DOI: 10.21088/jggn.2582.1407.7224.2

RFP Journal of Gerontology and Geriatric Nursing
Volume 7 Number 2, July - December 2024

ORIGINAL ARTICLE

Effectiveness of Nurse Led Intervention on Anxiety among Adolescents

S. Suvitha[1], V. Revathy[2], V. Uma[3]

HOW TO CITE THIS ARTICLE:

S. Suvitha, V. Revathy, V. Uma. Effectiveness of Nurse Led Intervention on Anxiety among Adolescents. RFP Journal of Gerontology and Geriatric Nursing. 2024; 7(2): 53–57.

ABSTRACT

Background: Adolescent is a unique and formative time. We can say as flowering time. Physical, emotional and social changes, including exposure to poverty, abuse, or violence, can make adolescents vulnerable to mental health problems.

Aim and objectives: This current study was adopted quasi experimental design-pre-test post-test control group with time series design with the aim of assessing the effectiveness of nurse led interventions on anxiety among adolescents.

Material and methods: The data collection tool consists of two parts which were questionnaire to assess the demographic characteristics and DASS – 42 (Depression Anxiety and Stress Scale with 42 items). The data were collected by interview schedule, after pre test the samples were advised to attend the one hour nurse led intervention session for about one week daily.

Results: During pretest, Majority of samples (80%) in the experimental group have mild and moderate level of anxiety equally. Majority of samples (50%) in the control group have moderate level of anxiety. During Post test, Majority of samples 50%)in the experimental group have normal level of mind state in the control group (40%) have moderate and severe level of anxiety equally

Conclusion: This study results shows that Nurse led intervention like five finger hypnosis which includes, relaxation exercise, teaching adaptive coping skills and building self esteem, are statistically significant in reducing the level of anxiety among the adolescents age group.

KEYWORDS

• Nurse led interventions • Anxiety • Adolescents • Effectiveness

AUTHOR'S AFFILIATION:

[1] Associate Professor, Department of Mental Health Nursing, College of Nursing, Mother Theresa Post Graduate and Research Institute of Health Sciences, Puducherry.

[2] Associate Professor, Department of Child Health Nursing College of Nursing, Mother Theresa Post Graduate and Research Institute of Health Sciences, Puducherry.

[3] Associate Professor, Department of Medical Surgical Nursing College of Nursing, Mother Theresa Post Graduate and Research Institute of Health Sciences, Puducherry.

CORRESPONDING AUTHOR:

S. Suvitha, Associate Professor, Department of Mental Health Nursing, College of Nursing, Mother Theresa Post Graduate and Research Institute of Health Sciences, Puducherry.

E-mail: suvithasundar9@gmail.com

➢ **Received:** 20-05-2024 ➢ **Accepted:** 28-06-2024

INTRODUCTION

Adolescent is a unique and formative time. We can say as flowering time. Physical, emotional and social changes, including exposure to poverty, abuse, or violence, can make adolescents vulnerable to mental health problems. Mental health can affected with multiple factors. Anxiety disorders are the most prevalent in this age group and are more common among older than among younger adolescents. Globally, it is estimated that 1 in 7 (14%) 10-19 year-olds experience mental health conditions (WHO), yet these remain largely unrecognized and untreated 3.6% of 10–14-year-olds and 4.6% of 15-19 year-olds experience an anxiety disorder. Depression is estimated to occur among 1.1% of adolescents aged 10-14 years, and 2.8% of 15-19-year-olds. Depression and anxiety share some of the same symptoms, including rapid and unexpected changes in mood.[1]

A community based cross sectional study was conducted among among adolescents and their family members. This study concluded that in rural area of Puducherry, one out of five adolescents (20.9%) had psychological distress and ten percentages of adolescents had moderate level of hopelessness (10%) requiring mental health and counselling services. Substance abuse was found in 125 (39%) of the family members of adolescents and 55 (44%) had problems at home related to the substance abuse. The need for mental health services was higher in females compared to males (55.6% vs. 44.3%).[2,3]

Anxiety and depressive disorders can profoundly affect school attendance and schoolwork. Social withdrawal can exacerbate isolation and loneliness. Depression can lead to suicide. Anxiety (anxiety) can be overcome in several ways, including pharmacological therapy and non-pharmacological therapy. Non-pharmacological therapy such as Self Hypnosis is a form of guided imaginary therapy, namely relaxation which aims to reduce stress and increase feelings of calm and peace and is a sedative method for difficult situations in life, one form of self hypnosis is five finger hypnosis. Five-finger hypnosis is giving treatment in a relaxed state, then focusing the mind on the images or memories.[4]

A study conducted by Safitri et.al., They found that five Finger Hypnosis Therapy can affect the level of public anxiety during the Covid-19 pandemic. And there were various other studies enlisted the effectiveness of five finger hypnosis therapy on anxiety. This present pilot study aimed to evaluate the effectiveness of five finger hypnosis therapy on anxiety among adolescents.

METHODOLOGY

This current study was adopted quasi experimental design- pre-test post-test control group with time series design. This study setting was conducted by prior permission from thec head of the department. One hundred and fifty five samples were selected by convenience sampling technique. The samples were late adolescents (18-19 yrs) who were fulfilling the inclusion criteria which were, Students in the age of 18 and 19 yrs. Students who were already exposed to short term courses and treatment for alcoholism, Students who were too ill to answer screening questions, students who were scored normal at DASS-42 and Colleges functioning with medical and paramedical courses have been excluded from the study.

The data collection tool consists of two parts which were questionnaire to assess the demographic characteristics and DASS – 42 (Depression Anxiety and Stress Scale with 42 items). The data were collected by interview schedule, after pre test the samples were advised to attend the one hour nurse led intervention session for about one week daily. The session includes relaxation exercises, teaching adoptive coping skills and building self esteem among samples. The post test data was collected after one week completion of intervention.

RESULTS

The results show that, regarding demographic data, majority, 90% of the samples were 18 years old, and remaining 10% of the samples were 19 years old. All the samples (100%) of the samples were male. In account of religion, majority 70% of the samples were Hindus, 20% of the samples were Christians and 10% of the samples were Muslims. Each 40% of the samples were from urban and rural areas and 20% of the samples were from semi urban. Regarding place of stay half of the students (50%) were from their home and another half of the students were staying hostel. Half of the students from nuclear family and another half

from joint family. Majority 90% of the students were belonging to middle class family and 10% of them were belongs to lower economic status. In account of father's educational status majority 80% of them were educated till primary education, in other hand regarding mother's educational status, half of them were not formally educated. In the view of samples past year academic performance majority 60% of them were scored below 50%. Among the samples majority 60% of the samples were said they consume alcohol due to stress than other reasons and maximum of the samples were started drinking alcohol at the age of 15 to 17 years of age.

The *Table 1* and *Figure 1* explains that, out of 150 samples in each control group and experimental group, in pre test majority 50% of samples had moderate level of anxiety in control group and in experimental group each 40% of them had mild and moderate level of anxiety in experimental group.

Table 1: Frequency and percentage wise distribution to evaluate the Nurse led intervention in the level of anxiety among late adolescents in selected colleges at Puducherry

Level of anxiety	Control group		Experimental group	
	Pre-test	Post-test	Pre-test	Post-test
Normal	-	-	-	50
Mild	20	20	40	30
Moderate	50	40	40	20
Severe	30	40	20	-
Extremely severe	-	-	-	-
Total	100	100	100	100

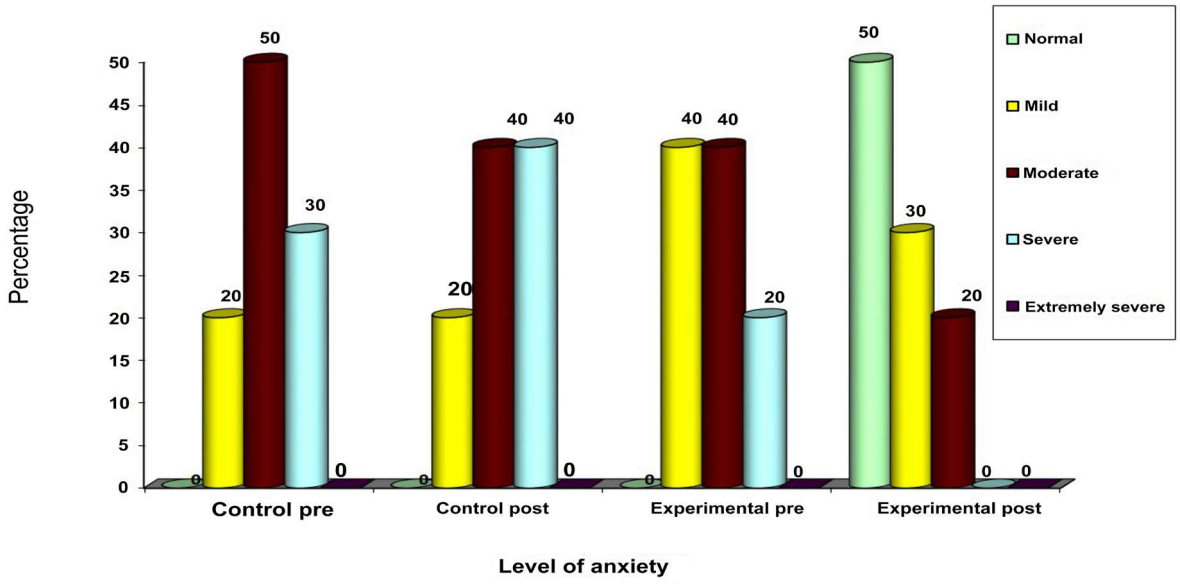

Figure 1: Percentage wise distribution to evaluate the Nurse led intervention in the level of anxiety among late adolescents in selected colleges at Puducherry

Table 2: Paired "t"-test was found to evaluate the Nurse led intervention in the level of anxiety among late adolescents in the experimental group.

Anxiety	Experimental pre-test		Experimental post-test		Mean difference	't'- value	P-value
	Mean	SD	Mean	SD			
Overall	5.9	1.45	3.8	1.48	2.1	6.03	P<0.001***

*-P<0.05, significant and **-P<0.01 & ***-P<0.001, Highly significant

The table 2, shows that, the experimental group mean and standard deviation of pretest was 5.9±1.45 and posttest was 3.8±1.48. The mean difference was 2.1. The paired 't' value is 6.03 which is statistically significant at the p level 0.001.

Table 3: Paired "t"-test was found to evaluate the Nurse led intervention in the level of anxiety among late adolescents in the control group

Anxiety	Control pre-test		Control post-test		Mean difference	't'- value	P-value
	Mean	SD	Mean	SD			
Overall	6.6	1.35	6.7	1.42	0.1	1	0.343

*-P<0.05, significant and **-P<0.01 &***-P<0.001, Highly significant

The table 3, shows that, the control group mean and standard deviation of pretest was 6.6±1.35 and post test was 6.7±1.42. The mean difference was 0.1. The paired 't' value is 1 which is statistically not significant at the p level 0.343.

Table 4: Unpaired "t"-test was found to evaluate the Nurse led intervention in the level of anxiety among late adolescents in the experimental group and control group

Anxiety	Control pre-test		Experimental post-test		Mean difference	't'- value	P-value
	Mean	SD	Mean	SD			
Overall	6.7	1.42	3.8	1.48	2.9	4.48	P<0.001***

Table 4 denotes that, the post test anxiety level of control group and experimental group. The unpaired 't' test value was 4.48, which was highly significant at the p level 0.001.

Table 5: Wilcoxon signed rank test was found to evaluate the Nurse led intervention in the level of anxiety among late adolescents in the experimental group

Anxiety	Experimental pre-test		Experimental post-test		Median difference	'z'- value	P-value
	Median	IOR	Median	IQR			
Overall	6	7-5	3.5	5-3	2.5	2.794	0.005**

*-P<0.05, significant and **-P<0.01 & ***-P<0.001, Highly significant

Table 5 shows that, the mean difference of the pre and post test of the experimental group was 2.5. the calculated wilconxon signed rank test 'z' value was 2.794 which was statically significant at the p level 0.005.

Table 6: wilcoxon signed rank test was found to evaluate the Nurse led intervention in the level of anxiety among late adolescents in the control group

Anxiety	Control pre-test		Control post-test		Median difference	'z'- value	P-value
	Median	IOR	Median	IQR			
Overall	7	8-6	7	8-6	0	1	0.317

*-P<0.05, significant and **-P<0.01 & ***-P<0.001, Highly significant

Table 6 shows that, the mean difference of the pre and post test of the control group was 0. the calculated wilconxon signed rank test 'z' value was 1 which was at the p level 0.317.

The chi square value shows that, the demographic variables were not significant at the p level with pre test level of anxiety.

DISSCUSSION

During pretest, Majority of samples (80%) in the experimental group have mild and moderate level of anxiety equally. Majority of samples (50%) in the control group have moderate level of anxiety. During Post test, Majority of samples 50%)in the experimental group

have normal level of mind state in the control group (40%) have moderate and severe level of anxiety equally. Paired "t"-test to evaluate the Nurse led intervention in the experimental group shows that mean difference of 2.1 with t value 6.03 with p value less than 0.001 is highly significant which clearly exhibits that the nurse led intervention (five finger hypnosis therapy) was effective in reducing anxiety level among adolescents.

Unpaired "t"-test to evaluate the Nurse led intervention in the experimental group and control group shows that mean difference of 2.9 with t value 4.48 with p value less than 0.001 is highly significant. wilcoxon signed rank test to evaluate the Nurse led intervention in the level of anxiety in the experimental group mean difference of 2.5 with t value 2.794 with p value 0.005. These results strengthen the effectiveness of nurse led intervention on anxiety. Association between Pre test level of anxiety has a significant relationship with the variable of reason for consumption of alcohol among the samples in the control group.

CONCLUSION

Anxiety is a normal, but highly subjective, human emotion. While normal anxiety serves a beneficial and adaptive purpose, anxiety can also become the cause of tremendous suffering for millions of people. Added to this is the nurse's readiness for caring the adolescents, as well as the existence of trained nurses to evaluate adolescents and to implement non-pharmacological interventions in reducing the anxiety is essential. This study results shows that Nurse led intervention like five finger hypnosis which includes, relaxation exercise, teaching adaptive coping skills and building self esteem, are statistically significant in reducing the level of anxiety among the adolescents age group. This kind of intervention should begin in the school settings preferably after the decision on the need for the intervention.

REFERENCES

1. Adolescent mental health (who.int)
2. Ramachandran, Niranjjan & Sarkar, Sonali & Balajee, Karthik & Srinivasan, Manikandan. (2018). Psychological distress, hopelessness and health service needs of late adolescents in rural Pondicherry, South India. International Journal of Community Medicine and Public Health. 5. 1109. 10.18203/2394-6040.ijcmph20180769.
3. Arikrishnan K., Krishnamoorthy Y., Sarveswaran G., Majella M.L., D. Swapna, B. & Chinnakali, P. (2021). Prevalence and predictors of positive mental health among adolescents in rural Puducherry, South India. *International Journal of Adolescent Medicine and Health*, *33*(3), 151-156. https://doi.org/10.1515/ijamh-2018-0205
4. Emilinda, S., & Rahmawati, A.F. (2021). The Effect of Five Finger Hypnosis Therapy in Reducing Anxiety in Gravida Mothers: Literature Review. *Open Access Health Scientific Journal*, 2(2), 48–54. https://doi.org/10.55700/oahsj.v2i2.19
5. Azizah, Lilik & Zainuri, Imam & Akbar, Amar. (2023). The Effectivness of Five-Finger Hypnosis Theraphy to Decrease on Family's Anxiety Levels in the Intensive Care Unit. Journal of Scientific Research, Education, and Technology (JSRET). 2. 42-52. 10.58526/jsret.v2i1.38.
6. Safitri, Aisyah & Tresya, Elvie. (2023). Five Finger Hypnosis to Reduce Anxiety Levels during the Covid-19 Pandemic. Journal of Complementary Nursing. 2. 122-126. 10.53801/jcn.v2i1.81.