

# EFFECTIVENESS OF RELAXATION RESPONSE TECHNIQUE ON AGGRESSION AMONG ADOLESCENTS



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## Abstract

Aggressions can be a problem for adolescent with both normal development and those with psychosocial disturbances. Thus, a study was undertaken to assess the effectiveness of selected relaxation response techniques on aggressive behavior among the adolescents at selected schools of Indore. One group pretest posttest research design was adopted. The sample consisted of 10 aggressive students aged 13-18 years studying at Choithram School, Indore selected by using non-probability purposive sampling. The investigator used standardized scale i.e., "Tough-mindedness and Tender-mindedness" of 30 items to assess the effectiveness of Relaxation Response Technique (RRT) on aggression. Sphygmomanometer was used in the study to measure the blood pressure of adolescents before and after the therapy. The reliability of the sphygmomanometer was obtained by Inter rater method which was  $r=0.87$ . Findings of the study revealed that 6(60%) had moderate level of aggression, 4(40%) had severe level of aggression and there was no association between level of aggression and selected socio demographic variables. The value for pre-test and post-test aggression score were  $'z'= 2.831$ , that was significant at  $p \leq 0.01$  confidence level revealing the effectiveness of RRT in reducing the aggression.

**Key words:** Relaxation Response Technique (RRT), Aggression, Effectiveness, Adolescent.

## Background

Adolescents are often referred to as at-risk group. This group experiences behavior problems at school, home and in the community. Adolescents need to receive appropriate direction, nurturing, encouragement and guidance from significant adults for their successful transition into adult life. If adolescents do not receive proper direction, nurturing, encouragement from their families, schools, communities or social systems, the result is that they become impulsive; lack planning, decision-making, problem-solving, and negotiating skills; and also fail to acquire the ability to appropriately control and deal with their anger. These deficiencies among the adolescents often lead to their involvement in delinquent activities, verbal and physical aggression, and in the acceptance of an antisocial value system" **Goldstein & Glick, 2000**<sup>4</sup> Violence is known to be common among adolescents growing up in urban environments and many emergency departments treat adolescent victims of violence every day," **Douglas J. Wiebe 2010**<sup>10</sup>.

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## Need of the Study

In a nationwide survey, 17% of students reported carrying a weapon (e.g., gun, knife, or club) on one or more days in the 30 days preceding the survey. Also 33% reported being in a physical fight one or more times in the 12 months preceding the survey. Similarly 9% of students reported being hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in the 12 months prior to being surveyed **Grunbaum et al. 2004**<sup>5</sup>.

**In 2008 the U.S. National Survey**<sup>8</sup> on Drug Use and Health found that 18.6% (2.3 million) of females aged 12-17 years got into a serious fight at school or work, 14.1% (1.7 million) participated in a group-against-group fight, and 5.7% (700,000) attacked another with intent to seriously harm. These statistics have increased research interest on this issue and on how best to prevent and intervene on adolescents' use of aggression and violence. Research has also showed that fighting and bullying are common among young people and that drunkenness was one of the situational factors found to precipitate violence. **WHO 2002**<sup>11</sup>

The Investigator, during her clinical posting found that the majority of children who were admitted with different diseases in the pediatric ward were showing common behavior mainly anger and most of the time it lead to