



ORIGINAL RESEARCH ARTICLE

STRESS AND SELF-ESTEEM AMONG NURSING STUDENTS AT PRIVATE MEDICAL COLLEGE, CHITWAN

Swostika Shrestha¹, Srijana Ghimire^{1,*}

¹School of Nursing, Chitwan Medical College, Bharatpur, Nepal

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**Correspondence to: Srijana Ghimire, School of Nursing, Chitwan Medical College, Bharatpur - 5, Chitwan*

Email: srijananeupane95@gmail.com

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ABSTRACT

Background: Stress and self-esteem are common issues that everyone has to cope with at some time in their lives and they could also affect other things going on in a person's life. The objective of the study is to identify the stress and self-esteem among nursing students.

Methods: A descriptive cross-sectional study was carried out among B.Sc. Nursing students, Chitwan Medical College. The data was collected by using structured questionnaire within 2 weeks. Obtained data were analyzed using IBM SPSS version 16.0. Descriptive statistics (mean, frequency, percentage and standard deviation) and inferential statistics (chi-square and correlation) were used for data analysis.

Results: Out of 116 respondents, 23.3%, 25.9%, 25.9% and 25.0% were from first, second, third and fourth year respectively. More than half i.e. 50.9% of the respondents had high stress. Respondents had faced higher (68.1%) in teacher related stress followed by peer stress 67.2% and self-inflict 66.0%. About 61.2% of the respondents had low self-esteem. There was higher stress in first year students than other. The fact is that as the academic year increases, students become more familiar to the learning environment and able to cope better. There was statistical significant association between stress among nursing students and habit of problem sharing ($p=0.04$).

Conclusions: It is concluded that respondents have high level of stress and low level of self-esteem. Therefore, intervention for increasing self-esteem and decreasing stress should be conducted by the college administration.

INTRODUCTION

Stress and self-esteem are common problem all people which reflects in coping at some time in their lives and they could be upset in a persons' life. College student's experienced academic stress is psychological condition to some extent. Self-esteem and psychological well-being which are think carefully its impact over the college students.¹

Academic stress is noticed when students can't finish their assignments with in time and forced by the lecturers and colleagues. Some students can't manage with some difficulties and proper organized schedule in their studies. Nursing students experience more frequently clinical stress like pressure in procedure, fear of mistake, working hour and handling with various patients.²

Medical students feel highly stressful situation when

utilizing their knowledge at practicum area. When student's unable to cope stressors in time which leads to failure in academic performance as well as quality and quantity of health care. Highly stressful students have worse in academic performance, health service and client recovery also. Continue stress can lead to life threatening situation i.e. high blood pressure, sleeplessness, tachycardia, even premature death.³

All people deals with stress on a daily basis which is fact of life. In the beginning of nursing profession, student feels stressful and affects the emotional, physical, social, and academic . Each student had different perceived capacity and response to stress differs, which may produce question on behavioral patterns among the student nurses during their study period like feeling of loneliness, nervousness, sleeplessness, and worrying. Thus, most of the student nurse faces a lot of difficulties and issues regarding their profession.⁴ Nursing students who had high levels of stress in clinical practice that may cause psychological problems during their professional life and reduce the quality of patient care which they provide.⁵

In most students showed mild stress in educational, clinical and personal areas, although it was more seen in practical area. With increase of age, he level of stress was observed to decrease in educational and clinical areas. In hospital setting, nursing students had more stress than medicine students. The level of stress in the subjects who were satisfied with their academic course was lower than subjects who were dissatisfied in clinical area.⁶ The varieties of structure of self-esteem are showed by personal beliefs about all their characteristics and can be influenced by internal and external variables, including exposure to the system.⁷

Self-esteem may refer to an exact, reasonable, balanced appreciation of one's worth as a person, victory and proficiency, but it can also refer to excessive proud and superiority show unpleasantly over others people.⁸ Self-esteem refers to the perception the individual possesses of his or her self-worth. A person who had high self-esteem and self-respect, those are considers worth, and proud of his/her achievements. Who experience low self-esteem which may lack confidence, self-critical and considers they are to be less worthy and competent

than others.⁹

Self-esteem is a function of identity development that results from successfully addressing the tasks associated with the developmental stages of life. According to him one's sense of developing, growing and confronting lives tasks leads to feelings of worth.¹⁰

Self-esteem is one of the most crucial parts of a person's work life, and which is found that there are many factors affect nurses' self-esteem. A nurse who has good self-esteem, she will be able to provide better quality care, also satisfied with her job, fully motivated to own profession and think her morals and values to make a successful professional image.¹¹ The objective of the study is to identify the stress and self-esteem among nursing students.

METHODS

A A descriptive cross-sectional study design was used to find out stress and self-esteem of nursing students. The study has two components: stress and self-esteem. Stress related question modified on the basis of stressors in nursing students Scale, Chinese Version (SINS-CN) and self-esteem question develop by Rosenberg Scale (1986). Stress related 36 items and 10 items in self-esteem related. All items are answered using a 4-point Likert scale.

All students (i.e.116) were from BSc. Nursing 1st to 4th year except researcher. Prior to data collection, ethical approval was obtained from Chitwan Medical College Institutional Review Committee and data collection permission was taken from Chitwan Medical College, School of Nursing. Verbal informed consent was also obtained from all students. All the students are collected in their respective class room and distribute questionnaire. After 30 minutes collect questionnaire. The collected data was checked, reviewed and organized daily for its accuracy, completeness and consistency. The data was entered in IBM SPSS version 16.0. Descriptive statistics such as frequency, percentage, mean and standard deviation was used for the socio-demographic and stress and self-esteem related items and inferential statistics was used to find out the association between variables.

RESULTS

Nearly half (46.6%) of respondents were in the age group 20-21 years with Mean age \pm SD 20.84 \pm 1.60 years where Minimum age was 18years and Maximum age was 24 years. Half of the respondents (50.9%) were Brahmin, most of them (92.2%) were follow Hindu religion, more than half (57.8%) are non-hostellers and (84.5%) of respondents were from nuclear family (show in table 1).

Table 1: Respondents' Academic, Economic, Support and Health Related Variables (n=116)

Variables	Frequency	%
Age group in years		
18-19	25	21.5
20-21	54	46.6
22-23	32	27.6
24-25	5	4.3
Mean age \pm SD 20.84 \pm 1.60 years (Min18, Max24)		
Ethnic group		
Brahmin	59	50.9
Chhetri	22	19
Janjati	33	28.4
Dalit	2	1.7
Religion		
Hindu	107	92.2
Buddhist	9	7.8
Current residence		
Hostel	49	42.2
Non-hostel	67	57.8
Type of family		
Nuclear	98	84.5
Joint	18	15.5

About 23.3% respondents were from first year, more than two third (77.6%) of the respondents were satisfied with their academic performance. Regarding academic and clinical learning environment, maximum 83.6% and 77.6% of the respondents considers adequate respectively. More than two third 88.8% had positive perception towards nursing education. About (78.4%) students had perceived adequate teachers' support (show in table 2). microalbuminuria and these were excluded from further analysis[Table 2].

Table 2: Respondents' Academic, Economic, Support and Health Related Variables (n=116)

Variables	Fre- quen- cy	%
Academic year		
1 st	27	23.3
2 nd	30	25.9
3 rd	30	25.9
4th	29	25
Satisfied academic performance		
Yes	90	77.6
No	26	22.4
Academic learning environment		
Adequate	97	83.6
Inadequate	19	16.4
Clinical learning environment		
Adequate	90	77.6
Inadequate	26	22.4
Perception towards nursing education		
Positive	103	88.8
Negative	13	11.2
Perceived family support		
Good	115	99.1
Poor	1	0.9
Perceived peer support		
Good	106	91.4
Poor	10	8.6
Perceived teacher's support		
Adequate	91	78.4
Inadequate	25	21.6
Habit of problem sharing		
No one	13	11.2
Family	40	34.5
Friends	63	54.3
Presence of chronic health problems		
Yes	11	9.5
No	105	90.5

Table 3 show mean score of stress on different domains. It reveals that respondents got maximum teacher related stress (3.40 \pm 0.05) and minimum

clinical stress (2.94±0.09).different in age, sex and medication use distribution [Table 3].

Table 3: Respondents’ Mean Score of Stress on Different Domains (n=116)

Variables	Mean(SD)	Mean Percentage
Educational stress	3.26(0.12)	65.3
Confidence stress	3.18(0.06)	63.6
Peer stress	3.36(0.15)	67.2
Finance and time management stress	3.16(0.12)	63.2
Self-inflicted stress	3.30(0.03)	66
Teacher related stress	3.40(0.05)	68.1
Clinical stress	2.94(0.09)	52.8
Total Mean Score	3.23(0.04)	63.7

Slightly more than half of the respondents had high stress i.e. (50.9%) and nearly two third i.e. 61.2% of the respondents had low self-esteem (show in table 4). There was higher stress in first year students then other years. There was statistical significant association between level of stress among nursing students with habit of problem sharing (p=0.04) that means those who shares problem with family had high stress and those who shares with friends had low stress (show in table 5). Other variable was not statistical significant association i.e. age, academic stress, ethnicity, satisfied academic performance, academic learning environment, clinical learning environment, perception towards nursing education (show in table 5).

Fig 1: Respondents’ Level of Stress and level of self esteem

	Frequency	%
Level of stress		
Low stress (≤ 3.23)	57	49.1
High stress (>3.23)	59	50.9
Total	116	100
Level of self-esteem		
Low self-esteem (≤18)	71	61.2
High self-esteem (>18)	45	38.8
Total	116	100

There was no statistical significant association between level of stress among nursing students and religion, current residence and type of family, mother’s educational status, father’s educational status, mother’s educational level, father’s educational level, mother’s occupation and father’s occupation, respondent’s perceived family, peer and teacher’s support and presence of chronic illness. Other variables (like stress) were not statistical significant association with level of self-esteem. (Not show in table).

Stress and self-esteem among nursing students are moderately negative correlated (p<0.001). That means as the stress increases, the self-esteem of the respondents decreases and vice versa (not shows in table).

Fig 1: Association between Respondents’ Levels of Stress with Selected Variables (n=116)

Variables	Level of Stress		p-value**
	High	Low	
	No.(%)	No.(%)	
Age			
≤21	36(45.6)	43(54.4)	0.26
>21	21(56.8)	16(43.2)	
Ethnicity			
Brahmin and Chhetri	36(44.4)	45(55.6)	0.12
Others	21(60.0)	14(40.0)	
Academic year			
1 st	17(63.0)	10(37.0)	0.05
2 nd	9(30.0)	21(70.0)	
3 rd	14(46.7)	16(53.3)	
4 th	17(58.6)	12(41.4)	
Satisfied academic performance			
No	13(50.0)	13(50.0)	0.92
Yes	44(48.9)	46(51.1)	
Academic learning environment			
Inadequate	8(42.1)	11(57.9)	0.5
Adequate	49(50.5)	48(49.5)	
Clinical learning environment			
Inadequate	13(50.0)	13(50.0)	0.92
Adequate	44(48.9)	46(51.1)	
Perception towards nursing education			

Negative	7(53.8)	6(46.2)	0.71
Positive	50(48.5)	53(51.5)	
Habit of problem sharing			
No one	6(46.2)	7(53.8)	0.04*
Family	26(65.0)	14(35.0)	
Friends	25(39.7)	38(60.3)	

*Significance level of p-value at 0.05 ** Pearson chi square

DISCUSSION

The mean score of overall stress was 3.23 (SD=0.04). Stress was higher on domains of education 3.26(SD=0.12), peer 3.36(SD=0.15), self-inflict 3.30(SD=0.03) and teacher 3.40(SD=0.05) and lower on domains of confidence 3.18(SD=0.06), finance and time management 3.16(SD=0.12) and clinical 2.94(SD=0.09). The findings of the study were supported by Liu, Gu, Wong, Luo, & Chan, (2015)¹⁴ study which showed mean score of overall stress was 3.33 (SD=0.49) and domains of education 3.35 (SD=0.62), finance and time management 3.31 (SD=0.72) and confidence 3.21 (SD=0.60) whereas the findings in clinical and self-inflicted stress are not supported by the study conducted by Liu, Gu, Wong, Luo, & Chan, (2015)¹⁴ which showed that clinical 3.44 (SD=0.54) and self-inflict 3.03 (SD=0.68). This might be due to huge amount of classwork material, nervousness, lack of enough money and free time.

But there is no statistical significant association between stress among nursing students with age (p=0.26) and financial support (p=0.15) which is contrasted and religion (p=0.74), residence (p=0.24) and family type (p=0.14) which is supported by the study conducted by Acharya and Chalise (2015)¹ age, religion, residence and family type.

The mean score of self-esteem was found to be 18 (SD=3.15). The study reveals that nearly two third (61.2%) of the respondents had low self-esteem. The finding of the study is supported by the study conducted by Acharya and Chalise (2015)¹ which showed that 78% of the respondents had low self-esteem. This may be due to high academic stress and lack of adequate support from peers, teachers and families.

There is no statistical significant association between self-esteem among nursing students

with age (p=0.17), family type (p=0.59), habit of problem sharing (p=0.97) and presence of chronic health problems (p= 1.00). The finding of the study is supported by Mane (2015)¹² which showed age (p=0.14), family type (p=0.05), habit of problem sharing (p=0.75) and presence of chronic health problems (p=0.08).

Similarly, there is no statistical significant association between self-esteem among nursing students with academic year (p=0.45). The finding of the study is supported by Shrestha (2013)¹³ which showed academic year (p=0.56).

The study revealed there is no statistical significant association between self-esteem among nursing students with place of residence (p=0.69) and. The finding of the study is not supported by the study conducted by Ghezlbash et al. (2015) which showed place of residence (p=0.003).⁹ The fact is that self-esteem is one's psychological condition and does not depend on residence.

The study revealed Pearson correlation between stress and self-esteem was (p=-0.35) and which was statistically significant. It showed there is moderate negative correlation between stress and self-esteem among nursing students. The finding of the study is supported by the study conducted by Acharya and Chalise (2015)¹ which showed Pearson correlation was (p=-0.58). This means as the stress increases the self-esteem of the student's decreases.

CONCLUSION

Nursing students have high stress and low self-esteem. More than half of the respondents have high teacher related stress and low clinical stress. There is statistical significant association between stress among nursing and habit of problem sharing. Also, the study concluded that there is moderate negative relationship between stress and self-esteem among nursing students, which means higher the stress, lowers the self-esteem and vice-versa. Therefore, intervention to lower the stress and increase the self-esteem among nursing students should be carried out so that the learning of the students will be efficient

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