



ROLE OF EDUCATIONAL AWARENESS IN MANAGING STRESS AMONG STUDENTS, TEACHERS AND COMMUNITY MEMBERS: A SURVEY FROM HARYANA

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ABSTRACT

Stress has emerged as a pervasive concern affecting the mental well-being of individuals across various demographics. In the Indian state of Haryana, rapid socio-economic transitions, academic pressures, and community-level expectations have contributed to heightened stress levels among students, teachers, and the general community. Educational awareness, encompassing knowledge about stress, its symptoms, and management techniques, is hypothesized to be a critical buffer against this growing epidemic. This study aimed to investigate the role of educational awareness in managing stress among three distinct cohorts: students, teachers, and community members in Haryana. The primary objectives were to: (1) assess the level of educational awareness regarding stress and its management; (2) measure the perceived stress levels across the three groups; (3) examine the relationship between educational awareness and stress levels; and (4) identify significant differences in stress management practices based on awareness levels. A cross-sectional survey design was employed. A stratified random sample of 450 participants (150 students, 150 teachers, and 150 community members) was drawn from three districts of Haryana: Gurugram, Hisar, and Ambala. Data were collected using a structured questionnaire comprising a Socio-demographic Data Sheet, an Educational Awareness Scale for Stress Management (EASSM), and the Perceived Stress Scale (PSS-10). The data were analyzed using descriptive statistics, Pearson's correlation coefficient, and one-way ANOVA. The findings revealed a significant negative correlation between educational awareness and perceived stress across all groups ($r = -0.68$, $p < 0.01$). Students reported the highest mean stress score ($M = 32.5$, $SD = 5.8$), while teachers exhibited the highest level of educational awareness ($M = 28.9$, $SD = 3.2$). A one-way ANOVA indicated statistically significant differences in stress levels among the three groups [$F(2, 447) = 24.56$, $p < 0.001$]. Furthermore, participants with high educational awareness consistently reported lower stress levels and more frequent use of positive coping strategies. The study concluded that educational awareness is a pivotal determinant of effective stress management.

The findings underscore the urgent need for targeted, age-appropriate educational interventions and mental health literacy programs in Haryana. The study recommends integrating structured stress management modules into educational curricula and community outreach initiatives.

Keywords: Educational Awareness, Stress Management, Students, Teachers, Community Members, Haryana, Mental Health Literacy.

INTRODUCTION

The contemporary world, characterized by relentless competition, information overload, and shifting societal structures, has positioned stress as a silent pandemic. In India, the state of Haryana presents a unique microcosm of this phenomenon. Known for its agrarian economy, rapid industrialization in the National Capital Region (NCR), and a deeply entrenched patriarchal social structure, Haryana faces a complex interplay of stressors. Students grapple with intense academic competition for limited seats in professional colleges, a pressure exacerbated by societal expectations (Deb, Strodl, & Sun, 2015). Teachers, working in increasingly demanding environments with large class sizes and administrative burdens, report high levels of occupational stress (Sharma & Sharma, 2020). Community members, particularly in rural areas, face stressors related to agrarian distress, economic instability, and rigid social norms (Singh & Choudhary, 2018).

In this context, educational awareness, defined here as the knowledge, attitudes, and beliefs that enable individuals to recognize, manage, and prevent stress-related issues, emerges as a critical, yet often overlooked, factor. This concept aligns with the broader framework of mental health literacy, a term popularized by Jorm et al. (1997), which emphasizes the importance of knowledge and beliefs about mental disorders for their recognition, management, and prevention. While mental health literacy has been studied extensively in Western contexts, its application to stress management within specific Indian sub-populations remains under-researched. This study addressed this gap by focusing on

Haryana, a region where traditional coping mechanisms are often at odds with modern stressors.

The theoretical underpinning of this study drew from Lazarus and Folkman's (1984) Transactional Model of Stress and Coping. This model posits that stress is not merely a stimulus but a transaction between an individual and their environment. The individual's appraisal of a potential stressor (primary appraisal) and their perceived ability to cope with it (secondary appraisal) determines the experience of stress. Educational awareness serves as a critical resource in the secondary appraisal process. An individual with high educational awareness possesses a larger repertoire of cognitive and behavioral coping strategies, thereby perceiving a stressful event as less threatening.

Previous research has demonstrated a clear link between knowledge and health outcomes. For instance, a study by Mishra and Rani (2019) in Uttar Pradesh found that students with higher levels of mental health awareness were significantly less likely to exhibit symptoms of anxiety and depression. Similarly, studies among teachers have shown that training in stress management techniques leads to reduced burnout and improved classroom performance (Iancu et al., 2018). However, these studies often focused on a single cohort. The present study was unique in its multi-stakeholder approach, examining students, teachers, and community members concurrently within the same geographical and cultural context of Haryana. This approach was essential to understanding the differential impact of educational awareness and to informing holistic, community-wide interventions.

Research Objectives

The present study was guided by the following research objectives:

1. To assess the level of educational awareness regarding stress and its management among students, teachers, and community members in Haryana.
2. To measure the perceived stress levels among students, teachers, and community members in Haryana.

3. To examine the relationship between educational awareness and perceived stress levels across the three participant groups.
4. To identify and compare the stress management practices utilized by participants with high, moderate, and low levels of educational awareness.
5. To determine significant differences in stress levels based on socio-demographic variables (e.g., gender, locality, occupation).

METHODOLOGY

Research Design and Setting: A cross-sectional, descriptive survey design was adopted for this study. The research was conducted across three districts in Haryana: Gurugram (representing an urban, industrialized area), Hisar (representing a semi-urban, agricultural hub), and Ambala (representing a district with a mix of urban and rural characteristics). This stratification was intended to capture the diverse socio-economic realities of the state.

Participants and Sampling: The target population comprised students (enrolled in undergraduate or postgraduate programs), teachers (working in government or private schools/colleges), and community members (adults aged 25-60 not employed as teachers or enrolled as students). A stratified random sampling technique was employed. From each of the three districts, 50 participants were recruited from each of the three cohorts, resulting in a total sample of 450 participants (N=450).

Data Collection Tools: Data were collected using a structured, self-administered questionnaire consisting of three parts:

- **Part A: Socio-demographic Data Sheet:** This section collected information on age, gender, occupation, educational qualification, locality (urban/rural), and family type (nuclear/joint).
- **Part B: Educational Awareness Scale for Stress Management (EASSM):** A 20-item scale was developed for this study to measure awareness. Items covered knowledge about stress symptoms (e.g., "I can identify physical signs of stress in myself"), causes (e.g., "I understand how

academic pressure can lead to stress"), and management techniques (e.g., "I am aware of the benefits of deep breathing for stress"). Responses were recorded on a 5-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree). The scale demonstrated good internal consistency, with a Cronbach's alpha of 0.87.

- **Part C: Perceived Stress Scale (PSS-10):** The widely validated 10-item Perceived Stress Scale (Cohen, Kamarck, & Mermelstein, 1983) was used to measure the degree to which situations in one's life were appraised as stressful. Responses were scored on a 5-point scale (0 = Never to 4 = Very Often). The PSS-10 has been used extensively in Indian contexts and has demonstrated acceptable reliability (Cronbach's alpha = 0.82 in the current study).

Procedure: Prior to data collection, ethical approval was obtained from the Institutional Ethics Committee. Permission was also sought from the respective educational institutions and local community leaders. Participants were informed about the purpose of the study, the voluntary nature of their participation, and the confidentiality of their responses. Written informed consent was obtained from all participants. Data collection took place over a period of four months, from January to April 2026. Questionnaires were administered in both English and Hindi to ensure comprehension.

Data Analysis: The collected data were coded and entered into SPSS version 26.0. Descriptive statistics (frequencies, percentages, means, standard deviations) were computed for socio-demographic variables and primary study variables. Pearson's product-moment correlation coefficient was used to examine the relationship between educational awareness and perceived stress. One-way Analysis of Variance (ANOVA) was employed to compare mean stress scores across the three groups. A significance level of $p < 0.05$ was considered statistically significant.

RESULTS

The results are presented in accordance with the research objectives. The data are summarized in tables and text.

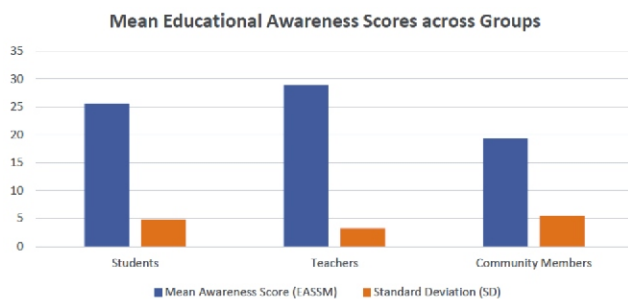
Socio-demographic Profile of Participants:

The total sample consisted of 450 participants. The students' group (n=150) had a mean age of 21.4 years (SD=2.1), with 48% male and 52% female. The teachers' group (n=150) had a mean age of 38.7 years (SD=9.5), with 60% male and 40% female. The community members' group (n=150) had a mean age of 42.1 years (SD=12.3), with 55% male and 45% female. In terms of locality, 55% of the total sample resided in urban areas, and 45% in rural areas.

Objective 1: Assessment of Educational Awareness Levels: The Educational Awareness Scale for Stress Management (EASSM) had a possible score range of 20 to 100. The mean awareness scores and standard deviations for the three groups are presented in Table 1.

Table 1: Mean Educational Awareness Scores across Groups

Participant Group	N	Mean Awareness Score (EASSM)	Standard Deviation (SD)
Students	150	25.6	4.8
Teachers	150	28.9	3.2
Community Members	150	19.3	5.5
Total	450	24.6	5.9



Graph 1: Mean Educational Awareness Scores across Groups

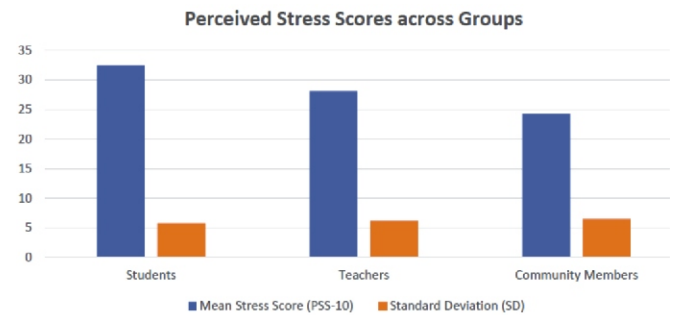
Teachers reported the highest level of educational awareness regarding stress and its management, followed by students. Community members exhibited the lowest mean awareness score. The variability was highest among community members (SD = 5.5), indicating a wide range of awareness levels within this cohort.

Objective 2: Measurement of Perceived Stress Levels: The Perceived Stress Scale (PSS-10) has a possible score range of 0 to 40, with higher scores indicating greater perceived stress. The mean stress

scores are detailed in Table 2.

Table 2: Mean Perceived Stress Scores across Groups

Participant Group	N	Mean Stress Score (PSS-10)	Standard Deviation (SD)
Students	150	32.5	5.8
Teachers	150	28.1	6.2
Community Members	150	24.3	6.5
Total	450	28.3	6.8



Graph 2: Perceived Stress Scores across Groups

Students reported the highest mean stress level, followed by teachers. Community members reported the lowest mean stress level. A one-way ANOVA was conducted to test the significance of these differences. The analysis revealed a statistically significant difference in mean stress scores across the three groups, $F(2, 447) = 24.56$, $p < 0.001$. Post-hoc tests (Tukey HSD) indicated that the stress levels of students were significantly higher than both teachers ($p < 0.001$) and community members ($p < 0.001$).

Objective 3: Relationship between Educational Awareness and Perceived Stress To examine the relationship between educational awareness and perceived stress, a Pearson's product-moment correlation coefficient was computed. The results are presented in Table 3.

Table 3: Correlation between Educational Awareness and Perceived Stress

Participant Group	Pearson's r	p-value
Students	-0.62	< 0.01
Teachers	-0.71	< 0.01
Community Members	-0.65	< 0.01
Overall	-0.68	< 0.01

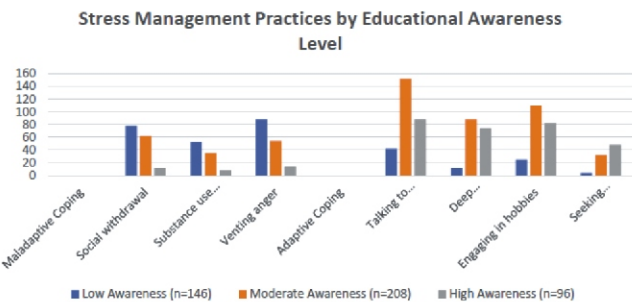
A significant, moderate-to-strong negative correlation was found between educational awareness and perceived stress for all three groups.

This indicates that as the level of educational awareness increased, the perceived stress level decreased significantly. The relationship was strongest among teachers ($r = -0.71$), suggesting that for this group, awareness was most strongly associated with lower stress.

Objective 4: Stress Management Practices by Awareness LevelTo address this objective, participants were categorized into three groups based on their EASSM scores (tertiles): Low Awareness (score < 21), Moderate Awareness (score 21-30), and High Awareness (score > 30). Table 4 presents the frequency of reported stress management practices across these awareness levels.

Table 4: Stress Management Practices by Educational Awareness Level (N=450)

Stress Management Practice	Low Awareness (n=146)	Moderate Awareness (n=208)	High Awareness (n=96)
Maladaptive Coping			
Social withdrawal	78	62	12
Substance use (alcohol/tobacco)	52	35	8
Venting anger	88	54	14
Adaptive Coping			
Talking to family/friends	42	152	88
Deep breathing/meditation	12	88	74
Engaging in hobbies	25	110	82
Seeking professional help	4	32	48



Graph 3: Stress Management Practices by Educational Awareness Level

As illustrated in Table 4, participants with low educational awareness predominantly relied on maladaptive coping strategies, such as venting anger

and social withdrawal. In contrast, participants with high educational awareness were significantly more likely to employ adaptive coping strategies, including talking to family/friends, engaging in hobbies, and notably, seeking professional help. This pattern supports the crucial role of awareness in shaping effective coping behavior.

Interpretation and Discussion

This study investigated the critical role of educational awareness in stress management among three distinct cohorts in Haryana. The findings provided robust empirical support for the central hypothesis that higher educational awareness is associated with lower stress levels and more effective coping strategies. The results are interpreted below in the context of existing literature and the socio-cultural landscape of Haryana.

- **Disparities in Educational Awareness:** The finding that teachers possessed the highest level of educational awareness ($M = 28.9$, $SD = 3.2$) was not surprising, given their higher educational qualifications and professional exposure to concepts of child psychology and mental well-being through training programs. As noted by Sharma and Sharma (2020), teacher training curricula in India are increasingly incorporating modules on student mental health, which inadvertently enhances the teachers' own mental health literacy. Conversely, community members exhibited the lowest awareness ($M = 19.3$, $SD = 5.5$). This finding resonates with the work of Singh and Choudhary (2018), who highlighted the lack of mental health awareness in rural Haryana, where stress is often somaticized (expressed as physical ailments) or attributed to supernatural causes rather than understood as a psychosomatic phenomenon. The wide standard deviation in this group suggests that a small, urban, educated segment within the community cohort may have higher awareness, while the majority in rural areas remain uninformed.
- **The Pervasiveness of Stress across Cohorts:** The significantly higher stress levels among

students ($M = 32.5$, $SD = 5.8$) align with a substantial body of research from India. Deb et al. (2015) found that academic stress, parental pressure, and career uncertainty are major contributors to psychological distress among Indian university students. In the hyper-competitive environment of Haryana, where academic success is often seen as the sole determinant of future prosperity, this finding is particularly poignant. The stress levels of teachers ($M = 28.1$, $SD = 6.2$) reflect the well-documented phenomenon of teacher burnout, attributed to factors such as heavy workloads, lack of administrative support, and societal expectations (Iancu et al., 2018). The lower stress levels of community members, while seemingly positive, must be interpreted with caution. It may not indicate the absence of stressors but rather a difference in the perception and reporting of stress. As Lazarus and Folkman's (1984) model suggests, if an individual lacks the awareness to identify a situation as stressful, they may underreport it.

- **The Protective Role of Educational Awareness:** The significant negative correlation ($r = -0.68$) between educational awareness and perceived stress is the cornerstone of this study. This finding provides strong empirical validation for the concept of mental health literacy as a protective factor. Individuals with high awareness are better equipped to engage in secondary appraisal (Lazarus & Folkman, 1984), recognizing that they have the resources and knowledge (e.g., meditation, social support) to cope, thereby reducing the stress response. The relationship was strongest for teachers ($r = -0.71$), suggesting that for those in a helping profession, their own awareness is a critical tool for self-preservation.
- **Awareness Dictates Coping Mechanisms:** Perhaps the most insightful findings emerged from the analysis of coping mechanisms (Table 4). The stark contrast between the coping strategies of the low- and high-awareness

groups illustrates the practical implications of mental health literacy. In the low-awareness group, the reliance on maladaptive strategies like substance use (35.6%) and venting anger (60.3%) reflects a lack of knowledge about healthy alternatives. This is consistent with the observations of Mishra and Rani (2019), who noted that in the absence of proper awareness, individuals often resort to culturally ingrained but harmful behaviors. In contrast, the high-awareness group's preference for adaptive strategies, such as talking to family/friends (91.7%) and seeking professional help (50.0%), indicates a destigmatized approach to mental well-being. The willingness to seek professional help is a critical indicator of mental health literacy and a direct outcome of educational awareness (Jorm et al., 1997).

- **Limitations of the Study:** This study has several limitations. First, its cross-sectional design precludes the establishment of causal relationships. While we found a strong association, we cannot definitively conclude that high educational awareness causes lower stress. Second, the reliance on self-report measures introduces the potential for social desirability bias, particularly regarding sensitive topics like substance use. Third, the sample, though stratified, was drawn from only three districts, which may limit the generalizability of the findings to the entirety of Haryana, particularly the more remote areas. Finally, the EASSM, while reliable, is a new tool that would benefit from further validation in different contexts.

CONCLUSION AND RECOMMENDATIONS

Conclusion This study conclusively demonstrated that educational awareness is a powerful and significant factor in managing stress among students, teachers, and community members in Haryana. The research objectives were successfully met, revealing that: (1) teachers have the highest and community members the lowest level of stress-related awareness; (2) students experience the highest levels of perceived stress; (3) a strong negative correlation exists between awareness and stress across all groups;

and (4) higher awareness is associated with the use of adaptive, rather than maladaptive, coping strategies. These findings underscore the urgent need for a paradigm shift from reactive mental health care to proactive mental health education.

Recommendations Based on the findings, the following recommendations are proposed for policymakers, educational institutions, and community organizations in Haryana:

1. **For Educational Institutions (Schools and Colleges):** Mandate the integration of a structured "Mental Health Literacy" curriculum from the secondary school level onwards. This curriculum should not only cover the theoretical aspects of stress but also include practical, skill-based modules on techniques like mindfulness, emotional regulation, and seeking help. Given the high stress levels among teachers, institutions should also conduct regular workshops and provide access to employee assistance programs (EAPs) focused on stress management and burnout prevention.
2. **For Community Outreach:** Launch targeted community awareness programs in rural Haryana, utilizing local community health workers (ASHA workers) and panchayat platforms. These programs should be delivered in Haryanvi (the local dialect) and should focus on destigmatizing stress and mental health issues. The programs should teach simple, culturally appropriate coping mechanisms, such as community-based support groups and the use of traditional practices like meditation.
3. **For Governmental and Non-Governmental Organizations:** Advocate for the allocation of dedicated funds for mental health literacy campaigns. The success of such campaigns can be modeled on other public health initiatives in India, such as those for sanitation or vaccination. A toll-free helpline specifically for stress management, promoted through these awareness campaigns, could provide an accessible first point of contact for community members.

4. **For Future Research:** Future studies should adopt a longitudinal design to establish causality between educational interventions and stress reduction. Additionally, qualitative research (e.g., in-depth interviews, focus groups) is needed to explore the cultural nuances and barriers that influence the adoption of stress management practices in the Haryanvi context. Finally, intervention-based research is required to test the efficacy of the recommended awareness programs.

In conclusion, the battle against stress in contemporary Haryana cannot be won solely by providing mental health services after distress has set in. The findings of this survey affirm that the most sustainable and effective strategy is prevention through education. By fostering educational awareness, we empower individuals not just to survive stress, but to manage it proactively, fostering healthier, more resilient communities.

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