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A STUDY TO ASSESS THE EFFECTIVENESS OF POSTIVE IMPACT OF GUIDED IMAGERY TECHINIQUES ON STUDENTS PERFORMANCE IN SELECTED COLLEGE, BENGALURU

Medical Surgical Nursing

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ABSTRACT

Background & Objectives: Nursing students often face high stress and anxiety due to academic workload, clinical responsibilities, and frequent evaluations. These factors impair concentration, memory, and psychomotor skills, reducing confidence and competence. Guided imagery, a mind–body relaxation technique, has shown promise in reducing distress and enhancing coping. This study aimed to evaluate its effectiveness in lowering stress and anxiety while improving skill performance among fresher nursing students in Bengaluru. **Methods :** The study was conducted at a selected nursing college in Bengaluru. A quasi-experimental pre-test/post-test design was adopted. 60 nursing students were assessed for baseline stress, anxiety, and skill performance using standardized tools. Guided imagery sessions were delivered as a structured intervention. Post-intervention assessments were conducted, and data were analyzed using paired t-tests, correlation (r-values), and association with demographic variables. **Results:** Pre-test findings revealed moderate to high stress and anxiety with impaired skill performance. Post-test results demonstrated significant reductions in stress and anxiety levels, with mean anxiety scores decreasing from 49.6 ± 14.1 to 30.9 ± 9.6 ($t = 6.001$, $p < 0.05$). A multi-state program further showed reductions from 58.4 ± 6.2 to 43.1 ± 5.8 ($p < 0.001$). Correlation analysis indicated that decreased anxiety was positively associated with improved skill performance (r values ranging from 0.42 to 0.61, $p < 0.05$). Selected demographic variables, including age and clinical exposure, showed significant associations with stress levels. **Interpretation & Conclusion:** Guided imagery was found to be an effective, low-cost, non-pharmacological intervention for reducing stress and anxiety while enhancing skill performance. Its integration into orientation programs and clinical training can strengthen emotional stability, confidence, and academic outcomes. The findings support adopting holistic mental health strategies in nursing education to promote resilience and professional competence.

KEYWORDS

Guided Imagery; Psychological; Relaxation Therapy; Psychomotor Performance

1.INTRODUCTION

Guided imagery is a mind–body relaxation technique that uses mental visualization to create calming sensory experiences. It is widely used in healthcare and education to reduce stress, anxiety, pain, and emotional distress while improving coping skills and performance. The technique activates the relaxation response, regulates autonomic nervous system activity, and enhances emotional well-being. Guided imagery is simple, safe, cost-effective, and can be delivered individually or in groups through live instruction or audio recordings.

I.Stress and Anxiety among Nursing Students.

Nursing students, particularly freshers, experience significant stress due to academic workload, clinical exposure, fear of making mistakes, examinations, and lack of practical experience. Excessive stress and anxiety impair attention, memory, decision-making, psychomotor skills, and self-confidence, leading to poor academic and clinical performance. Global and Indian studies consistently report high prevalence of stress, anxiety, and depression among nursing students, emphasizing the need for effective psychological interventions to improve learning, clinical competence, and emotional well-being.

II.Role and Effectiveness of Guided Imagery.

Guided imagery encourages students to visualize peaceful environments and successful academic or clinical experiences, promoting relaxation and reducing stress hormones. Regular practice improves emotional regulation, resilience, concentration, confidence, and coping abilities while decreasing physical symptoms such as muscle tension, fatigue, and sleep disturbances. Studies from India and other countries have demonstrated significant reductions in stress and anxiety among nursing students following guided imagery interventions, confirming its effectiveness as a non-pharmacological stress-management strategy.

III.Need for the Study

Despite increasing evidence supporting guided imagery, its use among fresher nursing students remains limited. Since psychological distress adversely affects learning, skill performance, and professional development, there is a need to evaluate the effectiveness of guided imagery in reducing mental distress and improving performance. The findings of this study may help nursing educators integrate evidence-based relaxation strategies into orientation and training programs to promote students' mental health and academic success.

OBJECTIVES

- To assess the pre-intervention level of stress, anxiety and skill among nursing students.
- To implement guided imagery as a stress-reduction intervention for nursing students.
- To assess the post intervention level of stress, anxiety and skill among nursing students.
- To assess the effectiveness of guided imagery intervention on level of stress, anxiety and skill by comparing pretest and posttest findings of nursing students.
- To correlate the posttest level of stress, anxiety and skill of nursing students after administration of guided imagery intervention.
- To associate post level of stress anxiety and skill with selected demographic variables of nursing students after administration of guided imagery intervention

HYPOTHESIS

H_1 There is a significant difference in the pre-test and post-test level of stress among nursing students after undergoing Guided Imagery (GI) techniques.

H2 There is a significant difference in the pre-test and post-test level of anxiety among nursing students after undergoing Guided Imagery (GI) techniques.

H3 There is a significant difference between the level of skills in performing IV procedure among selected nursing students and their selected demographic variables.

H4 There is a correlation between the posttest level of anxiety, stress and skills in performing IV procedure among nursing students.

H5 There is association of level of stress, anxiety and skills among nursing students with their demographic variable.

ASSUMPTIONS

The study assumes that,

- Fresher nursing students experience varying level of anxiety and stress due to academic, clinical, and psychosocial stressors
- Guided imagery is a beneficial and acceptable relaxation technique for fresher nursing students
- Regular practice of guided imagery can help reduce stress, anxiety, and emotional discomfort.
- Improvement in mental well-being can positively influence students' academic performance and adjustment to nursing education.

2.Conceptual framework

The conceptual framework of this study is based on Ludwig Von Bertalanffy's General System Theory (1968), which views systems as open structures interacting with their environment through input, throughput, output, and feedback. In this study, input includes nursing students' demographic variables and baseline stress, anxiety, and skill performance. Throughput is the guided imagery intervention, delivered daily for 10–15 minutes over one week to promote relaxation and focus. Output is the post-intervention assessment of stress, anxiety, and performance, compared with pre-test scores. Positive outcomes include reduced stress and anxiety, improved skills, confidence, and concentration, while negative outcomes may involve no improvement or resistance to the intervention. Feedback helps refine the process, with positive feedback reinforcing guided imagery use and negative feedback prompting modifications. Thus, the model illustrates guided imagery as an input-process-output-feedback cycle enhancing nursing students' psychological well-being and clinical competence.

3.METHODOLOGY

This study adopts a quantitative approach using a quasi-experimental one-group pretest–posttest design to assess the effectiveness of guided imagery on nursing students' stress, anxiety, and skill performance. Conducted in a selected nursing college in Bengaluru, the study targets 3rd and 4th year undergraduate students, with a sample size of 60 chosen through simple random sampling (lottery method). The independent variable is guided imagery audio sessions (10–15 minutes daily for one week), while dependent variables are stress, anxiety, and skill levels; extraneous variables include age, gender, religion, and hobbies. Inclusion criteria cover students aged 18–25 years, present during data collection, and willing to participate, while exclusion criteria eliminate those absent, trained in relaxation techniques, severely ill, or unwilling. This methodology ensures valid data collection and unbiased evaluation of guided imagery's impact.

4. MATERIALS AND METHODS

Data were collected using a structured tool that included three sections Prior to data collection, formal permission was obtained from the college authorities and ethical clearance was secured from the Institutional Ethics Committee. The purpose of the study was explained to participants, and written informed consent was obtained. Data collection was conducted in three phases. In the pre−test phase, nursing students were selected using convenience sampling and invited to the skill lab, where baseline levels of stress, anxiety, and skill performance were assessed using standardized tools such as the GAD−7 scale, Nursing Students Stress Scale (NSSS), Objective Anxiety Rating Scale, and IV OSCE checklist. Each student was observed by two researchers under faculty guidance, and the process took 15–20 minutes per participant. Following this, the guided imagery intervention was administered in groups of about 20 students. Sessions lasted 15–20 minutes and involved structured audio recordings with relaxation prompts, deep breathing, and visualization exercises to reduce stress and anxiety while enhancing confidence and skill performance. The intervention was delivered consistently over seven consecutive days in a quiet, supportive environment. In the post−test phase, students were again assessed in the skill lab using the same tools and procedures to evaluate changes in stress, anxiety, and skill performance. Finally, participants completed a feedback questionnaire to share their perceptions of the intervention. This structured approach ensured systematic evaluation of guided imagery as a non−pharmacological intervention to improve emotional stability and clinical competence among fresher nursing students.

Description of the tool:

The obtained data were organised and presented for analysis under the following sections.

- **Section I:** Distribution of Demographic Variables of Nursing Students With Stress, Anxiety.
- **Section II:** Description of Statistical Value of Pretest and post test Level of Stress, Anxiety And Skill Score Among Nursing Students With Anxiety And Stress .
- **Section III:** Comparison of Pretest And Posttest Level of Stress , Anxiety And Skill Score Among Nursing Students With Anxiety And Stress.
- **Section IV:** Correlation of Post Test Level of Stress, Anxiety And Skill Among Nursing Students after Administration of Guided Imagery Intervention.
- **Section V:** Association of Selected Demographic Variables With Posttest Level of Stress , Anxiety And Skill Score Among Nursing Students With Anxiety And Stress.
- **Section VI:** Description of Statistical Value of Feedback Answers of Guided Imagery Intervention.

Procedure Of Data Collection

Formal permission was obtained from college authorities, and ethical clearance was secured from the Institutional Ethics Committee. The study purpose was explained to participants, and written informed consent was collected. Data collection was conducted in three phases using self−administered questionnaires, completed independently to ensure accuracy and reliability.

- **Phase 1: Pre−test Assessment** Baseline data on anxiety, stress, and skill performance were collected through questionnaires to establish pre−intervention status.
- **Phase 2: Intervention (Guided Imagery Technique)** Structured guided imagery sessions were administered as per schedule, focusing on relaxation, anxiety reduction, and performance enhancement. Sessions were conducted under supervision over a specified period.
- **Phase 3: Post−test Assessment** The same questionnaires were administered post−intervention to measure changes in anxiety, stress, and skill performance. Results were compared with pre−test findings to evaluate the effectiveness of guided imagery.

Plan for Data Analysis Data

analysis was done using the following statistical methods.

Descriptive statistics

- Frequency and percentage to analyze the demographic data.
- mean and standard deviation to analyze the Effectiveness of nursing intervention.

Inferential statistics

- Paired “t” test to analyze the effectiveness of guided imagery intervention.
- Correlation coefficient test to assess the relationship between post test level of stress anxiety and skill among nursing students after guided imagery intervention.
- The association of level of score of post test level of stress anxiety and skill among nursing students after guided imagery intervention with their selective demographic variables among nursing students was analyzed by using chi square (x2) test.

Ethical Consideration

Prior to data collection the permission has been obtained from the authorities and oral consent was obtained from the samples. Confidentiality have been maintained.

5.RESULTS

Section I: Distribution of Demographic Variables of Nursing Students With Stress, Anxiety.

most nursing students 52 (86.67%) were aged 21–23 years, with 40 (66.67%) females and 20 (33.33%) males. Half 30 (50%) were Hindu, 19 (31.67%) Christian, 6 (10%) Muslim, and 5 (8.33%) from other religions; all 60 (100%) were unmarried. A majority 38 (63.33%) belonged to nuclear families, 56 (93.33%) pursued B.Sc. Nursing, and 53 (88.33%) resided in hostels. Academic performance showed 44 (73.33%) average, 15 (25%) excellent, and 1 (1.67%) low. For relaxation, 42 (70%) used other methods, 10 (16.67%) gym, and 8 (13.33%) yoga; 26 (43.33%) practiced occasionally, 21 (35%) regularly, and 13 (21.67%) never. Hobbies included music 23 (38.33%), other hobbies 20 (33.33%), movies 10 (16.67%), and studying 7 (11.67%). Most 48 (80%) had IV training, while 12 (20%) did not. Stress reduction habits included other methods 55 (91.67%), alcohol 3 (5%), and chewing gum 2 (3.33%). Sleep duration was 6–8 hours for 43 (71.67%), 2–5 hours for 14 (23.33%), 9–10 hours for 2 (3.33%), and irregular for 1 (1.67%). Family income was 50k–80k for 28 (46.67%), 20k–40k for 25 (41.67%), and above 80k for 7 (11.67%).

Section II: Description of Statistical Value of Pretest and post test Level of Stress , Anxiety And Skill Score Among Nursing Students With Anxiety And Stress .

The pre−test results revealed that anxiety and stress were widespread among nursing students. Subjectively, only 5% reported minimal anxiety, 28.33% mild, 43.33% moderate, and 23.33% severe, with

nearly two−thirds falling in the moderate to severe range. Objectively, half (50%) scored in the moderate anxiety range, 33.3% mild, 10% high, and only 5% minimal, indicating anxiety was common but not extreme. Stress levels showed 60% moderate, 25% severe, and 15% mild, reflecting sustained psychological pressure. Skill evaluation highlighted limited competency, with 66.7% average, 30% needing improvement, and only 3.3% rated good, while none achieved excellent. Post−test findings demonstrated marked improvement: 80% reported minimal anxiety and 20% mild, with none in moderate or severe categories. Objective measures confirmed this, with 96.7% minimal and 3.3% mild, eliminating higher anxiety levels entirely. Stress was reduced to mild (86.7%) and moderate (13.3%), with no severe cases. Skill performance showed remarkable enhancement, with 96.7% achieving excellent scores and only 1.7% each rated good and average, indicating that guided imagery effectively reduced psychological distress and significantly improved clinical competency.

Section III: Comparison of Pretest And Posttest Level of Stress , Anxiety And Skill Score Among Nursing StudentsWith Anxiety And Stress.

N=60

Comparison of pretest and post test scores	Pretest Mean	Pretest SD	Posttest Mean	Posttest SD
Anxiety (Subjective)	12.57	4.94	9.97	2.41
Anxiety (Objective)	4.84	1.56	1.08	0.45
Stress	32.43	9.48	19.68	5.61
Skill	19.68	5.56	47.63	3.19

PAIRED SAMPLES TEST							
Comparison of pretest and post test scores		Paired Differences			t-cal.	df	Sig. (2-tailed) ('P' value)
		Mean Difference	SD	Se(mean)			
Pair 1	Anxiety objective Pre Test And Anxiety Subjective Post Test	9.6	4.13	0.5332	18.005	59	P<0.001
Pair 2	Anxiety ObjectivePre TestAnd Anxiety Objective Post Test	3.7583	1.4743	0.1903	19.745	59	P<0.001
Pair 3	Stress Pre Test And Stress Post Test	24.75	7.804	1.0074	24.565	59	P<0.001
Pair 4	Skill Pre Test And Skill Post Test	-27.95	5.705	0.7366	-37.493	59	P<0.001

The comparison of pre−test and post−test scores clearly demonstrates the effectiveness of the guided imagery intervention. Subjective anxiety reduced from a mean of 12.57 to 9.97, stress declined from 32.43 to 19.68, and objective anxiety dropped from 4.84 to 1.08, while skill performance showed the most dramatic improvement, rising from 19.68 to 47.63. The paired samples test confirmed these changes as highly significant ($p < 0.001$), with the largest improvement seen in skill acquisition, followed by stress reduction, and consistent decreases in both subjective and objective anxiety. Overall, the findings highlight that guided imagery was highly effective in alleviating psychological distress and markedly enhancing clinical competency among nursing students, with improvements being both substantial and consistent across all measured domains.

Section IV: Correlation of Post Test Level of Stress, Anxiety And Skill Among Nursing Students after Administration of Guided Imagery Intervention.

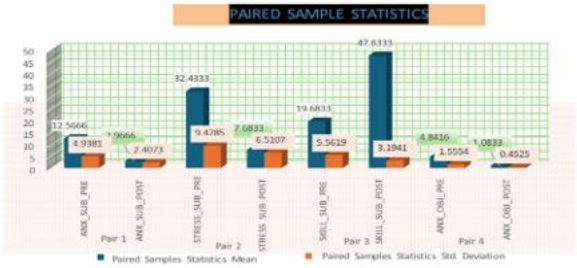
The correlation analysis showed that subjective anxiety was strongly and positively associated with stress ($r = 0.669$, $p < 0.001$), moderately and negatively correlated with skill performance ($r = –0.282$, $p < 0.05$), and moderately correlated with objective anxiety ($r = 0.275$, $p < 0.05$), indicating consistency between self−reported and observed measures. In contrast, correlations between stress and skill, stress and objective anxiety, and skill and objective anxiety were weak and statistically non−significant. Overall, subjective anxiety emerged as the key factor influencing stress and skill outcomes, while objective anxiety and stress had limited impact.

Section VI: Association of Selected Demographic Variables With Posttest Level of Stress , Anxiety And Skill Score Among Nursing Students With Anxiety And Stress.

The association analysis showed that certain lifestyle and academic factors were significantly related to post−test anxiety, stress, and skill outcomes. Marital status ($\chi^2 = 5.4$, $p = 0.0201$) and academic performance ($\chi^2 = 8.4448$, $p = 0.0146$) were significant, while relaxation practices ($\chi^2 = 12.7654$, $p = 0.0016$), exposure to relaxation techniques ($\chi^2 = 20.8742$, $p = 0.0001$), prior IV infusion training ($\chi^2 = 4.6886$, $p = 0.0303$), and sleep hours ($\chi^2 = 8.8956$, $p = 0.0307$) showed strong associations. In contrast, variables such as age, gender, religion, family type, course of study, residence, hobbies, stress−reduction habits, and family income did not demonstrate significant relationships. Overall, the findings suggest that personal lifestyle factors—particularly relaxation practices, sleep, and prior training—play a more critical role in influencing anxiety, stress, and skill performance than demographic characteristics.

Section VII: Description of Statistical Value of Feedback Answers of Guided Imagery Intervention.

shows that guided imagery was well received, with most students agreeing on its benefits. The strongest endorsements were for usefulness in practice (88.3%), appropriate duration (86.7%), reduction of anxiety (83.3%), and overall helpfulness (81.7%). Instructor clarity (80%), emotional well−being (78.3%), and concentration (76.7%) also gained positive responses. Lower agreement was noted for recall of steps (66.7%) and hand coordination (63.3%), suggesting limited impact on technical skills. Disagreement was minimal (1.7%–6.7%), reinforcing overall acceptance of guided imagery as a valuable complementary intervention for reducing anxiety, improving emotional well−being, and boosting confidence, though its effect on psychomotor skills was less pronounced.



Bar Diagram Showing Paired Sample Test of Anxiety, Stress And Skill.

6. Summary –

The study assessed the effectiveness of guided imagery in reducing stress and anxiety and improving IV skill performance among nursing students in Bengaluru. Using a simple random sample of 60 students, data were collected through pre−test, intervention, and post−test phases. The conceptual framework was based on Ludwig Von Bertalanffy's General System Model.

Major Findings

- Demographics: Majority were 21–23 years, female, unmarried, B.Sc. Nursing students, hostel residents, with average academic performance.
- Pre−test: High levels of anxiety and stress were common; most students had average or below−average skill performance.
- Post−test: Significant improvements were observed—subjective anxiety reduced to minimal/mild levels, objective anxiety nearly eliminated, stress reduced to mild/moderate, and 96.7% achieved excellent skill scores.
- Statistical Analysis: Paired t−tests confirmed highly significant differences ($p < 0.001$) across all variables, with the greatest gains in skill performance.
- Correlations: Subjective anxiety strongly correlated with stress ($r = 0.669$) and negatively with skill ($r = –0.282$), while objective anxiety and stress showed limited influence.
- Associations: Significant links were found with marital status, academic performance, relaxation practices, exposure to relaxation, prior IV training, and sleep hours; other demographic factors were non−significant.

Nursing Implications

- Education: Integrate guided imagery into curriculum, encourage practical sessions, and promote non−pharmacological interventions.
- Practice: Apply guided imagery in clinical care as a cost−effective, evidence−based method to reduce stress and improve outcomes.
- Administration: Formulate policies, allocate resources for training, and promote awareness through workshops and conferences.

- Research: Extend studies to varied populations, explore long−term effects, and disseminate findings to strengthen nursing knowledge.

LIMITATIONS

- Conducted in one institution with a small sample size.
- Short duration limited assessment of long−term effects (sustained well−being, skill retention, relapse risk, generalization).

Recommendations

- Replicate with larger samples and true experimental designs.
- Conduct studies in diverse settings and populations.
- Explore long−term effects and cost−effectiveness.
- Combine guided imagery with other relaxation techniques.
- Investigate innovative complementary therapies for stress and anxiety management.

7.CONCLUSION

the study demonstrated that guided imagery is a simple, safe, and highly effective non-pharmacological intervention for nursing students. It significantly reduced subjective and objective anxiety, lowered stress, and dramatically enhanced IV skill performance, with all results showing strong statistical significance ($p < 0.001$). Correlation analysis confirmed that anxiety and stress negatively impacted skill acquisition, while lifestyle factors played a more critical role than demographics. Despite limitations of sample size, single setting, and short duration, the findings establish guided imagery as a cost-effective strategy. Its integration into nursing education and practice can foster holistic development, improve competency, and strengthen evidence-based care.

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