

## Stress and coping in the nursing students

Sukhpal Kaur, Karobi Das, Amrinder, Neha, Kanika, Sukhjit, Meena,  
Pooja, Gagandeep, Isha, Arash, Rajina

**Abstract :** ***Aim:** The purpose of the present study was to identify the stressors and coping strategies of baccalaureate nursing students at one of the premier institutes of the country. **Method:** A total of 205 nursing students undergoing graduation were taken up for the study. The research instrument used was a self administered questionnaire to identify the various causes of stress and the coping strategies they were using to overcome these stresses. **Result:** Major stressors identified were academic in nature followed by social, personal, financial and family causes. Coping strategies used were hobbies and leisure time activities, self care, seeking social support and maladaptive ones such as (crying, isolating self, and avoiding recalling stressful events). **Conclusion:** It is inferred from the present study that by understanding the various stressors amongst the nursing students and by exploring how they cope with their difficulties will provide the building block for further interventions designed to minimize the stress amongst them.*

**Key word:** nursing students, stressors, coping strategies.

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### INTRODUCTION

Stress has been defined as a process which causes or precipitates individuals to believe that they are unable to cope with the situation facing them and the feeling of anxiety, tension, frustration and anger which results from the recognition that they are failing in some way and the situation is getting out of control.<sup>1</sup> Stress always relates to imbalance between demands made on us generally from external sources and our capabilities to meet those demands which usually leads to physical, physiological and psychological consequences. The goal of any nursing education programme is to graduate competent registered professional nurses. During the process of acquiring and demonstrating skill competencies and passing written examinations, the students undergo a considerable amount of stress. Apart

from academic stressors there are financial hardships and other personal stressors that the nursing students encounter. A great deal of stress is encountered by the nursing students in the course of adjusting to a rigorous course of clinical practice as they lack sufficient knowledge and skill to perform their duties and to provide adequate care to the patients.<sup>2</sup> It has been reported that baccalaureate nursing students regardless of the year of training experienced higher levels of stress and higher levels of physiological and psychological symptoms than the students in the other health related disciplines.<sup>3</sup> Studies also suggest that female students have higher levels of stress than their male counterparts.<sup>4</sup> The major stressors identified are academic, environmental, financial, interpersonal, and personal stressors.<sup>5</sup> These stressors may have direct or indirect impact

on the performance/productivity of the students academically, and they may not be able to work wholeheartedly with the patients in the clinical settings. Several investigators have found that more stress occurs during the initial period of clinical practice than in any other periods.<sup>6-9</sup> Stressful events include difficulty in developing relationships with professionals, lack of familiarity with operating procedures and with the hospital environment, lack of professional proficiency, committing errors, uncertainty of patients' expectations, use of improper clinical teaching methods, complexity of the working environment, lack of familiarity with the regulations of the hospital and learning incompetence.<sup>7-10</sup> When stress occurs, a person uses physiological and psychological energy to respond and adapt to a particular situation. The type of coping strategy usually depends on the intensity, duration and number of stressors. Active coping strategies which are viewed as positive coping, generally includes strategies such as problem solving, seeking emotional support from others and engagement in leisure pursuits.<sup>11</sup> However the avoidance and maladaptive coping primarily refers to strategies when individuals try to avoid dealing with problems by cognitively and physically distancing themselves from the situation.

This study aims to identify various stressors experienced by the baccalaureate nursing students and the coping strategies they adopt to combat these stressors.

### **Theoretical framework**

The theoretical framework for the study was drawn from the stress, appraisal and coping theory developed by Lazarus and Folkman (1984).<sup>12</sup> According to this theory, a stressor is perceived as stressful when the situation is appraised by the person as exceeding his or her resources and endangering his or her well being. Doing something and refraining from doing something about the stressful situation are ways

of coping. Coping is the constantly changing cognitive and behavioural efforts for managing specific external or internal demands that are appraised as exceeding the resources of the person. It is the process by which a person manages the appraisal. The function of coping includes managing or alleviating the problem causing the distress and regulation the emotional response to the problem. Once the person has successfully coped with a situation reappraisal occurs. Reappraisal allows for feedback about the outcome and allows for adjusting to the new situation. Successful coping results in adaptation. Adaptation is the capacity of a person to survive and flourish. Adaptation affects three important areas: health, psychological wellbeing, and social functioning. These three areas are interdependent, and when one area is affected all three areas are affected. In the current study, the various stresses studied are related to academic and clinical practice, financial and family problems, and personal and social problems. To cope up with these stresses, the strategies adopted were hobbies and leisure time activities, self care, seeking social support and maladaptive behaviour. The three adaptation outcomes: i.e. physical, psychological and social health were not studied.

### **Material and Method**

A descriptive study was undertaken at one of the premier institutes of India that offers three programmes in nursing - B.Sc. Nursing (4 years), B.Sc. Nursing (Post Basic), and M.Sc. Nursing. For the purpose of present study a total of 205 students undergoing B.Sc. Nursing (4 years) course were taken up. A self administered questionnaire was used to identify the various causes of stress and the coping strategies they were using to overcome these stressors. The various headings under which the stressors identified were: academic and clinical practice; family and financial causes; and personal and social causes. Similarly the coping

strategies adopted by the students were grouped under various headings like hobbies and leisure, self organization, social support and maladaptive. An informed consent from each participant was obtained. They were explained about the objective of the study and were assured that the information obtained would be used only for research purposes. Descriptive statistics was employed to analyze the data.

**Results**

Demographic profile of the subjects. The mean age of the students was 21.2 years ( $\pm 1.23$ ) with the range between 17-25 years. Majority of the subjects belonged to Sikh (53.7%) and Hindu (44.9%) religions, were from nuclear family (87.8%) and had family income more than Rs 10,000/month (60%).

**Academic causes of stress**

More than 80% of the students were stressed because of too many assignments, long college hours, study overload, and restrictions in the college. In around three fourth of the participants, the stressors experienced were short holiday breaks, long hours of working in the clinical areas, incomplete log books, nursing as a profession and lack of guidance in the ward. Around 50% were afraid that they were not adequately prepared for nursing.

**Table 1: Stresses related to academic and clinical practice**

Academic causes	Frequency N =205 (%)
Too many assignments and meeting dead line	184(89.8)
Long college hours	184(89.8)
Study overload	174(84.9)
Restrictions in the college	165(80.5)
Too short holiday break	160(78.1)
Working long hours in the ward	159(77.6)
Incomplete log book	159(77.6)
Nursing as a profession	147(71.7)
Lack of guidance in the ward	142(69.3)
Lowered self esteem as feeling of inferiority	133(64.9)
Afraid that I am not adequately prepared for nursing	116(56.6)

**Financial and Family causes**

Around 40% participants were stressed because of financial problems in the family. Chronic diseases in the family and frequent pressure from the parents on the academic performance were the stressors in around one third of the participants. Approximately in one fourth subjects the stressors were lack of guidance from the parents, death of a family member and unhappy home life.

Personal and social causes of stress were relationship with fellow students (64.6%), home sickness (61%), and health problems (61%). Around one fourth were stressed because of their relationship problem with opposite sex. 35.6% perceived peer pressure to be a cause of stress.

**Coping strategies used by the students**

More than 3/4th of the subjects were using coping strategies as hobbies and leisure time activities (listening to music, sleeping and watching TV), self care (praying to God and talking to self), seeking social support (sharing and seeking help) and by making use of maladaptive behaviour (isolating self and crying). Around 70% were 'getting irritable and start shouting at others' to relieve their stress. 'Phoning to friends and others', 'staying around people', 'reading books and magazines, over reacting, eating less and 'imagery' were practiced by around 60% of the subjects. Around 50% used methods such as to 'blaming others', 'reading religious books', 'diary writing', 'playing', 'painting', and 'dancing'. The least preferred coping strategies were 'gardening' and 'exercising', though around 20% used to 'overeat', 'take long warm bath', and had the habit of 'nail biting' at the time of stress.

**Discussion**

The results of the current study showed that the nursing students were not satisfied with their academic components which included too many assignments and deadlines, long college hours,

**Table 2: Coping strategies among students (N=205)**

Frequency	Coping strategies			
	Hobbies and leisure	Self care	Social support	Maladaptive
>75%	Listening to music Sleeping Watching TV	Praying Talking to self	Sharing and seeking help	Crying Isolating self
>51-74%	Reading books and magazines	Imagery	Phoning Staying around people	Avoiding to recall stressful events (selective forgetting) Being irritable and shouting at others Taking tea and coffee Over reacting Less eating
>25-50%	Walking around aimlessly Playing Doing something creative (e.g. painting) Dancing	Reading religious books Meditation/Yoga Writing diary		Blaming others
>24%	Taking warm bath Exercising Gardening			Nail biting Over eating

study overload, restrictions in the college, and too short holiday breaks. Even they faced stress during their clinical experience that was mainly due to long clinical hours and lack of guidance in the wards. Some were tense because they have opted for nursing as a profession and were feeling inferior as compared to doctors. Most of the students were around 17 years of age when they entered into the programme (B.Sc. nursing-4 years) course and are around 21 years at the end of the programme. During this time period they undergo a process of searching for self image and developing self confidence as a part

of 'seeking identity' which is a key developmental task of adolescence. Though some of the students willfully join the nursing profession, others join due to parental pressure or other reasons. The students usually lack sufficient knowledge and skill to perform their duties and to provide adequate care to the patients. Thus the clinical experience becomes a source of stress for the students. That clinical experience is the most anxiety producing component of nursing programme, has been documented in many studies.<sup>2</sup>The theory-practice gap, lack of clinical experience, unfamiliar area, difficult patients, fear

of making mistakes, and being evaluated by faculty members were expressed by students as anxiety producing situations in their initial clinical experience.<sup>2,13-15</sup> In the current study though around 50% had the feeling of incompetence and lack of professional skill, 40% were stressed because of financial problem in the family. Timmins and Kaliszer<sup>16</sup> did factor analysis of various stressors that cause stress amongst nursing students. They had reported that the five factors which emerged, as sources of stress amongst nursing students were academic, relationship with teacher and staff in the ward, financial constraints, and the death of a patient. In another study<sup>15</sup> the four main stressors in descending order were nursing studies, finances, family, and health. Kirkland<sup>4</sup> has documented that both by priority and frequency of occurrence the major stressors were academic in nature followed in descending order by environmental, financial, interpersonal, and personal stressors. In 60% of the participants of the current study the causes of stress were relationship with fellow students, home sickness, and health problems. Around one fourth were stressed because of their relationship problems with the opposite sex. In one of the studies<sup>17</sup> it has been reported that the four stressful events identified were interpersonal relationships, initial experiences, feeling helpless and demeaning experiences; however, the most frequently reported stressful event was interpersonal relationships.

Irrespective of the cause, stress affects the performance of the students both academically and in the clinical settings. Though small amount of anxiety does keep an individual on his toes, making him more careful and cautious, high levels of stress are believed to affect the students' health that ultimately affect the outcome. Coping strategies play an important part in the process of stress management, as the effective coping strategies facilitate the return to a balanced state and thus help to resolve the stressful situation.

In the current study listening to music, praying to God and sharing and seeking help during stressful situation was on the top most of the coping strategies being used by the students. The students were taking social support by sharing and seeking help (88%), telephoning (64%), and staying around people (58%). However Mahat<sup>18</sup> has reported eight categories of coping like problem solving, accepting responsibility, seeking social support, self control, tension reduction, avoidance, wishful thinking, and negative feelings. Amongst these the majority of the students utilized the 'seeking social support' category as the coping strategy the findings of which are similar to the findings of our study. On coping behaviour of nursing students during clinical practice abound with external-control strategy, the internal-control strategy, the 'let it be' strategy, the emotional strategy, talking to someone, improving professional abilities, losing temper or smashing things, logical analysis, problem solving, seeking information, emotional adjustment, seeking social support and relaxation.<sup>8,10</sup>

In conclusion the study has important implications on how nursing teachers may be able to assist and help students in handling stress effectively. They should encourage the students to have an optimistic attitude, to be more understanding and less critical during clinical practice and assist them in developing problem solving skills.

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Sukhpal Kaur, Lecturer  
Karobi Das, Lecturer  
Amrinder, Formerly Nursing Intern  
Neha, Formerly Nursing Intern  
Kanika, Formerly Nursing Intern  
Sukhjit, Formerly Nursing Intern  
Meena, Formerly Nursing Intern  
Pooja, Formerly Nursing Intern  
Gagandeep, Formerly Nursing Intern  
Isha, Formerly Nursing Intern  
Arash, Formerly Nursing Intern  
Rajina, Formerly Nursing Intern  
National Institute of Nursing Education  
PGIMER, Chandigarh

**Corresponding Author :**  
Sukhpal Kaur, Lecturer  
NINE, PGIMER, Chandigarh  
E mail: sukhpal.trehan@yahoo.in