2. Specific psycho social interventions
3. Identification and referral
4. Screening for mental health problems
5. Identification and referral of cases requiring specialist care
   • Previously known case of mental disorders
   • Suicidal ideation
   • With drawl symptoms
   • Physical violence in the family
6. Psycho social intervention for special groups

Conclusion:
The term psycho social intervention in the disaster management does not only to highly specialized interventions by mental health experts. Infact most psychosocial interventions for disaster affected people can be carried out effectively by community level relief workers if they are trained and supervised to do so.

“EFFECTIVENESS OF STP ON EMOTIONAL QUOTIENT AMONG SCHOOL TEACHERS”
Prof. (Mrs). V. Virginia Mary. M.Sc.(N), PhD(N) student EAST WEST COLLEGE OF NURSING, Bangalore-91

Background of the study: Emotional Quotient refers to ability to recognize our own and others feelings, which is essential in the workforce, education and leadership development of individuals. It is a foundation for emotional development, self-esteem, happiness and success in life. Primary School Teachers can play a significant part in helping young people to establish these foundations to enter in a better adjusted adulthood. Aim: To promote mental health among children through the character creators to cross critical adolescent stage that may enable to reach self actualisation. Methodology: Quasi experimental research design with quantitative approach was used. Sample size was 40 selected by using Simple Random Sampling Technique. A Structured self administered knowledge questionnaire on E.Q. was used. Collected Data was analyzed by using descriptive and inferential statistics. Results showed a statistically significant improvement in the post test mean knowledge score of study subjects regarding E.Q. The paired 't' test value was 13.395* which is statistically significant at 0.05 level in over all aspects under the study. There were no significant
associations of post test knowledge level with selected socio demographic variables except major subjects dealing variable with χ² value 12.831* (d.f.=4). Conclusion: the findings of the present study showed there is an effectiveness of S.T.P. on E.Q. among the subjects in a scientific method of evaluation. Therefore study subjects may develop skills in moulding their students for the inculcation of good adjustment, senses of emotional wellbeing, healthy interpersonal relationship which in turn results in better academic achievements and high self esteem which is essential for their future life.

====================================================================

A STUDY TO DETERMINE THE LEVEL OF HARDINESS AMONG WORKING WOMEN IN SELECTED COMMUNITY OF CALICUT DISTRICT, KERALA

Mrs. Reena George, Mr. Sajithkumar P Assistant Professors, MIMS College of Nursing, Kerala - 673633.

The objectives of the study were to:

- Determine the level of Hardiness among working women as measured by Hardiness assessment Scale.
- Identify the association between the level of hardiness and selected demographic variables.
- Identify the association between level of hardiness and physical illness among working women.

Methods: A non-experimental approach with descriptive survey design was used for the study. The sample consisted of 72 working women selected by convenient sampling method. Data were collected by administering a demographic proforma and Kobasa’s hardiness scale modified by the investigator, which contains 45 items with two parts. Part-I consisted of 21 items in the form of Likert scale and part II with 24 scenarios the areas assessed were commitment, control and challenge. The collected data were analyzed using descriptive and inferential statistics using SPSS version 17.

Results: The result revealed that among 72 working women 8.3% (6 women) had low level of hardiness and 50% (42 women) had moderate level of Hardiness where as the women belong to high level of hardness were 33.35% (24 women). There was no statistically significant association between the hardness score and some of the variables like age, occupation, duration of employment, marital status and family type whereas the remaining variables like educational qualification and presence of illness had shown significant association between hardness score at 0.05 level

Interpretation and conclusion: The findings of this study suggest that there is a need for educating women about proper time management which will help ward off stress. Working women can get rid of this stress by adapting to one’s work place in a better way. In the nut shell, the key to kill work stress lies in striking a balance between office and home. Ask family for support and the whole ordeal of fighting with stress is sure to become easier.

====================================================================

PSYCHOLOGICAL PREPAREDNESS FOR A DISASTER

Ms. K. Malika, II Year M.Sc(N), Narayana College of Nursing.

Millions of people each year who suffer disasters such as earthquake, hurricane, fire and flood are generally surprised to find disasters happen not just to people. Under the circumstances most people are not psychologically up to the task. In the past, disaster psychology has focused mainly on the response and recovery phases of emergencies. And now it believes that addressing emotional issues of preparedness along side the physical facets is a worthwhile area in which to focus. The age old proverb is as true today as it ever has been, an once of prevention is worth than a pound of cure*.

DEFINITIONS

DISASTER: “Disasters can be defined as any event, human-made or natural, sudden or progressive, causing widespread human material or environmental losses, which exceed the ability of the affected community to cope using its own resources” (ADPC).
Acharya College of Nursing
Symposium on Drug Abuse
"Hugs No Drugs"

On this gallant occasion we invite you to participate in this initiative and enrich the program with your esteemed presence.

Date: 10th July  
Time: 10AM to 1PM 
Venue: Seminar Hall

AGENDA

10:00 – 10.05AM : Prayer Song
10:05 – 10.10AM : Welcome Speech by Ms. Lakshmi Thakur III year B.Sc. Nursing Student
10:10 – 10.15AM : Lighting the Lamp.
10:15 – 10.25AM : Introducing the theme by Mrs. Chithra, Principal ACN
10:40 – 11.00AM : Alcohol Abuse disorders, Prof. Mrs. Virgina Mary, Principal of East West College, Bangalore
11.00 – 10.20AM : Other Substance abuse Disorder, Mrs. Sheila Antony, Student Director, ABHS
11.20 – 11.35AM : Tea Break
11.35 – 11.55AM : Prevention and rehabilitation for Substance Abuse Disorders, Mr. James Thomas, Clinical Support Specialist, LAB INDIA INSTRUMENTS
11:55 – 12.20PM : Nursing Management for Substance Abuse Disorder, Mrs. Vanitha I year M.Sc. Nursing Students Acharya College of Nursing
12:20 – 12.35PM : Documentary movie "DESTINY"
12:35 – 13.00PM : Vote of Thanks – Mr. Mohammed Fazil III year B.Sc. Nursing, Student.
ANNEXURE - XIV

Publications:


- Published a paper on “study habits of nursing student: a preliminary analysis”, in a journal of Kerala Nursing Forum- April - June 2013, vol-8, issue-2, pp-11-16, under the Guidance of Dr.K.Lalitha, professor in Nursing, NIMHANS, Bangalore.

- Published a paper on “Knowledge and attitude on learning of Adjustment through sports and physical activities: a descriptive survey”, in a journal of Kerala Nursing Forum- April - June 2013, vol-8, issue-2, pp-24-28. Under the Guidance of Dr.K.Lalitha, professor & HOD in Nursing Dept, NIMHANS, Bangalore.

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Editorial Office: Office of the Chief Editor, Kerala Nursing Forum, Theophilus College of Nursing, Kizhazha, Devagiri P.O., Kottayam - 686 555, Kerala, Ph: 0481 - 2495044, E-mail: keralanursingforum@gmail.com
# Journal of School Social Work

A National School Social Work monthly dedicated to networking of parents and teachers

**Price Rs 20**

**Volume IV**  
**Issue 03**  
**August 2007**

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**Hony. Special Editor:** **Dr Muralidhar D**  
**Additional Professor,**  
**Department of Psychiatric Social Work,**  
**NIMHANS, Bangalore**

**Focus: Academic Skills**
ANNEXURE – XV

Conferences Attended:

- Undergone Training on Refresher course in Research Methodology and statistical Methods organized by NIMHANS on 2010, at Bangalore.

- National conference on “Mixed Method Research – Exploring The Interactive Continuum Organized jointly by SRM University on 15th -1th of February 2013, kattankulathur kancheepuram dist T.N.

- Paradigm shift in nursing education- education of the heart with highlights on action research at national conference organized by St. Ann’s college of nursing-Mangalore on 21st 2009.
This is to certify that Dr. M. Virginia Mary, M. V. has attended a Refresher Course in "Research Methodology and Statistical Methods" conducted on 23rd & 24th of November 2009 at NIMHANS, Bangalore.

Dr. K. Thamarasu
Faculty

Dr. K. Marimuthu
Faculty

Professor and Head
This is awarded to Mr./Ms./Dr. V. MARY for his/her participation in the National Conference on the theme: "Mixed Method Research - Exploring The Interactive Continuum" as a delegate/organizer/resource person/presenter of a paper held on 15th-16th February 2013.

Dr. JAYA Mohanraj
Dean
Chairman - Organizing Committee

Dr. N. Chandra Prabha
Director - Health Sciences
ST ANN'S COLLEGE OF NURSING
MUKLI, MANGALORE 574 154

"Paradigm Shift in Nursing Education with Action Research"

1st National Conference on Education of the Heart

Certificate

This is to certify that Miss, Mrs. Dr. Y. Virginia Mary has been a delegate/organiser/presenter of papers for the National Conference organized by St. Ann's College of Nursing, Mulki, Mangalore from 19th to 21st February 2009.

CHAIRPERSON & PRINCIPAL

CHIEF PROGRAMME COORDINATOR