

MANAGING EXAMINATION ANXIETY

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ABSTRACT

Hypnosis was used in a group format with 28 students attending an examination anxiety workshop prior to their 'A' level examinations. The workshop included a discussion of anxiety and stress, study skills, how to challenge negative self-defeating statements, and a 30-minute hypnosis session. The hypnosis was aimed at mental and physical relaxation and changing attitudes about examinations. Feedback immediately after the workshop clearly indicated that all students felt that their attendance was very worthwhile, and that the most highly rated part of the day was the hypnosis element. Follow-up 4 months later indicated that most participants thought that the workshop was helpful in managing anxiety both before and during the examinations.

INTRODUCTION

A number of approaches have been developed to help students manage their 'nerves' in the examination setting, including behavioural, cognitive-behavioural and hypnotic (Stanton, 1994). Davies (1988) and Stanton (1991, 1993, 1994), both describe protocols for managing problems in revision and anxiety during examinations. Davies (1988) notes that while treatment will be similar in both groups, the timing of any intervention will be far earlier with students having difficulties with revision. His guiding principle is that relaxation should become a conditioned response to some physical characteristic of the examination setting, and thus the protocol involves a hypnotic induction followed by imaginal rehearsal using an anchor (e.g., a pen) associated with relaxation.

Stanton (1991) describes 10 suggestions administered within a hypnotic context, derived from combining Hartland's (1965) ego-strengthening with rational-emotive therapy (RET) in the treatment of three university students. Two sessions, spaced one week apart, were used to treat one student with examination revision problems, another student suffering from examination anxiety and a third student with public speaking anxiety. All students responded well to the intervention.

A 'five-step' hypnotic approach is described by Stanton (1993) in his treatment of 11 medical doctors who had failed their fellowship examinations due to anxiety. The approach includes physical and mental relaxation, disposing of mental 'rubbish' or obstacles, removal of a barrier representing negative influences, and enjoyment of a special place, where subjects view themselves as happy, content and tranquil. Subjects were seen individually for two 50-minute sessions of hypnosis. Ten of the 11 participants passed their subsequent examination and nine reported less test anxiety.

In 1994, Stanton compared his 'five-step' approach in a hypnotic context with a control condition in the group treatment of 40 high school students reporting high levels of test anxiety. A significant treatment effect emerged after only two 50-minute

sessions, demonstrating the greater effectiveness of the hypnotic intervention when compared with a discussion group. This difference in test anxiety was maintained at 6-month follow-up.

An interesting by-product of the interventions reported by Stanton in all of the above studies was a positive generalization effect to other aspects of his subjects' lives, in terms of becoming more confident in general. He also reported on the successful use of the 'five-step' method in the treatment of childhood obesity and depression.

Although the above reports focus on the use of hypnosis, the positive results from applying cognitive restructuring to test anxiety (e.g., Crowley, Crowley & Clodfelter, 1986) were impressive enough to convince us to incorporate this approach into our protocol as well. In addition, a brief review of study habits also seemed to be indicated, as students needed to know their academic material, regardless of how effective they managed anxiety. Otherwise, the purpose of our workshop was simply to apply Stanton's (1994) 'five-step' approach with students experiencing examination anxiety. Our intervention was not meant to be a controlled trial, but rather the application of proven psychological interventions to an educational setting.

METHOD

Twenty-eight students from a local Sixth Form College attended the 1.5 hours long workshop. All those attending were self-selected following an announcement in the college press. We met the students as a group 3 months before their 'A' level examinations in one of the college classrooms. After reviewing the workshop agenda, we dealt with any misconceptions about hypnosis, informed the students that they would be expected to complete an evaluation questionnaire, and that they would each be provided with a cassette tape of the hypnosis for daily home practice.

The aims of the workshop were to identify problem areas, to describe what stress and anxiety were, and to decrease examination anxiety. We hoped to do this by inculcating good study habits and positive 'self-talk', challenging negative thinking, and increasing confidence and mental/physical relaxation with hypnosis.

The workshop procedure in more detail was as follows:

1. **Brainstorm:** We started by asking why the students had attended, to ensure we understood what the issues were for them. We discovered that students were worried about failing their examinations, under peer and parental pressure to do well, and some had little motivation to study as a result of teachers telling them not to bother as they would probably fail (in an attempt to motivate the students!).
2. **What is anxiety and stress?:** The experience of stress was normalized and reframed as being helpful in many situations, as long as it did not get out of hand. An inverted 'U' shaped curve illuminated our description of the enhancing nature of stress up to the point where one's 'peak performance' is achieved in either physical or mental tasks. The physiological, cognitive and behavioural aspects of anxiety were then described with a listing of common signs and symptoms of each.
3. **Positive self-talk:** The cognitive model of anxiety was then presented, to explain how thoughts produce feelings, which produce behaviour. Common everyday examples of this were used to demonstrate the power of 'positive self talk'. We had students generate self-defeating cognitions about revision and taking examinations, followed by looking at the evidence for and against these negative automatic thoughts. We encouraged the group to habitually challenge their thinking in this manner.

4. Study skills: The need to study the material for examinations was emphasized, as was the fact that no amount of positive thinking or self-hypnosis could retrieve material that was not there in the first place. We suggested that studying in 45 minute blocks, followed by a 10–15 minute break, was more productive than long periods of study or ‘cramming’ for examinations. The importance of scheduling in some ‘fun time’ too, to take time to relax, listen to music and socialize, was also stressed. While much of this was probably common sense, it seemed to sink in deeper coming from two psychologists!
5. How relaxation and hypnosis can help: We described how hypnotically-induced relaxation could prevent stress getting out of hand and maximize one’s ability to make use of it. The group were told they would be taught how to ‘let go’ of tension and increase their confidence of successful revision and examination performance. As a result, we predicted their memory and concentration would improve, as would their ability to relax. Finally, the students were told that hypnotic suggestions would be given for physical and mental calmness, changing habits, rehearsal of anxiety management when studying and taking examinations, and, enjoyment of a ‘special place’.
6. Questions and answers about hypnosis: We discussed the students’ preconceptions/misconceptions and likened hypnosis to other naturally occurring altered states, such as daydreaming and the feeling experienced on waking up. We predicted that they would feel alterations in sensations but would retain control and could open their eyes at any time if they wished. The hypnotic procedure was briefly described and special attention was paid to explaining the eye-roll induction and the blackboard imagery, to avoid any confusion during the session. Any final questions were answered, followed by a 10-minute break.
7. Hypnosis session: As Stanton (1994) had shown his protocol to be effective in a controlled trial, the hypnosis script we used was basically a modification of his ‘five-step’ approach, in our own language. After an eye-roll induction with a count from one to three, students were asked to notice their breathing and any sensory changes, such as lightness or heaviness. A count from one to ten then followed, with the suggestion that with every number their relaxation and comfort would increase. Various parts of the body were then mentioned, followed by the trigger words, ‘relax now’. When the students heard the word ‘now’, that was their signal to relax that part of their body as much as they could. Next, we suggested that we would talk to the students in a special way, to the unconscious part of their minds, where their habits were stored. We suggested that when in a relaxed state like this, habits could be changed, including those pertaining to thinking about examinations. We then anchored the feelings of comfort by having the students rub their forefinger and thumb together on one hand, followed by the post-hypnotic suggestion that using this anchor would bring back most if not all of the feelings of physical and mental calmness and well-being. In order to remove ‘mental obstacles’ about performing well in examinations, an image of a blackboard was then suggested. Students were asked to imagine writing the reasons why examinations used to bother them on one half of the board, and writing ways of conquering anxiety on the other half. They were then asked to rub out the reasons that had been hindering their performance with a duster, with the suggestion that these ‘mental obstacles’ were also leaving their mind. ‘Future pacing’ was then used to rehearse revising for, and taking, examinations with a sense of mastery over worry and anxiety. A ‘special place’ was then suggested for the students to go to in their imagination, and again to anchor the accompanying positive feelings. Some general

ego-enhancing suggestions were then given, followed by dehypnotizing with a count from five to one.

We then briefly discussed the students' hypnotic experiences, followed by asking them to complete a Client Satisfaction Questionnaire before leaving. They were each given a copy of the hypnotic procedure on tape to take away for daily practice. Four months later, just after their examinations, another questionnaire was posted to the 28 students and 17 were returned (tapes and questionnaires with results are available from the senior author).

RESULTS

Students were generally very positive about the workshop immediately afterwards and the hypnosis element was described as the most helpful part. All 28 students reported that it had come at the right time and 96% were satisfied with the amount of help they received. All students felt at least 'somewhat' more confident about managing examination anxiety and they all also reported feeling more confident in being able to do their best in the examinations. Eighty-two per cent said they would definitely recommend the workshop to their friends, with the other five students reporting that they probably would. Most students were positive when asked about the discussion on anxiety and stress, but were somewhat less positive about our contribution on study skills and the discussion on why they attended. In addition, there were a number of suggestions for improving the workshop, including having a more comfortable room, meeting on more than one occasion and spending more time on challenging negative thoughts.

Four months later, just after the examinations, the students were surveyed once again for their opinion of how helpful the workshop had been in preparing them. Results indicated that the workshop had helped 47% of the respondents in their revision; 59% to feel less anxious prior to the examinations; and 53% to feel less anxious during the examinations. The use of the self-hypnosis tape varied quite considerably, with 53% saying they had listened to it from two to five times a week. Interestingly, 'seeing others with the same anxieties', and the hypnosis session accounted for most of what the students found to have been helpful in the workshop. Fifteen of the 17 respondents claimed to be willing to recommend the workshop to a friend and 53% thought that they were more likely to do their best in future examinations. Like Stanton, we found that a number of students reported positive 'spin-offs' from the workshop to other aspects of their lives, including seven who felt 'more confident, relaxed and positive' and two students who were now able to 'look at examinations as an enjoyable challenge'. One student reported that his mother had found the tape helpful!

DISCUSSION

A brief workshop using hypnosis as one element was successful in helping the majority of 28 students prepare for and take their examinations. As a number of therapeutic methods were used, however, it is impossible to evaluate the individual contribution of each, as ours was not a controlled trial. However, the feedback received immediately afterwards and at 4-month follow-up indicated that hypnosis was seen as a very helpful component. It is our impression that students also found it very reassuring to have seen how many of their colleagues were also worried about examination nerves. This 'normalization' process was combined with an opportunity

for them to discuss their worries with two professionals in a non-threatening situation. In addition, our rationale for using hypnosis had face validity, and all students knew beforehand that it would be an element of the workshop.

Future research could usefully tease apart the relative merits of the independent variables used in this workshop, including hypnosis, challenging automatic negative thoughts, study skills and general discussion. Regarding outcome, self-report measures appear to be the most valid, in combination with actual examination results. Stanton (1993, 1994) used the 'Examination Anxiety Thermometer' and the 'Test Anxiety Scale' while we devised our own 'Client Satisfaction Questionnaires'. Measurement before and after examinations is recommended. Although Stanton used two sessions of treatment, we did not do this for fear that some students would not attend the second session, for a variety of reasons. Although our workshop at 1½ hours long was possibly too brief, the addition of a further session needs to be considered carefully. Instead, we provided a self-hypnosis tape, for daily practice at home. A final testimony of the procedure is that the same college has invited us to repeat the workshop this year with another group of 30 students.

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