

The Experience of Stress Among Students of Nursing Schools

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ABSTRACT

This study looked into the level of stress and the symptoms of stress experienced by nursing students. The respondents are adolescents, female, in their 3rd Year level, single, living with their parents, eldest, living less than 1km. from school, with daily allowance of 100-150 Pesos and their first choice of course, is Nursing. Most stressful level for students was felt during Classroom activities and experiences followed by exposure in the Clinical area. The experience of stress can bring about physical symptoms to students. The choice, of course, is associated with the level of stress. Concerted efforts between the school and the affiliating hospital may be done to decrease the level of stress by providing an open, caring, and supportive learning environment to facilitate students' coping and increase self- efficacy. Seminars on time and classroom workload management may be given to students in order to increase their self-direction. The faculty may provide constructive feedback on the performance of the students and must be aware of the uniqueness and individuality of students in the learning process. Course requirements and strategies for instruction must be purposeful and innovative. For the Health Professionals and other personnel in the clinical area must show support and encouragement to students and consider them as an important member in providing care to patients. More intensive career orientation and counselling may be provided to Senior high school students before their enrollment in college in order for them to develop self- direction in their choice, of course, to be taken.

Keywords -

clinical, classroom, nurses, students, symptoms.

Introduction

Finishing a degree is a rewarding experience. However, one must undergo the rigorous process of examinations, submission of requirements and regular school attendance. Finishing a degree is a long and challenging experience. The experience may lead to high levels of stress often leading to effects in physiological and psychological health. Correspondingly, there is a common observation that the high occurrence of stress in the educational years may have an effect later in the practice of the profession. On the field of nursing education, there is still a dearth on studies to address concerns of nursing students. Although there are significant literature on discontent, stress, and burnout in the working nurse.

Stress among nursing students is a constant observable fact in the academe. Statements that years in school are very stressful are often heard from students. However, it is difficult to pinpoint the contributing factors leading to stress. Generally, the stress have been associated to the amount of lectures and skills to be learned which results to lack of time to meet other concerns. Other stressors that have been identified include

concerns about pressures in the clinical area such as dealing with mentally ill, terminally ill patients, faculty and student intercommunications, financial problems and feelings of inadequacy. Students enrolled in the course Bachelor of Science in Nursing (BSN) are exposed to almost the same stressors in the educational process as their medical counterparts. Both groups of students are subject to long hours of study, attending lectures on discussions of diseases, pressures of exposure in the clinical area to concerns on physical and personal nature. Nurses often live through the demands of the profession, however prolonged levels of stress had been correlated to adverse effects on patient care (Crary, 2013). The build up of stress begins in the enrolling in the nursing course. In addition to personal stressors such as family and peers, students in the nursing program experience high levels of stress and anxiety both didactic and clinical coursework that are done synchronously (Chernomas and Shapiro, 2012). The students' physical and mental health are often affected due to stress (Reeve et al., 2013) and in turn interfere the academic performance and finishing the degree (Goff, 2011).

In particular, college freshmen students, are particularly prone to academic stress due to the

transitional nature of college life like moving away from home for the first time, which can necessitate leaving all support systems such as parents, siblings, relatives and friends. This may also entail adjusting to new school mates and a new school environment. There is also a need to establish new acquaintances and are expected to be more independent. More so are predicaments in adapting to more rigorous academic requirements and the need to learn to harmonize with individuals from varied cultures, belief, and social background. For nursing students, stress is also attributed to increased strain brought about by classroom requirements such as examinations, case studies and exposure in the clinical area. This is supported by the study of Dhar R et al as cited by Kumar (2011), disclosing 48.83% mild stress and 11.62% moderate stress among nursing students. Clinical sources of stress include rendering care to terminally patients, interpersonal conflict with other health professionals, interpersonal relations with patients, feelings of incompetence, fear of committing a mistake, work overload and concerns about nursing care rendered to patients. In the classroom, sources of stress may include submission of requirements, enormous assignments and homework, assessment deadlines, uncomfortable classrooms and student-faculty interaction.

Further, in the study of Chernomas and Shapiro, 2013; Crary, 2013, the nursing curriculum comprises of considerable hours spent in both clinical and classroom area, rigorous examinations, and the challenge to attain and maintain a high grade point average in a competing environment. The unique stressors nursing students face differ from students in other professional degree programs, including social work, and pharmacy students (Crary, 2013). This is partly because the curriculum involves both clinical and didactic learning environment, which does not take place at the undergraduate level for other health courses (Crary, 2013).

It is for this reason that exposure of nursing students in the clinical area is a contributory factor to the development of stress. This is greater among students being exposed for the first time and being a beginner at performing clinical skills (Moscaritolo, 2009).

As educators, we are bound with the challenge of responding to concerns of students specifically on being stressed. However, effective interventions can be developed if factors contributing to stress be identified, as well as the physical and emotional changes felt due to stress. This study is, therefore conducted to assess the level of stress among student nurses. The result will serve as a basis in addressing the concerns of students, which contributes to stress. Eventually, students will become more productive, competent, effective, and efficient.

Objectives of the Study

The study determined the level of stress among nursing students. Specifically, it looked into the profile of the students as to age, sex, civil status, ordinal position in the family, living arrangement, distance of residence to school, daily allowance, year level and first choice of course. Further, the study determined the symptoms of stress experienced by the respondents and the significant relationship between profile and level of stress among nursing students.

Methodology

The research employed the descriptive method. The respondents of the study were the 125 Second Year to Fourth year student nurses from schools in Ilocos Sur and Abra School Year 2017-2018. The instrument used was formulated by the researcher and content validated by a pool of knowledgeable people. Part I looked into the profile of the respondents, Part II determined the stressors, and Part III looked into the signs of stress experienced. The statistical tools utilized to treat and interpret the data gathered for the study were frequency and percentage and mean.

Results and Discussion

Socio- demographic Profile of the Respondents

Table 1
Socio- demographic Profile of the Respondents

Profile	f	%
Age		
34- 36	2	1.6%

	Profile	f	%	
Sex	30- 33	2	1.6%	
	26- 29	5	4%	
	22- 25	9	7.2%	
	18- 21	107	85.6%	
	Total	125	100%	
	Male	28	22.4%	
	Female	97	77.65%	
	Total	125	100%	
	Civil Status	Single	120	99.0%
		Married	5	4.0%
Total		125	100%	
Ordinal Position	Eldest	47	37.6%	
	Middle	38	30.4%	
	Youngest	40	32.0%	
	Total	125	100%	
Living Arrangement	With parents	81	64.8%	
	With guardian	26	20.8%	
	Dormitory	18	14.4%	
	Total	125	100%	
Distance of Residence from School	Less than 1 km.	36	28.8%	
	1-2 kms.	16	12.8%	
	3-4 kms.	9	7.2%	
	5-6 kms.	16	12.8%	
	7-8 kms.	13	10.4%	
	9- 10 kms.	10	8.0%	
	More than 10 kms.	25	20.0%	
	Total	125	100%	
Daily Allowance	More than 500 Php	5	4.0%	
	451- 500 Php	2	1.6%	
	401- 450 Php	1	0.8%	
	351- 400 Php	1	0.8%	
	301- 350 Php	3	2.4%	
	251- 300 Php	6	4.8%	
	201- 250 Php	11	8.8%	
	151- 200 Php	39	31.2%	
	100- 150 Php	44	35.2%	
	Less than 100 Php	13	10.4%	
Total	125	100%		
Year Level	4 th Year	13	10.4%	
	3 rd Year	95	76.0%	
	2 nd Year	17	13.6%	
	Total	125	100%	
First Choice of Course	Nursing	62	49.6%	
	Engineering	8	6.4%	
	Medicine	8	6.4%	
	BSBA	7	5.6%	
	Medical Technology	12	9.6%	

Profile	f	%
Information Technology	4	3.2%
Hotel and Restaurant Management	14	11.2%
Agricultural Engineering	1	0.8%
Criminology	3	2.4%
Education	6	4.8%
Total	125	100%

A great majority are from the age of 18-21 years old (85.6%), female (77.65%), and are in their 3rd Year level (76.0%). Almost all of the respondents are single (99.0%) and majority are living with their parents (64.8%) while a substantial percentage are eldest (37.6%), living less than 1km. from school (28.8%), with a daily allowance of 100-150 Pesos (35.2%) and their first choice, of course, is Nursing (49.6%).

Level of Stress Among Nursing Students

The results of the Extent of Stress are shown in Table 2.

Table 2
The Level of Stress Among Nursing Students

Clinical	\bar{x}	DR
1. Situations experienced in the clinical area such as:		
a. handling a critically ill patient in the ICU	2.34	So
b. patient with a new and unfamiliar case/diagnosis	2.64	So
c. trauma patient brought to the emergency room	2.30	So
2. Fear of making mistakes while assisting doctors, nurses	3.66	O
3. Feeling of not having enough knowledge and skills to perform certain procedures	3.60	O
4. Communicating with personnel at the clinical area	3.47	O
5. Different attitudes of health professionals	3.32	So
6. Relations with staff in the clinical area (nurses, physicians, personnel)	3.26	So
7. Attitude of Clinical Instructor	3.45	O
8. Patients' or clients' attitude towards me	3.06	So

Clinical	\bar{x}	DR
9. Negative feedback about my performance	3.33	So
10. Too much responsibility as a student nurse	3.50	O
Overall	3.16	Mod
Classroom		
1. Too many classwork to be learned	3.76	O
2. Fear of failing the course	3.94	O
3. Unpreparedness for examinations	3.51	O
4. Classroom atmosphere created by instructors	3.14	So
5. Time demanded by instructors for activities	3.40	So
6. Competitions with classmates	2.65	So
7. Difficulty of classwork material to be learned	3.26	So
8. Teaching strategy of instructors	3.11	So
9. Unsure what is expected of me by instructors	3.26	So
10. Lack College' response to students' concerns	2.80	So
Overall	3.28	Mod
Personal		
1. Not enough time to spend with family	3.16	So
2. Lack of time for rest, leisure, fun, entertainment, recreation	3.51	O
3. Personal doubts about nursing career	3.26	So
4. Relationship with parents	2.40	So
5. Relationship with partner (boyfriend/girlfriend/husband/wife)	2.26	So
6. Actual personal health problem	2.75	So
7. High expectations of parents	2.70	So
8. Distance between the school and residence	2.95	So
9. Distance between training area and residence	2.98	So
10. Transportation used to go to school and training area	2.85	So
11. Too much responsibility at home	2.88	So
Overall	2.88	Mod
Financial		

Clinical	\bar{x}	DR
1. Insufficient allowance to attend duty or class	2.76	So
2. Delayed allowance given by parents or guardian	2.32	So
3. Too many expenses incurred for projects, requirements, books, paraphernalia	2.83	So
Overall	2.64	Mod
Grand Mean	2.99	Moderate

The Extent of Stress among Nursing students is Moderate (2.99). Among the three areas, the Classroom activities and experiences has the highest overall level of stress (3.28) followed by exposure in the Clinical area (3.16), and least source of stress is Financial concerns (2.64). This is supported by the study of Crary (2013) that stressors faced by nursing students vary from students in other professional degree programs as it involves both pedagogic and clinical settings which is not present in other undergraduate courses. According to Kumar, as stated by Valbona and Sokol (2013), it is a known fact that students experience struggles such as maintaining academic achievements, the need to finish the course and succeed in the future. Other stress factors may be financial problems, sleep disturbances, time management and lack of social activities and working closely with other health personnel.

When analyzing per category, the respondents, when exposed in the Clinical area Often "Fear of making mistakes while assisting doctors and nurses" (3.66) and "Feeling of not having enough knowledge and skills to perform certain procedures" (3.60). Meanwhile, situations experienced in the clinical area such as "Trauma patient brought to the emergency room" is Sometimes (2.30) their stressor. This may be attributed to a gap between theory and practice. Student may feel unprepared in their exposure to the clinical area resulting to fear of making a mistake and lack of confidence in performing a procedure. Other contributory factors may include witnessing pain and suffering of patients and also issues on death and dying. In addition, problematic interpersonal relationships with clinical instructors and nursing staff, being observed and evaluated, communicating with

physicians, and lack of familiarity with the hospital environment contributes to the level of stress among student nurses. It is therefore important for nursing students to be prepared prior to exposure to the clinical area. This supports the findings of Dearmon et al. 2013 that orientation activity prior to exposure in the clinical area statistically increases the knowledge of and confidence in skills needed and a decrease in anxiety.

While in the Classroom, "Fear of failing the course" (3.94) and "Too many classwork to be learned" (3.76) Often contributes to the stress of the respondents. On the other hand, "Competitions with classmates" is Sometimes (2.65) their stressor.

On Personal factors, the respondents are Often (3.51) stressed on the "Lack of time for rest, leisure, fun, entertainment, and recreation and are Sometimes (2.26) stressed by "Relationship with a partner." This may be attributed to long hours spent in the clinical and classroom area. According to Chernomas and Shapiro (2013), in addition to stressors associated with classroom and clinical course work, all students must counter personal stressors, such as demands of families, friends and social obligation.

While on the Financial aspect, "Too many expenses incurred for projects, requirements, books, and paraphernalia Sometimes (2.83) contribute to their stress. This may be because, being in the nursing school, it necessitates having books as references, which may tend to be expensive. Moreover, being in the health professions possessing paraphernalia such as blood pressure apparatus, stethoscope, thermometers to mention a few are very important since they are needed in the clinical area.

Symptoms of Stress Experienced

The results on the Symptoms of Stress Experienced are shown in Table 3.

Table 3
Symptoms of Stress Experienced

Symptoms	f	%
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Symptoms	f	%
1. Frequent headaches, jaw clenching or pain	87	69.6%
2. Gritting, grinding teeth	24	19.2%
3. Depression	37	29.6%
4. Tremors, trembling of lips, hands	24	19.2%
5. Neck ache, back pain, muscle spasms	107	85.6%
6. Always late, little interest on punctuality	84	67.2%
7. Cold or sweaty hands, feet	46	36.8%
8. Unexplained or frequent "allergy" attacks	29	23.2%
9. Heartburn, stomach pain, nausea	79	63.2%
10. Excess belching, flatulence	24	19.2%
11. Constipation, diarrhea	40	32.0%
12. Difficulty of breathing, frequent sighing	90	72.0%
13. Sudden attacks of life threatening panic	15	12.0%
14. Chest pain, palpitations, rapid pulse	100	80.0%
15. Frequent urination	54	43.2%
16. Excess anxiety, worry, guilt, nervousness	72	57.6%
17. Increased anger, frustration, hostility	73	58.4%
18. Frequent or wild mood swings	84	67.2%
19. Increased or decreased appetite	74	59.2%
20. Insomnia, nightmares, disturbing dreams	51	40.8%
21. Trouble learning new information	85	68.0%
22. Forgetfulness, disorganization, confusion	96	76.8%
23. Difficulty in making decisions	76	60.8%
24. Feeling overloaded or overwhelmed	99	79.2%
25. Frequent crying spells or suicidal thoughts	18	14.4%
26. Feelings of loneliness or worthlessness	72	57.6%
27. Little interest in appearance	50	40.0%
28. Trouble learning new information	41	32.8%
29. Social withdrawal and isolation	54	43.2%
30. Constant tiredness, weakness, fatigue	105	84.0%

Results of the study shows that the students experienced symptoms of stress such as "neck

pain, back pain and muscle spasms" (107 or 85.6%) followed by "constant tiredness, weakness and fatigue" (105 or 84.0%) while "sudden attacks of life threatening panic" is the least experienced symptom of stress (15 or 12.0%).

Stress poses a compelling effect on an adolescent's physical and mental well-being. Either it can stimulate and motivate students to improve their academic performance, or it may result to a decrease in their efficiency and effectiveness. This supports the study of Linn (2002) that nursing course yield a substantial stress on students. The adolescents may manifest lack of concentration, decreased academic performance, poor interpersonal relations, insomnia, irritability and habitual absenteeism. This further supports the statement of Bilali and Bilali (2013) that response to stress comprise of physiological changes, such as increase of heart rate and muscle tension, as well as behavioral and emotional changes.

Relationship between the profile and the Level of Stress among Nursing Students.

Table 4
Correlation Coefficients on the Level of Stress and Socio-demographic Profile

Variables	Clinical	Classroom	Personal	Financial	Overall
Age	-.020	.134	-.014	-.049	.010
Sex	-.096	-.042	-.008	.013	-.033
Civil status	-.094	.052	-.095	-.174	-.096
Ordinal Position	-.101	-.114	-.020	-.088	-.089
Living Arrangement	.103	-.047	.043	.041	.040
Distance from School	.060	.087	.013	.024	.049
Allowance	-.069	-.025	-.039	.029	-.027
Year Level	-.035	-.111	-.085	-.158	-.115
Course of Choice	-.249**	-.183*	-.174	-.148	-.212*

Results show that an inverse relationship existed between the course of choice and the level of stress (-.212). This may imply that those students who claimed that nursing is not their first choice have a higher level of stress, more so in their Clinical duty (-.249) and the Classroom (-.183). This may imply that they may have difficulty in adjusting to the demands of the clinical and

classroom area as they are not inclined to the health profession. This is further supported by statements of the respondents that nursing is not their first choice but that of their parents and relatives. On the other hand, the other demographic variables did not show any association with the stress level of the study subjects.

Conclusion

From among the respondents, a great majority of the respondents are adolescents, female, are in their 3rd Year level, single, living with their parents, eldest, living less than 1km. from school, with a daily allowance of 100-150 Pesos and their first choice, of course, is Nursing. The most stressful level for students was felt during Classroom activities and experiences followed by exposure in the Clinical area. It also revealed that their experience of stress brings about a wide array of physical symptoms such as constant tiredness, weakness, fatigue. Moreover, the choice of course, is also associated with the level of stress where those who did not choose nursing have a higher level of stress.

Hence, it is then recommended that concerted efforts between the school and the affiliating hospital may be done to decrease the level of stress by providing an open, supportive and supportive learning environment in order for the students to cope and increase capabilities. Seminars on time and classroom workload management may be given to students in order to increase their self-direction. The faculty may provide constructive feedback on the performance of the students and must be aware of the uniqueness and individuality of students in the learning process. Course requirements and strategies for instruction must be purposeful and innovative. For the Health Professionals and other personnel in the clinical area, they must show support and encouragement to students and consider them as an important member in providing care to patients. Further, instructors, adviser or the guidance counsellor may allot more time for students to express their concerns and help them find ways to minimize the felt symptoms brought about by stress. And lastly, a more intensive career orientation and counselling

may be provided to Senior high school students before their enrollment in college in order for them to develop self- direction in their choice, of course, to be taken.

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