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**Determination of the Relationship Between Clinical Practice Stress and Professional Self-Esteem in Nursing Students**

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**Abstract**

This study aims to investigate the relationship between clinical practice stress and professional self-esteem in nursing students in terms of some variables. The study is of a descriptive-relationship-seeking type. The study population consisted of 806 2nd, 3rd, and 4th-year students studying at Gazi University, Faculty of Health Sciences, Department of Nursing in the fall semester of 2022-2023. It aimed to reach 261 students by calculating the sample of which the population of the study is known. The sample of the study was obtained by systematic sampling method. The data collection forms used were the Personal Information Questionnaire, the Clinical Stress Questionnaire, and the Professional Self-Esteem Scale. According to the research results, there is a statistically significant difference between the medians of the professional self-esteem scores related to department choice, satisfaction with the department, positive communication with instructors, and positive communication with medical staff ( $p < 0.001$ ). As a result of our study, it was found that the older students, those who had voluntarily chosen the department, those who were satisfied with the department, those who had no difficulty meeting expectations, and those who were considering continuing in the profession had higher professional self-esteem. There was no relationship between clinical practice stress and professional self-esteem.

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## 1. Introduction

Nursing education consists of two parts: theoretical and clinical applications. Clinical practice is an indispensable part of nursing education and it often represents additional stress for nursing students, along with the stress of college education and life (Mankan et al., 2016). In studies conducted to determine the stress levels of nursing students, clinical practice has been found to increase students' stress levels (Taşdelen & Zaybak, 2013; Karagözoğlu et al., 2013; Arabacı Baysan et al., 2015; Hamadi et al., 2021). The stress experienced by students in the clinical setting can lead to difficulties in developing relationships with health care professionals, a decrease in the ability to cope with stress, slow and weak social relationships, professional inadequacy, failure to meet patient expectations, lack of compliance with the hospital, concern about harming patients, fear of giving false information, medical errors. Some studies say this causes anxiety about work (Ahmed & Mohammed, 2019; Rafati et al., 2020; Welch, 2023; Amsalu et al., 2020).

It is suggested that some experiences during clinical practice may have changed student nurses' professional self-esteem and negative effects on acquiring professional identity (Altıok & Üstün, 2013; Çivilidağ et al., 2018; Bulduk & Ardic, 2015). Professional self-esteem is an important indicator of developing an individual's personality and professional identity (Dincer & Öztunç, 2009). Occupational self-esteem is an individual's acceptance of occupational responsibilities and personal value judgment about the occupation. An individual's ability to fulfill his responsibilities in his work relationships shapes his occupational self-esteem (Dimitriadou et

al., 2014). The lack of professional self-concept development in nursing students negatively affects their clinical practice, job satisfaction and staying in the profession (Badiyepymaiejahromi et al., 2020). Professional respect not gained during nursing education can also cause problems in business life (Bimray et al., 2019).

This study aimed to examine the relationship between clinical practice stress and the professional self-esteem of nursing students using some variables. The study sought answers to the following questions:

1. What are the stress levels of nursing students in clinical practice?
2. Does the stress levels of student nurses in clinical practice differ depending on demographic characteristics?
3. What is the level of professional self-esteem of student nurses?
4. Is there a difference between student nurses' professional self-esteem as a function of some demographic characteristics?
5. Is there a relationship between clinical practice stress and the professional self-esteem of student nurses?

## 2. Materials and Methods

### 2.1. Type of Research

This is a descriptive, relationship-seeking study.

### 2.2. Study Population and Sample

The study population consisted of 806 2nd, 3rd, and 4th-year students studying at Gazi University, Faculty of Health Sciences, Department of Nursing in the fall semester of 2022-2023. It aimed to reach 261 students

using the epi-info program for a sample calculation of the known population.

### 2.3. Sampling Method

Students were stratified according to their classes; the number of students in each class was divided by the number of units in the population, and a proportional selection was made, and the students who would participate in the study were determined by systematic random sampling. The study included 78 students from the 2nd, 84 from the 3rd and 99 from the fourth.

### 2.4. Inclusion and Exclusion Criteria

Students enrolled in the Department of Nursing and completing at least one semester of clinical practicum were included in the study. First-year students who were not completing a clinical practicum at the time of the study were excluded from the study.

### 2.5. Data Collection Tools

**Personal Information Form:** As a result of the literature review, the researchers prepared a thirteen question questionnaire that included sociodemographic information and their opinions on the topic (Altunkürek et al., 2017; Kahraman & Kılıç, 2021; Admi et al., 2018).

**Arıcak Professional Self-Esteem Scale (APSC):** It was developed by Arıcak (1999) and is a Likert-type measurement instrument used to measure the respect attitude of individuals aged 17 years and older towards their respective professions (Arıcak, 1999). The occupational self-esteem scale consists of 30 items. Of these 30 items, 14 are positive (2, 5, 7, 9, 11, 13, 14, 16, 18, 20, 24, 26, 28, and 30), and 16 are negative (1, 3, 4, 6, 8, 10, 12, 15, 17, 19, 21, 22, 23, 25, 27, and

29). Positive items were scored as "strongly agree" 5, "agree" 4, "undecided" 3, "disagree" 2, and "disagree at all" 1. Negative items are scored in the opposite direction. The points awarded for each item are summed to give the total score. The Cronbach's alpha coefficient of the scale was reported as 0.93 (Arıcak, 1999).

**Clinical Stress Questionnaire (CQS):** It is a five-item Likert-type questionnaire developed by Pagana in 1989. It consists of 20 items and allows nursing students to measure the initial stress level (which may include threats and struggles) they experience on the first day of clinical practice. The items in the questionnaire are divided into four dimensions: Threat, Struggle, Harm, and Benefit. The threat subdimension of the CQS includes the following emotions: "6" (I was sad, worried, overwhelmed, touched, intimidated/shy, scared), struggle subdimension "7" (warned, fired up, hoped, liked, excited, thrilled, happy), harm subdimension "5" (I was angry, sad, felt guilty, disgusted, disappointed), and benefit subdimension "2" (relaxed, trusting). Each item is scored with 5 marks, and you are asked to tick one of the options 0- "not at all", 1- "somewhat", 2- "moderately", 3- "a lot", 4- "very much".

The questionnaire can be answered with a minimum of "0" and a maximum of "80" points. The Turkish validity of the Clinical Stress Questionnaire was conducted by Şendir and Acaroğlu (2008). The internal consistency coefficient was reported to be 0.70, and factor analysis was reported to support the original structure (Şendir & Acaroğlu, 2015).

## 2.6. Data Collection

Data were completed face to face by reaching the students identified by systematic sampling in the list between November 2022 and January 2023.

## 2.7. Data Analysis

Data were analyzed using the statistical program IBM SPSS.21 Conformity to the normal distribution was assessed by Shapiro-Wilk and Kolmogorov-Smirnov tests. The Mann-Whitney U test was used to compare nonnormally distributed values by paired groups, and the Kruskal-Wallis test was used to compare nonnormally distributed data by groups of three or more. Multiple comparisons were examined using Dunn's test. Spearman's rho correlation coefficient was used to examine the relationship between nonnormally distributed scale scores. Analytical results were expressed as mean±sd and median (minimum-maximum) for quantitative data and frequency for categorical data. The significance level was taken as  $p < 0.050$ .

## 2.8. Limitations of the Study

This study was limited to the Faculty of Health Sciences of Gazi University, Department of Nursing students. Therefore, the results can only be generalized for this group of students.

## 2.9. Ethical Dimension of the Study

Written consent was obtained from the head of the nursing department of the college, "institutional approval", "ethics committee approval" from the ethics committee of the college and "voluntary informed consent" from the students participating in the study based on voluntariness.

## 2.10. Statistical analysis

Data were analyzed using the statistical program IBM SPSS.21 Conformity to the normal distribution was assessed by Shapiro-Wilk and Kolmogorov-Smirnov tests. The Mann-Whitney U test was used to compare nonnormally distributed values by paired groups, and the Kruskal-Wallis test was used to compare nonnormally distributed data by groups of three or more. Multiple comparisons were examined using Dunn's test. Spearman's rho correlation coefficient was used to examine the relationship between nonnormally distributed scale scores. Analytical results were expressed as mean±sd and median (minimum-maximum) for quantitative data and frequency for categorical data. The significance level was taken as  $p < 0.050$ .

## 3. Results

It was found that 57.1% of participants had a grade point average of 3.01 or higher, 70.9% were satisfied with their faculty, 61.7% had difficulty meeting the instructors' expectations, and 35.6% had difficulty meeting the expectations of the nurses in charge (Table 1).

**Table 1.** Descriptive statistics for demographic characteristics

	Frequency (n)	Percentage (%)
<b>Gender</b>		
Male	39	14,9
Woman	222	85,1
<b>Classroom</b>		
2nd grade	78	29,9
3rd grade	83	31,8
4th grade	100	38,3
<b>Department selection status</b>		
Willingly	109	41,8
Unintentionally	59	22,6
Undecided	93	35,6
<b>Order of preference</b>		
Top 3 places	101	38,7
4th and higher row	160	61,3
<b>Reason for preference</b>		
Ease of finding a job	213	81,6
Women's occupation	12	4,6
Willingness to help people	10	3,8
Other (Province where the university is located, helping people, suitability for personality, family desire, degree completion)	26	10
<b>Grade point average</b>		
2.50 and below	29	11,1
2.51-3.00	83	31,8
3.01 and above	149	57,1
<b>Satisfaction with the department</b>		
Yes	185	70,9
No	76	29,1
<b>Difficulty in meeting the expectations of instructors</b>		
Yes	161	61,7
No	100	38,3
<b>Difficulty in meeting the expectations of charge nurses</b>		
Yes	93	35,6
No	168	64,4
<b>Communication with lecturers</b>		
Positive	199	76,2
Negative	62	23,8
<b>Communication with health personnel</b>		
Positive	150	57,5
Negative	111	42,5
<b>Don't think about dropping out of school</b>		
Yes	131	50,2
No	130	49,8
<b>Thinking about continuing in the profession</b>		
Yes	222	85,1
No	39	14,9

The mean score of professional self-esteem was 108.15, the minimum score was 58.00, and the maximum score was 143.00. The mean score of clinical stress was 34.34, the minimum score was 14.00, and the maximum score was 60.00 (Table 2).

**Table 2:** Descriptive Statistics of professional self-esteem and clinical stress scores

	Mean±sd	Median (min. - max.)
Professional self-esteem score	108.15 ± 18.15	111.00 (58.00 - 143.00)
<b>Clinical Stress Scores</b>	<b>Mean±sd</b>	<b>Median (min. - max.)</b>
<b>Struggle</b>	12.90 ± 4.59	12.00 (1.00 - 25.00)
<b>Threat</b>	11.61 ± 4.89	11.00 (2.00 - 24.00)
<b>Harm</b>	6.66 ± 3.70	6.00 (1.00 - 17.00)
<b>Benefit</b>	3.17 ± 1.67	3.00 (0.00 - 8.00)
<b>Total clinical stress score</b>	34.34 ± 8.74	35.00 (14.00 - 60.00)

The median 2nd-grade occupational self-esteem score was 111.50, the median 3rd-grade occupational self-esteem score was 102.00, and the median 4th-grade occupational self-esteem score was 116.00. A statistically significant difference exists between median self-esteem scores by class ( $p < 0.001$ ). This difference was due to the difference between the 3rd and other grades. No statistically significant difference existed between the medians of clinical stress scores by class ( $p=0.614$ ) (Table 3).

There is a statistically significant difference between the medians of professional self-esteem scores by department choice, satisfaction with the department, positive communication with lecturers positive communication with the instructors, and having positive communication with the health personnel ( $p < 0.001$ ) (Table 3).

A statistically significant positive and moderate association was found between the score of the occupational self-esteem scale and the scores of the struggle, benefit, and harm subscales ( $r=0.480$ ;  $p < 0.001$ ). No statistically significant correlation was found between occupational self-esteem and clinical stress scores ( $p=0.496$ ) (Table 4).

#### 4. Discussion

This study was conducted to determine the relationship between clinical practice stress and professional self-esteem in nursing students. High professional self-esteem in nursing students is important because it affects the quality of patient care, professionalism, and continuity of the profession (Iacobucci et al., 2013; Poorchangizi et al., 2019). In our study, students' professional self-esteem was found to be high. Lyu et al. (2022) found that the professional self-esteem scores of nursing students were at a moderate level (Lyu et al., 2022). Çöplü and Kartın (2019) found that the professional self-esteem scores of nursing students were at a moderate level. It was found that girls scored higher than boys (Çöplü & Kartın, 2019). In our study, the mean score of male students was higher than that of female students. This might be since the clinical stress scores of male students are relatively lower than female students. Looking at the characteristics of the students with high professional self-esteem in our study, it was found that the students who have positive communication with health care staff and faculty, who like to choose the department, who are satisfied with the department, who have high-grade point average, who do not plan to drop out and continue their education, have higher professional self-esteem.

**Table 3.** Scale values according to some variables

	Professional self-esteem score		Total clinical stress score	
	Mean ± sd	Median (min. - max.)	Mean ± sd	Median (min. - max.)
<b>Gender</b>				
Male	109.72 ± 22.60	112.00 (71.00 - 139.00)	33.77 ± 11.49	34.00 (14.00 - 50.00)
Woman	107.88 ± 17.29	111.00 (58.00 - 143.00)	34.44 ± 8.19	35.00 (14.00 - 60.00)
Test statistics	3966.500		4117.000	
p**	<b>0.404</b>		0.625	
<b>Classroom</b>				
2nd grade	108.21 ± 18.03	111.50 (58.00 - 143.00)b	34.56 ± 8.82	35.00 (14.00 - 50.00)
3rd grade	101.51 ± 18.24	102.00 (70.00 - 138.00)a	34.99 ± 8.22	35.00 (14.00 - 60.00)
4th grade	113.63 ± 16.41	116.00 (58.00 - 143.00)b	33.62 ± 9.13	34.00 (20.00 - 49.00)
Test statistics	19.954		0.975	
p*	<b>&lt;0.001</b>		0.614	
<b>Department selection status</b>				
Willingly	113.24 ± 19.61	118.00 (70.00 - 143.00)a	35.36 ± 8.43	35.00 (14.00 - 60.00)
Unintentionally	103.81 ± 20.52	114.00 (58.00 - 134.00)b	33.27 ± 8.34	32.00 (19.00 - 50.00)
Undecided	104.95 ± 12.68	108.00 (72.00 - 138.00)b	33.82 ± 9.30	35.00 (19.00 - 51.00)
Test statistics	19.867		1.851	
p*	<b>&lt;0.001</b>		0.396	
<b>Grade point average</b>				
2.50 and below	102.76 ± 21.16	100.00 (70.00 - 138.00)	30.38 ± 9.24	31.00 (14.00 - 60.00)a
2.51-3.00	107.82 ± 15.60	113.00 (72.00 - 134.00)	34.37 ± 9.04	35.00 (19.00 - 51.00)ab
3.01 and above	109.39 ± 18.75	111.00 (58.00 - 143.00)	35.09 ± 8.32	35.00 (20.00 - 50.00)b
Test statistics	3.762		7.893	
p*	0.152		<b>0.019</b>	
<b>Satisfaction with the department</b>				
Yes	114.36 ± 13.70	114.00 (77.00 - 143.00)	33.44 ± 8.94	33.00 (14.00 - 60.00)
No	93.05 ± 18.84	91.00 (58.00 - 122.00)	36.53 ± 7.88	35.50 (20.00 - 50.00)
Test statistics	2718.000		5579.000	
p**	<b>&lt;0.001</b>		0.009	
<b>Difficulty in meeting the expectations of instructors</b>				
Yes	110.16 ± 17.65	113.00 (70.00 - 143.00)	37.12 ± 8.16	38.00 (14.00 - 60.00)
No	104.92 ± 18.55	110.00 (58.00 - 138.00)	29.85 ± 7.76	29.50 (19.00 - 45.00)
Test statistics				
p**				
<b>Difficulty in meeting the expectations of charge nurses</b>				
Yes	105.51 ± 19.72	106.00 (70.00 - 139.00)	35.73 ± 8.68	36.00 (14.00 - 51.00)
No	109.62 ± 17.10	113.00 (58.00 - 143.00)	33.57 ± 8.71	33.00 (19.00 - 60.00)
Test statistics	6442.000		6749.500	
p**	<b>0.019</b>		0.069	



<b>Communication with lecturers</b>				
Positive	111.45 ± 15.97	114.00 (72.00 - 143.00)	33.94 ± 8.80	35.00 (14.00 - 51.00)
Negative	97.56 ± 20.64	96.00 (58.00 - 133.00)	35.61 ± 8.51	35.00 (20.00 - 60.00)
Test statistics	3666.500		5651.000	
P**	<0.001		0.318	
<b>Communication with health personnel</b>				
Positive	113.36 ± 15.35	115.00 (77.00 - 143.00)	33.06 ± 8.94	31.50 (19.00 - 60.00)
Negative	101.12 ± 19.29	106.00 (58.00 - 131.00)	36.06 ± 8.20	37.00 (14.00 - 50.00)
Test statistics	5134.500		6566.000	
P**	<0.001		0.003	
<b>Don't think about dropping out of school</b>				
Yes	102.18 ± 20.44	108.00 (58.00 - 139.00)	36.92 ± 8.72	37.00 (19.00 - 60.00)
No	114.18 ± 13.04	115.00 (81.00 - 143.00)	31.73 ± 7.99	31.00 (14.00 - 51.00)
Test statistics	5370.000		5762.000	
P**	<0.001		<0.001	
<b>Thinking about continuing in the profession</b>				
Yes	222.00 ± 110.64	34.05 (16.17 - 8.79)	34.00 ± 72.00	14.00 (143.00 - 60.00)
No	39.00 ± 94.03	36.00 (22.15 - 8.36)	35.00 ± 58.00	20.00 (126.00 - 50.00)
Test statistics	2579.500		3816.500	
P**	<0.001		0.238	

In the study of Kahraman and Kılıç (2021) on the professional self-esteem of nursing students, high scale scores were found. Similar to our study, it was found that the professional self-esteem of male students who had chosen the field voluntarily and were satisfied with their school life was higher (Kahraman & Kılıç, 2021).

It is well known that clinical internships are important for students to develop their professional knowledge and skills (Urbina & Monks, 2022). In a systematic review study by Welch (2023), it was found that clinical practice stress decreased as the length of training and clinical experience of students increased (Welch, 2023). In the study by Mankan et al. (2016), the clinical stress scores of nursing students were found to be low. Patients, physicians, nurses, and last

but not least, faculty members indicated the situations that caused them stress in the clinic (Mankan et al., 2016). In our study, the clinical stress score of the students were found to be low.

**Table 4:** The examination of the relationship between the score of the occupational self-esteem scale and the scores of the subscales, and the total scale of the Clinical Stress Questionnaire

	<b>Occupational self-esteem scale scores</b>	
	<b>r</b>	<b>p</b>
<b>Struggle</b>	0,480	<0,001
<b>Threat</b>	-0,212	0,001
<b>Harm</b>	-0,388	<0,001
<b>Benefit</b>	0,333	<0,001
<b>Total clinical stress score</b>	0,042	0,496

r: Spearman's rho correlation coefficient



In our study, the mean scores for clinical stress were higher in those who were dissatisfied with the department, had difficulty meeting the instructor's expectations, and indicated negative communication with the medical staff.

Clinical practices in nursing education are thought to impact students' professional self-development (Kılıç, 2018; Öz & Yıldız, 2019) positively. A systematic review study by Folkford and Risa (2023) of self-efficacy and learning factors in the clinical setting among midwifery students found that as students' self-efficacy increased, their stress in clinical practice decreased, their learning experiences increased, and their professionalism increased. The continuity of the instructor and establishment of a secure relationship with the student was found to have an impact on facilitating the student's professionalism and learning experience (Folkvord & Risa, 2023). Figen and Avcı (2020) found no relationship between educational stress and professional self-esteem in nursing students in their study. In the same way, our study found no relationship between students' clinical practice stress and professional self-esteem.

## 5. Conclusion

As a result of our study, it was found that the older students, those who chose the field voluntarily, those who are satisfied with the field, those who do not have difficulties in meeting the expectations, and those who are considering continuing the profession have higher professional self-esteem. There is no relationship between stress in clinical practice and professional self-esteem. It was found that clinical practice stress was higher among those who were not satisfied with the department, had difficulty meeting the instructor's expectations, and considered dropping out of their

training. Therefore, it is recommended that qualitative studies be conducted to help better understand the causes of clinical practice stress on professional self-esteem, professional identity formation, and perceptions of the profession among nursing students in future studies.

## Conflicts of interest

The authors declare no conflicts of interest.

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