

# "A STUDY TO ASSESS THE EFFECTIVENESS OF VATMON LAUGHTER TECHNIQUES TO REDUCE THELEVEL OF STRESS AMONG SENIOR CITIZENSIN SELECTED OLD AGE HOMES, KANPUR, U.P."

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#### **ABSTRACT**

Utilizing laughter techniques as a method of self-care holds promise as an economical approach to alleviate stress and combat unfavourable emotions among senior citizens residing old age home. Laughing is highly effective method for decreasing stress levels and dealingwith a demanding lifestyle. On the other hand, the incidence of psychiatric disorders in senior citizens, who are residents of old age homes, is approximately 80%. Among the psychological health issues occurring among the old age population, stress has the highest prevalence rate (17%). Laughing is highly effective method for decreasing stress levels and dealing with a lifestyle. It is beneficial for both physical and mental health. AIM OF STUDY: "A study to assess the effectiveness of VATM on laughter techniques to reduce the level of stress among senior citizens in selected old age homes, Kanpur, U.P." METHODS: This is a Quantitative Evaluative Research Approach with a Quasi-Experimental One- Group Pre-test and Post-test research design. SAMPLING TECHNIQUE: The sample were selected by using Purposive sampling technique. SAMPLE SIZE: The sample size was 60 senior citizens at selected old age homes, Kanpur, U.P. DATA COLLECTION TOOL: The data collection was performed by using a Standardized Perceived Stress Rating Scale and analysed by using descriptive and inferential statistics. RESULT: The result of the study represented that out of 60 sample senior citizens showed that pre-test mean level of stress was 36.15 with SD 0.96 and post-test mean level of stress was 22.86 with SD 1.62. paired 't' test value was 7.65 significant at, p>0.05. The test revealed that there was statistically significant association of the pretest level of stress of subjects with their selected demographic variables such as Age, Education, Gender, Marital status, Source of income, Health, History of smoking, Type of family, Pattern of communication, practiced any relaxation technique. CONCLUSION: Majority of senior citizens had high level of stress. Because of that new research that has been conducted among senior citizens had been implemented through VATM will improve about the level of stress among senior citizens in mere future.

# INTRODUCTION

Stress is a feeling of emotional or physical tension. It can come from any event or thought that frustrates you, angers you, or makes you nervous. Stress is your body's response to a challenge or demand. In short, stress can be positive, for example, when it helps you avoid danger or meet a deadline. But when it lasts for a long time, it can damage your health. Stress is a natural emotional disorder caused by cognitive dysfunction characterized by low mood and sadness. Laughter is a way to help cope with problems such as stress, anger, and boredom.<sup>1</sup>

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Laughter is part of human behaviour regulated by the brain, helping peoples clarify theirintentions in social interactions an providing an emotional context for conversations. Laughter is used as a signal of group membership? It signals acceptance and positive interactions with others. Laughter is sometimes considered contagious, and the laughter of one person can cause laughter in others as a positive response. <sup>2</sup>

Laughter techniques consist of different exercises at each stage of laughter sessions. The library of simulated laughter exercises is practically endless. Simulated laughter techniques can be easily and cost-effective implemented for therapeutic use in mental health. Simulated therapeutic laughter is entirely feasible and appears to be the most realistic, consistent and widespread laughter intervention for use in clinical practice and future laughter research. Once it has been judged that a laughter intervention may be indicated may be indicated for an individual or group, its effective use for preventive or therapeutic purposes must be learned and practiced like any other therapeutic strategy. <sup>3</sup>

#### **NEED FOR STUDY**

Laughter has many beneficial biochemical effects. It has been shown to lead to reductions in stress hormones such as cortisol and epinephrine. When you laugh, the brain releases endorphins that can relieve some physical pain. Laughter also increases the number of cells that produce antibodies and improves the effectiveness of T lymphocytes, which strengthen immune system. A 2000 study found that people with heart disease were 40 percent less likely to laugh and recognize humour in different situations, compared to people of the same age without heart disease. The common causes of laughter are feelings of joy and humour; however, other situations can also cause laughter. A general theory that explains laughter is called facilitation theory. Sigmund Freud summarized in his theory that laughter releases tension and "psychic energy". This theory is one of the reasons for the belief that laughter is beneficial for health. This theory explains why laughter can be a coping mechanism when a person is upset, angry or sad.4 Laughter techniques are based on the knowledge that the body cannot distinguish between spontaneous laughter. Therefore, their respective health benefits are believed to be the same as long as the laughter techniques are experienced with a minimum of enthusiasm. In both cases, health-related results are considered to be produced. 5

# **PROBLEM STATEMENT:**

"A study to assess the effectiveness of VATM on laughter techniques to reduce the level of stress among senior citizens in selected old age homes, Kanpur, U.P."

# **OBJECTIVES OF THE STUDY:**

- 1- To assess the level of stress among senior citizens in selected old age homes, Kanpur, U.P.
- 2- To evaluate the effectiveness of VATM on laughter techniques to reduce the level of stress among senior citizens in selected old age homes, Kanpur, U.P.
- 3- To determine the association between pre-test level of stress among senior citizens with their selected sociodemographic variables.

# **HYPOTHESIS:**

Hypothesis was tested at 0.05 level of significance.

- H01 There is no significant difference between pre-test and post-test level of stress among senior citizens in selected old age homes.
- H02- There will be no significant association between pre-test level of stress among senior citizens with their selected socio-demographic variables.
- H1- There is a significant difference between pre-test and post-test level of stress among senior citizens in selected old age homes.
- H2- There will be a significant association between pre-test level of stress among senior citizens with their selected socio-demographic variables.

# **METHODS AND MATERIALS:**

#### **RESEARCH APPROACH-**

The Research approach used for the present study was Quasi-experimental evaluative research approach.

## **RESEARCH DESIGN-**

The research design used in this study was Quasiexperimental, One group pre-test post-test research design without control group.

# VARIABLES-

**Independent Variable:** In this present study VATM on laughter techniques to reduce level of stress is independent variable.

**Dependent Variable:** In this present study the level of stress among senior citizens is dependent variable.

Socio-demographic Variables: In this present study demographic variables wereAge, Gender, Marital status, Education, Source of income, Health, History of smoking, Type of family, Pattern of communication, Performing any relaxed techniques.

#### POPULATION-

Population for the present study consisted of senior citizens.

# TARGET POPULATION-

The target population of present studyconsisted of age of 60 to <80 age population.

## **ACCESSIBLE POPULATION-**

Accessible population of present studyconsisted of 60 senior citizens in SwarajVridha Ashram, Panki, and VankhandeshwarBithoor Road, Mandhana, Kanpur, U.P.

#### SAMPLE-

In this study, the samples were senior citizens (60 to <80 Age).

#### SAMPLE SIZE-

The sample size of this study were 60 senior citizens.

#### **SAMPLING TECHNIQUE-**

In this study, **Purposive Sampling Technique** was used to select the sample.

#### **INCLUSION CRITERIA**

• Senior citizens who are willing to participate in the study.

#### **EXCLUSION CRITERIA-**

- Not present at the time of data collection.
- · Who is not having stress

# METHODS OF DATA COLLECTION:

Standardized Perceived Stress Rating Scale was prepared with respect to assess the effectiveness of VATM on laughter techniques to reduce the level of stress among senior citizens in selected old age homes.

### **DEVELOPMENT AND DESCRIPTION OF TOOLS-**

On the basis of develop framework to achieve the objective of the study, Standardized Perceived Stress Rating Scale was prepared with respect to assess the effectiveness of VATM on laughter techniques to reduce the level of stress among senior citizens in selected old age homes.

#### The tool consists of 2 sections:

#### Section B:

Distribution of pre-test and post-test level of knowledge regarding Text Neck Syndrome.

Distribution of senior citizens according to the pre-test and post-test level of knowledge onlevel of stress

# n=60

| S. No. | Level of knowledge           | Pre-test |        | Post-test |        |
|--------|------------------------------|----------|--------|-----------|--------|
|        |                              | F        | %      | F         | %      |
| 1.     | High level knowledge (27-40) | 56       | 93.33% | 03        | 05.00% |
| 2.     | Moderate knowledge (14-26)   | 04       | 6.67%  | 57        | 95.00% |
| 3.     | Low level knowledge (0-13)   | 00       | 00.00% | 00        | 00.00% |
|        | Total                        | 60       | 100%   | 60        | 100%   |

# Section C:

Evaluate the Effectiveness of VATM on laughter techniques to reduce the level of stress among senior citizensin selected old age homes, Kanpur, UP.

# Mean, mean-difference, standard deviation, paired "t" of Stress rating scale n=60

| S. No. | Level of knowledge | Mean  | Mean<br>difference | S.D. | 't' value | Table value                            |
|--------|--------------------|-------|--------------------|------|-----------|--|
| 1.     | Pre-test           | 36.15 |                    | 0.96 |           | 1.671at the 0.05 level of significance |
|        |                    |       | 13.29              |      | 7.65      |  |
| 2.     | Post-test          | 22.86 |                    | 1.62 |           |  |

#### Section D:

Association between the levels of pre-test level of stress with their selected demographic variables of senior citizens

The association between pre-test knowledge score with their selected demographic variables like, Gender, Marital status, Education, Source of income, Health, History of smoking, Type of family, Pattern of communication, Performing any relaxed techniques. Here calculated value of chi square was more than table at 0.05 level of significance, so there were significant association with other selected demographics variables.

Hence, in the formulated research hypothesis positive hypothesis H2 was accepted and Null hypothesis H02 was rejected.

# **CONCLUSION:**

On the basis of findings of the study, it wasconcluded that VATM was effective in improving the level of stress among senior citizens. It wasthe most important means of creating awareness and maintaining their health standards.

#### **SECTION B:** Perceived Stress Scale

#### **RESULT AND FINDINGS:**

#### Section A:

Frequency and percentage wise distribution of demographic variables.

The major findings of the study were as follows:-

- 1. Majority of senior citizens 22(36.66%) were between 70-75 years.
- Majority of senior citizens 37(61.66%) were females.
- Majority of senior citizens 30(50%) were widow.
- 4. Majority of senior citizens 40(66.66%) were educated from primary school.
- 5. Majority of senior citizens 38(63.33%)were dependent on self.
- 6. Majority of senior citizens 13(21.67%) were having good health.
- Majority of senior citizens 32(53.33%) were non smokers.
- Majority of senior citizens35(58.33%) were having nuclear family.
- Majority of senior citizens34(56.67%) were non satisfied with their pattern of communication.
- 10. Majority of senior citizens 50(83.33%) were not performing relaxation techniques.

# **REFERENCES:**

- 1- "Biology of stress". CESH /CSHS. Retrieved 27 September 2022.
- 2- Durkheim, Emile (1979) [1951], "Imitation". Suicide: A Study in Sociology [Etude de Sociologie].
- 3- Martin RA, Kuiper NA (1999) Daily occurrence of laughter: Relationships with age, gender, and Type A personality. Humor: International Journal of Human Research 12(4): 355-384
- 4- Bennett, Mary P:, Zeller, Janice M:, Rosenberg, Lisa; McCann, Judith (2003-04-01). "The effect of mirthful laughter on stress and natural killer cell activity". Alternative Therapies in health and Medicine. 9(2): 38-45.
- 5-Mora-Ripoll, R. (2010). "The Therapeutic Value of Laughter in medicine. "The Health Benefits of Humor, Help guide. Org, February 2014. Web accessed 1 March 2014.