CHAPTER III
METHOD

The study on, ‘Management of Stress, Behaviour Problems and Academic Problems in Adolescents through Positive Therapy’ involves the following steps:

- Objectives
- Hypotheses
- Area
- Sample
- Tools
- Procedure
- Intervention
- Reassessment
- Analysis of Data

OBJECTIVES

- To find out the relation between Stress, Behaviour Problems and Academic Problems
- To identify the level of Stress in Selected Adolescents
- To identify the level of Behaviour Problems in Selected Adolescents
- To assess the level of Academic Problems in Selected Adolescents
- Positive Therapy helps in the management of Stress, Behaviour Problems and Academic Problems

HYPOTHESES

The hypotheses are stated as alternate hypotheses, so that they can be either accepted or rejected based on the results.

1. There will be a Positive Relationship between Stress and Behaviour Problems in Adolescents.

2. There will be a Positive Relationship between Stress and Academic Problems in Adolescents.

3. There will be a Positive Relationship between Behaviour Problems and Academic


Problems in Adolescents.

4. The Negative Symptoms of the Adolescents will be reduced after the Positive Therapy.

5. There is a significant difference between Before and After Positive Therapy in the level of Stress experienced by the Adolescents.

6. The Physiological, Emotional, Cognitive and Behavioural Symptoms of the Stress level among the Adolescents will be reduced significantly due to Positive Therapy.

7. There is a significant difference between Before and After Positive Therapy in the level of Behaviour Problems of the Adolescents.

8. There is a significant difference in the Academic Problems between Before and After Positive Therapy among the Adolescents.

FIGURE 1: SINGLE GROUP BEFORE AND AFTER DESIGN
AREA

Holy Cross Girls’ Higher Secondary School and Seva Sangam Girls’ Higher Secondary School, Trichy, Tamil Nadu, India, were selected for the study. Adolescents from different socio-economic status were selected and Medium of Instructions were Tamil and English.

The reasons for selecting the area are as follows:

- Availability of the subjects
- Permission and facilities provided by the authorities to carry out the action research
- Easy accessibility
- Willingness and co-operation of the adolescents to serve as subjects in the action research

SAMPLE

Out of 750 girls studying in IX standard, from Holy Cross Girls’ Higher Secondary School and Seva Sangam Girls’ Higher Secondary School, Trichy, Tamil Nadu, India, 500 girls were selected by Purposive Sampling. “Purposive sampling is a sampling method in which, elements are chosen based on the purpose of the study. A purposive sample is one, which is selected by the researcher subjectively” (Galloway, 2000). Poor academic achievement was the criterion for selecting the sample. The age range of the sample was 13-15 years.

TOOLS

Selection of tests and tools is a very important aspect of any research, since it is the key to gain information. The following tests and tools were used to get the needed information about the adolescents.

CASE STUDY SCHEDULE (Hemalatha, 2007)

Case Study Schedule was used to collect the needed information about the adolescents including personal details, causes and effects of stress, negative emotions and symptoms. A copy of the Case Study Schedule (Hemalatha, 2007) is given in Annexure I.

STRESS INVENTORY (Hemalatha and Nandini Revised, 2005)

Stress Inventory (S. I.) was constructed and standardized by Hemalatha and Nandini in 2003 and it was revised in 2005. It consists of 30 items, under 4 parts namely,
Physiological, Emotional, Cognitive and Behavioural. There are two possible responses to each item namely, ‘Yes’ or ‘No’. The adolescents were asked to tick (✓) any one, which applied to them the most. There was no time limit. But the adolescents were asked to respond as quickly as possible. Scoring Key and Norms were provided by the authors. The validity of S.I. is 0.80 and the reliability by test retest method is 0.95. A copy of the Stress Inventory (Hemalatha and Nandini - Revised, 2005) is given in Annexure II.

BEHAVIOUR PROBLEMS CHECKLIST (Hemalatha and Sujeetha, 2007)

Behaviour Problems Checklist consists of 20 items. There are two possible responses to each item namely, ‘Yes’ or ‘No’. The adolescents were asked to tick (✓) any one, which applied to them. There was no time limit. But the adolescents were asked to respond as quickly as possible. The greater the number of ‘Yes’ responses, the more are the behaviour problems. A copy of the Behaviour Problems Checklist (Hemalatha and Sujeetha, 2007) is given in Annexure III.

ACADEMIC PROBLEMS CHECKLIST (Hemalatha and Sujeetha, 2007)

Academic Problems Checklist consists of 20 items. There are two possible responses to each item namely, ‘Yes’ or ‘No’. The adolescents were requested to tick (✓) any one, which applied to them. There was no time limit. But the adolescents were asked to answer as quickly as possible. The greater the number of ‘Yes’ responses, the more are the academic problems. A copy of the Academic Problems Checklist (Hemalatha and Sujeetha, 2007) is given in Annexure IV.

CASE STUDY REASSESSMENT SCHEDULE (Hemalatha, 2007)

Case Study Reassessment Schedule was used to get information on the negative emotions and symptoms of the adolescents after undergoing Positive Therapy. A copy of the Case Study Reassessment Schedule (Hemalatha, 2007) is given in Annexure V.

POSITIVE THERAPY HANDBOOK

Positive Therapy handbook for healthy, happy and successful living (Hemalatha, 2004) was used to provide intervention to the adolescents. It is a package, which combines the Eastern Techniques of Yoga and the Western Techniques of Cognitive Behaviour Therapy.
has four strategies namely, Relaxation Therapy, Counselling, Exercises and Behavioural Assignments. In this action research, all the techniques were used.

**PROCEDURE**

Holy Cross Girls’ Higher Secondary School, Trichy, Tamil Nadu and Seva Sangam Girls’ Higher Secondary School, Trichy, Tamil Nadu, were the two schools selected to conduct the action research. Out of 750 adolescents studying in IX standard, in the above two schools, 500 adolescents with poor academic achievement were identified by the teachers and referred for Positive Therapy. There were 290 girls from Holy Cross Girls’ Higher Secondary School and 210 girls from Seva Sangam Girls’ Higher Secondary School. Purposive sampling was used in this study. It is a non-probability sampling in which, the investigator selects the individuals to be the sample on the basis of some characteristics like age, family type, economic status and academic performance. In this research, the criterion for selecting the adolescents was ‘Poor Academic Achievement’.

A pilot study was conducted on 100 girls studying in IX standard (who were not included in the final sample) in the two schools, to identify their behaviour problems and academic problems. This helped in the construction of Behaviour Problems and Academic Problems Checklists.

All the 500 selected adolescents were initially assessed using the Case Study Schedule (Hemalatha, 2007), Stress Inventory (Hemalatha and Nandini, Revised 2005), Behaviour Problems and Academic Problems Checklists (Hemalatha and Sujeetha, 2007). Then, the adolescents were divided into 10 batches of 50 subjects in a batch. The subjects in all the batches were given the psychological intervention called, Positive Therapy.

**INTERVENTION**

**POSITIVE THERAPY**

Positive Therapy is a package evolved by Hemalatha (2004), based on the Eastern Techniques of Yoga and Western Techniques of Cognitive Behaviour Therapy. The assumption of Positive Therapy is that any behaviour problem is due to the way an individual perceives himself/herself, the situation, the people around and his/her future. A person with negative perception will also have negative thoughts, beliefs and emotions, which will affect his/her physical health and mental health. When negative thoughts are replaced by positive
thoughts, the individual becomes more realistic and reasonable in his/her perception, which results in enhanced well-being and health. The focus of Positive Therapy is on the present.

The aim of Positive Therapy is to modify negative thoughts, beliefs, emotions and behaviour by using four strategies namely, Relaxation Therapy, Counselling, Exercises and Behavioural Assignments.

RELAXATION THERAPY
In Positive Therapy, Relaxation Therapy involves three steps, Deep Breathing Practice, Relaxation Training and Autosuggestion.

DEEP BREATHING PRACTICE
In Deep Breathing Practice, the adolescents were asked to sit erect, with palms facing upwards and placed on the lap. They were asked to breathe in slowly for 4 counts (4 seconds) and breathe out gradually for 6 counts (6 seconds). This was repeated 5 times with the adolescents’ eyes open and 5 times with their eyes closed.

RELAXATION TRAINING
Relaxation Training was given to the adolescents in lying down posture, with the head straight, eyes closed, lips slightly apart, hands comfortably placed on the sides, palms facing upwards and legs stretched, with feet, one foot apart. The adolescents were asked to close their eyes with a folded handkerchief to ensure complete darkness. Then the following instructions were given:

“Breathe in slowly….breathe out gradually….” (This was repeated 3 times).
“Now, concentrate on the top of the head. Breathe in slowly…breathe out gradually…Top of the head…Relax…”. This was repeated 3 times followed by the researcher’s suggestions: “Now, top of the head is light and relaxed; no thoughts, no fears, no worries, no tension, no stress and no pain. Top of the head is light and relaxed. Top of the head is completely relaxed. Breathe in slowly…breathe out gradually…”.

Similar instructions were given to the other parts of the body in the order given below:
- Back of the head
- Forehead
- Eyes
- Mouth
- Neck and Shoulders
- Back
- Chest
- Stomach
- Hands and
- Legs

Then, the researcher gave the following directions to the adolescents who were in a relaxed state:

- **Inhale POSITIVE THOUGHTS.** Breathe out all negative, useless thoughts from the body
- **Inhale GOOD HEALTH.** Breathe out all the aches, pains and sicknesses from the body
- **Inhale HAPPINESS.** Breathe out all the worries from the body
- **Inhale STRENGTH.** Breathe out all the weaknesses from the body
- **Inhale COURAGE AND CONFIDENCE.** Breathe out all the fears from the body
- **Inhale SUCCESS.** Breathe out failures and fears of failures from the body
- **Inhale LOVE.** Breathe out hatred and anger from the body

**AUTOSUGGESTION**

The adolescents were asked to continue to have deep breathing, enjoying the relaxed state, when the following autosuggestions were given (3 times each):

- I am healthy
- I am happy
- I love everyone; everyone loves me
- I am bold and confident
- I can face any problem boldly and solve it successfully
- I will enjoy my studies
- I will surely pass in my exams
- Today is an excellent day; I will enjoy every minute of this day
- Thank you God, for giving me all that I need - good health, wealth, happiness and success in my studies
COUNSELLING

The Counselling Techniques involved in Positive Therapy are Rational Emotive Therapy, Thought Stopping, Symptom Stopping, Cognitive Restructuring and Assertiveness Training. In the present study, Rational Emotive Therapy, Thought Stopping and Cognitive Restructuring were used. Individual Counselling was given to the adolescents who had problems.

RATIONAL EMOTIVE THERAPY

More often, the problems are due to one’s own wrong perceptions and beliefs. Emotion and reason are like two pans of a balance. When one becomes highly emotional, one cannot think rationally. Positive Therapy helps to remove the irrational beliefs and thoughts by appealing to reason. The adolescents were trained to face their problems with clarity in thinking and reasoning, rather than resorting to fear or worry.

Some of the irrational beliefs of the adolescents are identified to be as follows:

- I will never get good marks
- I won’t pass in my exams
- I won’t have a bright future

These unwanted irrational thoughts were removed by appealing to their reason that they were getting good marks and passing in their exams from Standard - I till Standard - VIII. They were asked to have the strong belief that they were sure to get good marks and have a bright future.

THOUGHT STOPPING

The adolescents were asked to identify the recurring negative thoughts, which disturbed them. The most common negative thoughts were as follows:

“I am not efficient”.

“I am going to be a failure”.

The adolescents were asked to breathe in slowly, deliberately get one of the disturbing, negative thoughts and breathe out saying ‘Stop’ loudly, pushing the thought away. This practice was given five times. Then, the same procedure was followed when they were asked to say ‘Stop’ mentally. This practice was also given five times.

The same procedure was followed to remove the other negative thoughts. Whenever unwanted negative thoughts occurred, they were instructed to say ‘Stop’ (mentally) and
throw away the negative thought. In due course, they learned to throw out unwanted negative thoughts automatically.

**COGNITIVE RESTRUCTURING**

After removing the unwanted negative thoughts through ‘Thought Stopping’, it is necessary to replace the negative thoughts with positive, self-enhancing thoughts. This was done by ‘Cognitive Restructuring’. In this technique, the adolescents were asked to breathe in slowly (for 4 counts); while breathing out, the adolescents were asked to tell out each of the following positive statement (3 times each).

- I am efficient
- I can get good marks
- I can pass in my exams
- My future is bright

The adolescents were asked to strongly believe that these are true.

**EXERCISES**

Positive Therapy involves three exercises to help people get rid off their tension and develop a cheerful state. They are, Tension Releasing Exercise, Smile Therapy and Laugh Therapy.

**TENSION RELEASING EXERCISE**

In this, the adolescents were asked to stand, having the feet one foot apart, close the palms and bring them towards the chest, breathing in slowly; the researcher says, “Tension goes out”; the adolescents breathes out forcefully through the mouth making a loud sound ‘Ha’, simultaneously throwing down the hands sidewise, opening the palms, feeling that the tension might go out of the body. Each of the following suggestion was given as they breathe out (Each suggestion was given 3 times).

“Tension goes out”
“Fear goes out”
“Anger goes out”
“Anxiety goes out”
“Worry goes out”
SMILE THERAPY

According to Hemalatha (2004), a person cannot have negative emotions like fear, anger or worry while smiling; smile also changes the mood of a person to a cheerful one. In Smile Therapy, the adolescents were asked to say ‘Eee’ with a broad smile, breathe in slowly through the mouth with a hizzing sound (without involving the vocal cords). Then they were asked to breathe out gradually through the nose without any sound, closing their mouth smilingly. The adolescents were asked to enjoy the cool breeze entering through the mouth and feel the coolness spreading through the chest to the abdomen. This practice was given 10 times.

LAUGH THERAPY

In Laugh Therapy, the adolescents were asked to stand, bend down the back and the head slightly, breathe in slowly lifting up the head and the back and start laughing loudly without any inhibition. They were encouraged to make gestures, clap hands, look at each other etc. while laughing. They were asked to laugh louder and louder, for a longer duration. This practice was given five times.

BEHAVIOURAL ASSIGNMENTS

To have continuity in the therapy to reduce stress, behaviour and academic problems, the following Behavioural Assignments were given:

- Always have positive thoughts
- Have positive attitude towards self, life and others
- Live in the present, concentrate and enjoy what you do
- Develop interest and motivation to learn and study with full concentration and interest
- Study the day-to-day lessons, revise and recall the lessons regularly
- Have rest and relaxation in between the learning periods
- Avoid postponing the homework assignments
- Reduce the time spent on watching television
- Enjoy the company of your friends and family members
- Share your feelings with friends and family members
- Eat at regular intervals; do not skip any meal
➢ Have regular physical exercise such as, playing outdoor games or jogging
➢ Enjoy listening to music or singing
➢ Always have a smiling face
➢ Practice Deep Breathing for five minutes in the morning, facing east and five minutes in the evening, facing west
➢ Practice Relaxation Therapy in the morning and at night before going to sleep
➢ Have sound sleep for 7-8 hours a day
➢ Pray to God

In addition to the Behavioural Assignments of Positive Therapy, the following memory improvement techniques were given, as the sample were adolescents. They were asked to follow meaningful learning, whole-part-whole learning and distributed learning with rest intervals in between learning periods. They were advised to learn, recall and relearn the materials thrice. They were also taught the Mind Mapping Technique, as it improves memory. It is a diagram used to represent words, ideas, tasks or other items linked to and arranged radially around a central key word or idea.

DURATION OF POSITIVE THERAPY

Positive Therapy was given to all the 500 adolescents in 10 batches of 50 adolescents in each batch. It was given thrice a week, on alternate days, for four weeks. On the whole, 12 sessions were given to all the adolescents. The duration of each session was 50 minutes.

REASSESSMENT

After the administration of Positive Therapy for four weeks, the entire adolescents were reassessed using Case Study Reassessment Schedule, Stress Inventory, Behaviour Problems and Academic Problems Checklists.

ANALYSIS OF DATA

The data was analyzed statistically by using SPSS Package 16, the Mean, Standard Deviation, Kolmogrov-Smirnov Z, Correlation and Analysis of Variance were computed.

- Kolmogrov-Smirnov Z was calculated to find the homogeneity of the adolescents in the demographic variables among the adolescents
- Correlations were computed to find the relationships between Stress, Behaviour Problems and Academic Problems
• Analysis of Variance was calculated to study the effect of Positive Therapy on the level of Stress Before and After Positive Therapy

• Analysis of Variance was calculated to study the effect of Positive Therapy on the level of Behaviour Problems Before and After Positive Therapy

• Analysis of Variance was calculated to study the effect of Positive Therapy on the level of Academic Problems Before and After Positive Therapy