A two-session program to reduce test-anxiety among students: Results from a pilot stuy

Objectives: Mental images play a crucial role in anxiety disorders. We therefore explored the frequency of mental images in test-anxiety and the resulting burden of those affected within an online survey. Furthermore, since recent studies have shown promising first evidence for the effectiveness of modulating mental images in test anxiety, we additionally tailored a two-session program of Imagery Rescripting (IR) techniques to reduce test-anxiety. First application to students was conducted and feasibility in terms of treatment acceptance and safety was evaluated.

Methods: The online survey included 300 subject answering questions regarding test anxiety (PAF), depression (BDI-II-R), study-related self-efficacy (WIRKSTUD), self-efficacy alone (WIRKALL) and several instruments for the exploration of mental images (IFES, SUIS, VVIQ). For the sake of the feasibility study, six women and three men (n=9) were treated with this new approach. During two sessions they were guided to create new mental images related to the experience of coping with test-anxiety. Test-anxiety (PAF), Depression (BDI-90), Life satisfaction (FLZ), general (WIRKALL) and study specific self-efficacy (WIRKSTUD) were recorded prior to the treatment (t1) and post treatment (t2). At t2 the satisfaction of the participants with the procedure using the ZUF-8, VEV and BFTB was also recorded. A 3-months-follow-up will take place three months after the last session.

Results: In the online survey 55.8 % of the participants reported test-anxiety related mental images. In 78 %, these occurred even outside the exam period. For 85 % the images were unpleasant. The exposure to the images was rated on a scale of 0 to 10 at an average of 7.85 (SD=2.12). Results of the feasibility study did not record any symptom exacerbation from t1 to t2 as indicated by mild score improvement in BDI, WIRKSTUD and WIRKALL. Only in PAF there was a slight, but not significant, increase of the values. In ZUF-8, VEV and BFTB there was continuously high to medium acceptance and satisfaction of the subjects with the Imagery Rescripting procedure. Also no drop-out-rates were recorded.

Conclusion: Data from our feasibility study suggest that this short-term intervention is save and acceptable for students with test-anxiety. However, the study is limited by the small sample size and lack of a control group. In addition with the survey-based high incidence of mental images and the severity of burden, the results of our present studies indicate that an Imagery Rescripting-based might be the right starting point for treatment of test-anxiety. In the course of a randomized controlled trial, we want to investigate this question.