

Lippincott® Nursing Education Trends & Insights

Fostering resilience: Caring for students who will care for others

Purpose: To validate the imperative for developing strategies to protect mental health and well-being and enhance resilience in nursing students



The American Psychological Association defines resilience as “the process and outcome of successfully adapting to difficult or challenging life experiences”¹. Internal and external factors influence resilience; the availability and effectiveness of coping strategies play a significant role. If nursing education is designed to prepare students for practice, educators should address the skills needed to cope with stressors, build resilience, and prevent burnout. Nursing school is known for being demanding and challenging, often leading to elevated levels of anxiety in students¹⁰. When ignored, prolonged high stress levels may lead to increased incidences of anxiety and depression, inhibit learning and clinical practice performance, increase physical health issues, and decrease students’ beliefs in their ability to succeed³. This can ultimately lead to increased attrition, decreased success in the program, and/or failure to pass the NCLEX^{®2,11,15}.

Sources of stress for nursing students:



- Academic workload
- Lack of preparation for higher education
- Student-centered learning approaches
- Changing or perceived changing of expectations
- Ambivalence about career choice
- Fear of failure
- Lack of self-confidence
- Need for enhanced time management and study skills
- Lack of knowledge
- Academic pressure
- High stakes assessments
- Expenses and financial instability
- Faculty and clinical staff incivility
- A perceived gap between theory and clinical
- Transition from the classroom to a fast-paced healthcare environment
- Testing and test anxiety

Pre-licensure nursing education plays a significant role reshaping this trajectory and fostering positive health habits and practices in future nurses^{8,9}. If not addressed in nursing education, the implications for practicing nurses are well documented:



Over 65% of nurses report experiencing stress and burnout⁴.



Medical errors and negative client outcomes are correlated with high levels of stress and burnout¹³.



One-fifth of registered nurses in the U.S. reported an “intent to leave the workforce” by 2027 due to stress, burnout, or retirement⁷.



First year turnover rates are close to 30% among nurses, sustaining significant financial and patient care consequences⁵.

It is anticipated that the nursing workforce shortage will persist related to burnout, decreased job satisfaction, and increased turnover, especially in high-stress bedside nursing positions¹⁴.

Nursing education needs to act now

Recommendations to improve coping and build resilience:

Build assessments of stress and personal wellness challenges into educational milestones.

Create a psychologically safe learning environment that is supportive and in which students are not afraid to make and learn from mistakes.

Identify areas within the curriculum that cause elevated levels of anxiety. Provide tools to prepare, practice, and remediate along with adequate time for learning to reduce stress.

Disseminate information about and encourage use of student supports, such as counseling, learning resources and tutoring, peer mentoring, and social services.

Develop clear goals and provide clarity on the steps to reaching these goals. This may include providing frequent formative assessments and constructive feedback for learners.

Maintain vigilance in assessing stress levels and ensuring sensitivity during points of increased demands, academic challenges, and emotional triggers inherent of nursing school.

Prepare learners for student-driven/self-regulated learning and reframe faculty and student role expectations while instructing on the science of teaching and learning.

Ensure that learners have sufficient exposure to content and skills to build competency as they move from simple to complex knowledge.

Support healthy coping strategies, including healthy eating habits, hydration, meditation, relaxation/play, sufficient rest/sleep, physical activity, and engaging in social support systems while modeling healthy coping strategies and civility in interactions with students and colleagues.

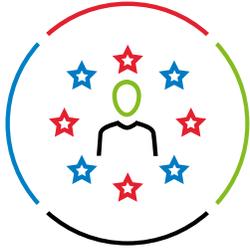
Consider a framework of individual (self-help, self-stewardship, and counseling), team-based (retreats, mindfulness programs, peer interventions), system-wide (culture of well-being and gratitude), and community-based strategies (needs/resource assessment)⁶.

Strive to promote effective communication between faculty and students. This includes applying policies consistently, providing opportunities for shared governance, and avoiding the introduction of new policies or program changes, striving to provide advance notice and rationale if changes are unavoidable.

Encourage a growth mindset through cognitive reappraisal of stressors. Teach students to reflect on the sources of stress and anxiety within the curriculum and reframe negative to more positive reactions.



Top three actions:



Recognize individuality and each students' unique capabilities to cope with or tolerate stress and the unique attributes that may influence stress and coping.



Create a culture of wellness within the nursing program and organization, applicable to all interactions, relationships, expectations, and roles.



Infuse self-care activities into class, clinical, lab/simulation, and coursework, including daily activities and ongoing reflective exercise.

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