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# Assessing stress, protective factors and psychological well-being among undergraduate nursing students



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#### ABSTRACT

Objectives: This study sought to examine predictors of psychological well-being (PWB) among nursing students at an Australian regional university. The study postulated that: stress would have a negative effect on PWB; internal factors such as self-efficacy, resilience and mindfulness would have a positive effect on PWB and, external factors like social support would have a positive effect on PWB.

Design: A cross sectional descriptive predictive model was used to test the study hypotheses.

Setting and Participants: Convenience sampling was used to recruit participants at an Australian regional university with non-traditional nursing cohorts and where the curriculum is predominantly taught on-line.

Methods: Six validated scales (The Perceived Stress Scale; General Self-Efficacy Scale; Connor Davidson Resilience Scale; Multi-Dimensional Scale of Perceived Social Support; Psychological Wellbeing Scale, Mindfulness Awareness Scale) and a demographic inventory were administered as an online survey. A multiple linear regression analysis was performed to assess the internal and external factors to predict the participants' PWR

Results: Of the 1760 invitations distributed, 657 responses were returned; however, because some were found to be significantly incomplete, 538 responses only were used for the data analysis. Demographics illustrated the characteristics of a non-traditional cohort that was female dominated. All three hypotheses were supported. An unexpected finding was that while it might be anticipated that non-traditional cohorts will have stronger coping skills due to life experiences, this should not be assumed. We found that our participants had higher stress scores and lower psychological wellbeing, compared to the younger groups (nursing or health allied) reported in previous studies. It was perhaps due to their difficulties in juggling responsibilities between study, work and family and the nature of studying externally online.

Conclusions: This study represents only a snapshot in time but emphasises the need for specific curriculum preparation to promote positive coping strategies. In this way, new graduates may be better prepared to engage with complex, demanding and ever-changing work environments across the globe.

#### 1. Introduction

It is well-recognised that the work environment of nursing is unpredictable and presents constant challenges. As routine, nurses at all levels are faced on a daily basis with managing complex events as part of their professional role. These events are viewed as part of the job, yet we as nurses, researchers and educators are aware of the stressful impact that contemporary nursing places on colleagues. Further, we are

concerned for the psychological well-being (PWB) of our students, since we are given the responsibility to educate, inspire and prepare them adequately for nursing practice.

Within the broad context of professional nursing, the literature illustrates death and dying, increasingly complex care and providing emotional support for clients and families are common stressors of contemporary nursing (Smith, 2014). Increased professionalization of nursing as a discipline incurs greater responsibilities that are reflected

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in more stringent standards and codes of nursing practice. The acuity and complexity of patient care has risen, yet inpatient length of stay is shorter, health and resources are constrained and lower staff ratios may occur (McCloskey and Taggart, 2010). The effects of an emotionally and physically demanding profession may be characterised by loss of productivity, increased levels of sick leave or absenteeism (Perry et al., 2015). Drury et al. (2014) describe compassion fatigue among emergency nurses, a phenomenon characterised by emotional exhaustion, depersonalisation, sadness and depression and an inability to work. Where such symptoms persist over a period of time, mental illness may result (Kidd and Finlayson, 2010). Hooper et al. (2010) consider all nurses, regardless of speciality, to be at such risk.

#### 2. Background

From a review of the literature we found a growing body of evidence indicating that nursing students across a multitude of countries experience stress (Altiok and Uston, 2013; Beddoe and Murphy, 2004; Chernomas and Shapiro, 2013; Gibbons et al., 2010; Walker and Mann, 2016). Stallman's (2008) study of students from two large Australian universities found higher rates of psychological distress among health service students than in the general population, although the study coincided with end of year examinations. In a replication of the 2008 study, Stallman and Shochet (2009) surveyed students across three Australian universities and again found a high prevalence of psychological problems among tertiary students generally when compared to the general population.

Laws and Fiedler (2012) noted long standing evidence of psychological distress among Australian tertiary students, a characteristic that is consistent with other countries (Lovell et al., 2015). Stressors may include students' academic, financial and interpersonal circumstances and support systems, with peaks of anxiety common around assessment deadlines and examination periods. Cleary et al. (2012) identified that issues around well-being such as mood, anxiety, alcohol and other drugs and eating disorders are common among young people enrolling at university. Any or all of these may impact on students' abilities to cope with the requirements of academic work on a day to day basis. Being able to organise and prioritise deadlines and to balance study and other commitments are key attributes contributing to academic success and therefore to psychological wellbeing.

For practice based disciplines such as nursing, clinical (practicum) placements can be an additional source of anxiety that is also evident across countries. A comparison of Spanish nursing students across each year of a three year program identified clinical practice as the main source of psychological stress (Jimenez et al., 2009). Gibbons et al. (2010) identified clinical placement as a major stressor among British nursing students. Melincavage (2011) found high levels of anxiety among North American nursing students attributable to clinical placement issues, sufficient in some cases to cause students to exit their study program. Key anxieties centred on students' self-perception of clinical competency, and staff attitudes and expectations of them during practicum, particularly during early placements. In addition, a recent Canadian study of nursing students measured levels of stress, depression and anxiety and also identified clinical placements as a major stressor (Chernomas and Shapiro, 2013).

It may not be realistic to purport an aim to remove work and study related stressors. However, identifying strategies that better enable students to cope with their work environment and reduce anxiety and stress is both desirable and plausible. This has been done using various survey tools that have explored stress coping and satisfaction levels among nursing students, including mindfulness, self-efficacy, and resilience. Furthermore, the association between personal, social and psychological wellbeing is also present in the literature.

Lo's (2002) longitudinal study of an Australian cohort in a regional university found that second year students experienced higher transient levels of stress that were most likely related to increased practice

demands. While the small size and the age of the study limit what might be extrapolated from it, it is one of few studies to include mature age students. For these students, leading stressors identified were firstly academic, then financial, followed by interpersonal and health issues. Family, partner/spouse or friends were identified as important support sources for participants. Among these mature age students, finding a balance between the demands of study, work and family was commonly stressful.

Beddoe and Murphy (2004) sought to identify if an eight week program of mindfulness-based stress reduction course (MBSR) could better equip students to cope with personal and professional stress. While the study was limited by a single site, a small sample and the absence of a control group, the results indicated a lessening of student anxiety through mindfulness practice. In response to evidence of high stress levels among Australian tertiary students, van der Reit et al. (2014) conducted a pilot study that evaluated the effects of a stress management and mindfulness program for first year nursing and midwifery students.

Although this was a small study in a single location, results indicated positive outcomes around indicators of well-being such as improved sleep patterns, levels of concentration, and clarity of thinking. Similarly, Smith's (2014) critical review of studies using MBSR among health professionals including nursing students identified MBSR as a very promising option.

Walker and Mann (2016) and Klainin-Yobas et al. (2016) also advocated mindfulness as a means to assist nursing students to cope with the stressors of clinical practice. Mindfulness was viewed as providing an approach to non-judgemental awareness of moment to moment experiences that is accompanied by sufficient support in the literature, thereby demonstrating the link between mindfulness and psychological wellbeing (PWB).

Self-efficacy is considered as a belief in one's personal competence that enables an individual to decide their degree of effort and persistence when faced with difficulties (van Dinther et al., 2011). Over a timeframe of one semester, Taylor and Reyes (2012) sought to explore self-efficacy and resilience among North American nursing students at varying stages of their study program. The self-efficacy score was slightly higher at the end of the semester, although not significantly so. The authors noted students ranked their ability to problem solve higher where they had made a greater personal effort to address their perceived difficulties. While the study timeframe was brief, the authors contended that higher levels of resilience contributed to persistence in addressing perceived challenges.

Resilience is a characteristic of the individual that is found in relation to nurses in challenging situations. In an extensive review of the literature, Aburn et al. (2015) found that while no universal definition of resilience existed, many of the studies reviewed cited Masten's (2001) work that identified personal strength drawn from life experiences and the contribution of support from friends and family in times of crisis integral to 'resilience'.

What constitutes or contributes to personal well-being can have many aspects. The link between psychological wellbeing and physical activity is widely acknowledged. Using a survey questionnaire and a single site convenience sample of first and third year nursing students, Hawker (2012) investigated the relationship between mental wellbeing and physical activity. Her results found some support for a link between the two, however the high percentage of obese participants may have in part have influenced the findings. Since gender is known to contribute to differences in physical activity, the female gender bias of the sample may also have affected results. In a study of Australian undergraduate students at a single university that explored depression, anxiety and stress symptoms and health behaviors, Lovell et al. (2015) found a similar pattern of insufficient physical activity, particularly among female students.

A cross sectional study of Cypriot nursing students (n = 123) by Papazisis et al. (2014) sought to determine if a relationship existed

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