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THE EFFECT OF ANXIETY TRAINING PROGRAMS ON STUDENT ANXIETY LEVELS

Abstract

This research is an experimental study on the level of anxiety of the Health Profession High School students preparing for the university exam and the factors causing this concern. The main purpose of this research is to show the exam performance, psychological adjustment processes, their view of life, factors which play a role in the formation of anxiety for the students who are studying at the Health Profession High School and preparing for university entrance exams. It is also aimed at developing a solution to the problem of how poor performances that cause high anxiety can be remedied and to monitor the situation after 80 minutes a week of training for four weeks and a total of 320 minutes of stress training. In line with this aim; the answers to the questions “What is the prevalence level of test anxiety in Health Profession High School students who are preparing for university exam?” and “The high exam anxiety observed in Health Profession High School students who are preparing for the university exam; according to the anxieties of the students about preparing for exams, according to the bodily reactions they give while preparing for the exams, at what level is it differentiating mentally according to the situations of preparing for the exams?” were searched. Using SPSS program, analysis was made with normality and T test and interpreted.

Keywords: Psychology, Test Anxiety, Solution Recommendations, Coping with Stress.

INTRODUCTION

Anxiety and the Concept of Anxiety

The root of the word “anxiety” comes from the Greek word “anxietas” and it is a concept that means worrying, fear, curiosity. (Köknel, 1988: 138).

According to Başarır (1990), anxiety is often a curiosity, worry and concern about an object, a person or an event. It is the most frequently observed emotional state of human behavior in daily life. Anxiety in everyday life sometimes encourages creativity and constructive behaviors by stimulating people. In addition, anxiety sometimes prevents creative and constructive behavior. It creates unrest. In general, terms, anxiety, which is defined as a feeling of living in the environment of the individual and in response to psychological events, is considered universal and ordinary in certain circumstances. The non-pleasant characteristics of anxiety made it perceived as negative and anxiety got categorized with mostly abnormal behaviors, instead of normal behaviors. Anxiety has an important place in both normal and pathological human behavior. For this reason, anxiety has become one of the most widely studied concepts in psychology (Başarır, 1990:1).

Just as it is in the definition of other feelings, it is difficult to define anxiety too. Anxiety can include one or more of sadness, distress, fear, sense of failure, despair, lack of knowledge of the results, and sense of being judged (Cüceloğlu, 2000: 276).

According to Öner and Le Compte, Anxiety, which is an experience that everyone can feel in certain periods, is studied in two ways as "State Anxiety" and "Constant Anxiety". State Anxiety occurs before or during events or situations classified as hazardous, it is an anxiety type mostly based on logical reasons that can be understood by others, and is usually related to the temporary situation in which each individual experience. Some people also have general and persistent anxieties that do not depend on a specific event or situation. This is called Constant Anxiety. Not being satisfied with what you are, being in a state of general dissatisfaction, restlessness, as if something bad may happen at any moment, being easily offended and turning pessimistic are characteristics of individuals with a high level of Constant Anxiety. Anxieties that are incompatible with the situation in which the individual is involved, are not dependent on the surrounding danger, and are not clearly understood by others are Constant Anxieties (Öner and Le Compte 1985).

Also, it should be mentioned that there are two types of effects of anxiety on disoriented behaviors and learning. There are motivating and incapacitating effects. Anxiety is the driving force in winning new behaviors, efficiency and success. Individuals with higher levels of anxiety are more easily conditioned by simple behaviors than those with lower levels of anxiety. (Taylor, 1953, Source; Kısa, 1996: p. 16).

We need to know two factors in order to understand that if anxiety is beneficial or harmful: (1) The level of anxiety and (2) The level of difficulty of the task we aim to succeed at. The severity of the anxiety and the difficulty of the task we want to achieve determines if the anxiety is beneficial or harmful. It has been observed that when a task involving highly complex cognitive processes such as analyzing and understanding a difficult physics problem, the anxiety is harmful. On the other hand, moderate anxiety has been observed to be useful in situations where simple tasks such as selecting specific objects to predetermined groups. (Cüceloğlu, 2000:278).

Briefly, for a lot of definitions, anxiety is a certain troubled situation with a known source, arising out of a conflict between conditions, a conflict between what we want to express and what we do not, and a conflict between a group of values.

Exam Anxiety

Exam anxiety can be defined as a set of behaviors that affect success in school and exams, including inadequate course work, excessive physiological responses, and non-test related thinking. A student who is anxious about the exam may show mental symptoms related to exam stress, such as physiological symptoms like nausea, headache, increase in heart rate, concentration disorder, not thinking about anything and desire to escape (Kutlu and Bozkurt, 2003: 209-210).

Exam anxiety has two aspects. These two different aspects are hypochondria and effectiveness. Hypochondria is about the individual's mental expressions about their performance during the test and usually involves thoughts or internal speeches (Öner,1990: 1). Examination anxiety, negative thoughts and feelings prevent the student from focusing on the subject, and the minds of the students are under influence at the moment of stress. Negative feelings lead to self-doubt, insecurity and anxiety, while at the same time preventing them from taking care of the exam and making them unable to work. If the mind is busy with other things, the mind is exhausted and this leads to poor performance or failure at the exam (Kutlu and Bozkurt, 2003: 210-211). Affectiveness is the stimulation of the autonomic nervous system and forms the sensory physiological direction of the test anxiety. Symptoms of affectiveness are rapid heartbeat of the individual, sweating, chill, reddening, yellowing and physical experiences such as nervousness and tension (Öner, 1990: 1).

The stimuli generalization made by the individual, often unconsciously, is also one of the factors that create anxiety. Stimuli generalization may occur without the awareness of the individual. Person can get caught in thinking any stimulant they experienced during a previous failure if occurred again may cause another failure (Kutlu and Bozkurt, 2003: 212).

The uncontrolled feelings caused by the anxiety cooperate with the negative situations. An anxious student can't study or studies very hard, but they can't remember their studies at the exam, they do wrong. The thought of these negative thoughts will repeat embeds at the mind of the student and leads to the feeling of test anxiety (Maviş and Saygın, 2004:143).

According to Dökmen (2013), there is anxiety of embarrassment for a significant part of the university students preparing for the exams, against their families and to their kith and kin. With this concern, young people are turning into the mood of "studying for others" rather than "for themselves". It may be considered natural that the student to study so their mother and father won't feel sad, but is it natural for that student to worry like "What would neighbours say if I fail?" When a young person in a city or town in Anatolia goes to a university in another city, they feel the support and pressure of their town behind them. This support motivates youngster to study; but pressure increases the anxiety. (Dökmen, 2013: p.23).

In this study, it was discovered that the students who are studying at Health Profession High School have high level of exam anxiety.

Pathological behaviors such as sleeplessness, opposition to authority, companionship and harm to friendship can also be observed in students who have anxiety. Those who experience

exam anxiety think that only they feel physiological findings such as heart throbbing, dryness of the mouth, stress. However, students with low exam anxiety also show similar physiological responses, but the interpretation of findings may be different for both groups. Students with high exam anxiety assume that these reactions weaken themselves, while students with low-level exam anxiety assume that it is a signal for themselves telling that they need to work more for the exam. Students with high exam anxiety tend to generalize their failures. For such students, the failure of the examination is also a personal failure. Instead of looking for ways to try to be successful at the upcoming exams and concentrating on them, they concentrate on thinking about the exams they failed and get lost in the negative thoughts and emotions they bring (Sermerci, 2007: p.202).

Serim (2016) compared Anatolian (State) and Private High Schools students' anxieties to their college entry test results and expectations about future. 138 high school students were participated in the research. According to research findings, individuals with higher hopelessness levels had also higher test anxieties levels, seniors from private schools had higher test anxieties levels compared to students from state schools, female students had higher test anxieties levels, students from private schools had higher levels of emotionality compared to students from state schools, students from private schools also had higher levels of delusions, older students displayed higher test anxieties levels, older students' level of hopelessness were also higher, individuals who had mothers with college education or better, also had higher test anxieties levels, individuals with higher allowances also had increased levels of test anxieties.

The purpose of research performed by Seftalici (2017) was to define the relationship between the last grade students' exam anxiety with the religiosity and spirituality levels. The participants (552 students) that were from science high schools and Anatolian high school were chosen randomly. In the study mentioned above, Revised Test Anxiety scale was conducted. The findings exhibited that female students were different from male students in terms of religious-spiritual handling strategies against the test anxiety. Despite any differences between school type and exam anxiety were observed, grades students who studied in Anatolian high school took and spiritual level were higher than those of science high school students. While female students preferred handling strategies such as crying, sleeping, eating, male students preferred the internet, going to cinema etc. however it was concluded that prayer was the anxiety decreasing and relaxing factor before and during exam.

In a related study, how exam anxiety was differentiated depending on self-esteem in terms of parent behavior of teenagers (age: between 16 and 19) was researched. 150 teenager (101 female and 49 male) in total were studied using Parental Attitude Scale, Scale of Examination Stress and Test Anxiety, and Self-Esteem Scale. Sub-dimensions of parent behavior, exam anxiety and self-esteem was not differentiated in terms of mother education level. It was observed that illiterate mothers were more dominant, mentioned potential decreased with increasing in education level. It was seem that school achieve was affected reversely with democratic parent behavior that teenagers mentioned (Biçkur, 2015).

In another study, Boztepe (2016) evaluated the relationship between expectations and parents' behavior on the exam anxiety of 12nd class high school students from both private and governmental schools. For measuring parents' expectation Parent Attitudes Inventory, for anxiety levels of students Anxiety Inventory was used. Findings displayed that parent's attitudes immensely affected the anxiety of students. In addition, family construction perceptions includ-

ing democratic, bossy, irresponsible or protective directly affected the text anxiety. As a conclusion, family construction perception of participants was not affected from education level and income.

The perfectionism aimed at self is positively associated with a high level of perceived self-control and a low level of motivation for success (Hewitt, Flett and Weber (1994). They have investigated the relationship between the areas of perfectionism and suicidal ideation, and have found that people in areas of perfectionism and social organization that are defined by oneself are more interested in suicidal thoughts (Flett, Hewitt, Blankstein, Solkin ve Brunschot, 1996).

Freud acknowledges perfectionism as an exaggerated super ego's indicator that defines strict demands for high success (Source: Mısırlı and Taşdemir, 2003).

Akdemir and Çuhadaroğlu (2008), During the adolescence period, the individual is experiencing difficulties and conflicts peculiar to this transition, such as accelerating cognitive development, increasing emotional needs and emotional intensity, choosing a profession, relationships with the opposite sex, separation from mother and father, and individualization. The moderation of educational activities contributes in reducing the anxiety. According to Benduray (1986), the moderation of educational activities contribute in reducing the anxiety.

Hypothesis

To measure the exam anxiety level of the Health Profession High School students preparing for University exams (Entrance to Higher Education Exam (YGS) - Undergraduate Placement Exam (LYS)) and to predict the level of exam anxiety using coping with anxiety training.

In this direction, roughly the answers to the following questions have been searched;

- What is the level of concern about how others see you?
- What is the level of concern about how you see yourself?
- What is the level of concern about future?
- What is the level of concern about not being prepared enough for the exam?
- What is the level of physical reactions to the examination?
- What is the level of mental reaction?
- What is the general level of exam anxiety?

METHOD

Model of Research

This research is a qualitative study on the level of anxiety of the Health Profession High School students preparing for the university exam and the factors that cause this anxiety.

Human and social behaviors are studied in social sciences such as psychology, sociology, anthropology and education. It is difficult to explain these behaviors in numbers. Measurements show us how many people behave how, but they can't answer "why?" It is called qualitative research which explores the "why" of human and group behavior. (Ergün, 2005).

Study Universe and Study Group

The study universe constitutes of 12th grade nursing students who are studying at Avcılar Çizgi Health Profession High School, Istanbul in 2016-2017 academic year.

The study group consists of 32 students, 26 females and 6 male volunteers.

Limitedness of the Study

The study is limited to a private Health Profession High School in the Avcılar district of Istanbul.

Data Collection Tool and Data Analysis

As data collection tool, developed by Spielberg. Adapted to Turkish and Turkish form prepared by Envanter Öner (1990) and Albayrak-Kaymak (1985; Source. Öner, 1990). Some researchers in Turkey adapt exam Anxiety Inventory and Turkish form is prepared.

Table 1. Study Group and Number

Study Group	Number
Health Profession High School students in the 12th grade nursing department (Pre-test Study Group)	32
Health Profession High School students in the 12th grade nursing department (Final Test Study Group)	32

Planning and Timing

This study was conducted in a 58-day period. Just as it is in every scientific work, a certain time and process planning for this study is made as seen in the table below.

Table 2. Preparation Process of the Research

Processes	Allocated Time
Forming Hypothesis	1 day
Guessing	1 day
Defining Material	4 days
Period of Education	28 days
Testing Hypothesis	8 days
Evaluating Results	8 days
Editing Datas	3 days
Writing the Project Report	5 days
Total	58 days

Table 3. Training Program Subjects and Dates

1 st Sitting	The reasons for the exam anxiety, the useless thoughts that increase the anxiety, the helpful thoughts that reduce the anxiety, controlling the anxiety.	06.02.2017	09.00/10.00
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2 nd Sitting	Controlling the anxiety, frequency of anxiety, things families need to do before the exam.	07.02.2017	09.00/10.00
3 rd Sitting	Relaxation techniques, proper breathing techniques.	13.02.2017	09.00/10.00
4 th Sitting	Nutrition Techniques, Sleep and Study Order.	20.02.2017	09.00/10.00
5 th Sitting	20 methods applied to reduce exam anxiety.	27.02.2017	09.00/10.00

Analysis of the Data

Process

Permission has been obtained to allow the scales to be applied before the study has moved to the application stage. The participants were then informed about the research, volunteers were asked to respond to the scales, pre-test was given to the students in the classrooms and post-test was administered after anxiety stress training. Data were obtained from 32 students. Analyzes in this study, with the SPSS program, investigate the effect of anxiety on students' anxiety levels. The results belong to the same person, but are before education and after education so are dependent variables. Therefore, the most appropriate test to compare the averages of these two variables is the normality test followed by the T test. First, hypotheses were formed.

The hypothesis is like this:

Ho there is no statistically significant difference between the two groups (T1 and T2).

H₁ there is a significant difference between the two groups.

Ho Hypothesis

S_{1g} (2 tailed) ≤ 0.005 Ho Reject

H₁ Hypothesis

S_{1g} (2 tailed) ≥ 0.005 Ho Accept

Table 4. Descriptive analysis

Gender		Statistic	Std. Error
ExamAnxiety1	Female	Mean	4,1923
		95% Confidence Interval for Lower Bound	3,5769
		Upper Bound	4,8077
		5% Trimmed Mean	4,2692

		Median	5,0000	
		Variance	2,322	
		Std. Deviation	1,52366	
		Minimum	1,00	
		Maximum	6,00	
		Range	5,00	
		Interquartile Range	2,00	
		Skewness	-,645	,456
		Kurtosis	-,541	,887
	Male	Mean	4,5000	,61914
		95% Confidence Interval for Mean	Lower Bound 2,9085	
			Upper Bound 6,0915	
		5% Trimmed Mean	4,5556	
		Median	4,5000	
		Variance	2,300	
		Std. Deviation	1,51658	
		Minimum	2,00	
		Maximum	6,00	
		Range	4,00	
		Interquartile Range	2,50	
		Skewness	-,774	,845
		Kurtosis	,284	1,741
ExamAnxiety2	Female	Mean	4,1154	,22414
		95% Confidence Interval for Mean	Lower Bound 3,6538	
			Upper 4,5770	

		Bound	
	5% Trimmed Mean	4,1282	
	Median	4,0000	
	Variance	1,306	
	Std. Deviation	1,14287	
	Minimum	2,00	
	Maximum	6,00	
	Range	4,00	
	Interquartile Range	1,25	
	Skewness	-,242	,456
	Kurtosis	-,229	,887
Male	Mean	3,5000	,34157
	95% Confidence Interval for Mean	Lower Bound 2,6220	
		Upper Bound 4,3780	
	5% Trimmed Mean	3,5556	
	Median	4,0000	
	Variance	,700	
	Std. Deviation	,83666	
	Variance	2,300	
	Std. Deviation	1,51658	
	Minimum	2,00	
	Maximum	6,00	
	Range	4,00	
	Interquartile Range	1,25	
	Skewness	-,242	,456
	Kurtosis	-,229	,887

For this table Skewness is found as -1.537 and Kurtosis value is 1.429

Table 5. Tests of normality

	Gender	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
		Statistic	df	Sig.	Statistic	df	Sig.
ExamAnxiety1	Female	,279	26	,000	,867	26	,003
	Male	,204	6	,200*	,902	6	,389
ExamAnxiety2	Female	,229	26	,001	,906	26	,021
	Male	,392	6	,004	,701	6	,006

Table 6. Explore analysis

	Gender	Cases					
		Valid		Missing		Total	
		N	Percent	N	Percent	N	Percent
ExamAnxiety1	Female	26	100,0%	0	,0%	26	100,0%
	Male	6	100,0%	0	,0%	6	100,0%
ExamAnxiety2	Female	26	100,0%	0	,0%	26	100,0%
	Male	6	100,0%	0	,0%	6	100,0%

Total number of students is 32.

As it can be seen at the table, “Shapiro-Wilk” test’s “Sig” values of exam anxiety pre-test for females $0.003 \leq 0.05$ so H_0 is unacceptable. At the same table, males have S_{1g} value of $0.389 \leq 0.05$ then H_0 hypothesis is accepted. Last test’s S_{1g} value is lesser than $0.021 \leq 0.05$ for females, so H_0 is rejected, H_1 accepted. For males last test S_{1g} value $0.006 \leq 0.05$ so H_0 is rejected.

Table 6. T-Test analysis results of students' anxiety levels before and after education

Variable	$\bar{x} \pm SS \pm$	Sd	t	P	
Pair 1	othsee1 - othsee2	1,37 ± 1,82	31	4,26	0,00
Pair 2	seeyou1 - seeyou2	0,78 ± 1,89	31	2,33	0,03
Pair 3	futw1 - futw2	0,78 ± 1,77	31	2,49	0,02
Pair 4	pref1 - pref2	0,34 ± 1,67	31	1,16	0,26
Pair 5	physicalreac1 - physicalreac2	0,62 ± 2,16	31	1,63	0,11
Pair 6	mentalreac1 - mentalreac2	1,06 ± 3,13	31	1,92	0,06

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Pair 7	ExamAnxiety1 - ExamAnxiety2	0,25 ± 1,91	31	0,74	0,47
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As you can see, the averages of the variables in this table are different from each other. However, looking only at this picture, it cannot be concluded that this difference is meaningful or meaningless. In this data set, the effect of education on anxiety level is investigated. The level of anxiety before the anxiety training of the students was measured and the levels of anxiety after the anxiety training were measured and these are dependent variables since they are the values before and after education belonging to the same person. Hence, the dependent sample is the T test results to compare the average of these two variables. Hypotheses Ho have 95% confidence that there is no statistically significant difference between pre and post-training anxiety levels.

H1: There is a statistically significant difference between averages of anxiety levels before and after training with 95% reliance.

The value to be considered for the decision is the value of "Sig.(2 – tailed)". Ho is rejected because the result of Pair 1-2-3-6 is denominated $0.000 \geq 0.05$. We can say that there is a statistically significant difference between the anxiety levels before and after training with 95% reliance, besides in the other results, Pair 4-5-7 is turns out meaningless.

RESULT AND SUGGESTIONS

The main purpose of this research is to reveal the exam performance, psychological adjustment processes, view of life, factors that affect the formation of exam anxiety, family environment, environmental factors, physical environment and the adolescence period affecting the Health Profession High School students. It is also aimed at developing a solution to the problem of how poor performances that cause high anxiety can be remedied and to monitor the situation after 80 minutes of training a week for four weeks and a total of 320 minutes of coping with the stress training. In accordance with this purpose; "What is the prevalence level of exam anxiety in the Health Profession High School students preparing for the university exam?" and "What is the reason for high level of exam anxiety in the Health Profession High School students preparing for the university exam, according to the anxieties about the preparation of the students for the exams, according to the bodily reactions they gave while preparing for the exams, how do they differ according to the situations in which they are preparing for exams?" The results showed that coping with the stress and anxiety training was beneficial. As a general result of this study; A statistically significant difference was found between the exam anxiety levels of pre-test and post-test students about other people's views, self-opinion, future concerns, anxieties about preparation, physical reactions, mental reactions and overall exam anxiety. According to this, it can be said that educational work contributes to reducing exam anxiety. The generalization of the given trainings to all schools at the secondary level may increase the level of awareness of the students. Similar to this research, Öner (2006) had also conducted an experimental study about the program to cope with exam anxiety and its effects on test anxiety in İzmir Dokuz Eylül University Buca Higher Teacher Education School. Akdemir, Çuhadaroğlu and Çetin (2008) found that individuals with these specific difficulties in adolescence have

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some difficulties such as the acceleration of cognitive development with the process of identity formation, the increase of emotional needs, emotional intensity, profession choice, relations with the opposite sex, separation of parents, and conflicts have been experienced and it has been determined that they share in the reduction of the loss of the regulation of educational activities accordingly. Experimental researches on anxiety and stress are few, and the effects of coping with exam anxiety training on high school students are examined by Adnan and Kaya (2006) and Adana and Kaya (2005). Güler and Çakır (2013) studied the variables that determine the anxiety of the senior high school students. Students and their families view university education as perhaps the only option of a successful life. However, the entrance exams to the university put young people and their families under great pressure. Adolescents who are experiencing the most turbulent, perhaps the most critical stage of life, are able to react at different levels of anxiety to challenging exam conditions (Doğan, 1999). Many studies have been conducted to understand pre-exam anxiety and to overcome the negative consequences (Lowe et all. 2008, Meijer 2001, Zeidner and Mathews 2005).

The following suggestions can be given according to the results of this study;

Schools may organize educational programs to check the stress of exam anxiety at secondary school level, to include parents in education, to include relaxation techniques, teach proper nutrition, to sleep and to study properly in their own bodies coordinated by school guidance services, especially for university entrance exam. At the beginning of the academic year, exam anxiety trainings may be included in the annual plans of the class counselors. Schools may exchange training programs they have prepared between themselves on a district basis. Schools can organize seminar programs on their own by specialist trainers. The limitations of this study should also be taken into account in interpreting the results. That is, the fact that the study group is limited to only one Health Profession High School makes it difficult to generalize the findings to other groups of students, and therefore it is necessary to repeat the variables discussed in the research in all high school students.

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