

Thoughts on the Worry and Terror that Nursing Students Experience During Clinical Practicums

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ABSTRACT

Anxiety and fear are prevalent emotional responses among nursing students, particularly during clinical practicums, and can significantly impact their academic performance and professional development. This paper examines the sources of these emotional states, focusing on the perceptions of nursing students regarding preceptor behavior and the role of relational teaching-learning processes in shaping their professional identity. Anxiety is often triggered by concerns about making mistakes, failing, or lacking knowledge, while fear typically arises during specific tasks or assessments. The support and attitudes of preceptors play a pivotal role in alleviating or exacerbating these emotions, and a lack of proper guidance can negatively affect students' learning experiences. Relational processes, including trust, moral courage, and sensitivity, are essential for fostering positive relationships between students and preceptors, contributing to both personal and academic growth. Furthermore, the development of leadership skills and teamwork is crucial for nursing students, as these qualities are integral to their future roles in healthcare. Intrinsic and extrinsic factors, such as self-demanding behavior and social comparison, also influence students' self-confidence and motivation. The study underscores the importance of addressing these emotional challenges early in the nursing education process to improve student outcomes and prepare them to become competent and compassionate healthcare professionals. The paper calls for strategic investments in nursing education and a supportive environment to foster the development of the next generation of nurses, in line with global healthcare needs.

Keywords: practicums, nurses, students, education.

INTRODUCTION

A recent report from a startup at the University of Oxford highlights that anxiety disorders affect 3.8% of the global population, which equates to approximately 284 million individuals (1). As a result, anxiety disorders have emerged as a major health concern in the 21st century (2). These disorders often involve a range of psychological comorbidities, such as symptoms of anxiety and fear (3). Anxiety refers to the anticipation of either a real or perceived threat, whereas fear is the emotional reaction to a situation that one perceives as an imminent or future threat (3). Regardless of the individual response, anxiety negatively impacts one's quality of life, including academic performance (4, 5). In the context of nursing education, these emotional responses, particularly during clinical placements, can significantly impair student performance (6-8).

Anxiety in nursing students is typically triggered by their perceptions of upcoming events, such as the initiation of clinical training, whereas fear tends to arise during the execution of tasks like technical procedures, dialogues, or practical assessments. A study that examined nursing students found that common anxiety triggers included fear of making mistakes, failing, lacking sufficient knowledge, having negative experiences with mentors, and

feeling unsure about how to interact with patients and their families. Emotional responses to these challenges are not confined to the early stages of clinical practice; such issues also persist in graduates (7).

A systematic review further reinforces that anxiety and related emotions, such as fear, have a detrimental effect on the academic performance of nursing students (6). This issue has gained increasing attention, especially in light of the COVID-19 pandemic, which has exacerbated the prevalence of anxiety and fear among students compared to pre-pandemic conditions (8). Thus, this paper aims to explore the impact of fear and anxiety on nursing students, recognizing that these emotional states can interfere with the learning process and potentially affect their future professional lives. The primary focus of this discussion is twofold: students' perceptions of preceptor behavior and attitudes, and the influence of relational teaching-learning processes on the development of their professional identity.

FINDING

In the practical training phase of nursing education, professors oversee students except during supervised internships, when nurses employed by the hosting institution assume the role of preceptors. This distinction highlights the need to evaluate the time spent with, and the nature of the relationships formed between, students and professors versus those between students and preceptors. Research indicates that the attitudes of preceptors can significantly influence students' levels of anxiety and fear (9, 10). For instance, a study involving nursing students found that one of the leading causes of anxiety was the interaction with preceptors, with students reporting a lack of support from these clinical mentors (10).

The impact of anxiety and fear on students can result in either positive or negative outcomes. When managed constructively, stressors in the learning environment can lead to academic improvement. However, students who react negatively to these stressors may become withdrawn, inhibiting their learning and performance. This underscores the need for close monitoring of students during their clinical placements. Despite their increasing autonomy, students still require guidance from preceptors, as they cannot be held solely responsible for their clinical activities. A qualitative study highlights that students in supervised placements gain valuable managerial skills and the opportunity to apply theoretical knowledge in practical settings (11). Therefore, the preceptor's role is pivotal in fostering student autonomy during this process.

Preceptors are essential figures in the clinical environment, providing guidance and overseeing students' practical work (12). However, concerns arise when unqualified individuals are tasked with supervising students, as this may result in the acquisition of incorrect practices that contradict established academic principles. The concept of preceptorship in nursing is therefore structured to provide comprehensive support for both students and preceptors. This structure includes defining students' rights and responsibilities during internships, assigning personal preceptors to directly monitor students, designating head preceptors to support both students and preceptors in achieving learning objectives, and involving clinical teachers and link professors who participate in the planning and evaluation of the internships. However, implementing this framework remains challenging, particularly in terms of ensuring the adequacy of the students' experiences (12).

Key elements such as trust, moral courage, and sensitivity are crucial in any interpersonal relationship, but they are especially important in a healthcare training environment. Preceptors should foster students' development by encouraging positive relationships, not only with them but also with the broader healthcare team, ensuring students feel supported. Trust in both preceptors' and professors' guidance is vital for students' confidence, which in turn positively influences their performance. A model that integrates nursing students, personal preceptors, head preceptors, link teachers, and clinical teachers provides a robust support system. The more extensive this support network, the more empowered students feel to navigate the challenges of clinical training.

Additionally, the students' comfort level with preceptors plays a significant role in the development of their moral courage and ethical perspectives. Moral courage, considered a vital virtue in nursing, significantly impacts the personal and professional development of nurses (13). However, responsibility in the teaching-learning process does not rest solely with educators but also involves the students' personal engagement. Each student has unique motivations and challenges that influence their academic outcomes, and their relationship with peers and instructors also plays a part. Establishing a positive working relationship with their tutors helps students cope with difficulties and results in personal and academic growth.

Considering the individuality of each student, the role of emotions in moral decision-making is important. Moral sensitivity, defined as the awareness that others' actions can affect one's well-being (14), enables nurses to navigate ethical dilemmas and address the demands and perspectives that emerge in clinical settings. Often, emotions are overlooked when discussing moral issues in healthcare. However, an imbalance between cognition and emotion could lead to neglecting an essential aspect of morality. Nurses must integrate both rationality and emotional intelligence in their approach to ethical issues, reflecting a balance between understanding what is good and bad based on their values and experiences (15).

This notion of moral sensitivity offers valuable insights into the dynamics of the teaching-learning process. The style and approach of professors and preceptors can either help students overcome anxiety and fear or exacerbate these feelings. It is essential for educators to respect students' individuality, encourage their passion for the

profession, and create a supportive learning environment that fosters growth. Educators must also recognize students' personal traits that may affect their development, such as a tendency for self-criticism or social comparison, as these factors can impact students' confidence and ability to perform tasks. By addressing these individual challenges, educators can minimize learning disparities and optimize the educational experience for nursing students.

Relational Teaching-Learning Processes and Their Impact on Professional Identity

Moral distress, which often leads to feelings of hopelessness, is an important consideration in the training of nursing students. Regardless of the emotional responses it provokes, moral distress can interfere with a student's development and their ability to remain in the profession (16, 17). This distress is not limited to a specific event or period; it is recurrent and may contribute to ongoing emotional strain (18). Such suffering can undermine a student's motivation to persist in their studies. When nursing students face fear and anxiety in clinical settings but are unable to cope effectively, it can negatively impact their academic performance and possibly lead them to reconsider their future in the nursing profession, even if they possess the potential for success.

However, students should be evaluated not solely on their individual performance but also from a collective perspective (17). Students might perform better individually than within a group of peers, preceptors, or professors. The development of leadership skills is a crucial aspect of nursing education, as nursing professionals are expected to drive change and assume leadership roles within healthcare settings. Additionally, teamwork, essential in nursing practice, should be cultivated from the outset of the nursing program. Clinical environments provide valuable opportunities for students to hone both their practical and theoretical knowledge, which is fundamental in shaping their professional identity (18). Academic success is not merely about meeting curriculum requirements; it also depends on intrinsic factors such as the ability to manage tasks, take responsibility, deal with setbacks, maintain motivation, and develop professionalism and communication skills. Furthermore, extrinsic factors, including the quality of instruction and the support students receive, play a significant role in their academic performance (19). Personal traits such as being self-demanding or engaging in social comparisons can influence a student's self-confidence during training. Stress experienced in the educational setting may affect satisfaction with the academic program, leading to disengagement and reduced motivation (20).

In response to dissatisfaction in the learning environment, students may increase self-imposed demands or strive for perfection in clinical tasks. However, this can negatively impact their academic performance and overall well-being, as it often leads them to dedicate excessive time to academic tasks at the expense of necessary rest and leisure. It is crucial for students to manage their time effectively during their studies to mitigate the stressors they face (e.g., self-doubt or negativity). Additionally, universities must create supportive environments that promote students' physical and mental health. Their role in preventing more serious conditions, such as depression, extends beyond academic success to include the personal growth of the students (21).

The concept of "social comparison," introduced by Leon Festinger in 1954, is highly relevant during academic training. Social comparison occurs when students evaluate their performance relative to their peers, seeking to align their achievements with those of others (22). While some degree of social comparison can be motivating, as it helps students identify areas for improvement, excessive comparison can diminish self-confidence and create unnecessary stress (23).

A self-demanding attitude and social comparison are unavoidable aspects of clinical training for nursing students. Therefore, interventions are necessary to help students manage feelings of low self-confidence, anxiety, and fear during their studies. The earlier these issues are recognized and addressed, the more likely students are to improve their performance in both theoretical and practical components of their training.

In alignment with the goals set by international organizations for healthcare policies, particularly concerning the role of nurses in the healthcare workforce, it is essential to support students pursuing nursing as a profession. Policymakers should prioritize investments in nursing education to inspire and retain talent in the field. This will help ensure that nurses can effectively serve society (24). Nursing education must be equipped to prepare the next generation of professionals, supported by both public and private organizations that value and incentivize the retention of skilled nurses (25).

Ultimately, relational processes in the teaching and learning environment are foundational not only to the professional development of nursing students but also to their professional identity. These processes should align with local, regional, and global healthcare needs. The nursing shortage of 5.9 million professionals reported in 2018 (24) underscores the urgency of addressing the challenges faced by nursing students. Efforts to inspire, support, and retain students are essential to maintaining a high-quality nursing workforce.

CONCLUSION

This discussion highlights the roles played by professors, preceptors, students, and organizations in shaping positive learning experiences. It emphasizes the importance of fostering an environment that encourages nursing students to develop moral sensitivity, take responsibility for patient-centered care, and build a strong

professional identity. By addressing the emotional and psychological challenges that nursing students face, we can support their personal and academic growth, ultimately preparing them to become competent and compassionate healthcare professionals.

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