

Original Research Article

Clinical Training Related Stressors and Coping Strategies among Student Nurses

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Abstract

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Stress is defined as the body's biochemical reaction to a stressful stimulus, a threatening event, or a new situation. Selye defines stress as body's non-cause- unique response to any types of stimuli. Consequently, the forms of biological response to adaptation demands are always the same, regardless of the cause. Stress from lack of professional knowledge and skills 1.8533 ±1.016 Stress from assignments and workload was 2.88±0.87, Stress from taking care of patients was 2.511±1.0058, Stress from clinical environment was 3.023±0.949, Stress from teachers and nursing staff was 2.8133±1.2105, and stress related to instructors and nursing staff was 3.1825±1.02025, Problem-solving approach (3.931±0.9185), staying optimistic (3.49±0.9522), transference (3.80333±0.929), and avoidance behavior (3.31666±1.0486). The findings demonstrated that nursing students at Lahore school of nursing the University of Lahore have mild stress levels. In order to overcome stressors, students frequently employed a problem-solving approach, followed by staying optimistic and using transference and avoidance

Keywords: Coping Strategies, Nursing Students, Practice, Stress

INTRODUCTION

Stress is defined as the body's biochemical reaction to a stressful stimulus, a threatening event, or a new situation. Selye defines stress as body's non-cause- unique response to any types of stimuli. Consequently, the forms of biological response to adaptation demands are always the same, regardless of the cause (Kotrotsiou et al., 2001).

Stressors are daunting and unpredictable stimuli that can alter everyday events by normal response. The stress responses are both optimistic and undesirable reaction to the stresses and life variations. Responses to stress can be physical, mental, emotional and behavioral (AMBAR, HUSSAIN et al.).

Nursing is an emotionally and highly stressful career demanding because nurses in different situations at

different times of the day have to deal with different individuals. The nursing students deal with to a very great degree emotionally exciting and speedily changing situations during their daily work. The facts that the nature human is willing to wear and tears linked with everyday activity is universally accepted (Yasmin et al., 2018).

Coping refers to the ability of the person to deal with difficult situations successfully (Rydgren, 2018).

Stress has been recognized as a critical psychological healthiness problem in the twentieth century (Chan, So et al., 2017). Stress can result from "too much or too little pleasure that damages the mind and body (Hamaideh, 2016).

In students nurses there stress is priory increase in

clinical training and in examination. In nursing students, Dhar R et al reported that 48.83 percent mild stress and 11.62 percent severe stress. Source of Clinical stress contain that work with terminally ill patient, relational clash with other nurses, clinical unsafely and anxiety of failure and interpersonal relations through patients, work overload and nursing related (Patterson and McCubbin 2016).

Nursing students face high levels of stress as compare to the other students of health sciences. Because the clinical rotation of nursing students is more difficult as compare to their theory (Labrague 2014).

The Clinical teacher, nursing lecturer, nursing preceptors, and staff nurses can diverse nursing students sectors to convince the students' nurses through their PMHN clinical education. This would help to improve the quality of nursing education and improve nursing students ' mental health (Pulido et al. 2015).

University level students nurses face high level of stress with coupled of questions about successes, time accessibility and patient care (Antoinette Bargagliotti 2012).

Among nursing students there are many sources of stress that can be associated with theoretical load, such as assignments, examinations, and exposure to a new environment such as clinical site. Among nursing students the frequency and level of stress and depression in different academic areas is a alarming between nursing students (El Ansari, Adetunji et al., 2014). Students who used avoidance or transition techniques (such as avoiding medical issues, trusting others to solve the problem, Controversy and lack of patience, eat a heavy food and longtime sleep) The psychological pressure was greater than those who used coping strategies to solve problems (I,e setting of ideas to resolve the difficulties, investigate the sense of stressful episodes, Approving various strategies for problem solving and using previous skill to solve difficulties) (Chan, So et al., 2016).

Some of the nursing students are incapable to manage with their stressors because they have do not the correct training strategy. Students are usually unable to eliminate stress but they can reduce the stress, so coping is an aspect that helps to sustain their mental level(Timmins and Kaliszzer 2015).

Lack of employee theory and practice, fear of error and interaction with colleagues, peers and patients Stress can lead to illness, deviations in learning, deprived theoretical presentation, Retirement programs for students and ultimately the quality of patient care may be affected. Because students nursing are unable to avoid these stressors, their performance, well-being, actions, and nursing satisfaction will be affected if they are unable to manage stress. In the stress adaptation plan, the ability of the individual to cope with stress is more

important than stress themselves. Appropriate ways to deal with stress-induced incident. Coping the dynamic, cognitive and behavioral effort to control internal and external stress there are two ways to cope problem and emotion (Chrousos et al., 2018).

Additional stress may come from a clinical environment that is constantly changing. Students need some time to build a working relationship with a new medical consultant. Setting, familiarize yourself with procedures and expectations in the new clinical area and familiarize yourself with the friendly apartment support staff to develop a sense of belonging (Burns et al., 2014).

AIMS OF THE STUDY

The core Aim of this research is to assess clinical training related stressors and coping strategies among student's nurses.

Significance of the Study

This study determines the sources of stressor and coping strategies among Lahore school of nursing student.

This study was helpful for nursing faculty, administrative staff of the institute to understand the level of stress and coping strategies of student and will help the students to minimize the level of stress.

Initial finding and controlling of stress can result in increased output among nursing students, to improve quality of lifespan, and life-threatening events.

LITERATURE REVIEW

Study was conducted in which the care of the patient was the main source of stress, few studies said that care of the patients was the students ' projecting stress (Chan, Huang et al. 2016).

Similarly a study reviled by Zupiria et al. in (2015) found that the lack of skills and knowledge is the most common stresses. Cultural, academic and environmental variables can affect changes in stress management (Alberdi-Erice, Huizi-Egilegor et al., 2015)

An another study conducted in Bahrain find that all students nurses in the clinical setting experienced moderate to severe stress (John and Al-Sawad 2015).

Also, a study in conducted Iran revealed that 99.3 percent of nursing students reported the level of perceived stress as moderate to high (Reeve et al., 2013).

A research was conducted in the KSA the research found that nursing students experience mild to moderate

level stress during clinical training due to heavy workloads and patient care.(Labrague et al., 2018).

In the context of recent research review, it is found that at hospital rotation students nurses faced with moderate to severe stress due to more workloads and care of patients(Gibbons 2010).

Coping was conceptualized in early research as a subconscious effort made by the participant in a form of the protection tool (Endler and Kocovski, 2015)

A worldwide of research was carried out among students nurses the finding of the research showing that the high levels of stress in is occurred students nurses. Research was based on undergraduate students nurses often show high stress rate and coping strategies between nursing students (Bartlett et al., 2016. High level of stress can be attributed both educational and clinical needs between students nurses (Rafati et al. 2017).

The study found that pressure on the part of teachers and nurses was important and one of the most common stress sources they viewed along the same lines with many studies; Chen and Hung (2014). The study found that pressure on the part of teachers and nurses was important and one of the most common stress sources they viewed along the same lines with many studies; Chen and Hung (2014) (Kaur, Chaurasia et al., 2017).

The study conducted by Smedley and Morey (2010) study agreed as the supportive clinical environment including staff and educator to alleviate student nervousness and boost self-confidence. The three main themes emerged from Nelwati and Plummer's (2013) work on the understanding of nursing students ' pressure at the clinical site (Shah, Hasan et al., 2010).

The study revealed that the correlation between stress and competence in nursing is negative. This study is conducted by Al-Zayyat, and Al-Gamal illustrated that students suffered from high levels of stress in the clinical setting and reported that common stressors among students care for patients independently, high expectations of teachers and clinical staff, and clinical responsibilities (Sahir, Afzal et al., 2019).

The study found that the most commonly used stress management mechanisms were problem-solving strategies, while the avoidance was less similar to earlier researches Shaban et al. (2012) found, that by contrast, the avoidance was the most commonly used mechanism by students to deal with different stressors avoidance is generally recognized as a temporary measure and not a sustainable solution to the underlying stressors (Maville, Tucker et al. 2016).

Previous researches show that associations play a major role in the psychological health of students. Bad associations between parents, peer, and teacher may increase the levels of stress, between students. Bachelor of nursing students identified conflict relationships as one

of the predictors of stress in a four-country longitudinal study, involving Japan, Taiwan, Thailand and the United States (Erb, Humpal et al. 2015).

Likewise, the other study reviled by Beiter et al. (2015) and Doulatabad et al. (2015) suggested that relationships with friends and staff as an important indicator of stress, and coping mechanism between students nurses, a research was conducted in India the finding of that research were show that the unhealthy association with friends as a predictor of stress (Seiffge-Krenke, 2013)

The study agreed with previous studies, suggesting that the quality of care provided to the patient was diminished by nursing students ' poor treatment. Several scientists have substituted Melincavage's word nervousness with stress studies (Hsiao, Chien et al., 2010).

Tully, 2004Chang et al. (2006) Summarize the evidence that emotional-centric coping is more likely to harm wellbeing, and Lambert et al. (2004) found that coping with escape avoidance was correlated with mental health reduction in a Japanese nu study (Seyedfatemi, Tafreshi et al., 2016).

METHODS

Setting

This Study was conducted in the University of Lahore, Lahore School of Nursing.

Research Design

Cross-sectional study was used to assess clinical training related stressors and coping strategies among students nurses.

Population

The target population of this study was all students of nursing department of Lahore University new campus 1- km of defense road, Lahore.

Sampling

Convenient sampling technique was used in this study.

Research Instrument

An adopted questionnaire was used to collect data from

target population. Proper consent was taken from Head of the department.

Data Gathering Procedure

Data was collected through questionnaire. The questionnaire consists of two sections. Section A contain of demographic data of the participants and section B contain questions related to the topic.

Analyze Data

- Data analysis was done by SPSS version 21 SPSS is a statistical computer software for data analysis. The study was descriptive study and all the descriptive statistics mean median percentage and frequency was obtained through the SPSS software.

Study Timeline

This study took 4 months (September 2019, to December 2019).

Ethical Consideration

The rules and regulations laid down by the University of Lahore's ethical committee will be followed while conducting research and respecting the rights of research participants.

- All participants will receive attached written informed consent.
- All data collection and details shall be kept confidential.
- Throughout the study, participants will remain anonymous.
- The subjects will be told that the study technique does not pose any drawbacks or risks.
- They will also be informed that during the study process they will be free to withdraw at any time.
- The data is kept under the key and locked while the keys are kept in hand. It will be kept under password in laptop.

RESULTS

This section presents the outcomes of the study.

Profile of the Respondents

Section 1

Demographic

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Summary

The below tables 1, 2, 3, 4 and 5 show that this study included a total number of of 135 participants (48% male and 52% female) from the nursing department at Lahore school of nursing, the University of Lahore. The below table show that .7% (n=1) participants belongs to age group of below 18 years, 37.0% (n=50) participants belongs to age group of 18-20 years, 43.7% (n=59) participants belongs to age group of 21-23 years, 18.5 (n=6) participants belongs to age group of below 23 years and 4.5 (n=25). 18.5% (n=25) participants are male and 81.5% (n=125) participants are female, 1.5% (n=2) participants are single and 98.5% (n=133) participants are married, 6.7% (n=9) participants are belong to poor family 72.6% (n=98) participants are belong to middle family and, and 20.7% (n=28), that 37.8% (n=51) participants are 1st year students, 32.6% (n=44) participants are 2nd year students, 19.3% (n=26) participants are 3rd year students and 10.4 (n=14) participants are 4th year students.

The tables 6,7,8,9,10 and 11 show that The spss version 21 was, used to measure stress levels among nursing students, showed that the Stress from lack of professional knowledge and skills 1.8533 ± 1.016 Stress from assignments and workload was 2.88 ± 0.87 , Stress from taking care of patients was 2.511 ± 1.0058 , Stress from clinical environment was 3.023 ± 0.949 , Stress from teachers and nursing staff was 2.8133 ± 1.2105 , and stress related to instructors and nursing staff was 3.1825 ± 1.02025 .

In the tables 12,13,14 and 15 show that The CBI showed that the strategies utilized by students to minimize stress during clinical rotation included taking a problem-solving approach (3.931 ± 0.9185), staying optimistic (3.49 ± 0.9522), transference (3.80333 ± 0.929), and avoidance behavior (3.31666 ± 1.0486) Section 2 represents the student and teacher related motivational questions.

Table 1. Demographic Characteristics

Age	Frequency	Percentage
below 18 years	1	0.7%
18_20	50	37.0%
21-23	59	43.7%
More than 23	25	18.5%

Gender		
Male	25	18.5%
Female	110	81.5%

Marital Status		
Married	2	1,5%
Unmarried	133	98.5%

Economic Status		
Poor	9	6.7%
Middle	98	72.6%
rich	28	20.7%

Year of Study		
1st	51	37.8%
2 nd	44	32.6%
3 rd	26	19.3%
4th	14	10.4%

Table 2. I. Stress from lack of professional knowledge and skills; 1.8533 ±1.016

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
1 Unfamiliar with medical history and terms	39.3 %	40.0%	6.7%	8.9%	5.2%	2.01±1.136
2 Unfamiliar with professional nursing skills	56.3 %	32.6%	5.9%	3.0%	2.2%	1.62±.897

Table 3 . II. Stress from assignments and workload; 1.8533 ±1.016

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
Worry about poor grades	2.2%	4.4%	43.7%	42.2%	7.4%	3.48±.790
Pressure from the nature and quality of clinical practice	3.0%	4.4%	29.6%	48.9%	14.1%	3.67±.881
Feelings that performance does not meet teachers' expectations	31.9%	45.9%	14.8%	3.7%	3.7%	2.01±.977
Feelings that dull and inflexible clinical practice affect family/social life	1.5%	2.2%	54.1%	27.4%	14.8%	2.01±.827
Feelings that the demands of clinical practice exceed physical and emotional endurance	5.9%	8.1%	45.9%	33.3%	6.7%	3.27±.924

Table 4. III. Stress from taking care of patients 2.511±1.0058

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
Lack of experience and ability in providing nursing care and in making judgment	9.6%	23.7%	36.3%	23.0%	7.4%	2.95±1.074
Not knowing how to help patients with physio-psycho-social problems	7.4%	5.9%	20.0%	38.5%	28.1%	3.74±1.152
Unable to reach expectations	40.7%	47.4%	3.7%	5.2%	3.0%	1.82±.945
Unable to provide appropriate responses to doctors', teachers' and patients 'questions	53.3%	37.0%	6.7%	1.5%	1.5%	1.61±.802
Worry about not being trusted or accepted by patients or their families	4.4%	5.9%	16.3%	60.0%	13.3%	3.72±.928
Unable to provide patients with good nursing care	68.1%	17.0%	7.4%	2.2%	5.2%	1.59±1.074
Not knowing how to communicate with patients	37.0%	47.4%	6.7%	5.2%	3.7%	1.91±.988
Difficulties in changing from the role of a student to that of a nurse	21.5%	3.7%	59.3%	9.6%	5.9%	2.75±1.084

Table 5. IV. Stress from clinical environment 3.023±0.949

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
Feelings of stress in the environment where clinical practice takes place	3.7%	5.2%	16.3%	54.8%	20.0%	3.82±.937
Unfamiliarity with ward facilities.	43.0%	43.0%	6.7%	4.4%	3.0%	1.81±.956
Feelings of stress from rapid changes in a patient's condition	6.7%	7.4%	37.0%	32.6%	16.3%	3.44±.956

Table 6. V. Stress from teachers and nursing staff; 2.8133±1.2105

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
Seeing a discrepancy between theory and practice	3.7%	6.7%	12.6%	49.6%	27.4%	3.90±.999
Not knowing how to discuss a patient's illness with teachers or medical and nursing personnel	30.4%	43.0%	17.8%	5.9%	3.0%	2.08±2.08
Feelings of stress when a teacher's instruction is different from expectations	3.7%	4.4%	8.9%	45.9%	37.0%	4.08±.985
Medical personnel lacking empathy and willingness to help	34.8%	35.6%	17.0%	7.4%	5.2%	2.13±1.129
Feelings that teachers do not evaluate students fairly	37.8%	40.7%	10.4%	6.7%	4.4%	1.99±1.075
Lack of care and guidance from teachers	6.7%	42.2%	32.6%	11.9%	6.7%	2.70±.995

Table 7. VI. Stress from peers and daily life 3.1825±1.02025

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
Experience of competition from peers in school and clinical practice	4.4%	8.9%	18.5%	48.1%	20.0%	3.70±1.030
Feelings of pressure from teachers who evaluate students' performance by comparison	3.0%	6.7%	16.3%	28.9%	45.2%	4.07±1.073
Feelings that clinical practice affects involvement in extracurricular activities	9.6%	11.9%	48.9%	25.2%	4.4%	3.03±.969
Inability to get along with group peers	34.8	51.1	5.2	3.7	5.2	1.93±1.009

Table 8. Coping behavior Inventory (CBI)

I Avoidance; 3.31666±1.0486

Question	Naver	Almost never	Some time	Fairy Often	Very often	Mean ± SD
To avoid difficulties during clinical practice.	3.0	4.4	12.6	44.4	35.6	4.05±.964
To avoid teachers.	7.4%	5.9%	48.1%	26.7%	11.9%	3.30±1.008
To quarrel with others and lose temper.	26.7%	43.0%	17.0%	8.9%	4.4%	2.21±1.075
To expect miracles so one does not have to face difficulties.	5.9%	7.4%	6.7%	43.0%	37.0%	3.98±1.129
To expect others to solve the problem.	12.6%	36.3%	33.3%	10.4%	7.4%	2.64±1.069
To attribute to fate.	56.3%	17.8%	19.3%	4.4%	2%	1.79±1.047

Table 9. II. Problem Solving; 3.931±0.9185

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
To adopt different strategies to solve problems	3.7%	.7%	3.7%	71.9%	20.0%	4.04±.777
To set up objectives to solve problems	3.0%	3.7%	4.4%	28.1%	60.7%	4.40±.956
To make plans, list priorities, and solve stressful events.	2.2%	2.2%	6.7%	62.2%	26.7%	4.09±.787
To find the meaning of stressful incidents.	6.7%	8.9%	5.9%	37.0%	41.5%	3.98±1.200
To employ past experience to solve problems.	3.7%	4.4%	39.3%	40.7%	11.9%	3.53±.896
To have confidence in performing as well as senior schoolmates.	3.0%	5.2%	39.3%	39.3%	13.3%	3.55±.895

Table 10. III. Stay Optimistic; 3.49±0.9522

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
To keep an optimistic and positive attitude in dealing with everything in life.	2.2%	2.2%	9.6%	46.7%	39.3%	4.19±.865
To see things objectively.	3.7%	2.2%	18.5%	36.3%	39.3%	4.05±1.002
To have confidence in overcoming difficulties.	4.4%	5.9%	19.3%	53.3%	17.0%	3.73±.965
To cry, to feel moody, sad, and helpless.	34.1%	44.4%	13.3%	5.2%	3.0%	1.99±.977

Table 11. IV. Transference; 3.80333±0.929

Question	Never	Almost never	Some time	Fairy Often	Very often	Mean ± SD
To feast and take a long sleep.	3.0%	7.4%	34.8%	25.2%	29.6%	3.71±1.064
To save time for sleep and maintain good health to face stress.	2.2%	3.7%	5.9%	49.6%	38.5%	4.19±.874
To relax via TV, movies, a shower, or physical exercises	3.0%	3.0%	39.3%	43.0%	11.9%	3.51±.851

DISCUSSION

This descriptive, cross-sectional study was conducted to assess clinical training related stressors and coping strategies among students nursing of Lahore school of nursing the University of Lahore. The duration of this study was from September 2019 to January 2020. In this study the data was collected from the male and female students of nursing department of Lahore school of nursing the university of Lahore mostly female participants were involve in this study, same study was conducted in Jordan in that's study also female participants were involve The findings demonstrated that stress levels among nursing students during their clinical rotation were mild , similar to an Iranian study conducted on nursing students during clinical practice, A simple random sampling technique was utilized to select 135 nursing students from Lahore school of nursing the University of Lahore. A study conducted in KSA there was also simple random sampling technique was utilized to select 125 nursing students from Albaha University. Mean and standard deviation derived through spss version 21 in this study. The demographic information of this study was include information regarding age, gender, marital status, academic year, economic status. While this type of study was conducted in KSA the demographic data of that study was include included information regarding age, gender, marital status, nationality, GPA, type of Programme (BSc, bridging, MSc, PhD), previous work experience, academic year, name of current course requiring clinical training).

In this study All six elements related to PSS, nursing students have ranged between 1 and 2. Consequently, however students have not previous practices at clinical settings; they showed high confidence and capability to overcome stressors. The overall level of stress was not very high, similar to previous reports.

It was found that the students of Lahore school of nursing the University of Lahore were satisfied with their course, which consisted of both theoretical and clinical parts; this study demonstrating that nursing students were not happy with their study of nursing for several reasons. Based on these findings, the

improvement of teaching procedures and setting of comprehensive tasks, especially for practical aspects, are proposed.

The students those were involve in this study tried to cope with stressors using single or combined strategies, which is similar to previous findings.

Further studies are recommended to determine how nursing students could be encouraged to utilize a combined coping approach to decrease stress.

The finding of this study is similar to those of a Jordanian and an American study in terms of coping strategies. Students significantly employed the coping strategy of avoidance to overcome stressors due to assignments and patient care, peers and daily life, and educators and clinical staff. Problem solving, as another strategy to overcome stress, was more significantly utilized by students to manage stressors due to assignments and patient care, environment, and teachers and clinical staff. The use of these strategies could be explained by the fact that they are the easiest for students and related to their personalities. It was also expressed in one integrative review that nursing students prefer taking a problem-solving approach over using emotion-focused coping strategies.

Another two strategies, staying optimistic and transference were significantly utilized by students to handle stress related to assignments and patient care, their environment, friends and everyday events, and educators and clinical staff. These relationships were similar to those demonstrated in the aforementioned Jordanian study. One study conducted on nursing students in three countries showed that other coping strategies could be effective in stress management and control.

CONCLUSION

The findings demonstrated that nursing students at Lahore school of nursing the University of Lahore have mild stress levels. In order to overcome stressors, **504 Merit Res. J. Med. Med. Sci.**

students frequently employed a problem-solving approach, followed by staying optimistic and using transference and avoidance.

RECOMMENDATIONS

Nursing students should be prepared to cope with stressors during their nursing studies, especially at the start of clinical training. Moreover, nursing faculty managers must implement strategies to improve the

physical health of students, which could enable them to overcome stressors.

Strength

The present study has a number of strength which are given below.

This study was conducted in the Pakistani context which assesses the clinical training related stressors and coping strategies among student's nurses.

Moreover, the deep and broad literature search strengthens this article

The large sample size 135in this study also enhanced the internal validity of this research.

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