



A Study to Evaluate Professional Duty Stress Among Student Nurses at Selected Colleges in Indore, Madhya Pradesh.

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Introduction

The nursing curriculum is designed to prepare professional and competent nurses who will apply their knowledge and abilities throughout the course of their employment. As a result, students' clinical learning and training should be prioritised since they apply all clinical abilities, including affective, psychomotor, and theoretical knowledge. In nursing education, information and skills gained in the clinical setting with actual patients are considerably more valuable than contrived situations in labs or classes. Clinical experience gives nursing students the chance to learn both useful information and psychomotor skills that will help them grow as professionals.

Nursing students encounter both academic and workplace stress during their training term. The causes of stress, or stressors, that interact and contribute to the beginning of stress in organisational settings are one area of study in workplace stress research (Spielberger & Reheiser 2005). Time constraints, workload, making judgments, constant change, and economic blunders at work are some of the most common stresses.

In recent decades, research on workplace health has shifted from an emphasis on physical risk avoidance to a more holistic approach. Emergent psychosocial hazards, such as occupational stress, are of special importance in this setting. Physical, psychological, and behavioural issues are among the detrimental impacts of stress on the individual. In turn, stress is linked to organisational concerns such as higher absenteeism, worse job quality, and lower productivity. The coping techniques that students use in clinical practise can vary and impact their stress levels. Effective coping skills help students perform much better in school; coping strategies also help students relieve stress. The best and most helpful ways to deal with stress were found to be problem solving, transference (trying to keep a positive attitude about the stressful situation), and persistent optimism.

Over the last sixty years, undergraduate nursing education in India has grown dramatically. The Indian nursing programme lasts four years. The nursing curriculum is developed to follow the norms and regulations of the Indian Nursing Council, which is in charge of programme accreditation at institutions. In India, the nursing curriculum mandates that specific courses be offered in specific years, so students in the second year of practise will be expected to finish Medical Surgical Nursing I and Medical Surgical Nursing II Practicum II in the third year, students are expected to finish Mental Health Nursing and Paediatric Health Nursing, and students are expected to finish Community Health Nursing II in the fourth year, Maternal Health Nursing. Throughout the curriculum, nursing students in India are required to complete about 2000 contact hours of clinical practise. Clinical educators often have a Masters degree and extensive clinical experience. Students often attend clinicals in groups, with a clinical teacher to student ratio of one to ten. The researcher's goal in this study is to determine the typical stresses faced by nursing students during clinical practice.

Methodology

The typical stresses faced by nursing students throughout their clinical practise are assessed using a descriptive comparative correlational approach.

Sample and sampling technique

A convenient sample was used to choose the samples. In the current study, 100 nursing students from the BSc Nursing Program from two distinct years of nursing at Selective Colleges in Indore, Madhya Pradesh participated (50 from the 3rd year and 50 from the 4th year), and Tools A self-reported questionnaire including demographic data, a perceived stress scale (PSS), and a coping behaviour inventory (CBI) was employed. Demographic information includes age, gender, years of schooling, nursing interest, and previous nursing experience.

The researchers addressed students during clinical practise in order for the data gathered to be more indicative of the experienced stress. At the conclusion of their clinical practise, the researcher addressed the students and explained the goal of the study. Students were given a cover sheet containing the study's details. Students who agreed to participate in the study were asked to fill out a questionnaire and submit it to the researcher as soon as possible. Only students who completed the surveys completely were included in the final sample. Data Examination The research variables were described using descriptive statistics according to the level of measurement. Inferential statistics, bivariate (T-test; ANOVA) statistical tests, and multivariate statistical analysis (multiple regression) were also used to answer the study questions.

Results

According to the report, 96.1%. The students' ages varied from 19 to 22 years old, with a mean of 20.9. (1.4). More than two-thirds of the participants (66.2%) were female. The biggest proportion of participants (42.4%) were in their second academic year, with 39.3% in Medical Surgical Nursing I. The majority of participants (66.5%) expressed an interest in the nursing profession, whereas only 18.2% had prior nursing experience. Female teachers taught the majority of the participants (68.9%). The subjects' subjective stress level was 1.56 (SD =.63). 44.22% of the subjects exhibited stress levels above the mean. Stress from assignment work was the most often perceived form of stressor (M = 2.12, SD = 0.88), followed by stress from peers and everyday life (M = 1.65, SD = 0.91) and from nursing staff and instructors (M = 1.58, SD = 0.89). Worrying about grades was the most stressful occurrence for students (M = 2.62, SD = 1.34), followed by feeling pressured by the type and quality of clinical practise (M = 2.15, SD = 1.22) and believing that one's performance does not fulfil professors' standards (M = 1.98, SD = 1.17). Minor stressors for students included inability to provide adequate nursing care to patients (M = 1.18; SD = 1.07), and unfamiliarity with medical history and terminology (M = 1.25; SD = 1.09). The ANOVA test was performed to compare mean differences across students from different academic years, courses taken, and stress levels. The results showed that the academic year of the student was directly linked to his or her level of stress (F = 6.34; df = 2, 100; p.05). Discussion This study examines nursing students' reported stress, stress-related elements in clinical practise, and coping methods employed by BSc nursing students across academic years. According to the study's findings, over half of the participants had stress levels above the norm. This is consistent with the findings of a prior study done among Jordanian nursing students during their first year of clinical practicum, which found that 52 percent of nursing students have stress levels above the norm. In the current study, three of the six stress-related characteristics were assessed as having stress levels below the mean by students (stress of the environment; stress of taking care of patients; and stress from lack of professional knowledge and skills). However, comparing stress levels between various groups and settings may be challenging. A trans-cultural approach says that a person's perception and thought processes may explain how they decide if a situation is stressful or not. It suggests that there is an internal demand for such things as fundamental necessities, self-esteem, and self-concept that influences student judgement and response to the scenario. This is also discussed in terms of the locus of control notion. In this scenario, those students who are interested in nursing have greater influence over the situation, which provides them with a sense of confidence

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