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Stress and Coping: A Qualitative Exploration of Academic and Psychosocial Stressors Among First Professional BAMS Students in Kerala

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Introduction

Irrespective of the nature of the course, beginners often find it difficult to adjust to a new academic environment. Undergraduate students are exposed to various academic and psychosocial stressors throughout their course period, which can lead to a range of physical, social, and emotional difficulties. Being away from the warmth of their home further worsens the condition. Much research has been conducted on stress in university students. Nelson et al. reported that first- and fifth-year students experienced higher stress levels than students in the middle years. They hypothesized that first-year students may face more stress due to the major life transition from high school to university, while fifth-year students may be stressed by uncertainties about life decisions after graduation. [1] Homesickness, difficulties in socializing or making friends, and challenges in managing time and study skills were found to be significant factors that hinder the adjustment of course beginners. The majority of first-year students have stated that transitioning to campus is the most stressful adjustment phase in their lives. The prevalence of overall adjustment problems was reported to be as high as 42.5%. [2] However, the extent of such difficulties tends to decrease over time. Senior students are generally more socially adjusted and better integrated into the social fabric of the college. [3]

As stress is defined as a perceived imbalance between the demands encountered in daily life and a person's ability to respond to them, medical students experience stress when curricular demands exceed their available resources. They have been reported to suffer from higher levels of perceived stress compared to the general population and students in other academic fields. [4] Academic and psychosocial issues act as major stressors. While some of these are common across all academic disciplines, others are specific to medical education. Psychosocial issues such as

adjustment problems, ethical concerns, exposure to patient suffering and death, student mistreatment, uncertainty about the future, lack of personal time, responsibility, life events, and educational debt—alongside academic challenges like poor student guidance/support and an overwhelming volume of information—contribute to the perceived stress among medical students. [5]

Similar stressors can be expected in the field of Ayurveda. However, in addition to these common challenges, undergraduate students of Ayurveda—especially in the first year—may face some unique concerns. Ayurveda, the indigenous medical system of India, is unparalleled in that it is not limited to disease management and treatment protocols but advocates a complete lifestyle for maintaining health. To support this holistic view, Ayurveda incorporates *Darshana*, or Indian philosophy, along with its medical guidelines and recommendations on diet and lifestyle modifications. Developing a true Ayurvedic perspective that integrates novel concepts such as the fundamental principles of Ayurveda and its unique approach to disease and management may take years. This makes it essential to introduce Indian philosophy at an early stage of learning Ayurveda. Accordingly, Indian philosophy is included as a subject in the First Professional BAMS course, although its abstract nature makes it particularly challenging for beginners. Another notable concern for First Professional BAMS students is the language barrier. Like many ancient Indian treatises, Ayurvedic literature is written in Sanskrit—a language no longer commonly spoken. Only a small number of students are exposed to Sanskrit during their school years. All these factors can hinder the adjustment process in the initial phase of the course and contribute to the perceived stress of First Professional BAMS students. Only those with better adaptability are able to cope with these challenges without much difficulty.

Coping strategies to deal with psychosocial issues are as numerous and varied as the stressors that precede them. Some coping strategies are adaptive, while others are maladaptive. Adaptive coping involves flexible and constructive approaches to solving problems or managing associated emotions (e.g., strategizing, cognitive reappraisal, emotional regulation, and expression), whereas maladaptive coping includes less constructive behaviors (e.g., rumination, venting, and confrontation) and avoidant tendencies (e.g., withdrawal, social isolation, and emotional suppression). [6] The selection of a coping strategy is often a personal choice and may depend on individual personality traits.

There is a lack of awareness about the academic and psychosocial stress experienced by First Professional BAMS students. Academicians and authorities have so far made little effort to explore what these students consider their greatest stressor(s) and what coping strategies they use to manage these stressors from the perspective of an Ayurvedic course beginner. Gaining such an

understanding could help in identifying personalized remedial measures to address the academic and psychosocial issues faced by First Professional BAMS students. It could also inform the development of new policies in Ayurvedic medical education, ultimately contributing to improved academic performance and student well-being.

Methodology

In light of the outlined gaps in existing knowledge regarding the various stressors experienced by First Professional BAMS students in Kerala, this paper qualitatively explores their academic and psychosocial challenges, along with the coping strategies they adopt to manage stress.

The research questions and objectives: The research question of concern was: *"What are the academic and psychosocial issues faced, and the coping strategies chosen to deal with the stresses, by the First Professional BAMS students?"* The primary objective was to identify the various types of academic and psychosocial issues faced, as well as the coping strategies adopted by First Professional undergraduate Ayurveda students of Kerala. The secondary objective was to gather suggestions for improving the situation from the students' point of view.

Method of data collection: Since the research question primarily addresses a social issue, Focus Group Discussion (FGD) was identified as the most suitable method, as it is particularly applicable in the field of sociology [7] and can help generate a deeper understanding of social issues. An FGD was conducted with students from Ayurveda colleges across different sectors, as they have first-hand or second-hand experience with various stressors and coping strategies, and can contribute valuable insights in this regard.

Sample selection: There are 17 Ayurveda colleges in the state of Kerala, affiliated with the Kerala University of Health Sciences, functioning either in the government or private sector. The private sector includes both aided and self-financing colleges. One college from each sector was randomly selected, and outspoken students were identified with the help of faculty members from the respective colleges. One student each from the First and Second Professional BAMS classes was selected from Ayurveda colleges in the government sector, the private sector with government aid and the private sector without government aid to participate in the FGD. Since the majority of BAMS students are female, and in order to reflect this distribution, only one male participant was included in the discussion, while the remaining five participants were female.

Serial Number	Gender	Class	College
1	Female	Second Professional	Self-financing college
2	Female	First Professional	
3	Male	Second Professional	Aided college
4	Female	First Professional	
5	Female	Second Professional	Government college
6	Female	First Professional	

Tool for data collection- A Focus Group Discussion (FGD) guide was prepared to help keep both the participants and the moderator focused on the topics to be explored. The following points were considered while preparing the FGD guide::

- Stress and its impact in First BAMS students
- Common academic and psychosocial issues faced by First BAMS students
- Coping strategies
- Suggestions to improve the situation

The questions in the FGD guide were framed under three categories: engagement questions, exploration questions, and exit questions. The set of questions followed an hourglass design—starting with broad engagement questions, followed by focused exploration questions, and concluding with broader exit questions. The guide included two engagement questions, nine exploration questions, and one exit question. The FGD guide is provided as Appendix 1.

The conduct of FGD: The participants were contacted over the phone a week prior to the scheduled date of the Focus Group Discussion (FGD) to explain the objective of the study and to obtain their verbal consent to participate. Following this, written consent was obtained by sending them an information sheet and requesting confirmation via email. The researcher herself served as the moderator, and a note-taker—familiar with the Ayurvedic academic setting—was arranged to document the main points of the discussion.

The FGD was conducted online using the Google Meet platform. The moderator followed a structured guideline, and the ground rules were explained at the beginning to ensure the smooth

and ethical conduct of the discussion. The entire session was video recorded with the participants' consent.

Steps in the conduct of FGD	Description of steps
Beginning and warm up	Welcome all the participants Introduce the Assistant/note taker Seek consent for video tapings Set up the basic rules & discipline to be followed during the discussion
Discussion of key points	Engagement questions Exploration questions Exit question
Winding up the discussion	Summarize the discussion Thank the participants

All discussions were fully transcribed in Malayalam and later translated into English. The translated version was then used by the researcher for analysis.

Analysis: The transcripts were analyzed using structured qualitative content analysis, primarily based on Mayring's general content analytic process model [8, 9]. The data were read multiple times to allow familiarization with the content. Key concepts, ideas, and patterns were identified, and initial codes were assigned to them. These codes were then grouped into various themes, and relevant data extracts were organized accordingly. Each theme was labeled with a term that best represented its core idea. The major themes identified were: **Stressors**, **Impact of Stress**, **Coping Strategies**, and **Suggestions**.

Result

Even though the participants shared similar views on the topic, their opinions often complemented one another, adding depth to the discussion. The results of the FGD are presented below

The stressors

Academic: The vast syllabus, unfamiliarity with topics covered in the First Professional course, the need to memorize portions, limited availability of textbooks, and the lack of guides to provide model answers were identified as major academic issues.

Psychosocial: Limited social interaction (especially with old friends and relatives) due to time constraints and the lack of close friendships with current peers were the major psychosocial issues. One of the participants even said, “the one big issue is missing out on social life. This affects badly, especially the extroverts”. Homesickness was not a significant concern for most students, as many had already lived away from home prior to joining the BAMS course to attend entrance coaching classes. But demotivation from the public alongside everything else was identified as one of the major disheartening factors from the point of view of First BAMS students. No one in the focus group considered learning an ancient science as a real problem, instead one of them told that she was really proud to study a science that is 5000 years old. Still, there is a constant fear about future job opportunities for many of the students. According to the participants, most students did not experience financial crises as well due to the availability of government grants. No one in the focus group reported serious relationship issues existing among first year students.

Issues faced by Out of state students: The participants pointed out that out-of-state students faced additional academic challenges due to language barriers. These students experienced more homesickness, as they couldn't visit home as frequently as in-state students. Another issue for out-of-state students was the unavailability of preferred food.

The greatest stressor: The greatest stressor for First Professional BAMS students was identified as the unfamiliarity with the subjects by the current First BAMS students. In contrast, Second Professional BAMS students considered the ‘Year Back’ system to be the most significant source of stress for a First professional BAMS student.

The impact of stress

The stress has negative impact on students’ life. Some of them find difficulty to concentrate in studies while some others have sleep disturbances. Depression, and anxiety are also prevalent in students but not to a great extent. Migraine, digestive problems, hair fall and general weakness are the other impacts of stress.

Coping strategies

Regarding coping strategies, participants reported that the use of social media is the most popular method of stress relief among First Professional BAMS students. Many students also engage in conversations with classmates to relieve stress. Only a few opted for trips to reduce stress. Some students admitted to procrastination. None of the participants reported substance abuse as a coping strategy chosen by any of the student. The group agreed that talking with current peers was the most effective method for stress relief, as they better understood the situation compared to family members and old friends.

Suggestions to improve the situation

Activity-based learning, better interaction between First BAMS students and their seniors and teachers, and regular mentor-mentee interactions were suggested as effective methods to address academic and psychosocial issues.

Discussion

Though the findings of this Focus Group Discussion (FGD) align with existing literature, they also offer valuable insights into the unique academic and psychosocial stressors specifically faced by First Professional BAMS students, thereby contributing to a more nuanced understanding of their lived experiences. Consistent with previous literature on undergraduate stress[10], the participants reported a range of academic challenges, particularly the vast and unfamiliar syllabus, the memorization learning demands and limited availability of standardized textbooks and model guides. The unfamiliarity with course content, especially in a traditional medical system like Ayurveda, emerged as the most significant academic stressor. This supports earlier observations that first-year students often experience heightened stress due to transitional academic pressures [10, 11].

Psychosocial stressors identified were similarly reflective of common undergraduate experiences, though with some variation. While homesickness was not prominent—likely due to pre-college hostel exposure during entrance coaching—the lack of meaningful peer relationships and limited time for social interaction were major concerns. These findings align with the other literature highlighting the critical role of social connectedness in student well-being [12]. Interestingly, participants viewed public demotivation toward the Ayurveda stream as a discouraging factor, which underscores the impact of external societal perceptions on student morale.

A noteworthy dimension that emerged was the unique stress profile of out-of-state students. Language barriers, limited home visits, and cultural disconnect in food preferences were highlighted as additional stressors. Such geographic and linguistic disparities have also been reported in professional [13] and other academic settings [14, 15], indicating the need for inclusive, regionally sensitive academic support systems.

The only point on which the participants differed was in identifying the greatest source of stress. While the current First Professional BAMS students viewed unfamiliarity with the subjects as their primary stressor, the Second Professional students, having already cleared the university examination, perceived the 'year back' system as the most significant stress factor. This contrast highlights how an individual's present academic stage can shape their perception of stress, with immediate challenges overshadowing other contributing issues.

The reported impacts of stress included both psychological (difficulty concentrating, anxiety, and mild depression) and physical symptoms migraine, digestive issues, hair fall, and general fatigue). These findings mirror those of similar studies in medical education that associate chronic academic stress with low mental health and somatic complaints [16].

Regarding coping strategies, the FGD revealed that students primarily resorted to passive coping mechanisms such as social media use and casual peer conversations. While these approaches provide short-term relief, their effectiveness may be limited without structured emotional support or active problem-solving strategies. The lack of substance abuse as a coping mechanism is encouraging, indicating a relatively healthy behavioral profile among students. Peer-to-peer dialogue was cited as the most effective strategy, possibly due to shared experiences and mutual understanding. These findings resonate with prior research that emphasizes the value of peer support in stress mitigation among health science students [17].

The participants suggested activity-based learning, structured mentorship and improved faculty-student engagement as possible solutions. These suggestions align well with evidence-based interventions recommended in other healthcare education settings, where mentorship and interactive pedagogy have shown to enhance student engagement and reduce burnout. The revised Ayurveda curriculum places greater emphasis on non-lecture teaching methods, thereby promoting experiential learning. Many of these methods are activity-based in nature. The mentorship program can improve the academic performance of all levels of students, especially below average performers who need extra care and guidance. Formal faculty mentoring could help the 1st year students to thrive on the complicated situations in a newer environment and excel in their career [18]. However, the mentorship program requires initiative, time and commitment from both

sides—that is, from both teachers and students—without which it cannot function optimally or achieve the desired outcomes. Difficulties in clear and open communication between mentor and mentee may arise due to personality clashes, cultural differences or a lack of trust, all of which should be addressed by the institution.

Although not explicitly reported by the participants, academic and psychosocial stressors are often rooted in the transition from school education to a demanding professional curriculum. These are further compounded by students' unfamiliarity with the subjects, heightened academic expectations, and limited coping mechanisms. In addition, the social and emotional adjustments required during this period—including adapting to a new peer group, institutional culture, and self-imposed expectations—intensify the overall stress burden. This highlights the critical need for designing tailored interventions and structured support systems to promote student well-being and facilitate smoother academic adjustment during the initial phase of professional education.

Conclusion

The findings of this Focus Group Discussion offer a comprehensive view of the academic and psychosocial stressors uniquely experienced by First Professional BAMS students, many of which are amplified by the distinct context of Ayurvedic education. It has been found that the academic challenges faced by First BAMS students basically arise from unfamiliar course content, learning expectations that demand more memorization and a lack of standardized resources. While social stressors were less tied to homesickness, issues like peer disconnect and societal perceptions of Ayurveda significantly influenced student well-being. The distinct challenges faced by out-of-state students further emphasize the importance of culturally and regionally sensitive support systems. The contrast in stress perceptions between First and Second Professional students highlights the evolving nature of academic pressures. The reported psychological and physical symptoms affirm the need for proactive stress management strategies. While current coping mechanisms were largely passive, the students' openness to peer dialogue and their constructive suggestions for mentorship, activity-based learning, and improved faculty engagement point toward practical and evidence-aligned solutions. Institutional support can play a crucial role in fostering a healthier academic environment for Ayurveda students. It is the responsibility of the academic institutions to recognize and respond to the multifactorial stressors through inclusive, responsive, and student-centered interventions. Doing so will not only improve the academic experience but also contribute to the holistic development and long-term resilience of future Ayurveda professionals.

Declaration by Authors

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