

**COMPARATIVE STUDY TO ASSESS THE EFFECTIVENESS OF LAUGHTER THERAPY  
VERSUS MUSIC THERAPY ON STRESS AMONG B.Sc. NURSING 1st YEAR STUDENTS AT  
SELECTED COLLEGE, AMBIKAPUR.**

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**ABSTRACT**

*Excessive stress has negative effects on nursing students, including psychological disorders, physiological diseases and social maladjustments. Laughter therapy and music therapy have been demonstrated to be effective in reducing stress among nursing students. This study aimed to conduct a comparative study to assess the effectiveness of laughter therapy versus music therapy on stress among B.Sc. Nursing 1st year students at the selected Colleges, Ambikapur. A specific true experimental parallel group research design was used. The sample size was 50. Participants were randomly assigned to an experimental group A (n = 25), which received the Laughter Therapy, and the experimental group B (n = 25), which received Music Therapy. Data collection was done using the Perceived Stress Scale. Interventions were given to both groups for 15- 20 min for 15 days daily. laughter therapy was more effective than music therapy in reducing the stress of the B.Sc. Nursing 1st year students. The t test value was 33.14 in experimental group A, whereas in the experimental group B t-test value was 20. Laughter therapy has been significantly more effective in reducing stress levels among B.Sc. Nursing 1st year students compared to music therapy.*

**Keywords:** Stress, Music Therapy, Laughter Therapy, Students' Academic Performance, Anxiety

## INTRODUCTION

Stress is a natural human response that prompts us to address challenges and threats in our lives. Stress is something to be managed rather than eliminated. To manage stress properly it is necessary to understand its antecedents as well as consequences. Stress can have an impact on a student's academic performance which can be both positive and negative effects depending on its severity. Several studies suggested that there are many sources of stress during undergraduate nursing education and training. The most common sources of stress identified by students and faculty that relate to academics includes academic demands, assignments and examinations, high workload, and combining clinical work with academic demands as well as academic responsibilities, financial constraints, social issues and health related problems. Laughter is a human asset, and effectively using laughter to minimize short-term and long-term stresses can significantly improve the quality of life. Listening music could be accomplished with few physical or cognitive demands. Music therapy gives soul to the universe, wings to the mind, flight to the imagination, a charm to sadness, gaiety and life to everything. Interventions that can reduce stress and could have a meaningful impact on students' outcomes, and potentially help address the growing challenges of academic performance. This study aimed to conduct a comparative study to assess the effectiveness of laughter therapy versus music therapy on stress among B.Sc. Nursing 1st year students at the selected College, Ambikapur. Objectives: 1. To assess the level of stress among B.Sc. Nursing 1st year, both the experimental group A and the experimental group B. 2. To assess the effectiveness of laughter therapy on stress among B.Sc. Nursing 1st year experimental group A. 3. To assess the effectiveness of music therapy on stress among B.Sc. Nursing 1st year experimental group B. 4. To compare the effectiveness of laughter therapy versus music therapy on stress among B.Sc. Nursing 1st year, both the experimental group A and the experimental group B. 5. To find out the association between the level of stress among B.Sc. Nursing 1st year of nursing, both the experimental group A and experimental group with their selected socio-demographic variables. Hypothesis: H1: There will be a significant difference between pre- and post-laughter therapy on stress in the experimental group A. H2: There will be a significant difference between pre and post-music therapy on stress in the comparative group B. H3: There will be a significant difference in students' level of stress between laughter therapy and music therapy in both the experimental group A & experimental group B. H4: There will be a significant association between the pre-test score of both the experimental group A & experimental group B with their selected socio-demographic variables.

## METHODS

Quantitative research approach and a specific true experimental Parallel Group Design were used to accomplish the study objectives. A simple random sampling technique was used to allocate samples in both the experimental group A and experimental group B. The sample size was 50 B. Sc. Nursing 1<sup>st</sup> year students. Participants were randomly assigned to an experimental group A (n = 25), which received the Laughter Therapy, and an experimental group B (n = 25), which received Music Therapy at the Government. Nursing College and We Care Nursing College Ambikapur, C.G., the tool for data collection consists of two sections: Section A- Socio-demographic data, Section B- Perceived Stress Scale. Individual scores on the PSS can range from 0 to 40, with higher scores indicating higher perceived stress. Pre-test was conducted with proper written consent and permission from the nursing institution under those who are supervised and under their guidance and support. Administer Laughter therapy to the experimental group and music therapy to the comparative group on alternate days, each therapy for 15- 20 minutes for 15 days. After the completion of the intervention, a post-test was conducted to compare the level of stress. Data gathered were analysed by using inferential (T-test and chi-square) and descriptive (Mean, Median, standard deviation, frequency and percentage) statistics.

## RESULT

Table 1 shows the frequency and percentage distribution of the B.Sc. Nursing 1<sup>st</sup> year students. (N=50)

S.N	Demographic Variables	Laughter Therapy		Music Therapy	
		Frequency	Percentage %	Frequency	Percentage %
<b>1.</b>	<b>Age</b>				
	17	01	4%	01	4%
	18	01	4%	02	8%
	19	08	32%	16	64%
	>19	15	60%	06	24%
<b>2.</b>	<b>Gender</b>				
	Male	0	0%	02	8%
	Female	25	100%	23	92%
<b>3.</b>	<b>Religion</b>				
	Hindu	17	68%	21	84%
	Muslim	06	24%	01	4%
	Christian	02	8%	03	12%
	Other	00	0%	00	0%
<b>4.</b>	<b>Marital Status</b>				
	Married	0	0%	0	0%
	Unmarried	25	100%	25	100%

<b>5.</b>	<b>Type Of Family</b>				
	Nuclear	16	64%	19	76%
	Joint	08	32%	06	24%
	Extended	01	04%	0	0%
<b>6.</b>	<b>Birth Order</b>				
	1 <sup>st</sup>	10	40%	3	12%
	2 <sup>nd</sup>	05	20%	3	12%
	3 <sup>rd</sup>	07	28%	13	52%
	>3 <sup>rd</sup>	03	12%	6	24%
<b>7.</b>	<b>No. Of Siblings</b>				
	One	3	12%	3	12%
	Two	3	12%	5	20%
	Three	13	52%	6	24%
	>Three	6	24%	11	44%
<b>8.</b>	<b>Place Of Accommodation</b>				
	Hostel	25	100%	12	48%
	Home/ Day scholar	0	0%	13	52%
<b>9.</b>	<b>Area Of Residence</b>				
	Urban	13	52%	10	40%
	Rural	12	48%	15	60%
<b>10.</b>	<b>Monthly Income</b>				
	5000-10000	6	24%	12	48%
	10000-20000	4	16%	4	16%
	20000-30000	9	36%	3	12%
	>30000	6	24%	6	24%

**Table 2 shows findings related to the comparison of pre-test and post- test stress in the experimental group A and B**

(N=50)

LEVEL OF STRESS	MEAN	MEAN DIFF.	SD	T- TEST VALUE	P- VALUE	DF	SE	t-Table value
<b>EXPERIMENTAL GROUP A</b>								
PRE TEST	21.8	4.64	5.76	33.14	<0.05	24	1.096	2.064
POST TEST	17.16		5.06				0.99	
<b>EXPERIMENTAL GROUP B</b>								
PRE TEST	19.32	05	5.56	20	<0.05	24	1.112	2.064
POST TEST	14.32		4.31				0.862	

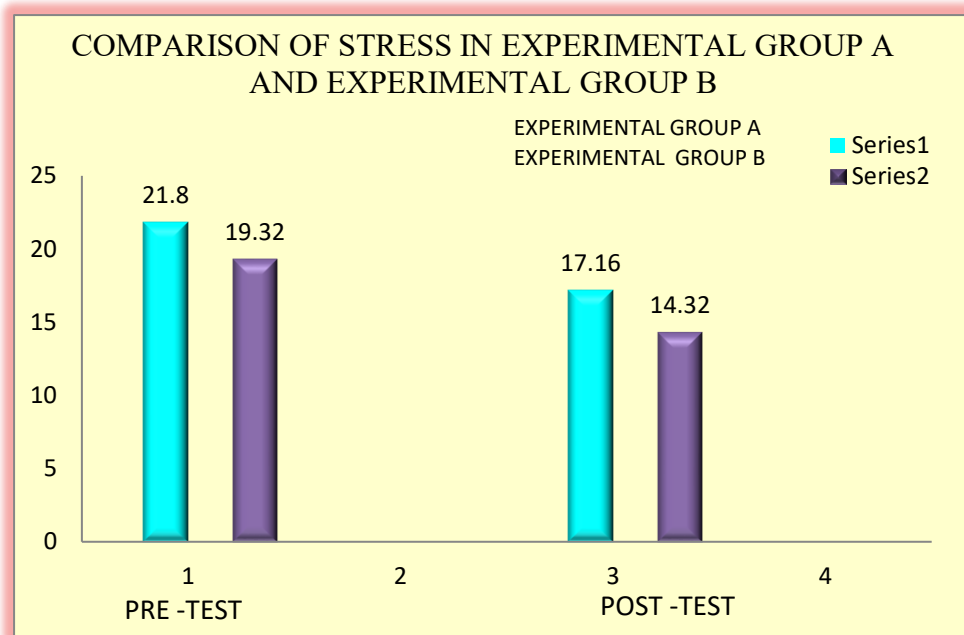


Fig 1 shows a comparison of the pre-test and post-test levels of stress in the experimental group A and the experimental group B. In the experimental group A mean score of the pre-test level of stress was found to be 21.8 (SD= 5.76); the mean score of the post-test level of stress was found to be 17.16 (SD= 5.06). In the experimental group B, the mean pre-test stress score was 19.32 (SD = 5.56); the mean post-test stress score was 14.32 (SD = 4.31).

**Discussion:** Comparison of pre-test and post-test level of stress of experimental group A and experimental group B shows that experimental group A, mean score of pre-test was found to be 21.8 (87.2%) and standard deviation was found to be 5.76 and the mean score of post –test was found to be 17.16 (68.64%) and standard deviation was found to be 5.06, in experimental group B mean score of pre-test was found to be 19.32 (77.28%) and the standard deviation was found to be 5.7, mean score of post-test was found to be 14.32 (57.28%) and the standard deviation was found to be 4.65. Hence, it was included that Laughter is more effective in stress compare to music therapy. The findings of this study are to some extent similar with the study done previously. The findings of this study also have several implications on nursing practice, nursing administration and nursing education that can be used in the following areas of profession. **Nursing Practice:** Incorporating laughter therapy and music therapy into nursing practice can help nurses manage stress, reduce anxiety, and promote relaxation, thereby improving mental health and prevent mental illness. Effectively relax muscle, reduces the anxiety and stress level of nursing students. **Nursing Education:** Stress reduction, enhance learning and retention, improve clinical performance, enhanced critical thinking. **Nursing Administration:** Stress reduction, enhance decision making, Improved focus and concentration, Promotion of well-being, Support for continuous learning.

## CONCLUSION

Laughter and music therapy can be effective non-pharmacological, non-invasive therapy to reduce the level of stress among B.Sc. Nursing 1<sup>st</sup> year students. This study shows that laughter therapy has a significantly greater effect in reducing stress levels among B.Sc. Nursing 1<sup>st</sup> year students compared to music therapy.

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