

The Application of Mindful Breathing Technique in Managing Students' Academic Anxiety Ahead of Exams at Madrasah Ibtidaiyah Darun Najah Margoyoso Pati

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ABSTRACT

Academic anxiety ahead of examinations is a multifaceted psychological issue frequently experienced by elementary school students, which can manifest as physical discomfort and cognitive impairments that hinder their academic potential. This study aims to investigate the application and effectiveness of the mindful breathing technique in managing and reducing academic anxiety among sixth-grade students prior to taking exams. Using a qualitative approach with a case study design, this research was conducted at Madrasah Ibtidaiyah (MI) Darun Najah Margoyoso Pati, gathering data through in-depth interviews with three purposively selected students and their classroom teacher, alongside passive-participant observation. The findings revealed that prior to the intervention, students exhibited high academic anxiety characterized by palpitations, cold sweats, and sudden mental blanking. Although the initial implementation faced minor behavioral distractions due to the developmental age of the students, the integration of 3 to 5 respiratory cycles of mindful breathing successfully induced instant physiological relaxation, resulting in a significant reduction in physical tension, clearer cognitive focus, and heightened self-confidence. In conclusion, the classical application of the mindful breathing technique serves as an effective, time-efficient, and practical self-regulation tool to alleviate academic anxiety and foster a calm, conducive classroom environment before examinations.

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1. INTRODUCTION

Every educational institution is essentially required to be able to produce the best, quality graduates, while having a character of good ethics. In order to realize a high and satisfactory quality of graduation, the school strives for various ways, ranging from improving the quality of the teaching and learning process to fulfilling academic support facilities. (Afifullah, 2025) The role of teachers in this case is very crucial because students are the subject as well as the main focus in the implementation of learning in schools which determines the achievement of learning goals. However, the demands of

achieving high academic standards often turn into a burden for students, especially when entering the final exam period. (Rahman, Siahaan and Haris, 2024)

This condition is clearly photographed at Madrasah Ibtidaiyah (MI) Darun Najah Margoyoso, Pati, which is under the auspices of the Ministry of Religion (Kemenag). As a basic education institution, MI Darun Najah organizes the Madrasah Exam independently as a final graduation requirement for grade VI students. The results of this exam play an important role because it is the main consideration instrument for students to be able to continue their studies to the next level of education. (Yunandari, 2021) Based on information from the homeroom teacher of grade VI, it was found that a fundamental problem was often felt by students before the implementation of the exam, namely the emergence of academic anxiety or academic anxiety.

The anxiety experienced by elementary school-age students ahead of exams is actually a classic problem that has long been a major concern in the world of education. Academic anxiety is defined as an unpleasant form of emotional or disturbing feelings of anxiety, which arises due to excessive pressure, fear, and worry in carrying out academic tasks or activities. (Ameliana, Setianingsih and Respati, 2023) The negative impact of academic anxiety not only harms students' emotional and psychological state, but also has a direct impact on their physiological performance and cognitive function during exams. (Fazila Farrasia dkk., 2023) Studies have shown a negative linear correlation in which students with high levels of academic anxiety tend to perform significantly worse on achievement and test results compared to their peers with lower levels of anxiety. (Distinct, 2021)

Stressors or triggers for academic anxiety in children are very diverse, ranging from external pressure to get good grades, a lot of assignments, poor time management, tight learning durations, fear of failure, to the condition of the school's physical environment such as facilities and classroom locations. (Arianto et al., 2026) The characteristics of elementary school-age children who are still in the stage of emotional development make them need practical psychological handling methods to reduce this pressure. (Rahman, Siahaan and Haris, 2024) In order to overcome the phenomenon academic anxiety at MI Darun Najah Margoyoso Pati, a safe and easy-to-apply intervention strategy is needed, one of which is through the application of techniques Mindful Breathing.

Mindful Breathing It can be defined as a technique of practicing breathing consciously, deeply, and calmly by focusing the mind's attention on the present moment (present moment) without giving excessive judgment or impulsive emotional reactions. (Cristiana, Rahma and Antu, undated) This exercise is very suitable and adaptive applied to various groups, including elementary school-age children, because of its simple and fast nature in calming the body and brain. (Purnomo and Suci, 2016) Biologically, when students perform techniques Mindful Breathing By breathing air regularly and exhaling it slowly, the activity of the parasympathetic nervous system will be activated. This process has been shown to reduce physical tension, relieve anxiety, improve concentration, and restore students' cognitive health so that they don't get caught up in panic or an empty state of mind (Blank) when looking at the exam question sheet. (Putri et al., 2024)

Several previous studies have confirmed the effectiveness of this approach in the school setting, such as the effectiveness of mindfulness interventions to manage adolescent anxiety in vocational schools, the use of Mindfulness-Based Stress Reduction (MBSR) in students, to the application of mindfulness techniques using the STOP method (Stop, Take a breath, Observe, Proceed) which has been proven to be able to foster calmness, focus, and confidence in grade V elementary school students. (Distinct, 2021) However, research on the application of this mindful breathing technique specifically in elementary Islamic educational institutions in rural areas still requires in-depth exploration. Based on this background, this study aims to qualitatively analyze the description of students' anxiety, how effective the application of techniques is Mindful Breathing in managing academic anxiety students, as well as obstacles or dynamics of technical implementation mindful breathing in grade VI students before the exam at Madrasah Ibtidaiyah Darun Najah Margoyoso Pati.

2. METHODS

This research applies the type of field research that is held in the school environment to obtain accurate, real, and in-depth data on the subject being studied. The scientific approach used is a descriptive qualitative approach, where the data collected is in the form of a series of written, oral, and visual words that do not emphasize the calculation of statistical numbers. Through this naturalistic qualitative approach, the researcher acts as a key instrument in the field to capture phenomena in its entirety based on the research subject's perspective (*emic perspective*) and produce descriptive data obtained from direct behavioral observation procedures without the presence of variable manipulation or artificial treatment.

This field research activity was carried out at Madrasah Ibtidaiyah (MI) Darun Najah Margoyoso, which is specifically located in Ngemplak Kidul Village, Margoyoso District, Pati Regency, Central Java Province. The determination of the research location is based on the urgency of the need to handle the psychological condition of grade VI students in the madrasah in the face of the pressure of the final exam. The time for the implementation of the research is planned in stages for two months, which covers April to May 2026. The research timeline is systematically divided into two main phases, namely the preparation stage in April which focuses on literature study, licensing administration management, instrument preparation, and preliminary data collection (pre-test), which is then followed by the implementation stage in May in the form of the implementation of mindful breathing technique intervention sessions, learning assistance, and post-test data collection), to comprehensive evaluation.

This study uses a purposive sampling technique by assigning 3 students in grade VI (six) as the main informants of the in-depth interview. The determination of the number of these 3 subjects is based on the principle of Data Saturation (Miles & Huberman, 2014), where the information extracted from the three subjects has reached a saturation point and shows a consistent pattern of answers, so that the addition of informants is no longer necessary. In addition, referring to the theory of Homogeneous Sampling from Patton (2015), the subjects of this study have homogeneous characteristics, namely being in the same age phase and academic pressure. The three children selected also represented a variety of manifestations of anxiety (psychological, physical, and cognitive) on the recommendation of the classroom teacher. This is in line with Creswell's (2016) view that qualitative research prioritizes the *depth* of understanding of the phenomenon being studied rather than the quantity of samples, so that the focus on 3 subjects is considered to have met the principle of validity and sufficiency of scientific data.

3. FINDINGS AND DISCUSSION

3.1. Research Findings

Initial Condition of Academic Anxiety of Grade VI Students Before Intervention

Based on the results of data mining, the announcement regarding the timeline and implementation of the Madrasah Exam actually triggered a wave of negative psychological responses in the majority of grade VI students. This academic anxiety arises as a result of the accumulation of external pressures such as the standardization of passing grades, the fear of failure, and the expectations of parents at home. This pattern of anxiety was confirmed directly through the stories of the three students when interviewed about their feelings before the intervention was applied.

Subject 1 ("R") expresses a form of cognitive anxiety that focuses on emotional fear of a bad outcome:

"I feel very afraid that my exam score will be bad. The thought constantly bothered me to the point that I was not excited to do other activities at school." (Rayhan Nadhifa Failure, 2026)

A similar condition was also experienced by Subject 2 ("F") who experienced acute anxiety, as well as Subject 3 ("N") who expressed profound cognitive confusion:

"I am confused and dizzy looking at the long try out questions. I feel like I want this exam day to end quickly so that the burden on my mind can be lifted." (Farisa Zaina Alya, 2026)

The academic anxiety experienced by the students turned out to be not only settled in the psychological domain, but also transformed massively into a symptom of physical disorders (psychosomatic). When students begin to enter the classroom and sit in exam chairs, their bodies respond to that mental pressure biologically. Subject 1 described a complaint of palpitations or a fast heartbeat. Meanwhile, Subject 2 showed symptoms of hyperhidrosis or excessive cold sweat in the palm area accompanied by muscle tension that triggers trembling in the hands when holding a pencil.

The most fatal impact of this high academic anxiety is the occurrence of cognitive barriers called the phenomenon of sudden blanking or sudden forgetfulness. All students confirmed that the subject matter, math formulas, and memorization that they had actually learned very well at home the night before, suddenly disappeared completely from their memories when the exam question sheets were distributed to their respective desks.

The real condition of students' anxiety was strongly validated by Mrs. Syafi' Fatmawati Zahro' as a grade VI teacher. Through daily observations on the sidelines of the classroom management process, he detected a very extreme polarization of class behavior ahead of the exam week.

"Usually, if you want to take the exam for grade VI children, you get very anxious, ma'am. There are those whose classes become noisy because they panic asking questions here and there, there are also children who are usually cheerful and suddenly become quiet and daydream in the corner of the classroom."(Syafi' Fatmawati Zahro, 2026)

These behavior patterns are divided into two, namely externalized and internalized responses. Some groups of students respond to anxiety vocally (externalization) by making the classroom atmosphere very noisy, rowdy, and panicked because they impulsively throw material questions here and there. On the other hand, some other groups of students responded silently (internalized) by showing withdrawal from social interactions, daydreaming with blank stares in the corner of the classroom, and losing their natural cheerfulness.

"Often. Every morning before the exam bell rings, the queue to the toilet is very long, children go back and forth for permission to urinate because they are tense. Then there were some girls whose faces were pale, when I held their hands it was very cold."(Syafi' Fatmawati Zahro, 2026)

Furthermore, the class teacher also found indications of disturbance which was characterized by a change in the student's facial expressions to be very pale and the surface of the hands that felt very cold when shaking hands with the teacher. Indications of physical anxiety can also be seen from the emergence of elimination disorders, where there is a long queue of students who go back and forth asking for permission to go to the toilet to urinate (*anyang-anyangan*) due to a sense of tension that they are unable to regulate.

Implementation and Barriers During the Mindful Breathing Intervention Process

The implementation of *mindful breathing* interventions in the classroom provides its own dynamics for elementary school-age students. In general, this technique provides an instant relaxation effect and a sense of comfort that is immediately felt in their respiratory and digestive systems. Subject 1 felt his chest become much more relaxed after inhaling slowly consciously, while Subject 2 reported that the tension in his abdomen (*mules*) slowly disappeared as the breathing exercises progressed.

Seeing the urgency of the problem, the researcher and the classroom teacher applied a classically *mindful breathing* technique intervention in the classroom exactly 5 minutes before the exam question sheets were distributed. Students are guided to position their bodies upright but relaxed, close their eyes, then take a deep breath slowly through their nose and exhale gently through their mouth while focusing their full focus on the flow of air in and out.

In its implementation, students reported that this breathing technique provided an instant relaxation effect. Subject 1 felt his chest cavity become much more relaxed and swollen after exhaling slowly. Subject 2 also reported that the tension in the normally excruciating abdominal area (*mules*) leading up to the exam slowly receded and disappeared as the conscious breathing cycle progressed.

However, as a method that is only applied for the first time to elementary school-age children (MI level), this intervention process faces specific obstacles that come from internal and external factors. The most dominant internal obstacle is the emergence of *the mind-wandering phenomenon*, where in the first 1-2 breathing cycles, children's minds are still wandering thinking about the difficulty level of exam questions or memories outside of school.

Meanwhile, external obstacles arise in the form of distractions from peers. The obligation to close one's eyes during training actually triggers the child's psychological urge to be nosy, glance at each other, whisper, and finally laugh out loud with the partner next to him. Based on the results of the data reduction, elementary school-age children need an average transition time and regulation of about 3 to 5 full breathing cycles before they are truly able to dispel these environmental distractions and achieve mindful solemnity focused on the present moment.

From the perspective of education practitioners, grade VI teachers consider that the mindful breathing technique is a very applicative intervention instrument, efficient (only takes 3-5 minutes), and very economical because it does not require any special costs or tools.

"I think this is a very good and practical technique. No tools are needed, just 3 to 5 minutes for children to sit quietly. This is very efficient to insert before the proctor hands out exam questions."(Syafi' Fatmawati Zahro, 2026)

Nevertheless, the teacher gave a critical note that the developmental characteristics of children of MI age who are still in the play phase require strict supervision techniques. In the early minutes of practice, there was often a lack of seriousness from some of the male students in the back row. Therefore, the success of this technique at the elementary school level absolutely requires the active involvement of the classroom teacher to walk between the lines in order to monitor and maintain the solemnity of the exercise atmosphere in a persuasive manner

Post-Intervention Impact Evaluation

Evaluations conducted immediately after the intervention were completed showed very significant results on the recovery of students' psychophysical conditions. Based on the confessions of the three subjects, their physical tension decreased drastically. Subjects R and F stated that their heart rate returned to stability and their palms stopped sweating coldly.

Cognitively and emotionally, this breathing exercise has succeeded in fostering high mental *readiness*. Students feel their heads become cooler, the tense feelings that are stuck in the mind evaporate, and their concentration levels increase sharply. This stable and calm emotional state directly eliminates the phenomenon of *sudden blanking*, so that students can read and analyze exam questions with focus, clarity, and confidence.

This positive impact that is felt instantly triggers the emergence of *self-regulation* awareness in students. All three experimental subjects expressed a strong interest and desire to repeat this conscious breathing technique independently in the future, especially when they were about to encounter subjects who were considered scourges or when they began to feel symptoms of heartburn and anxiety in the classroom.

The success of this intervention was also confirmed spatially by the classroom teacher. Mrs. Syafi' Fatmawati Zahro' witnessed a very contrasting and dramatic change in the classroom atmosphere.

"It feels so different, ma'am. Usually before the class exam it is like a market, crowded. But after Mbak Melani led the breathing exercise, the class was immediately silent, the children looked more solemn and ready to face the exam sheet."(Syafi' Fatmawati Zahro, 2026)

The classroom that was originally in a *high-arousal/chaos* state (very noisy, tense, panicked, and noisy) changed drastically to a *low-arousal/calm* state (quiet, calm, solemn, conducive, and ready) immediately after all students finished doing the conscious breathing exercise

3.2. Discussion

The findings of this study confirm that *academic anxiety* is a real obstacle that is multidimensional for elementary students, which includes affective, cognitive, physiological, and behavioral manifestations. When faced with high-risk evaluation situations such as the Madrasah Exam, the students' sympathetic nervous system is overactivated, triggering the release of stress hormones (such as cortisol and adrenaline) that manifest in psychosomatic symptoms such as palpitations, hyperhidrosis, indigestion and peripheral blood circulation as observed in MI Darun Najah Margoyoso students.

Cognitively, anxiety levels that exceed the optimal threshold have been proven to damage students' *working memory* capacity. The phenomenon of *sudden blanking* or sudden forgetfulness experienced by students when looking at exam questions is a logical consequence of the failure of the cognitive system in retrieving information that has been stored in long-term memory. This is in line with the academic anxiety theory that the fear of failure creates a secondary cognitive load that interferes with the student's focus of full attention on the main academic task at hand.

The application of mindful breathing interventions is present as an effective neuro-psychological solution to break the chain of anxiety. When students are directed to consciously, deeply, and slowly inhale and exhale, stimulation is centered on the vagus nerve which stimulates the work of the parasympathetic nervous system. This parasympathetic activation physiologically lowers the heart rate, relaxes muscle tension, and restores the body's homeostasis. This decrease in biological tension sends safe signals to the brain (specifically the amygdala), thus disabling the *fight-or-flight mode* and restoring the optimal function of the prefrontal cortex as the control center for concentration, logical reasoning, and memory. This situation is what students actually feel in the form of a clear, calm, and ready state of mind (*plong*).

However, this study makes an important theoretical contribution regarding the application of mindfulness in the realm of elementary school-age children (MI/SD context). In contrast to adult subjects or college students who have mature attention control, children have a shorter focus retention capacity and are susceptible to environmental distortions as well as natural propensity to play. Obstacles in the form of mind-wandering and the urge to laugh at the beginning of the intervention session prove that mindfulness in children cannot be released without guidance. The role of classroom teachers as facilitators and active supervisors (through classroom line monitoring) is an absolutely necessary moderator variable to ensure the transition of classroom conditions from *high-arousal* to *low-arousal*.

In the end, the findings regarding the emergence of self-regulation awareness in students and the plan to institutionalize *mindful breathing* by the madrasah indicate that this technique has high sustainability. This technique is not only a first aid tool during exams, but has the potential to be a long-term adaptive coping strategy for students in the face of various academic pressures in the future. By integrating mindful breathing into the daily routine of the madrasah, the school not only pursues the target of high academic graduation, but also actively maintains the *psychological well-being* of children from an early age.

The findings of this study reinforce the contemporary theory that states that *academic anxiety* (Academic anxiety) in elementary school-age children is a real psychological obstacle that is multidimensional, which damages the affective, cognitive, physiological, and social behavior domains of children at school. (Subandi *et al.*, undated) When a student is faced with an exam situation that is judged to threaten his or her self-esteem or academic future, the brain interprets the situation as a threat of danger. As a result, the brain overactivates the sympathetic nervous system to release stress hormones in the form of cortisol and adrenaline into the bloodstream. (Asif *et al.*, 2020) The release of this hormone is the basis for the emergence of clinical manifestations of psychosomatic symptoms in grade VI students of MI Darun Najah, such as muscle tension (shaking), hyperhidrosis (cold sweat), dizziness, and elimination disorders (going back and forth to the toilet).

Cognitively, high levels of the hormone cortisol in the body have been shown to interfere with performance *working memory* (working memory) located in the prefrontal cortex of the brain. Phenomenon *sudden blanking* or sudden mental deadlock experienced by students when looking at the question sheet is not caused by ignorance of the material, but due to the distortion of the cognitive system that is seized by fear, so that the brain fails to carry out the process *retrieval* (callback) memory data that has been stored. (Neil *et al.*, 2021) This phenomenon validates the argument of contemporary qualitative researchers that in children, academic anxiety always carries a linear decline in children's functional thinking capacity.

Application of techniques *mindful breathing* present as a form of intervention *Neuro-Psychological* which works in the opposite direction of the anxiety system. When students are guided to inhale and exhale deeply, regularly, and slowly, stimulation is mechanically centered on the vagus nerve (*vagus nerve*). This stimulation of the vagus nerve acts as a "biological brake" that activates the parasympathetic nervous system (*parasympathetic nervous system*). (Pascoe, Hetrick dan Parker, 2020) The activation of this parasympathetic nerve instantly lowers the heart rate, relaxes the tension of muscle fibers, stops the secretion of cold sweats, and suppresses the production of the hormone cortisol in the child's body.

This decrease in biological tension in the organs sends a safe feedback signal to the brain, thus disabling the *fight-or-flight* mode of the amygdala. When the amygdala calms down, the prefrontal cortex can take over its executive function optimally. This neurological process explains why after *the mindful breathing* intervention, students feel their heads become cooler, their minds become clearer, and memories that were originally blank can be reopened so that they can do the exam with focus and confidence.

However, this study provides a new theoretical record that distinguishes the application of *mindfulness in the realm of children (especially elementary school students/MI) and adult subjects*. If in adult subjects *mindfulness exercises* can be released independently, in children their attention control capacity is still in the early stages of development and has a focus range that tends to be short. Obstacles in the form of *mind-wandering* and sociological impulses to laugh and joke as a result of seeing friends next to them prove that children are very vulnerable to environmental distortions.

Therefore, the role of the classroom teacher here acts as *an external co-regulator* which is very crucial. The presence of teachers who actively monitor, walk between rows, and give gentle but firm voice instructions are moderator variables that ensure the successful transition of the classroom's psychological state from a *high-arousal/chaos* atmosphere to a *low-arousal/calm* atmosphere.

In the *sustainability* dimension, the emergence of a strong desire from within students to repeat this technique independently when facing difficult lessons indicates that *mindful breathing interventions* have succeeded in growing the seeds of *self-regulated learning* (self-regulation in learning). The student is no longer a passive object controlled by his or her anxious emotions, but rather begins to learn to be an active agent capable of managing his or her own mental health. By integrating mindful breathing into the madrasah culture, the institution not only focuses on achieving the quantitative target of graduation grades, but also actively cares for and maintains the *psychological well-being* of children from an early age in a sustainable manner

4. CONCLUSION

Based on the results of the research and discussion, it can be concluded that *academic anxiety* is a real obstacle faced by students of grade VI A MI Darun Najah Margoyoso Pati ahead of the final exam. These manifestations of anxiety are multidimensional, including psychological responses in the form of fear and confusion, psychosomatic symptoms (palpitations, hyperhidrosis, muscle tension, dizziness, and elimination disorders), as well as extreme polarization of class behavior in the form of externalization (noisy) and internalization (withdrawal/daydreaming). The level of anxiety that exceeds this threshold clearly interferes with students' cognitive function, which is evidenced by the emergence of the phenomenon of sudden blanking or sudden forgetting of the material that has been studied when faced with the exam question sheet.

The application of mindful breathing interventions clinically and classically has proven to be effective as a practical solution to reduce such academic anxiety. Through conscious and deep breathing exercises for 3 to 5 minutes, students' parasympathetic nervous systems are activated so that they are able to reduce physical tension, stabilize heart rate, eliminate psychosomatic symptoms, and restore students' mental *readiness* to a calm, clear, and focused state. The success of this intervention was macro able to change the classroom atmosphere from a *high-arousal/chaos* state (crowded and panicked) to *low-arousal/calm* (silent, conducive, and solemn) before the exam sheets were distributed.

However, the application of this technique to elementary school-age children has specific challenges in the form of internal mind-wandering obstacles and external distractions from peers at the beginning of the intervention session. Therefore, the presence of classroom teachers as supervisors who actively monitor the course of the exercise is a determining variable for the success of the intervention. Its high effectiveness, time efficiency, and economical nature trigger the emergence of self-regulation awareness in students to repeat this technique independently in the future. The positive impact was well responded to by the madrasah through a plan to institutionalize mindful breathing techniques into a daily habituation program after morning prayers, in order to take care of *the psychological well-being* of students in a sustainable manner.

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