

Research Article

Clinical Instructor Social Support and Nursing Student Stress in Clinical Environments

Marzieh shayesteh far¹, Hojat Zareh Houshyari Khah², Khadijeh Moradbeigi³,

Nasim Hatefi_Moadab⁴, marzieh ghassemi³,

Bahman Cheraghian⁵ and Saeedeh Elhami^{*6}

¹Shiraz University of medical sciences, Shiraz,
IRAN and Abadan school of medical sciences, Abadan, Iran

²Abadan School of medical sciences, Abadan, Iran
and guilan university of medical sciences, guilan, Iran

³Abadan school of Medical Sciences, Abadan, Iran

⁴Student Research Committee, Kermanshah university of medical sciences,
Kermanshah, Iran

⁵Ahvaz University of Medical Sciences, Ahvaz, Iran

⁶Abadan School of medical sciences, Abadan, Iran (Corresponding Author)

ABSTRACT

Background and purpose: Clinical Environment is Essential to The Nurse Education. Physical Structure And Social Aspects of Clinical Environment is Associated With Nursing Education. The Idea of Social Support is one of the Basic Needs in Clinical Education. Social Support of Students In The Clinical Environment Impact on Student's Stress Level. The Purpose of the Study Was to Investigate The Social Support Nursing Student Obtain from Clinical Instructors and its Relation With Clinical Stress in the Clinical Environment

Materials and methods: A Descriptive Correlational Design Was Utilized. Sample Size Consists of 238 Baccalaureate Nursing Students. Three Instrument an Included Demographic Data Sheet, Revised Inventory Socially Behavior (Rissb) and Student Nursing Stress Index Snsi. Statistical Analysis Was Conducted Using Descriptive Analysis.

Results: according to the Result, Perceived Social Support 76.5% of Nursing Study is Intermediated. Clinical Stress In 65.5 % Of Nursing Student Is Intermediation. There Was a Significant Correlation between Perceived Social Support and Age, Course Degree, Stress Of Nursing Students ($P < 0.001$).

Conclusion: With to this, It's Necessary for the Nursing Faculty to Focus on Social Support, also Faculty Should Plan Session Where Perceived Social Support ability Student Can Nurturance. Active Training Program for Teachers to Promote Professional Competence, Professional Socialization of Nursing Students is Recommended.

Keywords: Social Support, Clinical Instructors, Nursing Students, Stress

INTRODUCTION:

Nursing is a practice-based profession (1), thus clinical learning environment is the foundation of nursing education (2). Nursing education in the clinical learning environment is related to physical and social structure. The physical structure of the environment refersto (classroom, room temperature, position of chair, paint, etc.) (3). The social aspect of clinical learning environment includes every detail of human, physical and organizational and interpersonal

issues, mutual respect and honest communication between educator and students in treatment centers. Social climate dominating treatment centers affects individuals' behavior, emotions and growth. According Mouse, social atmosphere or clinical learning environment in the treatment centers will have a significant impact on individuals' occupational and workplace choices in the future (4). Other researchers stated that social climate in clinical

environments, includes interactions between nurses, patients, educators, nursing students and other health care providers that encompasses social support (4). The social support is an interpersonal supportive process, the main core of which is information exchange. This information includes facts, advice, reassuring words, positive confirmation, communion or similar supportive terminologies exchanged through verbal or non-verbal communication (5). Considering that the clinical setting is the basis of the nursing education and nursing students spend major part of their training time in the clinical setting, therefore, the social support system (social interaction) in the clinical setting is of much higher importance than the classroom. One of the components of the social support system in the clinical learning environment is nursing educators who guide clinical experiences as learning facilitators and can guide students to achieve learning objectives by making changes in the learning environment. They also play the role of supporters so that students are able to gain experience in the clinical setting (6,5). So without social support, learning will not be effective in the clinical setting. The results of the study conducted by Alavi (2007) showed that, from the perspective of students, those educators that could provide additional support for students in the clinical setting are more effective. (7) . After arrival at the hospital and interacting with their educators, students can judge about their behavior and they will experience the presence or absence of supporters based on their reactions (8-11). Social support in a positive clinical environment leads to increased level of creativity, self-confidence, confidence, motivation in learning and professional growth (12 and 4). On the other hand, weak social support aspects in the educators' performance such as, poor communication, ignoring students, tarnishing their honor, will have a negative impact on motivation in clinical training (13). The results of the study conducted by Ebrahimi (1994) showed that undesirable level of social support is provided for students in the clinical environment (14). So, in order to assess the social support, the received social support

should be assessed. Undesirable level of such support in the clinical environment can lead to stress in students, which in turn affects the quality of learning in the clinical setting (12, 4). Clinical training process is always associated with stress factors (15). Most studies have shown that nursing students' stress is associated with factors such as personal and family problems and economic issues. Also, the results of the studies on nursing students revealed that clinical and academic stressors are considered together. Clinical environment stressors include various educational tasks, lack of necessary experience to perform assigned duties, lack of knowledge about the clinical setting, responsibility and possibility of making mistakes while performing procedures for the patient, fear of causing harm to the patient, interaction with patients and relatives , interaction with instructors and other members of care team, clinical performance evaluation by the instructor, fear of lack of proper communication with the patient, in effective communication with the clinical instructor, non-availability in an emergency and etc.(15, 16). It should be noted that students' clinical stress, affects not only the educational purposes but also increases the likelihood of errors and jeopardizes the patient safety (13 , 17).In his researches, Eric Johnson (2007) showed a negative relationship between social support and stress among nursing students (17). Moreover, psychological variables have shown that high level of social support can have neutralizing effect on the clinical stress (4, 18, 19). Therefore, the role of instructors as social supporters of students is part of the expected tasks, which has a significant effect in reducing student's level of stress and enhancing their learning quality (20).According to the results of past researches, measuring the level of social support of nursing educators is considered as a quality index of clinical learning environment (4). By reviewing past studies, it can be inferred that there few studies in the field of social support and its effects on stress levels among nursing students and there is also no comprehensive and specific research on social support of nursing students in Iran. On the other

hand, social support, along with other factors in a clinical setting has not been studied. The researchers conducted their study to evaluate social support provided to the nursing students by their clinical instructors. Outcomes of level of social support on the students' stress are very important. Thus, the present study aimed to evaluate nursing educators' social support and its effect on students' stress in the clinical setting so that in addition to studying the status quo and by reflecting the results to the relevant authorities, necessary strategies are adopted to enhance clinical learning environment and quality of clinical education process.

MATERIALS AND METHODS:

This is a cross-sectional study. The study population included all nursing undergraduates studying at two Schools of Nursing of the University of Medical Sciences. The sample size was 238 participants, including all undergraduate nursing students who participated during all the semester. Inclusion criterion included completing at least one internship in the last semester and the exclusion criteria included having a mental crisis during the past one month (students who have been suffering from mental problems in the screening by University of Medical Sciences, crises such as marriage and the death of loved ones) and students who have clinical experience at the paramedic level and those who are currently studying. This study was approved by the Ethics Committee of Ahwaz University of Medical Sciences. The data collection tool included a questionnaire consisted of three parts: a) demographic questionnaire b) Revised inventory social support behavior questionnaire (RISSB) with 40 items, which was developed by Orly for the first time to evaluate social support in nursing students was used and After the initial review, the 40-item questionnaire was converted to 38-item questionnaire (4). Two items of the questionnaire was removed by the Research Committee of the School of Nursing due to their heterogeneity with cultural issues and the 36-item questionnaire was used to assess students' level of social support. The questionnaire was designed in 3 domains, including unguided

support (22 questions), guided support (8 questions) and tangible support (6 questions) based on 5 Likert scale. The behavioral scale in each part is based on 5 Likert scale. To calculate the social support received for each item, the following scores were assigned to each option. (Never) 1, (Rarely) 2, (Several times) 3, (often) 4, (always) 5. The minimum and maximum social support scores were 36 and 180, respectively so that scores of 83-36, 84-132 and 133-180 respectively indicate low, average and high social support. This instrument was used in similar research and had high reliability validity. (Alpha coefficient of 66% -94% and content validity of 0.718) (4). C) Nursing Student Stress Index Questionnaire (SNSI), this contains 22 questions and was used to investigate the nursing students' perception of stress. The Self-report instrument measures nursing students' stress level (Pulido 2012). This instrument is used in three areas: academic workload, clinical concerns, personal problems and other concerns scored based on 5 Likert scale, in which Score=1 and Score=5 denote "not stressful" and "Extremely stressful", respectively. Thus, the minimum and maximum score is between 22-110 and score between 22-51, 52-80 and 81-110 respectively shows mild, moderate and severe stress. The validity and reliability score of English version of the questionnaire is (0.70) and Cronbach's of (0.88), respectively (17). It should be noted that the questionnaires were simultaneously translated into Persian by two people in order to use social support and clinical stress questionnaires in the present research and finally, a questionnaire was prepared. Then, it was again reviewed by an expert fluent in English and the final questionnaire was prepared. In order to determine the content validity, the questionnaire was given to 10 experts to comment on the statements. After considering the views, the content validity of 0.71 and 0.70 was obtained for Social Support Questionnaire and students Stress Index Questionnaire, respectively. Also, to evaluate the reliability, after guided a pilot study on 30 students, a Cronbach's alpha coefficient 0.87% and 0.85% was calculated for Social Support Questionnaire and students Stress Index

Questionnaire. In this research, data were collected during one step after visiting two nursing universities. After the necessary coordination with Education Unit of colleges, the time to complete questionnaires for each course was considered according to the pedagogy of theoretical and practical courses in the free time of training programs. Then Social Support Questionnaire and Clinical Stress Assessment Instrument were completed and collected in a one step after explaining the goals of the study to the students, obtaining their informed consent and assuring them regarding the confidentiality of information. To analyze the data, SPSS(ver.16) was used. First, studied variables were described using descriptive statistics methods such as frequency tables, graphs and indicators of central tendency and dispersion. Then, chi-square test, T- test and analysis of variance, Pearson correlation coefficient and nonparametric equivalents were used to perform statistics analysis and to investigate the relationship among variables.

Findings

In the present study, since researchers attended at the time of data collection, all questionnaires have been returned. The average age of nursing students was (21.26 ± 1.579). Female, single, junior participants and nursing students from two university centers accounted for 70.97%, 90.7%, 30.8% and 53.4%, respectively. Based on the results, 76.5% and 12.1% of students evaluated the received social support at medium and high levels. Results on social support in each domain showed that a total of 68.4%, 62.8% and 49.8% of the students evaluated social support at the medium level, respectively in the unguided, guided and intangible domains. The frequency distribution of social support behavior is elaborated in Table 1.

Table 1 - Frequency of social support in nursing students at academic selected centers

received Social support		Frequency (percent)	mean (SD)
unguided support	low	28 (11/3)	75/06(14/63)
	medium	169(68/4)	
	high	50 (20/2)	
guided support	low	21(8/5)	26/26(5/61)
	medium	155(62/8)	
	high	71(28/7)	
tangible	low	106(42/9)	17/75(5/22)

support	medium	123(49/8)	119/05
	high	18(7/3)	

The findings also showed that the perceived stress level of 65.5% of nursing students was at the medium level. The results showed that the perceived stress level of 65.5%, 47% and 52.6% of nursing students within domains of academic work, clinical concern and individual problems was at the moderate levels (Table 2).

Table 2 - Frequency the perceived stress of nursing students at academic selected centers

the perceived stress of nursing students	Frequency (percent)	mean (SD)	
academic work	low	62(25/1)	41/69(1/059)
	medium	162 (65/6)	
	high	23(9/3)	
clinical concern	low	87(35/2)	27/23(2/86)
	medium	116(47)	
	high	44(17/8)	
individual problems	low	77(31/2)	8/35(3/036)
	medium	130(52/6)	
	high	0(16/2)	
			60/91(14/47)

The present study showed that the relationship between social support behavior and the age of students was assessed using Pearson's correlation coefficient, which showed no statistically significant difference (rho=0.52 and (P <0.001). Also, the relationship between students' level of social support and semester were examined using Spearman correlation coefficient correlation, which showed no statistically significant difference (rho=0.046 and (P <0.001). The relationship between the level of social support and school location was examined using t- test, which showed statistically significant difference (t=3.029 and df=245 and (p <0.001). Also, the relationship between perceived social support and stress levels in nursing students was assessed using Pearson's correlation coefficient. This relationship was statistically significant to (rho=0.047, (P <0.001). In other words, with increasing social support given to students by the teachers, the level of stress among the students decreases.

DISCUSSION AND CONCLUSION:

The present study aimed to determine nursing students' perception of social support received from clinical instructors and its relationship with level of stress among nursing students. The

findings showed that (76.5%) of students evaluated the social support at the medium level, which was consistent with the results obtained by Montalvo (4) and Orly (22). Considering that clinical instructors have not received academic training in the field of clinical education in most universities, except in some cases of workshop-based clinical training and self-learning, on the one hand, and most clinical instructors are inexperienced and do not have the right skills and efficient clinical training, on the other hand; and therefore, their teaching methods and student assessment is also based on students' theoretical knowledge;(23) so, we can't expect to have higher social support and professional clinical education behavior. To achieve this goal, attempts should be made to increase the ability of clinical instructors in different ways. The results of this study also showed that unguided and guided supports were at the moderate level from the viewpoint of nursing students. Unguided support includes measures such as active listening and understanding etc. This area covers one of the important skills in the effective communication that emphasizes students' role from the stage of learning to work in the clinical setting. So, it reduces stress in the workplace and strengthens students' level of self-confidence in doing work independently without instructors' assistance. Guided support is one of the basic needs of the qualified clinical instructor that should be considered by them and universities. Guided support also includes aspects such as advice and gives feedback to the students. Feedback is one of the fundamental ways in the clinical positions. In fact, it is a kind of structured and goal-oriented interaction to better learning and gives the opportunity to the learner to think deeply about his/her performance. The feedback aims to transfer a clear concept of the problem to learners that makes them aware of their shortcomings and eventually provides suggestions on how to correct the defect (writing a list of clinical problems, prioritizing them by importance and resubmitting them to the instructor) (24). Students also evaluated the non-tangible assistance at the medium level. By non-tangible assistance, we mean providing educational

materials to students that should be done by instructors. In this regard, instructors should give students a list of resources such as books and articles, thereby giving the opportunity to the student to acquire desired skills in the clinical field and accept the instructor as a competent and wise guide trying to advance their professional development, therefore, learners will put more effort in the professional socialization and learning process (25). This study showed that there was a significant correlation between the level of social support received by nursing students and their age ($p < 0.001$). In other words, younger nursing students had higher perception of social support. Perhaps, it can be said that younger students are more inclined to receive the social support due to having little experience and that is why they had higher level of perception of the social support. In a study, Stewart also implies this result (20), but there was no relationship between age and perceived social support in the study conducted by Montalvo (4). The results of the present study also showed that students' stress level was moderate. Clinical training process is always associated with stress factor and students' clinical experience can cause such stress in them (7). Students' clinical stress not only affects the educational purposes but also increases the likelihood of errors and jeopardizes the patient safety (9,10). Stress is a multiple domain phenomenon that always happens between the individual and the environment (17). If the level of stress increases in the clinical learning environment, students will not be able to adapt themselves with its triggers (25 and 17). Therefore, nursing instructors must identify the stress phenomenon in the learners and reduce distress in them by manipulating the learning environment. The clinical environment cannot always be controlled and the student may suffer from an unexpected disaster at any moment (17). The clinical instructor should create a positive clinical learning environment and relieve students' stress experience. The clinical instructor must have the ability to recognize and interpret stressful experiences and reduce the complexity of the stressful environment by

making appropriate changes in order to perform a qualitative research in health care field (25, 26). Thus, the social support identifies symptoms of distress through concise and structured feedback, talking to other people, expressing feelings and help balance the mental health among nursing students (11, 27 and 28). Considering that social support is a set of general and specific supportive behaviors that balance the stress imposed on the person and research has shown that people with high social support, enjoys from higher level of physical, mental and social health and better adapt to life's stressors, and as it is also one of the predictors of health; necessary measures should be adopted to increase the level of social support received from family and friends and should help promote students' level of mental health by strengthening appropriate social communication skills. It is not possible to generalize the results obtained in the present study to other nursing schools and it is necessary to evaluate the level of social support received by students in other medical universities across the country. Also, considering the type of research, possible confounding variables are not considered in this study. With regard to the present situation in each university, it is recommended that the present study be repeated so that clinical instructors re-learn the professional qualifications.

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