



## Review Article

# Anxiety and Coping Strategies: The Adequate and Integrative Review

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## Abstract

Stress has become part of students' academic life due to the various internal and external expectations placed on their shoulders. Adolescents are particularly vulnerable to the problems associated with academic stress as transitions occur at an individual and social level. It, therefore, becomes imperative to understand the sources and impact of academic stress to derive adequate and efficient intervention strategies. Understanding the sources of stress would facilitate the development of effective counseling modules and intervention strategies by school psychologists and counselors to help students alleviate stress. Anxiety in nursing students negatively impacts academic as well overall success. This review highlights anxiety and coping strategies in nursing students.

**Key words:** Anxiety, counseling, coping strategies

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## Introduction

Stress contributes to health problems worldwide. Its presence is felt in home, office, industry, and academic environments. It is a common element in life regardless of race or cultural background. The emotional and physical ways in which we respond to pressure can cause mental and physical symptoms. The effects of stress vary with the ways it is appraised, and the coping strategies used differ between individuals and are influenced by ethnic, cultural, and socioeconomic characteristics.<sup>[1]</sup> Students are subjected to different kinds of stressors such as the pressure of academics with an obligation to succeed, an uncertain future and difficulties of integrating into the system. The students also face social, emotional, physical, and family problems, which may affect their learning ability and academic performance. In recent years there

is growing appreciation of stressors involved in Medical Training College students, especially freshmen, are a group particularly prone to stress.<sup>[2]</sup>

The nursing profession is currently in a state of crisis. The number of nurses' available and seeking employment is not meeting the demands of the health-care industry. Nursing education is responding to this need by attempting to increase the number of graduate nurses.<sup>[1]</sup> Due to fiscal considerations, restrictions on student to teacher ratios, and limited clinical facilities, it is not always feasible to rely on increasing program size to increase the number of graduates. In many schools of nursing, the focus is shifting from efforts to enlarge nursing programs to strategies to increase the retention of the students who are accepted and enroll in the programs. The National League for Nursing reported an 80% net retention rate in nursing programs across the country, with 83% net retention in public institutions, and 79% net retention in the south.<sup>[3]</sup> 20% of the nursing school population that leaves school each year before graduation is a vital element in meeting the demand for nurses in the future.

When in a nursing education program, students are often exposed to high levels of stress when compared to other students in other formalized programs.<sup>[4]</sup> In particular, the clinical component of the nursing program which is meant to prepare nursing students for professional nursing roles and enhance their critical thinking and decision-making

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skills in the clinical settings produces high levels of discomfort, stress, and anxiety.<sup>[5]</sup>

Existing evidence showed that there are two major sources of stress among nursing students: Academic and clinical stressors, with the latter being perceived more intensely by nursing students at all levels.<sup>[6]</sup> Stressors related to academia include the academic process, heavy assignments and workloads, and examinations. Studies consistently show that nursing students experience moderate-to-severe levels of stress during clinical practice.<sup>[7,8]</sup>

Clinical sources of stress include fear of the unknown, new clinical environments, engaging in various clinical activities, taking care of patients, lack of professional knowledge or nursing skills, fear of failure, clinical incompetence, experience of death and dying, unfamiliarity with patients' medical history, unfamiliar patients' diagnoses and treatments, fear of making mistakes, giving medication to children, and lack of control in relationships with patients.

Other reported stressors include peers, daily life and the environment, nursing staff and nurse educators finding of new friends, learning of new responsibilities, being placed in unfamiliar situations, working with people they do not know, financial strain, relationships with friends, tutors and companions, negative interactions with instructor's, being observed by instructors, and being late and poor relationships with clinical staff.<sup>[9]</sup>

Stress is considered beneficial in minimal amounts as it increases excitement and motivation. However, unmanaged stress or failure to cope with chronic stress may be harmful to the health and well-being of an individual. Chronic stress may affect the learning, decision-making, thinking, and eventually the academic performance of the nursing student. Stress may even be a reason why they choose to leave the nursing program. Unmanaged stress may also cause the nursing student to experience negative emotional states such as sadness, apprehension, anxiety, worry, anger, lack of self-esteem, guilt, grief, nervous breakdown, depression, feeling of loneliness, listlessness, or sleeplessness.<sup>[8]</sup>

Coping mechanisms are a necessity when dealing with stress and accompanying stressors. Lazarus and Folkman classified coping ways as problem based and emotion based.<sup>[10]</sup> Several studies highlighted problem-solving approach as the most common coping behaviors in nursing students while the avoidance approach as the least utilized coping behaviors in nursing students. Problem-based coping ways are known to be beneficial to students' learning, clinical performance, and well-being, while emotion-based coping ways were found to be harmful to their health.<sup>[11]</sup>

## Studies Related to Anxiety and Coping Strategies

Shadaifat *et al.* illustrated the level of stress and common stressors among nursing students, to describe the difference

in stress level related to demographic data, and to identify coping mechanisms used by nursing students. A descriptive cross-sectional study was carried out to determine the type of stress and coping strategies among nursing students. The level of stress was evaluated through perceived stress scale (PSS) and type of coping strategies was assessed by the use of coping behaviors inventory. Students perceived moderate level of stress, most commonly attributed to assignments and workload, teachers and nursing staff, peers and daily life, and taking care of patients. The most frequently used coping mechanism was problem-solving. The study found that age, grade point average, education level, and residence are good predictors of the use of transference as a coping behavior. A moderate level of stress among students illustrated the need for stress management programs and the provision of suitable support.<sup>[12]</sup>

Aslan and Akturk determined the stress levels experienced by nursing students during the nursing education and the associated factors. The population of the study consisted of the students of the University, Faculty of Health Sciences Nursing Department. There were 1200 students in the faculty of nursing. The sample consisted of 479 students. Participants used introductory questionnaire, nursing education stress scale. According to the results of this study, it was determined that the nursing students experience high level of stress and their demographic characteristics were affected by their education stress and practical stress and academic stress subscale scores. It was also determined that stress scores of the students who preferred the nursing profession willingly or liked it while studying and found the profession prestigious were lower.<sup>[13]</sup>

Rafati *et al.* explored the coping strategies of Iranian nursing students with stress in a clinical setting. This qualitative content analysis study was carried out with 20 nursing students who were selected using purposive sampling at the Razi nursing and midwifery school in Kerman, in Iran, during a 10-month period in 2016. Data were collected using semi-structured face-to-face interviews and analyzed through Graneheim and Lundman's qualitative content analysis method. "Seeking well-being" as the main theme and three categories of "active confrontation with stress," "mastering the mind and body," and "avoidance" were obtained from data analysis. The exploration of nursing student's experiences of coping with clinical stressors increases students' awareness of their coping strategy. The academic authorities in recognizing the coping strategies of students with stress in clinical setting can provide necessary training on effective coping strategies for students.<sup>[14]</sup>

Seyedfatemi *et al.* conducted a descriptive cross-sectional study to determine sources of stress and coping strategies in nursing students studying at the Iran faculty of nursing and midwifery. All undergraduate nursing students enrolled in years 1–4 during academic year 2004–2005 were included in this study, with a total of 366 questionnaires fully completed by the students. The Student Stress Survey and the adolescent coping orientation for problem

experiences inventory were used for data collection. Most students reported “finding new friends” (76.2%), “working with people they did not know” (63.4%) as interpersonal sources of stress, “new responsibilities” (72.1%), and “started college” (65.8%) as intrapersonal sources of stress more than others. The most frequent academic source of stress was “increased class workload” (66.9%) and the most frequent environmental sources of stress were being “placed in unfamiliar situations” (64.2%) and “waiting in long lines” (60.4%). Interpersonal and environmental sources of stress were reported more frequently than intrapersonal and academic sources. Mean interpersonal ( $P = 0.04$ ) and environmental ( $P = 0.04$ ) sources of stress were significantly greater in the 1<sup>st</sup> year than in the 4<sup>th</sup> year students. Among coping strategies in 12 areas, the family problem-solving strategies, “trying to reason with parents and compromise” (73%) and “going along with family rules” (68%) were used “often or always” by most students. To cope with engaging in demanding activity, students often or always used “trying to figure out how to deal with problems” (66.4%) and “trying to improve themselves” (64.5%). The self-reliance strategy, “trying to make their own decisions” (62%); the social support strategies, “apologizing to people” (59.6%), “trying to help other people solve their problems” (56.3%), and “trying to keep up friendships or make new friends” (54.4%); the spiritual strategy, “praying” (65.8%); the seeking diversions strategy, “listening to music” (57.7%), and the relaxing strategy, “daydreaming” (52.5%) and the effort to “be close with someone cares about you” (50.5%) were each used “often or always” by a majority of students. Most students reported that the avoiding strategies “smoking” (93.7%) and “drinking beer or wine” (92.9%); the ventilating strategies “saying mean things to people” and “swearing” (85.8%); the professional support strategies “getting professional counseling” (74.6%) and “talking to a teacher or counselor” (67.2%); and the humorous strategy “joking and keeping a sense of humor” (51.9%) were used “seldom or never.” The 1<sup>st</sup> year nursing students are exposed to a variety of stressors. Establishing a student support system during the 1<sup>st</sup> year and improving it throughout nursing school is necessary to equip nursing students with effective coping skills. Efforts should include counseling helpers and their teachers, strategies that can be called upon in these students’ future nursing careers.<sup>[15]</sup>

Menon *et al.* assessed the levels of stress and its associated adverse behavioral effects in undergraduate medical students in a tertiary care medical college. This cross-sectional, descriptive, and analytical study included medical students from the 2<sup>nd</sup> to 4<sup>th</sup> years who had given informed consent to participate in the study. Students were assessed with a semi-structured questionnaire, students stress scale (SSS), perceived stress questionnaire, and risk-taking and self-harm (RT and SH) inventory. A total of 405 students (153 males and 252 females) participated in the study. There were no significant differences in the age, perceived family support, religious practices, physical activity, and SSS scores of the male and female students. A significantly

higher score was obtained by boys as compared to the girls on the scores of the RT subscale and total score on RT and SH inventory. However, girls obtained significantly higher scores as compared to boys on the PSS. Among girls, 23.4% reported high stress, 63.5% had moderate stress, and 13.1% reported low stress. Among boys, 11.1% reported high stress, 68.6% had moderate stress, and 20.3% reported low stress. The difference was statistically significant. The majority of medical undergraduates were under stress; however, the majority perceived themselves to be under moderate stress. Male students had higher scores on RT and SH inventory as compared to females. There is an urgent need to study the causes and devise effective management and preventive measures to avoid the harmful long-term effects of stress on their careers and well-being.<sup>[16]</sup>

Bass and Bradford determined if journaling decreased anxiety among beginning nursing students. The reasons behind this study were add to nursing knowledge on journaling to relieve anxiety among nursing students, to hopefully help them perform better in the nursing program, and to avoid burnout in the future as registered nurses. The design involved a convenience sample of incoming summer BSN students randomly assigned to an experimental or control group. A pretest-posttest design with classroom instructor reminders on a week-to-week basis regarding weekly journal writing was used over the course of 12 weeks. All students received a notebook, and the experimental group was given instructions to journal, while the control group was given instructions to take notes. Beck’s anxiety inventory (BAT) and Draw-a-Person-in-the-Rain (DAPR) were administered at the beginning and end of the study in the classroom setting. Furthermore, before the study, the institutional review board approval was obtained, and students completed informed consent with the knowledge of details pertaining to the study and the risks involved. All data were collected anonymously with no student identifiers, and results were reported as aggregate data. The pretest-posttest data, in addition to the demographics, were analyzed using paired t-test analysis, a regression line, and Chi-square tests through SPSS software. An analysis of the results showed no statistically significant data, with the exception of a slight correlation between expected end grade in class and post-BAT score – better grade expectations were associated with lower BAT scores or less anxiety. Visual analysis of the data showed a small negative correlation between the control group’s anxiety levels and BAT scores. DAPR was found not to show any correlation with BAT scores. Further research is necessary to note the possible correlation between note-taking and anxiety reduction among the nursing student population, in addition to the potential benefits of more creative journaling interventions to reduce anxiety.<sup>[17]</sup>

Karimi *et al.* explored Iranian nursing students’ perception regarding the consequences of reflection during clinical practices. This qualitative study was conducted by a conventional content analysis approach in two nursing schools at Shiraz and Fasa Universities of Medical



Sciences in Iran. Data were collected through in-depth semi-structured interviews during 2015–2016, from 20 students selected by purposive sampling. All the interviews were tape-recorded, transcribed verbatim, and analyzed by content analysis method. Rigor of this study was approved by member check and external audit. Two categories emerged from the data analysis, including movement toward professionalism and self-actualization of emotions. The former consisted of three subcategories of function modification, sharing experiences, and generalizing experiences. The latter consisted of two subcategories of inner satisfaction and peace of mind. The results indicated that nursing students' reflection in clinical settings is effective in personal and professional levels. Reflection in a personal level led to positive emotions that increased the quality of care in patients. Accordingly, nursing educators need to create a nurturing climate as well as supporting reflective behaviors of nursing students.<sup>[18]</sup>

Rathnayake and Ekanayaka examined depression, anxiety, and stress and associated factors among undergraduate nursing students in Sri Lanka. This cross-sectional study was conducted at the Department of Nursing, Faculty of Allied Health Sciences, University of Peradeniya. A purposive sample of 92 undergraduate nursing students completed a pretested self-administered questionnaire. Depression, anxiety, and stress were measured by the Sinhala version of Depression, Anxiety, and Stress Scale. The sample consisted of 30.4% of male and 69.6% of female students. The mean age was 24.1 years (standard deviation  $\pm 1.6$ ). The majority of the respondents reported mild to extremely severe symptoms of depression (51.1%), anxiety (59.8%), and stress (82.6%). It showed a significant positive relationship between depression and anxiety. Depression, anxiety, and stress are highly prevalent among undergraduate nursing students and correlations between these variables are positive. Self-rated physical health and self-rated mental health are the factors most closely related to negative emotional states. The improvement of mental health among nursing students is essential. The findings call for initiation of stress management interventions and increased counseling facilities for nursing students.

Hirsch *et al.* identified the coping strategies used by nursing students in a university in southern Brazil, establishing the relationship between the sociodemographic and academic variables examined. An exploratory, descriptive, and quantitative study carried out with 146 nursing students, through application of the coping strategies inventory. For the data analysis, descriptive statistics, analysis of variance and regression analysis were used. It was found that the coping strategy most used by nursing students is escape. A connection was also detected between the academic dissatisfaction variable and the use of negative coping strategies. It was noted that students satisfied with the course used positive coping strategies targeting the problem, whereas dissatisfied students used negative strategies focusing on the emotion.<sup>[19,20]</sup>

## Conclusion

The review suggests that nursing students suffer from anxiety. Efforts are required to cater to nursing students who are distressed, in a non-intrusive manner. Awareness about manifestations of distress among nursing students needs to be increased among not only students themselves but also other stakeholders such as educationists and parents. Further research is required on this issue, and multicentric longitudinal studies would help to provide better answers about psychological distress among nursing students in India.

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