

# Stress on clinical practice among student nurses from selected colleges in, Ujjain.

Mr.Vimalesh Vyas,Ph.D Scholar,Malwanchal University

Prof.Dr. Jinu K Rajan ,Ph.D Supervisor,Malwanchal University

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## Introduction

Professional and competent nurses are produced by following a nursing curriculum that emphasizes application of knowledge and skills over the course of their job. Since clinical learning and training employs all of the clinical skills; affective, psychomotor, and theoretical knowledge should be prioritized for students. Information and skills learned in the clinical setting while working with real patients are considerably more valuable in nursing education than those learned in a classroom or laboratory setting using contrived scenarios. In clinical practice, nursing students can obtain the practical knowledge and psychomotor abilities they'll need as they advance in their careers.

During their training, nursing students are subjected to both academic and workplace stress. The sources of stress, or stressors, that interact and contribute to the beginning of stress in organizational settings are an area of interest in research on workplace stress (Spielberger & Reheiser 2005). Workplace stressors include things like deadlines, workload, decision-making, and constant change.

In the last few decades, research on workplace health has shifted from a prevention-focused strategy to one that takes a global view. Psychosocial concerns such as occupational stress that occur in this situation are particularly important. Physical, psychological, and behavioral illnesses are just a few of the side consequences of stress on the body and mind. As a result, stress is linked to concerns at the organizational level, such as more absenteeism, lower job quality, and lower productivity..

The coping methods students choose to use in their clinical practice can modify and influence their stress levels. Students who use effective coping methods do better academically, and they also experience less stress as a result of such strategies. Coping tactics found to involve problem resolution, transference (efforts to maintain a good attitude toward the stressful situation), and unwavering optimism.

Over the last 60 years, nursing education at the undergraduate level has grown dramatically in India. The nursing program in India lasts four years. The Indian nursing council, which is in charge of accrediting universities' nursing programs, sets the standards for nursing curricula in India. As a result, students in their second year of practice will be expected to complete Medical Surgical Nursing I and Medical Surgical Nursing II Practice II in their third year, and students in their fourth year will be expected to complete Mental Health Nursing and Paediatric Health Nursing before completing the Maternal Health Nursing course in their fifth year. In India, nursing students must do around 2000 hours of clinical practice during the course of their training. In general, clinical educators have a Master's degree and a lot of clinical experience under their belt. Clinical teachers often have a one-to-ten student-to-clinical-instructor ratio. The researcher's goal in this study is to discover the most common sources of stress encountered by nursing students during clinical rotations.

## Methodology

The common stressors experienced by nursing students throughout their clinical practice are assessed using a descriptive comparative correlational design.

The sampling process and the samples used in it

The samples were chosen from a convenient sample of 100 nursing students from the BSc Nursing Program who were in two separate nursing years at the medical college at the time of the current study (50 from 3rd year and 50 from 4th year)

### Settings Ujjain, Madhya Pradesh, Selected Hospitals Instruments

Perceived Stress Scale (PSS) and Coping Behaviour Inventory (CBI) were included in the self-reported questionnaire (CBI). Information such as gender, age, and years of education were gathered, as well as an interest in nursing and prior nursing experience.

### Compilation of Information

During clinical practice, researchers spoke with students in order to acquire more representative data on stress perception. At the conclusion of the clinical practice, the researcher approached the students and described the study's goal. Students received a cover page with study details. Researchers enlisted the help of eager students, who were instructed to complete a questionnaire and submit it to them as soon as they could. To ensure a representative sample, students who completed the surveys in their entirety were excluded.

### Analyzing the Information

The variables in the study were described using descriptive statistics that were adequate for the measurement level. Statistical tests such as Bivariate (T-test; ANOVA) and Multivariate (Multiple Regression) statistical analysis were also utilized to help answer the problems.

### Result

According to the findings of the research, 96.1 percent of the population agrees. Between 19 and 22 years old, the average age of the students was 20.9. (1.4). Females accounted for 66.2 percent of the total participants. Students in their second academic year had the highest participation rate (42.4 percent), while students in Medical Surgical Nursing I had the lowest participation rate (39.5 percent). The majority of participants, 66.5 percent, were interested in nursing as a career, while only 18.2 percent had prior nursing experience. Female teachers taught the majority of the participants (68.9%). According to the results, participants reported an average level of stress of 1.56 (SD=.63). Stress levels were above average in 44.22 percent of the subjects. While stress from assignment work was the most common source of anxiety, anxiety from peers and daily life were also common (M=1.65, SD=0.91), as were stressors from healthcare providers and school personnel (M=1.58, SD=0.89). Most students were worried about their grades (M=2.62, SD=1.34), followed by clinical practice pressure (M=2.15, SD=1.22) and the impression that one's performance did not exceed teachers' expectations (M=1.98, SD=1.17). Patients' communication (M=.85; SD=1.14), inability to offer effective nursing care (M= 1.18; SD=1.07), and unfamiliarity with medical history and terminology (M=1.25; SD=1.09) were all minor sources of stress for the students in the study.

Student mean differences in different academic years, courses taken and stress levels were tested using the ANOVA test. As a consequence of the research, it was discovered that the student's academic year had a significant impact on his or her stress level.

### Discussion

BSc nursing students' coping methods and their perceptions of stress are examined as well as stress-related clinical practice elements during various academic years of study. According to the results of the study, half of the participants had stress levels that were higher than the average. Another study conducted among Jordanian nursing students during their first clinical rotation found that 52% of them had stress levels above the national average, which is consistent with the current findings. Three of the six stress-related indicators measured in the current study showed students to be less stressed than the average (stress of the environment; stress of taking care of patients and stress from lack of professional knowledge and skills). However, comparing stress levels across different people and contexts may be tricky. According to a trans-cultural approach, an individual's perceptual and cognitive processes can explain whether or not they perceive a situation as stressful.

Apparently, factors including basic necessities, self-esteem, and self-concept influence how students assess and respond to a given circumstance. The locus of control theory also helps to explain this. Because of this, students who are interested in nursing have greater control over the situation, which boosts their confidence.

### Reference

1. Aiken LH, Clarke SP, Sloane DM, Sochalski J. Cause for concern: nurses' reports of hospital care in five countries. *LDI Issue Brief* (2001) 6(8):1-4.

2. Aiken LH, Clarke SP, Sloane DM, Sochalski JA, Busse R, Clarke H, et al. Nurses' reports on hospital care in five countries. *Health Aff (Millwood)* (2001) 20(3):43–53. doi:10.1377/hlthaff.20.3.43
3. Aiken LH, Clarke SP, Sloane DM, Lake ET, Cheney T. Effects of hospital care environment on patient mortality and nurse outcomes. *J Nurs Adm* (2009) 39(7–8 Suppl):S45–51. doi:10.1097/NNA.0b013e3181aeb4cf
4. Clarke SP, Sloane DM, Aiken LH. Effects of hospital staffing and organizational climate on needlestick injuries to nurses. *Am J Public Health* (2002) 92(7):1115–9. doi:10.2105/AJPH.92.7.1115
5. Floyd JA. Nursing students' stress levels, attitude toward drugs, and drug use. *Arch Psychiatr Nurs* (1991) 5(1):46–53. doi:10.1016/0883-9417(91)90009-T
6. Deasy C, Coughlan B, Pironom J, Jourdan D, Mannix-McNamara P. Psychological distress and coping amongst higher education students: a mixed method enquiry. *PLoS One* (2014) 9(12):e115193. doi:10.1371/journal.pone.0115193
7. Beck CT. Burnout in undergraduate nursing students. *Nurse Educ* (1995) 20(4):19–23. doi:10.1097/00006223-199507000-00008
8. Aiken LH, Clarke SP, Silber JH, Sloane D. Hospital nurse staffing, education, and patient mortality. *LDI Issue Brief* (2003) 9(2):1–4.
9. Beck DL, Srivastava R. Perceived level and sources of stress in baccalaureate nursing students. *J Nurs Educ* (1991) 30(3):127–33.
10. Aiken LH, Sloane DM, Clarke S, Poghosyan L, Cho E, You L, et al. Importance of work environments on hospital outcomes in nine countries. *Int J Qual Health Care* (2011) 23(4):357–64. doi:10.1093/intqhc/mzr022
11. Decker F. Occupational and non-occupational factors in job satisfaction and psychological distress among nurses. *Res Nurs Health* (1997) 20:453–64. doi:10.1002/(SICI)1098-240X(199710)20:5<453::AID-NUR9>3.0.CO;2-N
12. Antos MQT, de Almeida AO, Martins HO, Moreno V. Aplicação de um instrumento de avaliação do grau de depressão em universitários do interior paulista durante a graduação em Enfermagem. *Acta Sci Health Sci* (2003) 25(2):171–6. doi:10.4025/ACTASCIHEALTHSCI.V25I2.2228
13. Jimenez C, Navia-Osorio PM, Diaz CV. Stress and health in novice and experienced nursing students. *J Adv Nurs* (2010) 66(2):442–55. doi:10.1111/j.1365-2648.2009.05183.x
14. Mediterranean WHOOfE. Occupational Health, A Manual for Primary Health Care Workers. Cairo: Mediterranean WHOOfE (2001).