

A descriptive study to assess the level of anxiety related to exams among students studying in GNM Training institute KCGMC, Karnal.

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ABSTRACT

Examination anxiety is a multidimensional phenomena involving emotional, cognitive, behavioural and physiological responses and exams are a major source of stress for nursing students due to vast curriculum and demanding clinical requirements. This study assessed the level of anxiety related to exams among students studying in GNM Training institute KCGMC Karnal. A quantitative research approach and descriptive research design was used for this study that included a sample of 60 GNM students who were selected using purposive sampling technique at GNM TRAINING INSTITUTE KCGMCH, KARNAL. Data was collected using demographic questionnaire and standardized anxiety scale i.e Westside test anxiety scale. The data was analyzed using both descriptive (frequency, percentage) and inferential statistics (chi square test) and was represented using bar graphs. The findings revealed that the largest group of students were classified in high normal category(26.8%), followed by normal or average anxiety(21.4%) and moderately high anxiety(16.1%). Overall 22 students(39.3%) were at moderately high, high or extremely high levels indicating that a substantial proportion may require closer academic and psychological support before examinations. A significant association was found between selected demographic variables (year of study and examination pressure) and level of anxiety at a p value of 0.00163 and 0.02100 respectively. The study concludes that pre examination anxiety was common with nearly two-fifths falling within high to extremely high WTAS categories. Year of study and Perceived examination pressure emerged as the most robust correlates of anxiety. These results support focused screening and supportive interventions, particularly for first year students and students who reports examination pressure.

Keywords

Assess, level, level of anxiety, exams, students, GNM training institute

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I. Background

Anxiety is a common emotional response involving worry, fear and nervousness, but excessive examination anxiety can negatively affect students concentration, memory, decision making, academic performance and overall well being. NM students are particularly vulnerable because they face academic workload, clinical training, practical examinations, assignments, patient care responsibilities and continuous evaluations. Examination anxiety may produce emotional, cognitive, behavioural and physical symptoms such as restlessness, negative thoughts, procrastination, sleep disturbances, increased heart rate etc. Various personal, academic, environmental and psychological factors such as low confidence, heavy curriculum, financial difficulties, lack of social support and poor coping skills can increase anxiety. Research suggests that appropriate coping strategies such as relaxation, mindfulness, counselling, time management, exercise and social support can help students to manage examination anxiety. Therefore, present study aims to assess level of examination anxiety and its association with selected demographic variables among GNM students at KCGMCH, Karnal and to provide appropriate information regarding coping strategies for reducing anxiety and promoting students psychological wellbeing.

II. Methodology :-

Research approach

in this study quantitative research approach was used to assess the knowledge regarding level of anxiety among students studying in GNM training institute KCGMC, Karnal.

1. Research Design

For the study, a descriptive research design was adopted. This design enables the researcher to describe the existing level of examination anxiety and determine its association with selected socio-demographic variables.

2. Variables Under Study Variable

a). Research Variables The variables in the present study are:

I. Study Variable (Dependent Variable)

The dependent variable is the level of anxiety related to examinations among GNM students. It is measured using the Westside Test Anxiety Scale (WTAS).

b) Independent (Socio-demographic) Variables

The independent variables selected for the present study are:

- Age (in completed years)
- Year of study (1st Year, 2nd Year, 3rd Year)
- Gender (Male/Female)
- Examination pressure (Low/Moderate/High)
- Place of residence (Urban/Rural)
- Study hours per day (Less than 2 hours, 2–4 hours, more than 4 hours)
- Sleep duration (Less than 6 hours, 6–8 hours, more than 8 hours) • Number of siblings (None, One, Two, Three or more)

3. Setting of the Study

The study was conducted at the GNM Training Institute, Kalpana Chawla Government Medical College (KCGMC), Karnal, Haryana. The setting was selected because it was easily accessible to the researcher and contains the target population required for the study.

4. Target Population

The target population for the study consists of all students studying in the GNM Training Institute, KCGMC, Karnal. These students are considered appropriate because they regularly appear in internal and university examinations and are likely to experience examination-related anxiety.

5. Sample Size

The sample size for the study consists of 56 GNM students studying at GNM Training Institute, KCGMC, Karnal, who fulfill the inclusion criteria and voluntarily agree to participate in the study.

6. Sampling Technique

For the study, Purposive Sampling Technique (Non-probability Sampling) was used. In purposive sampling, participants were selected based on the objectives of the study and predefined inclusion criteria.

7. Sampling Criteria

A. Inclusion Criteria

The study included GNM students who were: Available during the period of data collection. Studying in the GNM Training Institute, KCGMC, Karnal.

Willing to participate in the study.

Able to read and understand English or Hindi.

Present on the day of data collection.

Giving written informed consent for participation.

B. Exclusion Criteria

The study excluded GNM students who were: Absent during data collection.

Not willing to participate.

Have discontinued or resigned from the course.
Seriously ill or unable to complete the questionnaire.

8. Development of the Tool

The research instrument consists of three sections:

Section I: Demographic Questionnaire This section includes demographic variables.

Section II: Westside Test Anxiety Scale (WTAS) The Westside Test Anxiety Scale developed by Dr. Richard Driscoll consists of 10 items measured on a five-point Likert scale ranging from 1 (Never) to 5 (Always). The tool measures anxiety related to examinations and identifies different levels of test anxiety

9. Description of the Tool

The research tool consists of three sections.

Section I: Demographic Questionnaire

This section consists of demographic variables that may influence test anxiety among students. These include age, gender, year of study, place of residence, examination pressure, study hours per day, sleep duration, number of siblings, and previous academic performance.

Section II: Westside Test Anxiety Scale

The standardized Westside Test Anxiety Scale consists of 10 statements assessing students' reactions before, during, and after examinations.

Participants respond using a five-point rating scale. The interpretation of scores is as follows:

1.0–1.9 = Comfortably Low-Test Anxiety 2.0–2.5 = Normal or Average Anxiety

2.6–2.9 = High Normal Anxiety 3.0–3.4 = Moderately High Anxiety 3.5–3.9 = High Test Anxiety 4.0–5.0 = Extremely High Anxiety

10. Validity of the Tool

Content validity of the tool was established by obtaining opinions from experts in Psychiatric Nursing, Nursing Research, Medical-Surgical Nursing, Community Health Nursing, and Statistics. Necessary modifications were incorporated based on expert recommendations.

11. Reliability of the Tool

The reliability of the Westside Test Anxiety Scale has already been established by its developer.

12. Ethical Consideration

- Ethical principles were strictly followed throughout the study.
- Written permission was obtained from the Principal, College of Nursing, Pt. Deen Dayal Upadhyaya University of Health Sciences, Kutail, Karnal.
- Permission was also obtained from the Principal of GNM Training Institute, KCGMC, Karnal.
- Approval from the Institutional Ethics Committee was obtained before conducting the study.
- Participants received complete information regarding the purpose and procedure of the study. Written informed consent was obtained from every participant.
- Participation was entirely voluntary.
- Participants had the right to withdraw from the study at any stage without any penalty.
- Confidentiality and anonymity of the participants was maintained.
- No physical, psychological, social, or financial harm was caused to the participants. Collected data was used only for research purposes.

Privacy of the participants was respected throughout the study.

13. Data Collection Procedure

Permission was obtained and eligible GNM students were selected using criteria. After taking consent data was collected using a demographic questionnaire and Westside test anxiety scale. The responses were checked and kept confidential.

14. Plan for Data Analysis and Interpretation

The collected data was coded, tabulated, and analyzed using descriptive and inferential statistics. Descriptive Statistics

- Frequency
- Percentage

These statistics described demographic variables and levels of test anxiety. Inferential Statistics

- Chi-square test to determine the association between demographic variables and level of test anxiety.
- Level of significance was set at $p < 0.05$.

The analyzed data was presented using tables, graphs and bar diagrams for easy interpretation

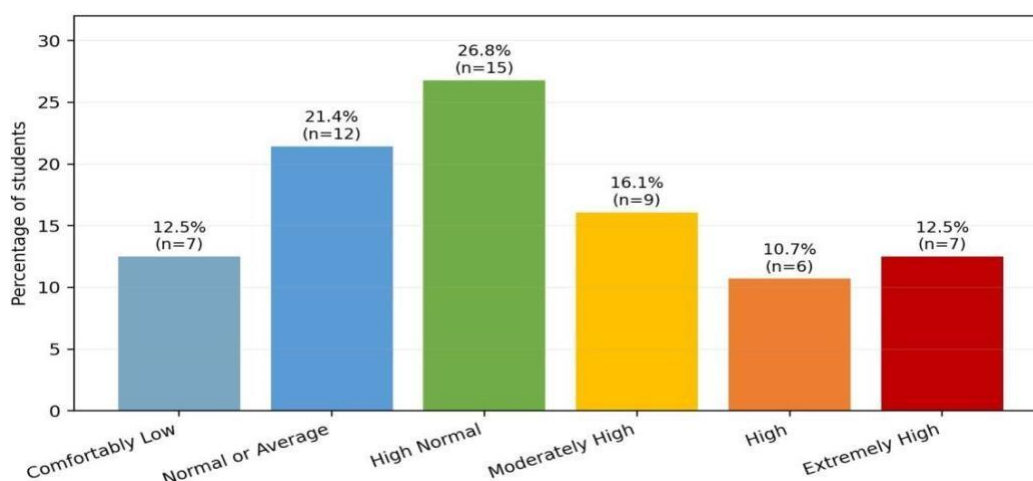
III. Result

The sample was almost evenly distributed across the three years of study. Most students were 19–21 years old (73.2%), female (94.6%), and residing as paying guests (64.3%). Approximately two-thirds slept 5–7 hours daily (67.9%), while 60.7% studied for 2–4 hours per day. Examination pressure was reported by 57.1% of students, and 71.4% participated in extracurricular activities. The marked gender imbalance and several small subgroup sizes should be considered when interpreting inferential results.

Table: frequency and percentage Distribution of selected demographic variables

Variable	Category	Frequency (f)	Percentage (%)
Year of Study	1st Year	19	33.9
	2nd Year	19	33.9
	3rd Year	18	32.1
Age Group	17–18 years	4	7.1
	18–19 years	11	19.6
	19–21 years	41	73.2
Gender	Female	53	94.6
	Male	3	5.4
Residence	Home	19	33.9
	Paying Guest (PG)	36	64.3
	Unclassified	1	1.8
Daily Sleep Duration	<5 hours	6	10.7
	5–7 hours	38	67.9
	7–9 hours	12	21.4
Average Study Hours/Day	<2 hours	13	23.2
	2–4 hours	34	60.7
	5–6 hours	6	10.7
	>6 hours	3	5.4
Examination Pressure	Yes	32	57.1
	No	24	42.9
Extracurricular Activities	Yes	40	71.4
	No	16	28.6

The largest group of students was classified in the high-normal category (26.8%), followed by normal or average anxiety (21.4%) and moderately high anxiety (16.1%). Seven students each (12.5%) were in the comfortably low and extremely high categories, while six (10.7%) had high anxiety. Overall, 22 students (39.3%) were at moderately high, high, or extremely high levels, indicating that a substantial proportion had exam related anxiety.



Year of study ($\chi^2 = 28.279$, $p = 0.00163$), examination pressure ($\chi^2 = 18.926$, $p = 0.00198$), and reason for pressure ($\chi^2 = 20.904$, $p = 0.02100$) showed statistically significant associations with anxiety category. Examination pressure had the largest observed association (Cramer's $V = 0.502$), while year of study ($V = 0.409$) and reason for pressure ($V = 0.315$) showed medium associations.

Variable	χ^2	df	p	Cramer's V	Effect	FDR p	Decision
Year of Study	28.279	10	0.00163	0.409	Medium	.0099	Significant
Examination Pressure	18.926	5	0.00198	0.502	Large	.0099	Significant

Key-points of result:

- The most frequent WTAS category was high normal (26.8%); 39.3% of students were classified from moderately high through extremely high anxiety.
- Year of study remained associated with anxiety after FDR correction; first-year students displayed higher anxiety ranks than second- and third-year students.
- Self-reported examination pressure was consistently associated with higher anxiety in both chi-square and Mann–Whitney analyses and produced the largest chi-square effect size.
- The apparent association with reason for pressure was not retained after FDR correction and should be treated as exploratory.
- No statistically significant evidence was found for age, gender, siblings, residence, study hours, extracurricular activities, or sleep duration at $\alpha = 0.05$.

Implications

Nursing practice:

- Identify student exam anxiety early and offer guidance. o Conduct regular stress management sessions.
- o Teach effective study skills and time management
- Encourage open faculty student communication

Nursing education

- Embed stress and anxiety management into curriculum
- Emphasize active, confidence building learning methods.
- Apply findings to mental health nursing and counselling coursework.

Nursing administration

- Implement routine pre exam anxiety screenings
- Encourage comprehensive student welfare support
- Enforce institutional mental well being policies.

Nursing research

- Serve as baseline data for future anxiety studies.
- Replicate research with larger, multi institution samples.
- Compare anxiety levels across GNM, BSC and allied health programs.

IV. Conclusion

Based on the findings of the study, it can be concluded that examination anxiety is a common problem among students studying in GNM Training Institute, KCGMC, Karnal. A substantial proportion of students experienced moderate to high levels of anxiety before examinations, indicating the need for timely interventions to support their mental health and academic performance.

Therefore, it is essential that nursing educators and administrators implement effective strategies such as stress-management programs, counseling services, time-management training, and regular mentoring to help students cope with examination-related anxiety. Creating a supportive learning environment can enhance students' confidence, improve academic achievement, and promote positive mental health throughout their nursing education.

V. Summary

This descriptive study assessed examination anxiety levels among GNM students at KCGMCH, Karnal. Findings revealed that a majority of students experienced moderate to high levels of anxiety, with a few exhibiting low anxiety. Statistical analysis showed a significant association between anxiety and specific demographic Variables (year of study and perceived examination pressure).

Ultimately, the study highlights that examination anxiety negatively impacts students psychological well being, confidence, and academic success. It also indicate that examination anxiety requires timely attention to improve students academic performance. To address this, authors need for early identification, regular counselling sessions and structured stress management interventions.

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