

COPING STRATEGIES FOR STRESS AMONG STUDENT NURSES: A CASE OF SUNYANI NURSES' TRAINING COLLEGE

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ABSTRACT

This study sought to examine stress and coping strategies adopted by student nurses in the Sunyani Nurses' Training College. A questionnaire made up of two sections was used in the collecting of data. The random sampling method was used, of which two hundred and fifty students partook in the study. The data was analysed using the independent t- test. The study revealed no significant difference between male and female student nurses with regards to the stress coping strategies. Based on the findings of the study, it is recommended that the general studying and equipment needed for successful clinical practical sessions for trainees must be improved by providing state of the art equipment by government and hospital management to help sustain the interest of the students in the nursing profession.

Keywords: Stress, Coping Strategies, Students nurses and Sunyani

1.1 Introduction

Stress has been categorized as an antecedent or stimulus, as a consequence or response, and as an interaction. It has been studied from many different frameworks or perspectives (Selye, 1956). For example, Selye proposed a physiological assessment that supports considering the association between stress and illness. The psychological view in which stress is "a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being" (p. 2).

The outside world and indeed Ghana are facing a nursing shortage (Buchan&Calman 2004). Advances in medical technology help people to live longer, increasing the aging population requiring medical and nursing care (Morgan, 2001). Admission to nursing programs has not declined in recent years, but the number of graduating students may not be enough to provide care to everyone (Chang et al., 2005). It is therefore important that nursing educators not only recruit to nursing schools, but also provide quality education in an environment conducive to learning which will minimize attrition. In Ghana, nursing education programs are offered at both the college level and at the university level. Some many prospective students compete for admissions into the available Nursing colleges and the Universities. According to the MOH 2009 annual report, 1075 students were admitted into the Nursing Colleges and 320 were admitted into Nursing Degree programs in the Universities. Three years down the lane, out of the 1075 students, 286 had left their colleagues indicating an attrition rate of 26.6%. In the same year in the universities, 17 had left their colleagues as at the third year of their studies indicating an attrition rate of 5.3%.

Clinical experience has been linked to high levels of stress and anxiety in nursing students and the literature shows that there is a link between the nursing student attrition and the stress related to the clinical experience (Deary, Watson, & Hogston, 2003; Lindop, 1989; Morgan, 2001). Stress related to clinical rotations has also been shown to increase nursing student absenteeism (Timmins & Kaliszer, 2002). Stress and high levels of anxiety also negatively affect learning and student performance in clinical settings (Hogston, 1995).

There are a multitude of factors which have been linked to students' experiences of stress and anxiety in clinical setting. They include: a) the interpersonal relationships with health care professionals; b) constant observation and evaluation by teachers; c) perceptions of non-supportive, threatening faculty; d) ineffective teaching skills of the nursing educator; e) unrealistic expectations by staff and teachers; f) fear of making a mistake or harming a patient; g) lacking the clinical knowledge to accomplish a task; h) feeling of inadequacy; and i) unfamiliarity with the clinical setting, among others. Providing clinical experiences within a non-threatening setting is therefore essential to student learning.

The goal of this research is to describe the realities of students' clinical experiences and to develop a deeper understanding of the stressors facing students during their clinical learning. The results of the study will hopefully sensitize nursing educators and nurses working with nursing students to the challenges students are facing.

1.2 Objective of the study

The main objective of the study is to examine the sources and coping strategies of stress among student nurses. The specific objectives of the study are to:

1. Identify the coping strategies for stress adopted by student nurses in the Sunyani Nurses' Training College.

1.3 Research Hypotheses

1. H_0 : There will be no significant difference between fresh and continuing student nurses with regards to the coping strategies they adopt in managing stress.
2. H_0 : There will be no significant difference between male and female student nurses with regards to the coping strategies they adopt in managing stress.

2.1 Theoretical Framework

The Life Events Theory of stress argues that there are various events in life that can be very stressful and this served as the theoretical base for this study. The Life Events Theory basically underscores the significant influence of stressors (major and minor life events) in eliciting the stress response. According to this theory, life events such as the death of a loved one, experiencing of personal injury or illness, problem of unwanted pregnancies or even change of residence can all prove to be very stressful. All these life events if not managed properly can prove to be a major stumbling block in the attainments of one's personal goals and ambitions. In an attempt to measure life changes, Holmes and Rahe developed the life events scale (also known as the Holmes and Rahe Social Readjustment Rating Scale). The life events are ranked in order from the most stressful to the least stressful. According to the scale, some of the most stressful life events include death of a spouse, divorce, detention in jail or other institutions, major personal injuries or illness, being fired from work just to mention a few. The scale rates life events such as vacations, major holidays, minor violations of the law just to mention a few as some of the least stressful life events.

3.1 Sample Size and sampling technique

The sample size for the study was two hundred and fifty (250). Seventy four (74) of the respondents were males whiles one hundred and seventy six (176) were females. With respect to age, ninety one (91) of the respondents were between the ages of seventeen to twenty years, seventy six (76) were between the ages of twenty one to twenty four whiles eighty three (83) of the respondents were between the ages of twenty five to thirty years. With reference to the educational level of the respondents, ninety one (91) of them were in their first year, one hundred and one (101) were in their second year whiles fifty eight (58) were in their final year. The Sunyani Nurses Training College was used in the study. This was done to ensure that the sample size was obtained. In selecting the student nurses for the study, random sampling was used. It involves choosing the students at random and continuing that process until the required sample size was obtained (Cohen, Manion & Morrison, 2007). This helped to prevent bias in the selection of students for the study.

4.1 Test of Hypotheses

Hypothesis one states that “There is no significant difference between fresh and continuing student nurses with regard to the coping strategies they adopt in managing stress.”

Table 1: t-table comparing the coping strategies adopted by fresh and continuing student nurses

Scale	Fresh		Continuing		t-Value	p Value	Remarks
	Mean	SD	Mean	SD			
I think regular exercise can offer a physical release of stress for me	4180	1602	4257	1925	.748	.081	NS
Adequate staffing makes practical lessons less stressful for me	2298	2009	4062	1563	.854	.005	S
Organising my studies by setting priorities helps to reduce stress for me.	3689	1881	3591	2424	.564	.119	NS
I think developing a good support network among fellow students and supervisors helps to reduce stress.	7216	1971	3423	1610	.341	.020	NS
I like being flexible for change when things do not go as planned. It helps to reduce stress for me.	2455	1558	7214	2031	.333	.020	NS
Average	4696	2131	2423	1573	.043	.298	NS

For coping strategies adopted by fresh student nurses ($M=.47$, $SD=.21$); that of continuing student nurses was ($M=.24$, $SD=.46$), $t(250) = 1.04$, $p = .298$, $df = 248$. Therefore we fail to reject the Hypothesis 1. This implies that no significant difference exists between fresh and continuing student nurses with regards to how they cope with stress.

Hypothesis two states that “There is no significant difference between male and female student nurses with regards to the coping strategies they adopt in managing stress.”

Table 2: t-table comparing the coping strategies adopted by female and male student nurses

Scale	Female		Male		t-Value	P Value	Remarks
	Mean	SD	Mean	SD			
I think regular exercise can offer a physical release of stress for me	4458	1384	4519	1450	.633	104	NS
Adequate staffing makes practical lessons less stressful for me	2787	1970	2406	1983	.663	098	NS
Organising my studies by setting priorities helps to reduce stress for me.	3396	1619	3978	2311	1.466	144	NS
I think developing a good support network among fellow students and supervisors helps to reduce stress.	7927	1551	3885	2056	.603	.000	NS
I like being flexible for change when things do not go as planned. It helps to reduce stress for me.	2604	1586	7659	1659	.797	.426	NS
Average	5490	2285	7074	1764	.985	.083	NS

For coping strategies adopted by female student nurses ($M=.55$, $SD=.23$); that of male student nurses ($M=.71$, $SD=.18$), $t(250) = 2.99$, $p = .083$, $df = 248$. Therefore we fail to reject Hypothesis 2. This implies there is no significant difference between female and male student nurses with regards to how they cope with stress.

The item "I think developing a good support network among fellow students and supervisors helps to reduce stress" was the only item among the five items eliciting the response on coping strategies to deal with stress was significant. Female student nurses ($M=3.92$, $SD=.46$); that of male student nurses was ($M= 3.48$, $SD=.48$), $t(250) = 1.42$, $p = .157$, $df = 248$. ($p= .005$).

4.2 DISCUSSION

The first hypothesis was that "There will be no significant difference between fresh and continuing student nurses with regards to the coping strategies they adopt in managing stress." The finding of the hypothesis is supported by the findings of Landa and Zafra (2011) on sources of stress among student nurses and the coping strategies adopted. They concluded that no differences exist significantly between fresh and continuing student nurses in the way they coped with stress. They maintained that the desires to aspire on professional development were causes of stress among both the fresh and continuing student nurses but however both groups resorted to attending seminars and conference as a coping strategy. It is worthy of mentioning that the position of the researchers agrees with the finding of the current study. The findings of the study are also in line with findings of Dollard and Jacques (1999). They made it clear that strategies adopted to cope with stress do not differ significantly on educational level among student nurses. Student nurses directing their irritation and poor interpersonal relationship on patients were found as common indicators so far as coping strategies of stress were concerned. This could be due to the fact that as one progresses through the educational ladder, he or she amasses some worth of experience

therefore those at the top of the educational ladder would not exhibit different characteristics in the way of thinking and approach to doing things.

The hypothesis two stated that “There will be no significant difference between male and female student nurses with regards to the coping strategies they adopt in managing stress. The findings of the study revealed that indeed there was no statistical difference in coping with stress among male and female nursing students.” Deary, Watson, and Hogston (2003) affirmed the finding of this study. They carried out a longitudinal cohort study of stress and attrition in student nurses in England. They found out that no significant differences existed between male and female student nurses with regards to how they coped with stress. A 1995 study in Botswana by Audet however found statistically significant differences between male and female student nurses with regards to the coping strategies of stress they adopted. Male nurses often became rebellious whilst the females became audacious against their patients as coping strategies. This could be explained by the fact that both male and female student nurses are mostly faced by similar stressors therefore approaches in coping with these stressors by both set of student nurses would not have a vast or huge difference.

5.1 Summary and Conclusion

The study assessed coping strategies for stress among student nurses in the Sunyani Nurses’ Training College. A descriptive survey was employed for the study and questionnaires were used to solicit for respondents’ view with respect to the issue under study. The respondents were sampled using the random sample technique. The hypotheses were tested with the independent sample t-test. It was found out that there was no significant difference between fresh and continuing student nurses with respect to how they coped with stress. The study also revealed that there was no significant difference between female and male student nurses with regards to the coping strategies adopted to curb stress.

5.2 Recommendation

Based on the findings and conclusions drawn from the study, the following recommendations are made to key stakeholders of the nursing profession.

1. The general studying and clinical conditions of student nurses such as providing accommodation facilities and some financial assistance will go a long way to help these students cope with stress.
2. Psychiatry as a course offered in the nursing training institutions should be able to equip students with adaptive skills in terms of stress. This will come to fruition when the emphasis is geared towards both patients and student nurses. The emphasis is currently geared towards patients largely.
3. Since this study was limited to only student nurses, it is suggested that further study should be conducted to look at stress among medical students and students in health related professions to ensure broader generalisability.

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