Reducing Anxiety with Student Nurses – Building Partnerships within a University and Clinical Settings

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Abstract

Anxiety is a common experience for many student nurses, especially during clinical placements [1]. The high stress and unpredictability of the placements, combined with the added pressure of learning new skills and adapting to new environments, can cause significant levels of anxiety in student nurses. A university and hospital-based clinical team worked collaboratively to address student, preceptor, and faculty concerns about anxiety and stress within the clinical placement. This article will explore five strategies a university and the clinical preceptors, through collaboration took to reduce anxiety in student nurses during their clinical placement.

Anxiety is a common experience for many student nurses, especially during clinical placements [1]. The high stress and unpredictability of the placements, combined with the added pressure of learning new skills and adapting to new environments, can cause significant levels of anxiety in student nurses. Furthermore, anxiety can have a significant impact on nursing students’ academic performance, emotional well-being, and overall quality of life [2]. Additionally, it can lead to decreased motivation, concentration, and memory recall, making it difficult for students to learn and retain information. It can also cause physical symptoms such as headaches, fatigue, and gastrointestinal problems (McDermott et al., 2021). However, reducing anxiety is essential for promoting optimal learning and in turn, providing patient-centered care. This article will explore five strategies a university and clinical preceptors, through collaboration took to reduce anxiety in student nurses during their clinical placement.

Background

Student anxiety in the clinical area is a well-documented phenomenon that has been studied extensively in literature [1-4]. Clinical settings can refer to a wide range of healthcare environments, such as hospitals, clinics, and community settings, where students are required to interact with patients, healthcare professionals, and other stakeholders in the real-world environment. Although supervised and supported through preceptors or mentors this imposes additional anxiety on the nursing student.

One study by Aloufi et al. (2021) explored nursing students’ experiences with anxiety in clinical settings. The study found that many nursing students experienced anxiety related to clinical experiences, particularly when it came to providing direct patient care. The authors suggest that interventions such as simulation, or practice out of the clinical areas and superior mentorship can help alleviate this anxiety. Similarly, performance and anxiety were examined by Al-Ghareeb, McKenna and Cooper (2019) [5]. This study found that students who experienced higher levels of anxiety had a poorer clinical performance. The suggestion was to provide opportunities for practice in low-stakes assessments and practice cognitive-behavioral therapy to reduce anxiety levels. Congruent to other studies, a review by Judd et al. (2019) suggested that simulation-based education, mindfulness interventions, and debriefing sessions were shown to be effective in reducing anxiety in nursing students. Finally, a study by Wong et al (2019) explored the impact of a clinical anxiety management program on nursing students’ anxiety levels. The study found that the program was effective in reducing anxiety levels in nursing students. The authors suggest that such programs can be useful tools for addressing anxiety in clinical settings. Overall, the literature suggests that anxiety is a common issue among nursing students in clinical settings independent of experience, geographical or clinical setting. It also suggests that interventions such as mindfulness-based, simulation, or anxiety management programs have been found to be effective in reducing anxiety levels and improving clinical performance. The team reviewed this and decided that a number of interventions should be intentionally and systematically implemented to reduce anxiety in our nursing students.

Implementation

A university and hospital-based clinical team worked collaboratively to address student, preceptor and faculty concerns of anxiety and stress within the clinical placement. A systematic approach through collaborative meetings, inclusive discussion, and evidence-based interventions was used to address this issue.

Once identified that anxiety was affecting student performance five practical, cost-effective, and evidence-based interventions were implemented. This was in collaboration with the clinical team and was key to the success of the project. Each intervention will be described. Firstly, providing students with a supportive learning environment. Clinical preceptors can create a safe space for students by demonstrating empathy and actively listening to their concerns.
The team undertook a series of workshops to bridge the gap in understanding. Through a series of role play and open discussion preceptors were ‘taken back’ to what it was like to be a student and how to support and empathize with the undergraduate. Students who feel heard and valued are more likely to feel comfortable and confident in their abilities, which can help reduce anxiety. Additionally, preceptors can use positive reinforcement to acknowledge and celebrate students’ successes, which can also boost their confidence and reduce anxiety. Faculty and preceptors worked together to find ways to acknowledge students learning through guided de-brief. Another strategy introduced to reduce anxiety was to provide student nurses with clear expectations and guidance. Students who are unsure of what is expected of them or who lack clear guidance may feel anxious about making mistakes or falling short of expectations.

To address this clear and weekly clinical objectives were devised, mirroring the didactic and theoretical concepts covered. The clinical preceptors provided the students with detailed instructions and clear expectations for their roles and responsibilities in a newly devised ‘pre-brief’. Additionally, objectives were provided at the beginning of the term on the learning platform to reinforce and aid understanding. On evaluation, this was proven to help students feel more prepared and confident in their abilities. Next, in collaboration with the clinical preceptor’s communication and feedback strategies were examined. A workshop on clear, concise, and respectful manners. This was to encourage students to communicate their concerns and ask questions which can help alleviate anxiety and prevent misunderstandings. Additionally, education and best practice on providing students with feedback on their performance to highlight areas of strength and offer constructive criticism for areas that need improvement. Debrief has been shown where learning takes place Cantrell, (2008) [6-8] suggests that feedback has been shown to help students feel more confident. A formal debrief in the clinical areas to mirror the simulation center was implemented. As the students were familiar with this method it was quickly assimilated. Next, incorporating realization techniques into the learning environment was another effective strategy for reducing anxiety in student nurses. With the help of the University’s wellness center stress-reducing techniques such as deep breathing exercises, meditation, and yoga were introduced to the nursing students. In collaboration with the clinical preceptors were encouraged to practice these techniques with the students during placement. Finally, there was a recognition that the hospital-based clinical preceptors were not fully aware of the university services open to students to reduce anxiety. The resources, such as the wellness center, and counseling services were readily shared so the preceptors could provide access to these resources and help the students feel more supported and empowered to manage their anxiety reducing its impact on their learning and overall well-being.

Although in the initial stages, informal feedback and reports from both preceptors and the students appear to suggest the interventions are reducing anxiety. Also, the collaborative response has initiated more of a team-based rather than silo response to student issues.

In conclusion, anxiety is a common experience for many students’ nurses during their clinical placements. However, it is essential to reduce anxiety levels to promote optimal learning. Working collaboratively with the clinical preceptors to create a supportive learning environment, providing clear expectations and guidance, effective communication incorporating relaxation techniques and providing resources can all help reduce anxiety in student nurses. By collaborating and demonstrating evidence-based strategies clinical preceptors felt better equipped to support the students in their learning and help them manage the challenges of their clinical placements.

References


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