Relationship between Perceived Stress and Coping Pattern amongst Nursing Students

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Abstract

The present study triesto find the relationship between perceived stress and coping pattern among nursing students. The researcher usedthe tools of Shelden Cohen (1983) and the Cope Scale by Carver CS (1997), included Avoidant Coping and Approach Coping. Astratified random technique was used to select the sample from different hospitals/colleges, nursing students pursuing their studies in various institutions in Karnataka. There werea total of 162 volunteering participants. A self-administered questionnaire of Perceived Stress Scale and Brief COPE inventory was given to the participantsand the duration of the study was of one month. Statistical methods employed aremean, percentage, standard deviation, t-test, and Spearman's Coefficient correlation, and were calculated using IBM SPSS. The results of Spearman's Rho test show that there is a significant positive linear relationship between perceived stress and the following coping skills among the participants.

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Introduction

There are different ideas concerning the definition of stress; possibly the most common is a somatic, mental, or emotional strain or tension. The commonmeaning of stress is a condition or feeling experienced when a person identifies that demands are surpassing the personal and social resources the individual canuse. The definition of stress is measured to be something that causes discomfort by maximum of the persons. However, stress is not always harmful since betterpressure results in increased productivity. Stress, for most people, is to focus on the undesirable feelings and emotions it produces. Almost every definition of stress deliberatesprecise resultant physical, physiological and biochemical responses that are experienced or observed. A very inclusive definition of stress that comprises these and more is the biopsychosocial model, which has three types of apparatuses. This definition of stress differentiates between an external element, another that is internal, and a third that embodies the communication between these two factors. American institution of Stress (2010).

Bodily demands on the body like syndrome conditions, exercise, high temperature by environmental and societalsituations which are

assessed as hypothetically harmful, irrepressible, or exceptional our resources for managing, can lead to Stress, which is an internal state, (Morgan, Weisz, Schopler, 1993).

Managing is the process of spending attentive effort and energy to solve individual and interpersonal problems. In stressful situations, coping mechanisms seek to control, minimize, or accept stress and stressors that occur in regular life. These mechanisms are frequently referred to as coping skills or coping tactics. All coping tactics have the adaptive goal of dipping or dealing with stress, but some strategies can be maladaptive (unhealthy) or merely futile. Maladaptive behaviours are those that constrain a person's ability to adjust to circumstances.

Review of Literature

During this study on nursing students, we reviewed the following literature relating to Stress, Coping Strategies. These studies helped by enlightening us with the current research and focusing on our education in an exclusive way.

Farquhar J et al. (2017) conducted a research on a group of medical students in Singapore across four years to derive cooperative definitions from the medical student viewpoint, to identify common themes of students' experiences, and to distinguish pre-clinical and clinical year students' involvements relating to these four constructs using a semi-structured question guide for participants in collecting their understanding, experiences and the relationships between stress, burnout, coping, and resilience. Nineattention groups existed steered and nine themes appeared within three domains:

- Relating constructs to personal experience
- Interrelating stress, burnout, coping, and resilience
- Understanding the requirement of stress.

It was connected to clinical students, pre-clinical students reported theory-based rather than reality-based involvements and exam-induced stress, defined constructs using present rather than future situations, and described constructs as independent rather than interrelated.

Singh S et al. (2016) studied 100 completion year medical students to assess supposed stress and its relation to general psychopathology, the pattern of coping, and burnout. Results indicated a statistically noteworthy association of perceived stress with general psychopathology and slightly anxiety component of burnout. Further it was initiate that acceptance, positive reframing, humour, planning, and active coping correlated with a lower score on perceived stress. People who disclosed positive coping strategies had lesser stress and general psychopathology. A higher score on perceived stress was relatedtoadvanced scores on general psychopathology and burnout.

Das P et al., (2012) studied the relationship between stress and depression among post-graduate students. The sample size was 51(27 males and 24 females). Beck's Depression and Hari's Stress inventory were used to measure the level of depression and stress among post-graduate scholars. Results showed that stress and depression were higher among male students in comparison to their female counterparts. Gender had a predominant effect on the depression level of male and female post-graduate students. Male post-graduate students were more depressed than female post-graduate students.

The Rationale of the Study

Studies show that nursing students experience high levels of stress, which is connected to academic developments and scientific skills training. As per a psychosocial phenomenon, stress disturbs cholars' academic achievement and wellbeing. Coping mechanisms help pupils deal with the challenges arising from stress.

Methodology Aim and Objective

- To assess the apparent stress among nursing students and its relation with the coping pattern
- To find the relation between perceived stress and coping pattern

Hypotheses of the Study

There is no relation between perceived stress and coping pattern among nursing students.

Operational Definitions

Perceived stress is the emotional state or feelings that persons have about how much stress they are below at a given idea in time or over a given time.

Coping is efforts to avoid or reducerisk, destruction, and lossor to reduce the suffering that is habituallyconnected with those experiences.

Tools used for Data Collection

- 1. Perceived Stress Scale by Shelden Cohen (1983).
- 2. Brief Cope Scale by Carver CS (1997).

Description of Tools

Perceived Stress Scale

The Perceived Stress Inventory was conventional to measure the degree to which situations in one's lifespan are measured as stressful. Emotional stress has been defined as the degree to which peopleobserve (evaluate) that their demands surpass their aptitude to cope. The PSS was published in 1983. The Perceived Stress inventory wasestablished by Sheldon Cohen and his contemporaries. It is the most widely used 10-item psychological instrument to measure the degree to which situations in an individual's life are evaluated as stressful, which measures the perceived stress over the last 1-month duration, Cohenet al., (1983).

Scoring

- 0 = Never
- 1 =Almost Never
- 2 = Sometimes
- 3 = Fairly Often
- 4 = Very Often

Brief COPE Scale

"The COPE List was developed to measure a wide range of coping replies, several of which had aclearorigin in theory. The list includes some responses that are expected to be dysfunctional and some that are expected to be functional. It also includes at least two pairs of polar-opposite propensities. These were reflected because each tool is unipolar and we think people engage in a wide range of coping mechanisms during a given period, including both of each pair of opposites." Carver CS (1997).

The Brief COPE Scale is used to assess different coping behaviours and opinions a person may have in reply to a specific situation. It is a self-report questionnaire. The aspect of coping seen are self-distraction, active coping, rejection, substance use, use of emotive support, use of instrumental support, behavioural disconnection, venting, positive reframing, planning, humour, acceptance, religionand self-blame. Scores are accessible for the two principal coping styles:

- 1. **Avoidant Coping**: This is considered by the subscales of denial, substance use, discharge, behavioral disengagementand self-distraction and self-blame. Avoidant Coping is related to inferior physical health among those with medicinal conditions. Compared to Approach Coping, Avoidant Coping is perceived to be less active at managing apprehension.
- 2. **Approach Coping** is ordered by the subscales of active coping, positive reframing, planning, acceptance, seeking expressive support, and seeking informational sustenance. Approach dealing is related to more helpful responses to difficulty, including adaptive everyday adjustment, better physical health outcomes, and more stable emotional responding. The raw scorespresenceobtainable for Avoidant and Approach Coping, percentile ranks are obtainable using prescriptive data from a heart-failure sample Eisenberg et al., (2012) to indicate the relative preference to coping compared to others feeling adversity.

Research Design

The current study aimed to evaluate the apparent stress among nursing studying in Karnataka and its relation with the managing pattern.

Research Method

The descriptive survey method was employed to carry out this part of the research work.

Population

Nursing students of various nursing colleges in Bangalore city, Karnataka, instituted the population of the present study.

Selection of Students/ Sample Size

Nursing Students from different hospitals/colleges was selected using a stratified random sample with a total sample size of 162 volunteering participants.

Study Design and Technique

Around 162 nursing students were selected for the study. Firstly, rapport was established between the experimenterand participant. This was followed by providing instructions for each part of the questionnaires, and precautions were taken to safeguard that they understood the questionnaire. Each participant was entreated to respond to each item in the questionnaire freely and frankly without any reluctance. Each applicant was requested to clarify for understanding before they tried to respond.

Data Analysis Techniques

In this study several statistical tools and applies were used according to the requirement of the study. Mean, percentage, standard deviation, t-test, and Spearman's Coefficient correlation existed calculated using IBM SPSS (Statistical Package for the Social Sciences).

Result and Discussion

The subjects were Nursing Students following their studies in various institutions in Karnataka. There were a total of 162 volunteering applicants. A self-administered questionnaire of Perceived Stress Scale and Brief COPE inventory wasadministered to the participants. After analyzing the data, the following findings were observed.

H1. There is no relation between perceived stress and coping pattern among nursing students.

Table 1 Correlation of percented stress with various coping measures				
Types of Coping skills	Spearman's Correlation Coefficient (Rho Value)	P-Value	Significance	Type of Correlation
Active Coping	.353**	.000004	S	Positive
Planning	.413**	.000000	S	Positive
Using_Instrumental_ Support	.150	.057524	NS	Positive
Using_Emotional_Support	.237**	.002442	S	Positive
Venting	.281**	.000290	S	Positive
Behavioral _Disengagement	.219**	.005151	S	Positive
Self-Distraction	.401**	.000000	S	Positive
Self-blame	.144	.068203	NS	Positive
Positive Reframing	.357**	.000003	S	Positive
Humor	062	.433800	NS	Negative
Denial	.270**	.000508	S	Positive
Acceptance	.263**	.000739	S	Positive
Religion	.230**	.003279	S	Positive
Substance Use	.007	.927105	NS	Positive

 Table 1 Correlation of perceived stress with various coping measures

**Significant correlation at the 0.01 level (2-tailed)

*Significant correlation at the 0.05 level (2-tailed)

NS-Not significant, S-Statistically significant

The results of Spearman's Rho test shows that there is a significant positive linear relationship between perceived stress and the following coping skills in the participants: Active Coping, Planning, Using Emotional Support, Venting, Behavioural Disengagement, Self-Distraction, Positive Reframing, Denial, Acceptance, Religion, and there is no significant linear relationship between perceived stress and the following coping skills in participants: Using Instrumental Support, Self-Blame, Humour, Substance Use. Therefore, the current study of nursing pupils does not fully support the null hypothesis that there is no relation between perceived stress and coping pattern among nursing students.

In the present day of rising science and technology, it's a burden to the nursing students, as they are predictable to learn and master aenormous amount of knowledge, attitudes, and helps for which they consume to work hard which in turn put them below a lot of stress, Wolf &Kissling (1984). Further, contest for maintaining a balance between qualified and domestic front increases stress. Studies on medical scholars from various Indian medical colleges and medical colleges in other countries across the globe recognized a high incidence of stress, Abdulghanietal.,(2011); Shete and Garkal (2015); Shivanand B. Gobbur (2016); Yusoff and Fuad Abdul Rahim (2010).

Conclusion

The present study also displayed a high-stress level in nursing students. Our research has provided significant findings in terms of the association of Perceived stress with coping strategies. The outcomes are further protected by earlier studies done both in Indian and foreign medical

colleges. It provides a sound groundwork for planning interferences to reduce medical/nursing student's mental morbidity and avoid burnout. The interventions so strategic will help the students improve their quality of workproduction both on the professional and personal front.

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