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Assessing Stress and Coping Mechanisms Among UNIMAS Nursing
Students During Clinical Placements: A Cross-Sectional Study

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This project is submitted

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DECLARATION

I declare that the work in this thesis was carried out in accordance with the regulations of Universiti Malaysia Sarawak. Except where due acknowledgements have been made, the work is that of the author alone. The thesis has not been accepted for any degree and is not concurrently submitted in candidature of any other degree.



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ABSTRACT

Introduction: Clinical placements are an essential component of nursing education, but are often associated with increased psychological stress among students. Stress during clinical practice can negatively impact students' mental health, learning outcomes, and professional development. Therefore, understanding how nursing students cope with stress is crucial in creating a supportive learning environment.

Objective: This study aimed to assess the levels of stress and identify coping mechanisms among undergraduate nursing students at University Malaysia Sarawak (UNIMAS) during clinical placements.

Methodology: A cross-sectional study was conducted among 137 undergraduate nursing students from Year 2 to Year 4, selected through simple random sampling. A structured questionnaire was used, which included the Perceived Stress Scale (PSS) and the Coping Behaviour Inventory (CBI). Data were analysed using SPSS version 27.

Result: The study revealed that the majority of students experienced moderate to high levels of stress, with a mean PSS score of 87.11 ± 16.71 . The most prominent stressors were related to patient care responsibilities, assignments, workload, and interactions with teachers and nursing staff. Many students also cited stress from a lack of professional knowledge and skills, peer relationships, and the clinical environment. In terms of coping, students employed a range of strategies, including problem-solving, avoidance, staying optimistic, and transference. The overall mean coping score was 62.45 ± 9.91 , indicating that students actively used coping strategies in response to stress. A Spearman correlation analysis showed significant relationships between stressors and coping mechanisms. Avoidance was positively correlated with stress from all domains, especially with stress from teachers and

nursing staff ($r_s = .611, p < .001$), and peers and daily life ($r_s = .495, p < .001$). Problem-solving showed weaker but still significant correlations with stress from patient care, assignments, and peer-related stress. Similarly, staying optimistic and transference strategies were also associated with various stressors, but to a lesser degree. These findings suggest that while students attempt to cope actively with stress, reliance on avoidance, often considered maladaptive, was common in situations involving interpersonal or institutional pressures.

Conclusion: These findings provide essential insights into the psychological challenges faced by nursing students and highlight the need for interventions that promote effective coping strategies, particularly during clinical training.

Keywords: Stress, Coping Mechanisms, Clinical Placements, Nursing Students

***Menilai Tekanan dan Cara Mengatasi Tekanan dalam Kalangan Pelajar
Kejururawatan UNIMAS Semasa Penempatan Klinikal***

ABSTRAK

Pengenalan: Penempatan klinikal merupakan komponen penting dalam pendidikan kejururawatan, namun sering dikaitkan dengan peningkatan tekanan psikologi dalam kalangan pelajar. Tekanan semasa latihan klinikal boleh memberi kesan negatif terhadap kesihatan mental pelajar, pencapaian pembelajaran, dan pembangunan profesional. Oleh itu, memahami cara pelajar kejururawatan menangani tekanan adalah penting bagi mewujudkan persekitaran pembelajaran yang menyokong.

Objektif: Kajian ini bertujuan untuk menilai tahap tekanan dan mengenal pasti cara mengatasi tekanan yang digunakan oleh pelajar kejururawatan prasiswazah di Universiti Malaysia Sarawak (UNIMAS) semasa penempatan klinikal.

Metodologi: Satu kajian keratan rentas telah dijalankan melibatkan 137 pelajar kejururawatan prasiswazah dari Tahun 2 hingga Tahun 4, yang dipilih melalui pensampelan rawak mudah. Soal selidik berstruktur digunakan, merangkumi Skala Tekanan yang Dirasai (PSS) dan Inventori Tingkah Laku Penangguhan (CBI). Data dianalisis menggunakan perisian SPSS versi 27.

Keputusan: Kajian ini mendedahkan bahawa majoriti pelajar mengalami tahap tekanan yang sederhana hingga tinggi, dengan skor min PSS sebanyak 87.11 ± 16.71 . Faktor tekanan yang paling ketara adalah berkaitan dengan tanggungjawab penjagaan pesakit, tugas dan beban kerja, serta interaksi dengan pensyarah dan staf kejururawatan. Ramai pelajar juga melaporkan tekanan yang berpunca daripada kekurangan pengetahuan dan kemahiran profesional, hubungan dengan rakan sebaya, serta persekitaran klinikal. Dari segi

mekanisme penangguhan, pelajar menggunakan pelbagai strategi termasuk penyelesaian masalah, pengelakan, kekal optimistik, dan pemindahan. Skor min keseluruhan bagi mekanisme penangguhan ialah 62.45 ± 9.91 , menunjukkan bahawa pelajar secara aktif menggunakan strategi penangguhan dalam menghadapi tekanan. Analisis korelasi Spearman menunjukkan hubungan yang signifikan antara faktor tekanan dan mekanisme penangguhan. Strategi pengelakan menunjukkan korelasi positif dengan semua domain tekanan, terutamanya tekanan daripada pensyarah dan staf kejururawatan $r_s = .611, p < .001$, serta tekanan daripada rakan sebaya dan kehidupan harian $r_s = .495, p < .001$. Strategi penyelesaian masalah menunjukkan korelasi yang lebih lemah tetapi masih signifikan dengan tekanan daripada penjagaan pesakit, tugas, dan tekanan berkaitan rakan sebaya. Begitu juga, strategi kekal optimistik dan pemindahan turut dikaitkan dengan pelbagai faktor tekanan tetapi pada tahap yang lebih rendah. Dapatan ini mencadangkan bahawa walaupun pelajar berusaha menangani tekanan secara aktif, kebergantungan terhadap strategi pengelakan yang sering dianggap tidak adaptif adalah perkara biasa dalam situasi yang melibatkan tekanan interpersonal atau institusi.

Kesimpulan: Dapatan ini memberikan pandangan penting mengenai cabaran psikologi yang dihadapi oleh pelajar kejururawatan dan menekankan keperluan untuk intervensi yang dapat menggalakkan strategi penangguhan yang berkesan, terutamanya semasa latihan klinikal.

Kata kunci: Tekanan, Mekanisme Penangguhan, Penempatan Klinikal, Pelajar Kejururawatan

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LIST OF ABBREVIATIONS

CBI	Coping Behaviour Inventory
CTN	Clinical Teaching Nursing
FMHS	Faculty of Medicine and Health Sciences
IBM SPSS	IBM Statistical Product and Service Solutions
PSS	Perceive Stress Scale
UNIMAS	University Malaysia Sarawak
WHO	World Health Organization

CHAPTER 1

INTRODUCTION

1.1 Introduction

This study aimed to assess the types of stressors, stress levels, and coping mechanisms experienced during clinical placements among nursing students at the University of Malaysia Sarawak (UNIMAS). This chapter consists of eight sub-sections: the background of the study, problem statement, research questions, research objectives, hypotheses, the significance of the study, research operational definitions, and research summary.

1.2 Study Background

Clinical placement was an integral component of nursing education, serving as a critical platform for students to translate theoretical knowledge into practical skills within real-world clinical environments. This virtual experience was crucial in developing psychomotor, emotional, and cognitive competencies essential for professional practice (Alanazi et al., 2023). This hands-on experience is essential in nursing education, as it allows students to integrate theory with practice, bridging the gap between classroom learning and real-world nursing situations. Through clinical placements, students gain valuable exposure to the complexities of patient care, fostering the development of professional competencies. Moreover, the clinical posting provides an opportunity for the student nurses to apply theory to practice under the supervision of the clinical instructors. In Malaysia, student nurses were required to meet certain conditions before being eligible to sit for the licensing exam. These included 100% attendance in clinical settings and completion of the required clinical hours for any missed sessions.

Additionally, nursing students are required to achieve 100% of the core competency procedures outlined in their clinical record practice book. This ensures that students have demonstrated proficiency in the essential skills and procedures necessary for competent patient care. The completion of these competencies is a key part of their clinical training, validating their readiness to meet the demands of professional nursing practice. (Malaysian Nursing Board, 2018).

Besides, clinical placement is essential as it provides invaluable hands-on experience in real-life situations that prepares nursing students for future roles as nurses. The transition from classroom learning to clinical practice can be a challenging experience for nursing students, often accompanied by significant stress. Stress is a natural human response that helps individuals cope with challenges and threats in their environment (WHO, 2023). Even though everyone is affected by stress, our stress reaction is a major determinant of the general performance of an individual and their capability to face most of the challenges in life. College environments are considered one of the many places where stress is exposed, particularly for nursing students during their academic careers. Students experience stress in both the clinical and academic components of their study programs (Ab Latif et al., 2019). ‘Coping Mechanisms’ refers to the behavioural and psychological patterns that individuals adopt to deal with stressful situations, reduce, tolerate, or suffer them (Ab Latif et al., 2019). These strategies are essential in determining how individuals respond to stress and can significantly influence their emotional and psychological well-being in challenging circumstances.

Currently, other countries like South Africa, Saudi Arabia, and Spain have carried out numerous studies that explain the stress nurses in clinical placement endure and the different

coping strategies they use nowadays (Motsaanaka, 2020; Alanazi, 2023; Onieva-Zafra, 2020). Sheu et al. (2002) state that during their clinical training, nursing students encounter a variety of stressors. These stressors include difficulties in providing patient care, demands from nursing staff and tutors, heavy workloads and tasks, interpersonal stress from peers and day-to-day life, feelings of inadequacy because of a deficiency in professional knowledge and skills, along with difficulties in the clinical environment itself. Every one of these elements contributes significantly to the stress that students endure in clinical settings.

Coping is used to mean the behavioural responses, mental responses, as well as the dynamic processes people use in coping with the stressors that may be internal and may also be external. Two general categories can be used to describe coping strategies. Emotion-focused coping is trying to manage or reduce the emotional agony caused by the situation, and problem-focused coping is to directly address the situation and remove the source of the stress. Depending on their prior beliefs and the type of stressor, each person can employ one of these techniques. Most students stated that they deal with stress by employing a problem-solving approach. Nursing students most frequently employed transference coping strategies, problem-solving techniques, and optimism. Additional techniques, including deep breathing, relaxation, prayer, and music listening, can also help reduce stress (Alanazi et al., 2022).

Although there are already existing studies, more studies are nonetheless needed to fill the knowledge gap in relation to stressors encountered in clinical placement and coping methods used by Malaysian nursing students. The major aim of the research is to measure the stress level and the kinds of stressors faced by nursing students during clinical placements. It also looks to examine coping mechanisms employed by these students and assess the efficiency

of the coping mechanisms. The results of this study are projected to provide useful information that would help nursing programs improve their support structures in academic success and develop the emotional health of nursing students.

1.3 Problem Statement

Clinical placements can be a stressful experience that can influence the personal development and emotional well-being of the students. Previous researchers have investigated the stress levels that nursing students experience at the time of completion of clinical placements, as well as the various coping strategies that nurses engage in combating these challenges. These experiments have been implemented in countries like South Africa, Saudi Arabia, and Spain (Motsaanaka, 2020; Alanazi, 2023; Onieva-Zafra, 2020).

Nursing students are prone to having negative emotional experiences during clinical posting (Motsaanaka et al., 2020). The highest source of stress and anxiety for a student nurse is related to their caregiver roles (D'emeh, 2020; Fadana, 2021). Students frequently experience severe emotional, physical, and mental strain in the fast-paced, unpredictable, and demanding clinical setting. Nursing students face several challenges during their clinical placements, which can impact their learning experience. A major source of stress is the constant close contact with patients and the emotional involvement required in hospital settings (Alanazi et al., 2022). Several reasons are causing the students to have negative emotional experiences. One of the reasons is that nurses sometimes shift their responsibilities and workload onto students, which limits the students' chances to learn and engage fully in the ward (Motsaanaka et al., 2020). Poor psychosocial conditions in the clinical environment can further hinder the learning process (Baraz et al., 2015). Additionally, discrimination by

staff, where nursing students are treated differently from those in other programs, discourages students and reduces their learning opportunities (Berhe & Gebretensaye, 2021).

Other than that, insufficient clinical supervision often leads to reduced learning opportunities (Berhe & Gebretensaye, 2021). Nursing students view the lack of teaching and supervision by clinical instructors in the ward as causing stress among the students because it impedes the opportunities to learn in the clinical environment (Motsaanaka et al., 2020). As a result, the pressure and challenges they face may lead to a decline in their enthusiasm and motivation to learn, ultimately affecting their commitment to continue their training and development in the nursing profession (Bazrafkan & Kalyani, 2018). Lack of contact with clinical instructors in the ward caused the students to feel a sense of being abandoned and wasted learning opportunities (Baraz et al., 2015).

Although stress is a normal part of clinical education, nursing students may suffer negative consequences if their stress levels are too high or poorly controlled. Extended exposure to high levels of stress can result in burnout, anxiety, subpar academic performance, and even nursing program dropout. There are many different coping strategies to deal with this stress, and some of them may be maladaptive as well as adaptive. Adaptive coping strategies include managing one's time, looking for social support, and exercising. Effective time management allows students to balance academic demands with personal life, reducing feelings of being overwhelmed. Social support from peers, family, or mentors provides emotional reassurance and practical advice, fostering a sense of belonging and resilience. Physical activities, such as exercise or yoga, are also beneficial, as they help release tension, improve mood, and enhance overall mental health. Alternatively, certain students may adopt maladaptive coping strategies in response to stress, including avoidance, over-engagement

with distractions such as social media, or turning to substance use. While these approaches may provide temporary relief, they often exacerbate stress and contribute to long-term challenges, including reduced academic performance and poor mental health outcomes.

Although the issue of stress concerns nursing students on clinical rotations is significant, little is known about the nature of stress that they face, as well as the coping strategies they use to deal with it. Additional research is required in depth to know more about the problems that students experience within clinical facilities and how they respond to the pressures involved in the clinical environment. Lack of knowledge about this problem may make it difficult for nursing programs and other healthcare facilities to support students effectively, which could result in less-than-ideal learning environments and increase mental health issues.

Thus, this study will focus on investigating the levels of stress and the stressors experienced by nursing students when they are enrolled in the clinical placement, the measurement of the stressors, and the effectiveness of the coping mechanisms employed by nursing students. The study is essential to finding out how the nursing students fare as far as their mental health is concerned when on the clinical posting, as well as the stress factors that the nursing students experience. It may offer important suggestions as to how the students could be helped in dealing with stress and enhancing the general experience of learning.

1.4 Research Questions

- i. What is the stress level among UNIMAS nursing students during clinical placements?
- ii. What are the coping mechanisms used by nursing students during clinical placements?
- iii. Is there any relationship between stress and the coping mechanisms used by nursing students during clinical placements?

1.5 Research Objectives

1.4.1 General Research Objectives

To determine the stress among UNIMAS nursing students during clinical placements and identify the coping mechanisms used to cope with the stress.

1.4.2 Specific Research Objectives

- i. To identify the stress among UNIMAS nursing students during clinical placements.
- ii. To examine the coping mechanisms used by nursing students during clinical placements.
- iii. To identify the relationship between stress and coping mechanisms used by nursing students during clinical placements.

1.6 Hypotheses

Null Hypothesis (H_0)

There is no significant relationship between stress and coping mechanisms among UNIMAS nursing students in clinical placements.

Alternative Hypothesis (H_A)

There is a significant relationship between stress and coping mechanisms among UNIMAS nursing students in clinical placements.

1.7 Significance of Study

The significance of the study lies in addressing the topic of mental health and well-being of nursing students, being one of the most essential elements that precondition their performance in the academic process and further profession as medical workers. Clinical placements can be extremely stressful for students, which can impact their performance, learning outcomes, and general psychological well-being.

The study may help educational bodies to provide better support systems to the students as it would be able to forecast the main stress factors and coping mechanisms of the nursing students thereby helping the educational establishments to create new systems that can take care of the nursing students by providing them mentorship programs, resilience training, and counseling services. The findings also seek to enhance awareness among educators about the difficulties that students encounter during their placements, thus cultivating a better understanding and support for the students in the clinical environment. Good communication between students and clinical instructors will foster a supportive environment and result in an effective learning process.

Moreover, this study aims to develop more resilient and emotionally healthy nurses by encouraging improved coping strategies and lowering stress levels among nursing students. Better mental health among nurses may result in enhanced professional performance, thereby improving patient care quality. The findings may also be used to support modifications to healthcare environments, such as developing a culture that is more encouraging of students during practicums and promoting cooperation between nursing schools and healthcare facilities to facilitate students' entry into the workforce.

Next, it could improve the nursing practice. The staff nurse in the ward becomes more familiar with the presence of the students in the ward. By knowing this, the nurse will guide the students and give them a sense of responsibility. When nurses actively engage with student nurses, it can help alleviate the negative and degrading atmosphere often present in clinical environments (Farzi et al., 2018). This involvement fosters a more supportive and encouraging learning environment, which can enhance the overall experience for students and promote better emotional well-being during their clinical placements. As a result, the clinical setting becomes a comfortable environment for the students to learn, and staff nurses supervise the students. So, the students can learn and deliver care to the patients safely.

In the end, this study will help improve knowledge of the psychological difficulties encountered during clinical placements and strategies for resolving them, which will be advantageous to nursing students, instructors, and healthcare organizations. This study will also benefit nursing research. It will provide more scientific data for future research and add findings to existing literature.

1.8 Operational Definition of the Term

1.8.1 Nursing Students

According to Collins Dictionary (2024), a student nurse refers to someone who is pursuing a nursing education at a nursing school or hospital. Nursing students participating in this study range from second-year (Year 2) to fourth-year (Year 4) UNIMAS undergraduate nursing students.

1.8.2 Stress

Stress can be defined as a certain form of psychological state that manifests as tension or uncomfortable feelings imposed by situations that are difficult (WHO, 2023). Stress in this paper is a specific instance of stress among nursing students during their clinical rotations. To determine this, the Perceived Stress Scale (PSS) developed by Sheu et al. (2002) will be used. Respondents will have to answer the questions based on a particular range of questions posing scenarios regarding the kinds and level of stress experienced in clinical practice with the help of a five-point Likert scale. The degree of response is enclosed in a scale of never to always as follows: (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, and 5 = Always). Calculation of PSS is done by summing all items. The greater the number of items that have more points, the higher the score on each factor means the greater stress levels.

1.8.3 Coping Mechanisms

Coping is the use of terminology that identifies how people respond to stressful changes in their lives (Cleveland Clinic, 2020). Coping mechanisms refer to the strategies employed by the students of nursing, in order to respond to the stress that they face when on clinical placements. The coping styles adopted by the nursing students shall be determined

by the Coping Behaviour Inventory (CBI) of Sheu et al (2002) Nursing students. CBI has 14 items assessed using a 5-point Likert scale. The degree of response is enclosed in a scale of never to always as follows: (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, and 5 = Always). The scale has four subscales, and they are the three items that measure the behaviour of transference, three items assessing optimistic behaviour, which are three items that assess avoidance coping behaviour, and five items behaviour scores that measure problem-solving behaviour. The total of each subscale represents the extent of the utilisation of a certain coping strategy; the bigger the sum, the more often such a strategy is referred to. Sheu et al. (2002) indicated a Cronbach's Alpha of 0.76 in the CBI, which proved that the CBI is a worthy measure and a good instrument in its reliability.

1.8.4 Clinical Placements

Clinical placements are an important element for nursing students, giving first-hand and real-life experience in the nursing discipline while actively participating in the ward routine (Jyoti & Shama, 2021). In this study, clinical placement, also known as clinical posting, refers to the training that the participants are involved with throughout their journey as nursing students.

1.9 Summary

In conclusion, this chapter explains the stress encountered by nursing students during their clinical placements and how nursing students cope with the stressful events. This chapter also describes the problem while emphasizing the importance of this study. In addition, the research questions and research objectives are related to one another. In this study, the researcher wants to assess the type of stress encountered by UNIMAS nursing students during their clinical placements and how they cope with the stress. Also, in this chapter, the researcher outlines the significance of conducting this research to nursing education, nursing practice, and nursing research. Last, the researcher defines the conceptual and operational definitions for the key elements of this study.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

The purpose of this chapter is to provide a general grasp of the study issue through a literature review and conceptual framework. This study referred to a type of publication or article that is relevant to the topic and research issue. Furthermore, for better understanding, the issue of this literature review was divided into three themes: stress levels among nursing students, coping mechanisms during clinical placements, and the relationship between stress levels and coping methods.

To conduct the literature review for this study, specific strategies were employed to identify relevant and credible sources. Recent journal articles published within the last 10 years were prioritized to ensure up-to-date information. The search was performed using reliable academic databases and platforms, including Google Scholar, PubMed, and ResearchGate. To refine the search process, key terms and phrases such as “nursing students,” “stress,” “coping mechanisms,” and “clinical placement” were used. These keywords were chosen to capture the core themes of the topic and to retrieve literature that directly addressed the challenges and coping strategies of nursing students in clinical environments.

2.2 Stress Level Among Nursing Students

Clinical placement plays a crucial role in nursing education, allowing students to enhance their professional knowledge and nursing competencies through hands-on experience in real-world healthcare environments. However, due to the demanding and challenging nature of clinical placements, nursing students are often exposed to significant levels of stress (Bista

et al., 2018). In a study by Ahmed et al. (2019) conducted at Albaha University in Saudi Arabia, stress levels and coping mechanisms among nursing students were assessed using the Perceived Stress Scale (PSS). The results revealed that nursing students experienced moderate levels of stress. Key stressors found by them included the clinical practice environment, teacher evaluations, interactions with hospital staff, and academic workload.

Similarly, Alanazi et al. (2023) explored stress levels and coping strategies among Saudi undergraduate nursing students, specifically focusing on female participants. This study employed the Perceived Stress Scale to assess the students' stress levels, identify stressors, and evaluate the coping mechanisms they used during clinical placements. The findings revealed that the students experienced moderate levels of stress, primarily due to the emotional demands and continuous interpersonal interactions inherent in clinical practice. The study found that the most significant stressors were related to academic workload and assignments, followed by the clinical environment, relationships with peers, and daily life challenges. The student's primary sources of stress, however, were their "worrying about grades," "pressure from the nature and quality of clinical practice," and their perception that "dull and inflexible clinical practice affects one's family and social life."

Liu et al. (2022) conducted a cross-sectional study on stress levels among nursing students in China during their first month of clinical practicum. The research revealed that the students experienced moderate stress, primarily attributed to gaps in their knowledge and skill deficiencies. This finding highlights the challenges that nursing students face as they transition from theoretical learning to practical application. The study further emphasized that the most significant stressor was the lack of sufficient knowledge and clinical skills.

2.3 Coping Mechanisms During Clinical Placements

The research by Ludin and Azman (2022) covered stress and management strategies in clinical nursing students and found that transference was the most commonly used strategy during the COVID-19 pandemic. Students engaged in activities such as watching television, exercising, and maintaining healthy habits to alleviate stress. The study also noted the importance of optimism and self-esteem by boosting their self-esteem and problem-solving skills to manage stress.

A cross-sectional study carried out by Abd and El (2015) was conducted to investigate stressors and coping strategies perceived by nursing students at Damanhour University. The study similarly found that transference and optimism were prominent coping strategies among nursing students, with problem-solving being less utilized. The researchers suggested that this might be due to the nursing education system not fostering skills such as synthesis, problem-solving, and creative thinking. Similarly, Alanzi et al. (2023) reported that nursing students most commonly adopted optimism as a coping mechanism, followed by transference and problem-solving.

Despite the focus on coping strategies in nursing students, limited research specifically addresses problem-solving and emotion-focused coping mechanisms. The cross-sectional study by Chaabane et al. (2021) examined nursing school students in the Middle East and North Africa in terms of their perceptions of stress, stressors, and coping mechanisms. The study identified that common emotion-focused coping strategies included growth-oriented approaches and positive reinforcement, such as maintaining optimism and hoping for the best. Among problem-focused strategies, the most prevalent were active coping, encompassing problem analysis and resolution, and seeking social support, which involved

reaching out for help and establishing supportive networks. Additionally, many students turned to religious practices, such as prayer, invocation, and finding solace in their faith, as a means of stress relief. Conversely, maladaptive coping mechanisms were observed, with mental disengagement, which involves distractions and transference to avoid stress, and behavioural disengagement, which includes social withdrawal and avoidance, being the most common ineffective strategies.

According to a study by Bista et al. (2018), the use of emotion-focused strategies by nursing students in Kathmandu was prevalent, which includes the use of emotional supports and positive reframing of events. In contrast, problem-focused strategies were less frequently employed. This highlights a tendency among nursing students to prioritize managing their emotional responses over addressing the root causes of stress directly. The nursing students tended to rely on techniques such as seeking emotional support, humour, positive reframing, acceptance, and behavioural disengagement rather than strategies like denial, substance abuse, or planning. This preference may be attributed to the relative ease and comfort of managing stress through emotion-focused approaches compared to problem-focused strategies.

2.4 Relationship Between Stress Level and Coping Mechanisms

Coping strategies are also important in the stress management that nursing students experience during their clinical placements. These strategies are those that students adopt in controlling their emotional state and alleviating stress. Nevertheless, the issue of the relationship between the coping practices of nursing students and their stress levels during clinical rotations has not been studied in depth. Alkhawaldeh et al. (2023) have presented cross-sectional research based on stress risk factors and coping in university students. It was

found that the avoidance-based strategies, which were denial and the use of substances, were linked to more instances of stress. In contrast, constructive coping methods, including physical activity and seeking social support, correlated with lower stress levels. This suggests that the way students address stress significantly impacts their overall well-being and stress levels.

This finding is supported by a cross-sectional study by Hasan et al. (2018) that examined the connection between psychological distress, coping mechanisms, and occupational stress among nurses employed in mental health hospitals in Jordan. Hasan et al. (2018) found that coping mechanisms used by mental health nurses can impact stress levels. This study also found that long-term situation management may result in significant stress and distress. Compared to nurses who employed more open coping mechanisms, ineffective coping strategies like silence and secrecy tended to cause more mental distress.

Apart from that, a study by Alanazi et al. (2023) discovered a link between avoidance and one or two perceived stressors. Keeping an optimistic attitude is negatively connected with stress from patient care and tension due to a lack of professional expertise. Additionally, maintaining optimism was a key coping strategy for overcoming peer and everyday stress. Their results are in line with those of Pacheco & Kamble (2016), who investigated how undergraduate students' coping mechanisms and optimism relate to stress. Optimism and denial, religious coping, mental and behavioural disengagement, and emotional focus and venting were all found to be negatively correlated. Consistent with earlier research, transference was used more frequently as a coping mechanism to deal with stress brought on by workload, assignments, instructors, and nursing staff.

Lastly, in one of the studies carried out by Liu et al. (2022), the authors observed that nursing students exposed to chronic stress during clinical practicums had an increased tendency to use unhealthy coping strategies. These included self-blame, denial, emotional outbursts, and avoidance behaviours. The study highlighted that heightened stress levels tend to increase the likelihood of adopting negative coping strategies. This can be attributed to the fact that both positive and negative coping strategies have relative, rather than absolute, effects. Negative coping strategies, such as taking breaks or self-comforting, may appear less demanding and offer temporary relief from the negative emotions caused by stress. However, research has consistently shown that positive coping strategies are more effective in the long term for managing and alleviating stress experienced during nursing practicums.

2.5 Conceptual Framework

In undertaking this study, a conceptual framework, which will be adapted based on the Transactional model of stress and coping by Lazarus and Folkman (1984), will be used to assess the level of stress and coping methods used by UNIMAS nursing students during their clinical placement. The framework will visualise the effect of various kinds of stressors on the coping mechanisms adopted by the students under the pressure of clinical placements and academic stressors.

The framework is separated into two major units, including Perceived Stress and Coping Behaviour, and the relationship between the two units is a two-sided relationship. Six major areas illustrate the Perceived Stress construct that nursing students mostly face during their studies and their practice (1) stress associated with patient care, (2) stress with assignments and workload, (3) stress with the lack of professional background and competence, (4) stress with the area of practice, (5) stress with peers and everyday life, (6) stress with the teachers

and the nursing staff. These burdens are the areas of academic stress and interpersonal stress that add to the psychological stress that is involved in the clinical rotations. PSS lies on the foundation of the transactional model of stress and coping proposed by Lazarus and Folkman. This model has assumed the role of stress in terms of individual employee appraisal of a situation, which depends on whether it is a threat or a challenge and whether or not the resources to deal with it exist. The PSS evaluates the extent to which people feel stressed in their lives, and it revolves around the subjective stressful situation rather than on happenings pointing towards stressful occasions.

The second variable, Coping Behaviour, defines the strategies that their students use in coping with the perceived stress. The more general perception of coping strategies helps explain the CBI, which is described as mental, emotional, and behavioural attempts to deal with stress. The CBI summarizes and quantifies the use of coping strategies by various individuals. The strategies are classified into four different frameworks; this includes (1) avoidance, (2) problem-solving, (3) staying optimistic, and (4) transference. All these behaviours signify different states of stress response, about active ways of responding, such as resolution to the problem, or passive or emotional, which is avoiding the issue or taking it out to go elsewhere.

The two-way arrows between the Perceived Stress and Coping Behaviour imply that there is a dynamic process. Stressors affect the coping behaviours accepted by the students, and the coping behaviours adopted by the students can, in effect, affect the interpretation or management of other stressors in the future. PSS gives an indicator of the perceived high amount of stress, whereas the CBI offers answers about the coping mechanisms that one deploys to handle the stress. When individuals score high in PSS, there is a possibility that

they employ diverse coping strategies compared to low PSS. The PSS and CBI are also frequently used collectively to measure how adopting coping behaviours relates to the perception of stress and how varied approaches to coping behaviours may be linked with varied perceived-stress levels. As an instance, one student may be regularly distressed because of interaction with teachers and learn how to cope with it by avoiding things, thereby developing avoidance coping as a habit that maintains stress in case not treated constructively.

This conceptual framework offers a rather orderly paradigm based on which the study judges the relationship between certain stressors and certain coping strategies. It enhances the objectives of the study since it assists it to find out the most prevalent stressors and the most utilised coping mechanisms amongst the nursing students in UNIMAS. Gaining insight into this connection is the key learning outcome for drawing up effective educational interventions, emotional support systems, and skill-building workshops to strengthen the mental resilience and clinical competence of students. Through this framework, the researcher aims to find out the most popular coping mechanisms, either in problem or emotion-focused, that nursing students at UNIMAS use during stressful times when they are going on clinical rotations. In this manner, one will be able to learn more about how students cope with stress and where support and intervention can be applied.

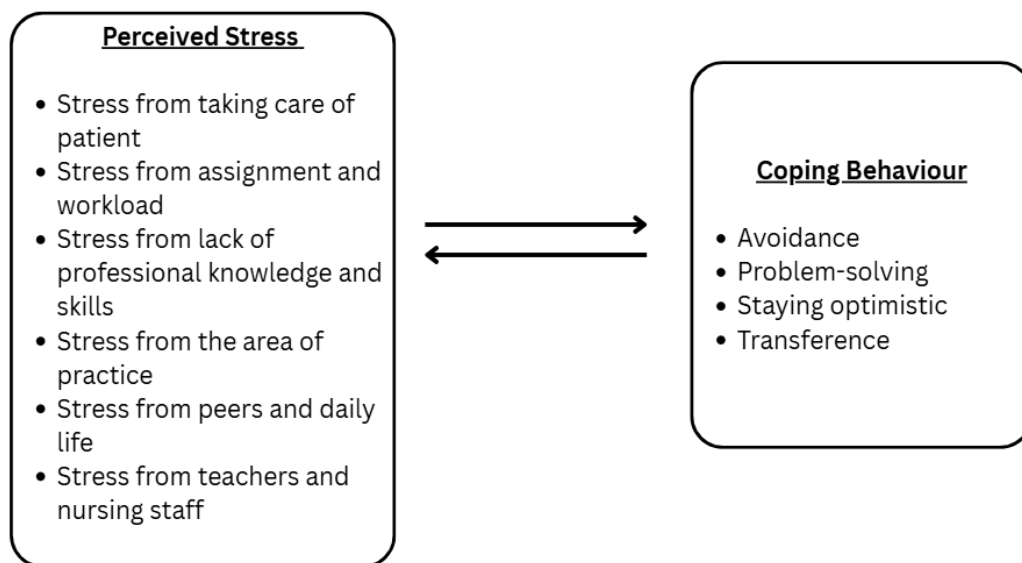


Figure 2.1: Conceptual Framework of the Perceived Stress Scale (PSS) and Coping Behaviour Inventory (CBI)

2.6 Summary

In a nutshell, after analysing and reviewing a few journal articles, the question regarding the previously selected topic has been addressed and adequately clarified. There are numerous studies evaluating coping strategies and stress among nursing students abroad, as well as some suggestions on how to help nursing students feel less stressed during clinical placements. However, there is a lack of research on the stress and coping mechanisms of nursing students in Malaysia, and no studies have been carried out there. For this reason, the evaluation of the stress levels and coping mechanisms of UNIMAS nursing students is crucial, so that it can be used again in a future study.

CHAPTER 3

METHODOLOGY

3.1 Introduction

The methodology used to achieve the research objective will be covered in this chapter and it will delve into several subheadings, including the research design in Section 3.1, the research setting in Section 3.2, the inclusion and exclusion criteria in Section 3.3, the sampling method and sample size in Section 3.4, the study instrument in Section 3.5, ethical considerations in Section 3.6, the data collection procedure in Section 3.7, the data analysis in Section 3.8, and last but not least the summary of this chapter will be in Section 3.9.

3.2 Research Design

Data for this study were gathered quantitatively using a cross-sectional design. Quantitative research relies on methods from the natural sciences to produce objective, numerical data that can be measured precisely. It applies statistical, computational, and mathematical techniques to explore cause-and-effect relationships between variables, making it an example of empirical research (Ahmad et al., 2019). Data will be gathered through sampling methods, including online questionnaires, surveys, and polls, to collect responses from current and potential participants (Fleetwood, 2023). The data analysis will be conducted using SPSS version 27.

3.3 Research Setting

This research will take place at the Faculty of Medicine and Health Sciences at University Malaysia Sarawak (UNIMAS), located in Kota Samarahan, Sarawak.

3.4 Population

The aggregated nursing student population at the FMHS, UNIMAS is 238, including Year 1 (52), Year 2 (64), Year 3 (58), and Year 4 (64). In this research, the students in Year 1 nursing and Post-registration Nursing will be omitted. Thus, the population size of this study will be 183 individuals, who are undergraduate students of nursing in their second, third, and fourth years of study.

3.5 Inclusion and Exclusion Criteria

3.5.1 Inclusion Criteria

This study will include second-year through fourth-year nursing students from the FMHS, UNIMAS, with both male and female students eligible to participate. These students were selected because they have already gained experience in clinical settings, making them the most suitable participants for this study. Their exposure to clinical placements provides valuable insights into the challenges and coping mechanisms relevant to the research objectives. This group represents a critical stage in nursing education, where students balance academic requirements with the demands of hands-on clinical practice, making their perspectives particularly relevant.

3.5.2 Exclusion Criteria

To conduct this study, some groups of participants will be excluded for fairness and accuracy. First-year students could not be included because they do not have experience with clinical placements and are not provided with sufficient exposure to clinical conditions. Post-registration nursing students were omitted to prevent any bias, as they have more experience in clinical settings and thus could alter the results. Lastly, students that have already taken

part in the pilot study were excluded to prevent bias since they were already aware of the questionnaire.

3.6 Sampling Method and Sample Size

3.6.1 Sample size

The students who will participate in this research are the second-year (63 students), third-year (57 students), and fourth-year (63 students) nursing students of UNIMAS who will be recruited through the Simple Random Sampling method. In this research, the total population is 183 students. According to the formula by Krejcie and Morgan (1970), the sample size of 125 students is proposed; 10 of the sample would be increased to consider the chance of non-responses, therefore final sample size would be 137 students.

Calculation of the Krejcie & Morgan formula:	
$s = \frac{X^2NP(1-P)}{d^2(N-1) + X^2P(1-P)}$ Where, s = required sample size X² = the table value of chi-square for 1 degree of freedom at the desired confidence level (3.841) N = the population size P = the population proportion (assumed to be 0.50) since this would provide a maximum sample size d = the degree of accuracy expressed as a proportion (0.05) The calculation for sample size in this study is as below: $s = \frac{(3.841)(183)(0.50)(1 - 0.50)}{(0.05)^2(183 - 1) + 3.841(0.50)(1 - 0.50)}$ s = 125 samples + 10% (potential unresponsive) s = 137 samples	Equation 3.1
	Equation 3.2

3.6.1 Simple Random Sampling

Scientific research frequently uses simple random sampling, especially when studying homogeneous populations. Because participants in this approach are chosen at random, every person has an equal chance of getting selected. According to Noor et al. (2022), simple random sampling is the most straightforward and popular method for selecting a sample. In this method, each unit is chosen at random and has an equal chance of being chosen at each draw. The researcher first generated a numerical list of all eligible participants before using the random number method for this investigation. Using a computer-generated random number program, random numbers were produced to select participants, ensuring a fair and unbiased process for choosing respondents.

3.7 Study Instruments

This study will use data gathered using a self-administered and validated questionnaire, adapted from Ahmed et al. (2019). The questionnaire will be organized into three sections: first section (A) will be used to acquire the general demographic data; second section (B) use of the perceived stress scale (PSS) to measure the stress level of the participant, and third section (C) the coping behaviour inventory (CBI) will be used to check the coping strategies used by the participants.

Section A of the questionnaire collects demographic information, such as age, gender, CGPA, academic year, and the name of the current course that requires clinical placement.

Section B of the questionnaire, with the purpose of measuring the stress and stressors received by the nursing students, employs the Perceived Stress Scale (PSS) that has been

developed by Sheu et al. (2002). This module has 2 questions, and each question has five response categories measured on a five-point Likert scale. The degree of response is enclosed in a scale of never to always as follows: (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, and 5 = Always). The items are also arranged into different domains, including five on the patient care, five on the aspect of teachers and nursing employees, three on the assignments and workloads, four on the aspects of peers and daily life, three on a deficiency of professional knowledge and abilities, and three on the issues of the clinical environment. Sub scores and total scores are obtained, with the scores that carry higher figures representing greater stress levels. Internal consistency has been proved to be high of with the Cronbach alpha values lying between 0.86 and 0.89 (Sheu et al., 2002).

Section C is the evaluation of the coping method used by the UNIMAS nursing students to cope with the stress that they encounter when being placed in clinical departments. The current section employs the use of the Coping Behaviour Inventory (CBI), which was slightly modified based on Ahmed et al. (2019) and initially designed by Sheu et al. (2002). The CBI is a 19-item scale that has four subscales of avoidance behaviours (6 items), problem-solving behaviours (6 items), optimistic coping (4 items), and transference behaviours (3 items). Each question is measured by a five-point Likert scale. The degree of response is enclosed in a scale of never to always as follows: (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, and 5 = Always). The summation of each of the item scores is determined, whereby each of the scores reflects the extent of frequent use of a definite coping strategy. Cronbach's alpha ranges have also been accepted as good internal consistency of CBI values (0.75-0.84) (Sheu et al., 2002).

3.8 Ethical Considerations

Ethical approval from the University of Malaysia Sarawak and the FMHS, UNIMAS, will be obtained before the participant's voluntary involvement in tool completion. Before using the questionnaire in this study, permission to use and adopt the questionnaire will be sent to the authors through email. A Google Form link will be sent to the second, third, and fourth-year groups through WhatsApp. The consent process will be thoroughly explained to all participants, who will be asked to review the consent form and the study's terms and conditions. Once participants provide their informed consent, they will proceed to complete the demographic information form, the Perceived Stress Scale (PSS), and the Coping Behaviour Inventory (CBI). Completing the entire questionnaire is expected to take approximately 10 minutes. To ensure privacy and confidentiality, participants' names will be excluded from the records. The participants' educational levels will be verified using their student ID numbers. The data collected will be securely retained by the researcher and will not be disclosed to the public. Additionally, participants will be informed of their right to withdraw from the study at any time.

3.9 Data Collection Procedure

3.9.1 Pilot Study

After obtaining permission granted by the Ethics of Research Committee of Nursing, FMHS, UNIMAS, data collection shall then commence. A pilot study shall be carried out before the main study. The first definition of the pilot study is an exploratory, small-scale, admitting investigation that has been undertaken to test the viability and the application of research means before their use in a wide-ranging study. Its primary purpose is to identify potential issues or limitations in the research design, enabling necessary adjustments to be made before investing significant time and resources in the full-scale study. It helps ensure

that the proposed methods are sound and workable, allowing researchers to refine their approach and avoid costly mistakes. Rather than addressing specific research questions, the pilot study provides essential insights into the practicality of the research methods (Lowe, 2019). The pilot study will include 10% of nursing students from the population who meet the inclusion criteria. The participants will be excluded from participating in the actual study to avoid bias, as they have answered the questionnaires. Data will be collected through an online survey questionnaire adopted from the previous studies that will be sent out via WhatsApp. The questionnaire will only take about 10 minutes of the participant’s time to complete the questionnaire.

Reliability analysis will be carried out using SPSS version 27 to assess the internal consistency of the questionnaire. The reliability will be evaluated through Cronbach's Alpha, a standard research method. A Cronbach’s Alpha value of 0.7 or above is considered an acceptable threshold for reliability (Gebremedhin et al., 2022). This approach will ensure that the items within the questionnaire consistently measure the constructs they are intended to assess.

Pilot Study: $10\% \times \text{Sample Size} = \text{total}$ $10\% \times 137 = 13.7$ $= 14 \text{ people}$	Equation 3.3
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3.9.2 Actual Study

Data will be collected using a pretested questionnaire with three sections, once the ethical approval is received. The questionnaire will be written in English and sent out to the respondents via Google Forms. A link will be distributed to the WhatsApp group of Year 2,

Year 3, and Year 4 UNIMAS nursing students. The participants were given time to respond to the questionnaire within two weeks. To avoid participants being unresponsive to the questionnaire, each unfinished respondent will be contacted individually to remind them to complete the Google form.

3.10 Reliability Analysis

An analysis of the reliability of the data is performed using Cronbach's Alpha. Generally, the Cronbach's coefficient must be above 0.70 for the data to be considered valid. These standards and rules have been mentioned by Hair et al. (2010). Based on Table 3.1, the Cronbach's coefficient value exceeds 0.70 for all variables. Therefore, consistency in the construction of all variables is confirmed by the results. The reliability for the Perceived Stress Scale (PSS) is found to be excellent (29 items; $\alpha = .939$). Meanwhile, for Coping Behaviour Inventory (CBI) is found to be good (19 items; $\alpha = .878$).

Table 3.1: *Cronbach's alpha of Perceived Stress Scale (PSS) and Coping Behaviour Inventory (CBI)*

Variables	No. Items	Cronbach's alpha (α)
Perceived Stress Scale (PSS)	29	.939
Coping Behaviour Inventory (CBI)	19	.878

3.11 Data Analysis

IBM SPSS Statistics version 27 will be used for data analysis. The collected data will be cleaned and analysed in alignment with the study objectives. Two analytical methods will be employed: descriptive statistics and inferential statistics.

The description of the demographic data, coping strategies, and stress levels will be performed based on descriptive statistics. The outcome will be given in the form of means, percentages, frequencies, frequency distributions, and low and high ranges. Data that is not normally distributed will be tabulated by the use of the median and interquartile range.

Inferential statistics will be employed to analyse the relationship between stress levels and coping mechanisms, providing insights into the associations and patterns within the data. To choose the best inferential statistical test, a normality test will be performed. A parametric test using the Pearson correlation coefficient will be performed if the data is regularly distributed. The Spearman correlation coefficient, a non-parametric test, will be employed if the test is not normally distributed.

3.12 Summary

This chapter outlines the methodology for assessing stress levels and coping strategies among nursing students at UNIMAS. The study utilizes a cross-sectional, quantitative research design and includes second, third-, and fourth-year nursing students from the FMHS, UNIMAS. A sample of 137 participants will be selected using simple random sampling. Data collection will be conducted through a self-administered questionnaire divided into three sections. The study will commence after obtaining ethical approval from the Ethics of Research Committee of Nursing, FMHS, UNIMAS. Data analysis will be performed using IBM SPSS version 27, incorporating both descriptive and inferential statistics. The appropriate inferential statistical test will be selected to investigate the relationship between stress levels and coping strategies used by nursing students during clinical placements. A normality test will be conducted to determine the suitable statistical test. If the data is normally distributed, the Pearson correlation coefficient will be employed as a parametric test. For non-normally distributed data, the Spearman correlation coefficient will be used as a non-parametric alternative.

CHAPTER 4

RESULTS

4.1 Introduction

This chapter presents the results regarding the topic chosen, which is stress level and coping mechanisms among UNIMAS nursing students during clinical placements. This chapter will delve into several subheadings, including the general characteristics of the respondents, satisfaction level with nursing study, and external factors that influence stress level in Section 4.2. This chapter also presents the coping mechanisms used by UNIMAS nursing students in Section 4.3, correlation analysis between stressors and coping mechanisms in Section 4.4, and last but not least, the summary of this chapter will be in Section 4.5.

4.2 General characteristics of the respondents (n=137)

All 137 nursing students have responded, resulting in a 100% response rate. The general characteristics of this study's respondents are presented in Table 4.1. The mean age for the respondents is $\mu = 22.31 \pm 1.09$, and ranges between 21 to 25 years old. The majority of the respondents are female (79.9%), while the highest participation is from Year 2, which is 38%. Next, for the Cumulative Grade Point Average (CGPA), the highest points obtained by UNIMAS nursing students are 3 – 4, which is 92.7% (n=127). Furthermore, the respondents were studying Medical Surgical Nursing (35.0%), Integrated Nursing Practicum (31.4%), Community Family Health Nursing (16.8%), and Mental Health Practicum (16.79%). Next, the respondents were asked about their satisfaction level with their nursing study. About 24 (17.5%) are very satisfied, and 78 (56.9%) are satisfied.

Table 4.1: *General characteristics of the respondents. (N=137)*

Characteristics	Frequency	Percentage (%)	Mean ± SD
Age			22.31 ± 1.09
Gender			
Female	109	79.6	
Male	28	20.4	
Academic Year			
Year 2	52	38.0	
Year 3	42	30.7	
Year 4	43	31.4	
CGPA			
3 - 4	127	92.7	
2 - < 3	10	7.3	
The course requires clinical training			
Medical-Surgical Nursing	48	35.0	
Community and Family Health Nursing	23	16.8	
Mental Health Nursing	23	16.8	
Integrated Nursing Practicum	43	31.4	
Satisfaction Level			
Very satisfied	24	17.5	
Satisfied	78	56.9	
Neither satisfied nor dissatisfied	32	23.4	
Dissatisfied	3	2.2	

Table 4.2 shows the main external factors that influence the respondents' stress level, which include personal illness or injury (30, 21.9%), Noise (20, 14.6%), Heat (14, 10.2%), and Death of a close family member (10, 7.3%).

Table 4.2: *External stressors on nursing students at UNIMAS*

Experiences with the following in a month	Frequency	Percentage (%)
Personal illness or injury	30	21.9
Noise	20	14.6
Heat	14	10.2
Crowding	13	9.5
Death of a close family member	10	7.3
Social interaction with rude, bossy, aggressive people	11	8.0
Bright lights	6	4.4
Moving location	4	2.9
Confined space	2	1.5
None	27	19.7

4.3 Stress Level among UNIMAS nursing students during clinical placements

This section shows the PSS used to measure stress levels among UNIMAS nursing students during their clinical placements. Table 4.3 displays the Perceived Stress Scale (PSS) among UNIMAS nursing students during clinical placements. The PSS measures the stressors that affect nursing students. The questionnaire for the Perceived Stress Scale (PSS) consisted of 29 questions focusing on the stress encountered by nursing students during clinical placements. Each question provided five options, which were coded as ‘never’ (coded 1), ‘rarely’ (coded 2), ‘sometimes’ (coded 3), ‘frequently’ (coded 4), and finally ‘always’ (coded 5). The total mean score for the Perceived Stress Scale is 87.11 ± 16.71 , ranging between 32 – 128, indicating that the perceived stress level among the respondents is likely to be higher.

Table 4.3: *Perceived Stress Scale (PSS) among UNIMAS nursing students (N = 137)*

PSS	Mean ± SD	Min	Max
1. Stress from taking care of patients	23.34 ± 5.76	8	40
2. Stress from assignments and workload	17.82 ± 3.72	7	25
3. Stress from a lack of professional knowledge and skills	9.12 ± 2.33	3	15
4. Stress from the area of practice	8.82 ± 2.41	3	15
5. Stress from peers and daily life	11.50 ± 3.14	4	20
6. Stress from teachers and nursing staff	16.51 ± 4.33	6	30
Total PSS	87.11 ± 16.71	32	128

4.4 Coping Mechanisms Used by Nursing Students During Clinical Placements

This section requires researchers to identify the most commonly used coping mechanisms among UNIMAS nursing students for overcoming stress during clinical placements. Table 4.4 displays the Coping Behaviour Inventory (CBI) results for UNIMAS nursing students during these placements. The CBI assesses how these students manage their stress in clinical settings. The Coping Behaviour Inventory questionnaire contained 19 questions regarding the coping strategies employed by nursing students during clinical placements. Each question offered five options, coded as ‘never’ (1), ‘rarely’ (2), ‘sometimes’ (3), ‘frequently’ (4), and ‘always’ (5). The total mean score for CBI is 62.45 ± 9.91, ranging between 28 – 84, indicating that the higher the stress level among the respondents, the higher the use of coping mechanisms.

Table 4.4: *Coping Behaviour Inventory (CBI) among UNIMAS nursing students (N = 137)*

PSS	Mean $\pm$ SD	Min	Max
1. Avoidance	14.68 $\pm$ 4.41	6	27
2. Problem-solving	20.93 $\pm$ 4.61	7	30
3. Staying optimistic	14.64 $\pm$ 2.72	6	20
4. Transference	12.20 $\pm$ 2.54	5	15
Total CBI	62.45 $\pm$ 9.91	28	84

4.5 Correlation Analysis Between Stressors and Coping Mechanisms among UNIMAS Nursing Students

In this study, an analysis of the Spearman Correlation Coefficient Test was performed to examine the relationship between stressors and coping mechanisms among UNIMAS nursing students. Furthermore, correlation coefficients are positive when $r_s > 0$. This situation indicates that the correlation coefficient has been achieved. Meanwhile, when $r_s = 0$, there is no correlation between variables, and if $r_s < 0$, it indicates a negative correlation between variables.

The relationship between stressors and Coping Mechanisms among UNIMAS nursing students was investigated using the Spearman correlation coefficient. The result of the test is shown in Table 4.5. There was a strong positive relationship between stress from taking care of patients and avoidance as a coping mechanism, $r_s(137) = .483$, $p < .001$. However, analysis shows there is a weak correlation between stress from taking care of the patient with other coping mechanisms [problem-solving, $r_s(137) = .231$, staying optimistic, $r_s(137) = .218$, and transference, $r_s(137) = .238$, with $p < 0.05$]. The findings indicate that the higher the stress due to taking care of the patient, likely a higher coping mechanism (avoidance, problem-solving, staying optimistic, and transference) will be used by the respondents. And, above all, avoidance seemed to be the most common mechanism.

There was a moderate positive relationship between stress from the assignment and workload with staying optimistic, $r_s(137) = .339$, $p < .001$. However, there was a weak positive relationship between stress from the assignment and workload with other coping mechanisms [avoidance, $r_s(137) = .273$, problem-solving, $r_s(137) = .248$, and transference, $r_s(137) = .222$, with $p < 0.05$]. Results indicated that the greater the stress caused by the assignment and workload, the greater the application of avoidance, problem-solving, and staying optimistic, as well as transference skills, by the respondents as coping strategies. And out of all the coping strategies, being optimistic became the most prevalent coping strategy among the respondents to deal with the pressures of both the assignment and the workload.

There was a weak positive relationship between stress from a lack of professional knowledge and skills with avoidance, $r_s(137) = .263$, $p = .002$. There was a strong positive relationship between stress from the area of practice with avoidance, $r_s(137) = .413$, $p < .001$. This finding shows that the greater the stress brought about by the absence of professional knowledge and skills, and the stress brought about by the area of practice, the greater the proportion of avoidance coping methods adopted by the respondents.

There was a strong positive relationship between stress from peers and daily life with avoidance, $r_s(137) = .495$, $p < .001$. There was a weak relationship between stress from peers and daily life, with the coping mechanisms [problem-solving, $r_s(137) = .245$, and staying optimistic, $r_s(137) = .203$, with $p < 0.05$]. The results have shown that the greater the stress burden of peers and daily life, the greater the use of the coping strategies of avoiding, problem solving, and maintaining optimism. As compared to all the coping strategies, it appears that the respondents use avoidance more to quell the stress posed by peers and everyday life.

There was a strong positive relationship between the stress from teachers and nursing staff with avoidance, $r_s(137) = .611, p < .001$. The result indicated that the more the stress occasioned by teachers and the nursing staff, the more avoidance was used as a tool of coping by the respondents.

Lastly, there was a strong positive relationship between the total perceived stress scale and total coping behaviour inventory, $r_s(137) = .464, p < .001$. The finding indicates that the higher the perceived stress scale among the respondents, the higher the use of coping mechanisms to overcome the stress. Among all the coping mechanisms, avoidance seems to be the most used coping mechanism among the respondents, and it also has the highest significant result among all the stress sources.

Table 4.5: *Spearman Correlation Coefficient Test between Stressor and Coping Mechanism among UNIMAS Nursing Students (N=137)*

	Stress from taking care of a patient	Stress from the assignment and workload	Stress from a lack of professional knowledge and skills	Stress from the area of practice	Stress from peers and daily life	Stress from teachers and nursing staff	Total Perceived Stress Scale (PSS)
Avoidance	.483**	.273**	.263**	.413**	.495**	.611**	
Problem-solving	.231**	.248**	.074	.053	.245**	.091	
Staying Optimistic	.218*	.339**	.013	.093	.203*	.140	
Transference	.238**	.222**	.099	.046	.120	.090	
Total CBI							.464**

** . Correlation is significant at the 0.01 level (2-tailed)

* . Correlation is significant at the 0.05 level (2-tailed)

4.6 Summary

Overall, the analysis of the data has revealed and answered all the objectives that have been listed in the earlier study. The response of the respondents will also be explained in detail in the next chapter, supported by the appropriate literature and previous studies. The findings indicated a significant and weak correlation between each stressor and coping mechanisms. Thus, it shows that research can help in observing and evaluating the stress level among UNIMAS Nursing Students during clinical placements and observing the coping mechanisms used to treat their stress.

CHAPTER 5

DISCUSSION

5.1 Introduction

This chapter discussed the findings on the stress level, stressors, coping mechanisms, and relationships between stress levels among undergraduate nursing students in UNIMAS and coping mechanisms used during clinical placements. In this chapter, a summary of findings, consequences of the study, the limitations of the study, and the conclusion will be presented.

5.2 Stress level and Stressors among UNIMAS Nursing Students during clinical placements

The purpose of the current study was to determine the level of stress, define the coping mechanisms, and study correlations between the stress and coping mechanisms among the UNIMAS nursing students at the time of the clinical placement. The results of the study showed that the level of stress in UNIMAS nursing students as they go through their clinical placements was moderate to high, and according to all of the questions that make up the PSS, all the respondents had a score of between 2 and 3 as found in a similar study published by Ahmed et al. (2019) titled nursing students stress and coping strategies during clinical training in Saudi Arabia that finds that most of their respondents have a moderate stress level during clinical placements. This outcome may be attributed to the inherently high-pressure environment of clinical practice, where students are constantly required to apply theoretical knowledge to real-life patient care under time constraints and professional scrutiny. Furthermore, the current study involved Year 2 to Year 4 students, who were already familiar with clinical environments and reported greater confidence and

capability in managing stressors. Their familiarity with clinical routines may explain the slightly higher resilience observed compared to less experienced students.

Besides that, the most recent study concluded that most of the respondents (56.9%) were satisfied with their study in nursing, which consisted of theory classes and clinical practicum. This finding was consistent with the past research in Saudi who proved that nursing students were not only satisfied with the nursing course but also not happy with their nursing study due to a few reasons (Ahmed et al., 2019). In that study, dissatisfaction arose from factors such as inconsistent guidance and the emotional burden of clinical work, indicating that satisfaction may depend more on the support system than the curriculum itself.

After the data were collected using the Perceived Stress Scale (PSS) developed by Sheu et al. (2002), overall results for the current study showed that the mean score for all six domains in PSS was likely to be higher. Usually, nursing students are more exposed to the stress from taking care of patients. This can include dealing with critically ill patients, communicating with patients and their families, and the emotional toll of witnessing suffering or death.

Furthermore, students felt pressure from the assignments and workload in the clinical setting, especially when it came to the quality of work they had to achieve and the rules they had to follow because they were unfamiliar with hospital procedures. These findings are similar to the study by Alanazi et al. (2022), who highlighted that the intense academic pressure faced by nursing students is compounded by the dual demands of academic coursework and clinical performance.

Other than that, sources of stress reported during clinical placement also included stress from teachers and nursing staff, possibly due to strict supervision, high expectations, or lack of support and constructive feedback from clinical instructors. A key stressor in this category was the feeling that teachers' instructions differ from one's expectations, pointing to possible communication gaps or inconsistent guidance between academic and clinical settings. Some students reported a lack of fair evaluation and support from teachers, which could negatively affect their learning and motivation. According to Al-Yateem and Griffiths (2019), nursing students frequently experience a lack of faculty support, which can lead to elevated anxiety or diminished self-assurance in their clinical skills. Students in the present study reported inconsistent expectations, a lack of constructive feedback, and perceived unfair evaluation from the lecturer; these issues can significantly impair their learning motivation and professional development. Additionally, Hamadi and Zakari (2021) noted that students' learning processes suffer when teachers provide insufficient assistance.

Meanwhile, both stress from a lack of professional knowledge and skills and stress from peers and daily life were also reported. These reflect internal anxieties related to feeling underprepared or lacking competence, as well as external pressures from social relationships, financial issues, or personal responsibilities. This finding is supported by a previous study by Alkouri et al. (2025), who revealed that the sources of stress experienced by nursing students are stress related to peer and daily life. Thus, this study demonstrates that nursing students must endure a demanding, competitive environment fostered by instructors and classmates, which might increase feelings of anxiety and inadequacy (Chauhan et al., 2023).

Lastly, stress from the area of practice was also reported. This type of stress may stem from unfamiliar or high-pressure clinical environments, the fear of making mistakes,

or handling complex patient care tasks under supervision. These findings suggest that even experienced students encounter psychological distress when faced with unpredictable and high-risk care situations.

5.3 Coping Mechanisms among UNIMAS Nursing Students during Clinical Placements

The next aim of this study is to examine the coping mechanisms used by UNIMAS nursing students during clinical placements. Based on the results of the Coping Behaviour Inventory (CBI) among UNIMAS nursing students. The overall mean score for coping mechanisms is 62.45 ± 9.91 , indicating a different type of strategies utilized by nursing students to overcome their stress during clinical placements.

The most frequently used coping strategy was problem-solving. This indicates that many students actively seek solutions to manage stressful situations during their clinical practice by setting objectives, making plans, analysing the meaning behind stressful incidents, and applying past experiences to handle current challenges. This result aligned with the previous study by Alkouri et al. (2025) with the title “Perceived stress, coping mechanisms, and influential factors among undergraduate nursing students during clinical placements”. The result of this study found that the most favoured approach by their respondents is problem-solving, particularly within the demanding environment of nursing practice. The reason is that problem-solving directly addresses the stressor and enhances students' sense of control, making it a more adaptive and effective strategy in clinical settings. According to Hamadi et al. (2021), addressing challenges and achieving goals requires nursing students to not only manage their existing stressors but also to remain resilient and adaptable throughout the clinical training process. Labrague et al. (2018) further

confirmed that nursing students prefer this approach because it promotes academic and emotional stability.

The second most common strategy was avoidance, with a mean score of 14.68 ± 4.414 . Although this approach may provide temporary relief, it involves behaviours such as avoiding difficulties, expecting others to solve problems, or attributing outcomes to fate, which may not effectively address the root causes of stress. This result aligned with the study from Alkouri et al. (2025), highlighting that reliance on avoidance coping is associated with lower levels of satisfaction and increased stress among nursing students, and it is not considered a viable path to achieving long-term success in the nursing profession. Furthermore, Al-Zayyat and Al-Gamal (2014) found that the use of avoidance strategies may contribute to heightened subjective stress levels.

Next, staying optimistic was also a prevalent strategy, with a mean score of 14.64 ± 2.719 . These findings are supported by a previous study by Alkouri et al. (2025), which showed that staying optimistic reduces the likelihood of stress and improves coping mechanisms. Students who cultivate staying optimistic and self-confidence are more comfortable during rigorous clinical placements (Kim et al, 2015). This method involves maintaining a positive attitude, seeing situations objectively, and having confidence in overcoming challenges.

Meanwhile, another coping mechanism used by nursing students was transference, reported with a mean score of 12.20 ± 2.535 . This involves redirecting stress through leisure activities like watching TV, exercising, sleeping, or maintaining physical health, helping to restore emotional balance and reduce stress indirectly. This type of coping mechanism can be supported by the study from Chin et al. (2020), who reported that nursing students frequently employ relaxation techniques to manage stress during clinical practice. This

suggests that while problem-solving is essential, students also acknowledge the importance of self-care strategies for stress relief, recognizing the need to maintain their overall well-being. Although this method doesn't directly solve the issue, it plays a critical role in self-care and preventing burnout.

The detailed responses further show that a majority of students frequently or always adopt strategies under problem-solving and avoidance, while staying optimistic behaviours are often used occasionally. These findings suggest that while many nursing students are inclined to tackle stress through active and practical means, a significant number also rely on avoidance and emotional redirection, indicating the need for structured coping skills training and emotional support interventions during clinical practice.

5.4 Relationship between stress and coping mechanisms

A Spearman correlation test revealed statistically significant relationships between various stressors and the coping mechanisms used by undergraduate nursing students at UNIMAS during clinical placements. The data showed that avoidance as a coping mechanism had a weak to strong positive correlation with all stressor types, especially stress from teachers and nursing staff, $r_s(137) = .611, p < 0.001$, and stress from peers and daily life, $r_s(137) = .495, p < 0.001$. These results suggest that students who experience high levels of interpersonal or environmental stress tend to engage in avoidance behaviours, which may include emotional withdrawal or evasion of challenging situations. While this may offer temporary relief, it is generally considered a maladaptive coping strategy, potentially leading to poor emotional outcomes. This pattern of behaviour is also observed in the previous study by Ahmed et al. (2019), where avoidance coping was frequently used among students experiencing interpersonal stress. One reason for this tendency is the lack of coping skills training in the nursing curriculum, which leaves students without structured strategies to

manage stress effectively. Additionally, fear of failure, criticism, or making mistakes, especially under strict supervision or perceived unfair evaluation, may lead students to avoid problems instead of confronting them. Perceived lack of control or support from instructors or staff, a finding also reported by Al-Yateem and Griffiths (2019), reinforces this behaviour, as students may believe that their efforts will not change outcomes in a rigid or unsupportive clinical environment.

Moreover, the emotional burden of dealing with suffering patients or the pressure of professional expectations can be overwhelming, prompting students to protect themselves emotionally through avoidance. Cultural influences or personal upbringing might also play a role, where addressing stress directly is not encouraged or modelled.

On the other hand, problem-solving showed weak but still statistically significant correlations with several stressors, such as stress from patient care, $r_s(137) = .231, p = .007$, assignments and workload, $r_s(137) = .248, p = .004$, and peer-related stress, $r_s(137) = .245, p = .004$. These findings imply that students who are stressed from patient care, assignments, and clinical workload, and from peer relationships, tend to employ more active and constructive strategies like problem-solving, such as setting objectives, planning solutions, and relying on their clinical knowledge to cope with stress. These strategies may be favoured because they are the most accessible for students and align with their personalities. According to Labrague et al. (2018), students prefer problem-solving because it allows them to regain control over stressful situations and directly address the challenges they face.

Staying optimistic, often linked to positive reframing and confidence, showed a significant but weak correlation with stress from assignments, $r_s(137) = .339, p < 0.001$, and patient care, $r_s(137) = .218, p = .010$. The result indicates that students who are experiencing much stress from patient care and assignments were also more likely to employ staying

optimistic as their coping mechanisms. This suggests that optimism plays a small but meaningful role in managing emotionally demanding aspects of nursing education. However, the lack of significant correlation with stress from professional skills, area of practice, or instructors indicates that optimism alone may not be sufficient to buffer stress in more complex or institutional contexts.

Moreover, transference, which includes coping actions like rest, watching television, or engaging in physical activity, also correlated weakly with patient care, $r_s(137) = .238$, $p = .005$, and workload stress, $r_s(137) = .222$, $p = .009$. These methods, while not directly addressing the stressor, may serve to provide temporary relief and help students maintain emotional balance.

Overall, the findings highlight that avoidance is the most consistently associated coping mechanism across all stressors, but it is also the least constructive long-term. In contrast, problem-solving and optimism are employed more in manageable stress contexts and could be encouraged in nursing education to improve emotional resilience. These results support the need for targeted interventions in nursing programs to promote adaptive coping strategies and reduce reliance on avoidance, especially when facing stress from authority figures or clinical demands. Therefore, nursing education should focus on reducing reliance on avoidance coping and promoting constructive coping strategies through training, supportive supervision, and continuous reflection. This approach not only enhances students' academic and clinical performance but also strengthens their psychological resilience and professional growth.

However, the overall weaker correlation suggests that while students may recognize the benefits of problem-solving, they often lack the confidence, training, or support necessary to apply it consistently, particularly in response to interpersonal or institutional

stressors. To encourage a shift from avoidance to more constructive coping strategies, such as problem-solving, several key improvements can be made within nursing education. First, structured stress management training should be integrated into the curriculum to equip students with practical, evidence-based coping techniques. Additionally, fostering a supportive clinical environment where students feel safe to make mistakes and seek guidance without fear of judgment is essential. Encouraging reflective practices and debriefing sessions after clinical placements can help students process their experiences and reinforce the use of active coping behaviours. Establishing mentorship or peer support systems can also provide students with role models who demonstrate effective stress management techniques. Furthermore, gradually building students' confidence through supervised responsibilities can enhance their readiness to face clinical challenges. Lastly, normalizing stress and openly discussing the emotional demands of nursing can reduce stigma and empower students to seek help and apply proactive coping strategies, ultimately promoting both academic success and emotional well-being.

5.5 Consequences of the study

This study on stress levels and coping mechanisms among undergraduate nursing students at UNIMAS during clinical placements presents several meaningful implications. Firstly, the findings can enhance student support services. By identifying common stressors and the coping strategies used, the findings can help nursing faculty design targeted support interventions, such as counselling programs, stress management workshops, and mentorship systems tailored to students' needs. Secondly, this research contributes to improving academic performance and student retention. A better understanding of how stress affects nursing students enables institutions to create a more conducive learning environment, which may reduce dropout rates and foster academic success. Early intervention strategies can be

implemented to prevent stress from escalating and negatively impacting students' academic journeys. Moreover, the findings can inform curriculum development. Educators can use the findings to integrate stress management training and emotional resilience-building into the nursing curriculum. Teaching effective coping mechanisms early in the program may better equip students to handle the rigours of clinical placements and future professional practice. In addition, the study highlights areas for improving the clinical learning environment. Awareness of stressors can encourage collaboration between nursing schools and clinical sites to create a more supportive and engaging atmosphere. Staff nurses and clinical instructors who understand the challenges faced by students are more likely to provide constructive guidance, feedback, and mentorship. Finally, this research can contribute to the body of nursing knowledge and serve as a foundation for further research. Future studies may explore interventions that reduce stress or compare coping mechanisms across different institutions or year levels. It may also inspire advocacy for policy changes in nursing education, aiming to prioritise mental health and well-being.

5.6 Limitations

While this study provides valuable insights, several limitations should be acknowledged. First, the data collection for this study only focused on nursing students in the Faculty of Medicine and Health Sciences, UNIMAS, and does not include nursing students in other universities in Malaysia. Considering that this recent study was only done at the Faculty of Medicine and Health Science (FMHS) UNIMAS and only included a population of Year 2 to Year 4 nursing students, it can affect the total sample size. A small sample size may reduce the generalizability of the findings to a broader population of nursing students. Thus, the overall results and findings do not represent the nursing student community. In addition, there is a time constraint in conducting the study as the course runs

for a short period and is busy with theory classes and practicum. Other than that, conducting research as a student also costs a lot of money, such as for printing, presentation purposes, and continuous internet data supply. Limited resources can affect the scope of the study, the depth of data analysis, and the ability to conduct follow-up research or interventions to address identified knowledge gaps. Lastly, the reliability of self-reported data must be considered. Participants' responses may be influenced by their level of understanding, personal bias, or a tendency to underreport or overreport their distress. As such, the findings may be subject to recall bias and may not fully capture the actual stress levels experienced.

5.7 Summary

In conclusion, clinical placements are a vital part of nursing education, but they often expose students to high levels of stress that can affect their emotional well-being and academic performance. Nursing students must learn how to manage their stress effectively through appropriate coping mechanisms such as problem-solving and emotional regulation. Understanding the sources of stress and how students cope can guide the development of supportive strategies within the faculty. The current findings may help assess the seriousness of stress among nursing students, design effective support systems, and promote better mental health during clinical training.

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APPENDICES

Appendix A: Cover Letter for Ethical Application

Nurul Aini Syahirah Binti Rosli,
Faculty Medicine and Health Sciences,
Universiti Malaysia Sarawak,
94300 Kota Samarahan,
Sarawak.

The Chairman,
Medical Research Ethics Committee,
Faculty of Medicine and Health Sciences,
Universiti Malaysia Sarawak,
94300 Kota Samarahan,
Sarawak.

15th December 2024

Professor/Associate Professor/Dt/Sir/Madam,

REQUEST FOR APPROVAL TO CONDUCT RESEARCH PROJECT

I am a final-year student pursuing a Bachelor of Nursing with Honours at the Faculty of Medicine and Health Sciences, UNIMAS. I enrolled in MDJ 4653 Final Year Project I, in which course is coordinated by Madam Shalin Lee Wan Fei. Please find my details as follows:

Full name: Nurul Aini Syahirah Binti Rosli

Matrix number: 80827

IC No.: 020417-11-0378

I would like to request for the kind approval from the Faculty of Medicine and Health Sciences Medical Research Ethics Committee to conduct the following study:

Research title: Assessing Stress and Coping Mechanisms Among UNIMAS Nursing Students in Clinical Placements: A Cross-sectional Study

Supervisor's name: Azylina Anak Gunggu

Email address: gazylina@unimas.my

Supervisor's HP number: 0194683120

Please find the required documents as appended for your kind consideration and approval.

Thank you.

Yours sincerely,



(Nurul Aini Syahirah Binti Rosli)

Appendix B: Ethical Approval

Pejabat Akademik
Fakulti Perubatan dan Sains Kesihatan
Academic Office
Faculty of Medicine & Health Sciences
☎: 581000 samb 7768
✉: 665152

UNIVERSITI MALAYSIA
SARAWAK
94300 Kota Samarahan

MEMORANDUM

Reference : UNIMAS/NC-21.05/03-03 Jld. 8(111)

To : Nurul Aini Syahirah Binti Rosli (80827)
Bachelor of Nursing with Honours
Faculty of Medicine and Health Sciences

From : Dean
Faculty of Medicine and Health Sciences

Date : 05 March 2025

Subject : **Final Year Project - Research Approval: Assessing Stress and Coping Mechanisms Among UNIMAS Nursing Students During Clinical Placements**

The above matter is referred.

The Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (UNIMAS) has granted the **RESEARCH APPROVAL** for this Final Year Project research based on the appraisal by the Department of Nursing, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak (UNIMAS) on 24 February 2025. The Final Year Project research details stated below:

Student Name : Nurul Aini Syahirah Binti Rosli

Student ID : 80827

Programme : Bachelor of Nursing with Honours

Research Title : *Assessing Stress and Coping Mechanisms Among UNIMAS Nursing Students During Clinical Placements*

Supervisor Name : Madam Azylina Anak Gunggu

Supervisor H/P : +60 19-468 3120

All records and data are to be kept strictly **CONFIDENTIAL** and can only be used for the purpose of this study. All precautions are to be taken to maintain data confidentiality. Permission from the all relevant heads of departments/units where the study will be carried out must be obtained prior to the study.

Please note that the approval is valid from **February 2025** to **November 2025** only. The reference number for this letter must be stated in all correspondence related to this study to facilitate the process.

Thank you with regards and well wishes.

Yours sincerely,



Professor Dr. Asri bin Said
Dean

c.c : Deputy Dean of Undergraduate
: Head of Nursing Department
: Bachelor of Nursing with Honours
: MDJ4653 Final Year Project 1 Course Coordinator

Appendix C: Participant Information Sheet (PIS)

Version 1.0, dated 16th December 2024



PARTICIPANT INFORMATION SHEET

- 1. Title of the study** : Assessing Stress and Coping Mechanism Among UNIMAS Nursing Students in Clinical Placement: A Cross-Sectional Study
- 2. Main Researcher** : Nurul Aini Syahirah Binti Rosli
- 3. Supervisor** : a) **Course Coordinator:** Shalin Lee Wan Fei
b) **Main research supervisor:** Madam. Azylina Anak Gunggu
- 4. Institution** : Department of Nursing, Faculty of Medicine and Health Sciences, University Malaysia Sarawak
- 5. Name of sponsor** : No external funding

Objectives:

1. To identify the stress level among UNIMAS nursing students during clinical placements.
2. To examine the coping mechanisms used by nursing students during clinical placements.
3. To identify the relationship between stress levels and coping mechanisms used by nursing students during clinical placements.

6. Introduction

You must understand why the study is being done and what it will involve. Please take the time to read through this information and consider it carefully before deciding if you are willing to participate. Ask the study researcher if anything is unclear or if you would like more information. After you are properly satisfied that you understand this study and wish to participate, you must sign this informed consent form.

Your participation in this study is voluntary. You do not have to be in this study if you do not want to. You may also refuse to answer any questions you do not want to answer. If you volunteer to be in this study, you may withdraw from it at any time. If you withdraw, any data collected from you up to your withdrawal will still be used for the study. Your refusal to participate or withdraw will not affect any medical or health benefits to which you are otherwise entitled.

7. What is the purpose of the study

This study aims to assess stressors and levels of stress among UNIMAS nursing students during clinical placement and identify the effectiveness of different coping mechanisms that they use to cope with the stress. Thus, this study is important for the students as it could help to acknowledge the mental well-being of the students during the clinical posting and identify the source of the problems.

This research will be conducted from March (01/03/25) till April (30/04/25). Online questionnaires through Google Forms will be disseminated to participants and will be given times for two weeks to complete the questionnaire at any time. The expected number of participants is 125 individuals.

8. Who can participate in this study

This research targets undergraduate nursing students from the Faculty of Medicine and Health Sciences (FMHS), UNIMAS. The inclusion and exclusion criteria have been outlined to identify eligible participants. The inclusion criteria for this research comprise undergraduate nursing students from Year 2 until Year 4. The students were chosen as respondents based on a simple random sampling method using a number generator, while exclusion criteria for this study consist of post-registration UNIMAS nursing students, Year 1 UNIMAS nursing students, students who are unwilling to participate in this study, and students who are selected for the pilot study.

9. What are my responsibilities when taking part in this study?

It is important that you respond openly and comprehensively to all inquiries posed by the study staff, a process expected to consume approximately 20-30 minutes of your time to answer all the questions. The researcher will give you time for 2 weeks to complete the Google Form.

For studies involving questionnaires:

You will be given a survey form via the Google Form link to be answered. This form contains three sections which are Section A, Demographic Data, Section B, Perceived Stress Scale (PSS), and Section C, Coping Behavior Inventory (CBI).

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10. What are the benefits of being in this research?

Your participation in this study is completely voluntary, and your decision will not affect your current study or clinical placements. The level of risk associated with this study is primarily related to time consumption, otherwise minimal. You have the right to refuse to answer any questions that may make you feel uncomfortable, and you can opt to withdraw from the study at any point without incurring any penalties.

11. What are the potential risks and side effects of being in this study?

There may or may not be any direct benefits to you. However, this study can greatly benefit both students and educational institutions. It helps identify common stressors, such as academic pressure and clinical challenges and explores effective ways students cope with them. This information can guide schools to provide better mental health support, like counseling and stress management programs, leading to improved student well-being and academic performance. Additionally, it prepares nursing students to handle workplace stress more effectively, reducing burnout and enhancing patient care. Overall, such research promotes awareness, improves support systems, and contributes to creating a healthier, more resilient future nursing workforce.

12. Who is funding this study?

This study does not receive any external funding and is fully sponsored by the main study researcher. You will not be paid for participating in this study.

13. Will my information be kept private?

All your information obtained in this study will be kept and handled confidentially, following applicable laws and regulations. When publishing or presenting the study results, your identity will not be revealed without your expressed consent.

14. Who should I call if I have questions?

If you have any questions about the study, please contact the researcher, Nurul Aini Syahirah Binti Rosli at telephone number +60109145172.

If you have any questions about your rights as a participant in this study, please contact: The Secretary, Medical Research & Ethics Committee, Ministry of Health Malaysia, at telephone number 03-3362 8407/8205/8888.

15. Ethical review of the study?

This study has been approved by the Medical Research Ethical Committee of the University Malaysia Sarawak. The committees can be contacted through the email address: medicalethics@unimas.my for Medical Research Ethical Committee of the University Malaysia Sarawak.

APPENDIX D: Informed Consent Form

Version 1.0, dated 16th December 2024



INFORMED CONSENT FORM

Title of Study: Assessing Stress and Coping Mechanism Among UNIMAS Nursing Students in Clinical Placement: A Cross-Sectional Study

By signing below, I confirm the following:

- I have been given oral and written information for the above study and have read and understood the information given.
- I have had sufficient time to consider participation in the study and have had the opportunity to ask questions and all my questions have been answered satisfactorily.
- I understand that all my participation is voluntary, and I can at any time freely withdraw from the study without giving a reason and this will in no way affect my future study. I am not taking part in any other research study at these times. I understand the risks and benefits, and I freely give my informed consent to participate under the conditions stated.
- I will receive a copy of this informed consent form signed and dated to bring home.
- While information gained in this study, may be used in a conference presentation and may also be published in journal articles, I will not be identified, and information concerning me will remain strictly confidential.

Subject:

Signature:

I/C number:

Name

Date:

Investigator conducting informed consent:

Signature:

I/C number:

Name:

Date:

APPENDIX E: Permission Obtained from Original Author to Use Questionnaire



Aini Syaa <ainisyaa.rosli@gmail.com>

Request for Permission to use your Perceived Stress Scale (PSS) and Coping Behavior Inventory (CBI) for Final Year Project

2 messages

Aini Syaa <ainisyaa.rosli@gmail.com>
To: weliamdeen1980@hotmail.com

Sat, Oct 26, 2024 at 4:48 PM

Dear Waled Amen Mohammed,

I hope this message finds you well. I am Nurul Aini Syahirah, a final-year Nursing Student at the University of Malaysia Sarawak (UNIMAS). I am writing to request permission to use your questionnaire for my Final-Year Project, "Assessing stress and coping mechanisms among UNIMAS nursing students in clinical placements."

I understand you might be occupied, and I deeply appreciate your time in considering my request. I am seeking your permission to utilize the questionnaire you developed for my research. Your work on "Nursing students' stress and coping strategies during clinical training in KSA" perfectly aligned with the objective of my study.

To ensure compliance with ethical guidelines and maintain academic standards, I kindly request the following details:

1. Permission to Adopt Instrument: Format permission to adopt and use the questionnaire, tailored to the context of UNIMAS Nursing Students.
2. Complete Questionnaire Details: If feasible, could you provide the complete questionnaire with distracters/answer options and correct answers? This would ensure the integrity of your original work and aid in accurate data collection.
3. Domains and Sections Within the Questionnaire: A detailed breakdown of the various domains and sections covered in the questionnaire would greatly assist in aligning my study objectives.
4. Instrument/Questionnaire Guide: Any associated guide or manual related to the questionnaire's administration and scoring procedures would be immediately helpful for the success of my research.

I highly value intellectual property rights and assure you that your work will be duly credited in my final report. I am fully committed to complying with any conditions or requirements you may have in granting permission for the adoption of your questionnaire. Thank you very much for considering my request. I eagerly anticipate your positive response. If you require any further information clarification, please feel free to contact me.

Thank you for your time and consideration.

Sincerely,
Nurul Aini Syahirah Binti Rosli
80827
UNIMAS Year 4 Nursing Student

Waled Ahmed <weliamdeen1980@hotmail.com>
To: Aini Syaa <ainisyaa.rosli@gmail.com>

Sat, Oct 26, 2024 at 4:50 PM

Dear Nurul

You have our permission to use the mentioned tool that you could find in the article

Good luck

Waled Ahmed

From: Aini Syaa <ainisyaa.rosli@gmail.com>

Sent: Saturday, October 26, 2024 11:48:31 AM

To: weliamdeen1980@hotmail.com <weliamdeen1980@hotmail.com>

Subject: Request for Permission to use your Perceived Stress Scale (PSS) and Coping Behavior Inventory (CBI) for Final Year Project

[Quoted text hidden]

APPENDIX F: Questionnaire PSS and CBI

Section A: Socio-demographic data

Complete the information below accordingly. Please tick (✓) your answers in the boxes provided below or fill in the relevant information in the blanks provided:

1. Age: _____(years)

2. Gender

Male ☐

Female ☐

3. GPA

3 – 4 ☐

2 - < 3 ☐

1 - < 2 ☐

< 1 ☐

4. Academic Year

Year 1 ☐

Year 2 ☐

Year 3 ☐

Year 4 ☐

5. Name of current course required clinical training

Section B: Level of Stress Among Nursing Students During Clinical Placements

Questionnaire adapted from Ahmed et al., 2019, Perceived Stress Scale (PSS) by Sheu et al., 2002

Subscale 1: Level of Stress

Kindly select the relevant option to indicate your opinion.

1. A Nursing Study Satisfaction:

- | | |
|------------------------------------|--------------------------|
| Very Satisfied | ☐ |
| Satisfied | ☐ |
| Neither satisfied nor dissatisfied | ☐ |
| Dissatisfied | ☐ |
| Very Satisfied | ☐ |

2. Experiences with the following in a month (You may choose more than one):

- | | |
|--|--------------------------|
| Death of a close family member | ☐ |
| Personal illness or injury | ☐ |
| Marriage | ☐ |
| Pregnancy | ☐ |
| Divorce | ☐ |
| Buying a house | ☐ |
| Being laid off from a job | ☐ |
| Moving location | ☐ |
| Noise | ☐ |
| Bright lights | ☐ |
| Heat | ☐ |
| Confined space | ☐ |
| Social interaction with rude, bossy, aggressive people | ☐ |
| Crowding | ☐ |
| None | ☐ |

Subscale 2: Stress among nursing students using Perceived Stress Scale (PSS)

Kindly select and circle the relevant option to indicate your opinion about each statement's veracity
(1= Never; 2= Rarely; 3= Sometimes; 4= Frequently; 5= Always)

PSS	Never	Rarely	Sometimes	Frequently	Always
Stress from taking care of patients					
Lack of experience and ability to provide nursing care and make judgments	1	2	3	4	5
Do not know how to help patients with physio-psycho-social problems	1	2	3	4	5
Unable to meet one's expectations	1	2	3	4	5
Unable to provide appropriate responses to teachers' and patients' questions	1	2	3	4	5
Worried about not being trusted or accepted by patients' families	1	2	3	4	5
Unable to provide patients with good nursing care	1	2	3	4	5
Do not know how to communicate with patients	1	2	3	4	5
Experience difficulties in changing from the role of a student to that of a nurse	1	2	3	4	5
Stress from assignments and workload					
Worry about bad grades	1	2	3	4	5
Experience pressure from nature and the quality of clinical practice	1	2	3	4	5

Feel that one's performance does not meet the teacher's expectations	1	2	3	4	5
Feel that clinical practice requirements exceed one's physical and emotional endurance	1	2	3	4	5
Feel that a dull and inflexible clinical practice affects one's family and social life	1	2	3	4	5
Stress from a lack of professional knowledge and skills					
Unfamiliar with medical history and terms	1	2	3	4	5
Unfamiliar with professional nursing skills	1	2	3	4	5
Unfamiliar with the patient's diagnoses and treatment	1	2	3	4	5
Stress from the area of practice					
Feel stressed in the hospital environment where clinical practice takes place	1	2	3	4	5
Unfamiliar with the ward facilities	1	2	3	4	5
Feel stressed from rapid changes in the patient's condition	1	2	3	4	5
Stress from peers and daily life					
Experience competition from peers in school and clinical practice	1	2	3	4	5
Feel pressure from teachers who evaluate students' performance by comparison	1	2	3	4	5
Feel that clinical practice affects involvement in extracurricular activities	1	2	3	4	5
Cannot get along with peers	1	2	3	4	5

Stress from teachers and nursing staff					
Experience discrepancy between theory and practice	1	2	3	4	5
Do not know how to discuss the patient's illness with teachers or nursing personnel	1	2	3	4	5
Feel stressed because the teacher's instruction differs from one's expectations	1	2	3	4	5
Doctors lack empathy and are unwilling to help	1	2	3	4	5
Feel that teachers do not evaluate students fairly	1	2	3	4	5
Lack of care and guidance from the teacher	1	2	3	4	5

Section C: Coping Mechanisms used by UNIMAS Nursing Students

Questionnaire adapted from Ahmed et al., 2019, Coping Behavior Inventory (CBI) by Sheu et al., 2002

Kindly select and circle the relevant option to indicate your opinion about each statement's veracity
(1= Never; 2= Rarely; 3= Sometimes; 4= Frequently; 5= Always)

CBI	Never	Rarely	Sometimes	Frequently	Always
Avoidance					
To avoid difficulties during clinical practice	1	2	3	4	5
To avoid teachers	1	2	3	4	5
To quarrel with others and lose temper	1	2	3	4	5
To expect miracles so one does not have to face difficulties	1	2	3	4	5
To expect others to solve the problem	1	2	3	4	5
To attribute to fate	1	2	3	4	5
Problem-solving					
To adopt different strategies to solve problems	1	2	3	4	5
To set up objectives to solve problems	1	2	3	4	5
To make plans, list priorities, and solve stressful events	1	2	3	4	5

To determine the meaning of stressful incidents	1	2	3	4	5
To employ experience to solve problems	1	2	3	4	5
To have confidence in performing as well as senior schoolmates	1	2	3	4	5
Staying optimistic					
To keep a positive attitude in dealing with life events	1	2	3	4	5
To see things objectively	1	2	3	4	5
To have confidence in overcoming difficulties	1	2	3	4	5
To cry, feel moody, sad, and helpless	1	2	3	4	5
Transference					
To feast and enjoy a long sleep	1	2	3	4	5
To save time for sleep and maintain good health to face stress	1	2	3	4	5
To relax via TV, movies, a shower, or physical exercise	1	2	3	4	5

APPENDIX G: Study Expenditure

Budget			
Project Title	Assessing Stress and Coping Mechanism Among UNIMAS Nursing Students in Clinical Placement: A Cross-Sectional Study		
Duration of Project	September 2024 – July 2025		
Expenditure	Unit Price (RM)	Quantity	Amount in (RM)
Equipment SPSS	RM6	1	RM6
Material and Supplies Binding Plastic A4 covers	2.00/ring 1.00/sheet	1 ring 4 sheets	RM 2 RM 4
Printing Printing of Information letter with Informed Consent and questionnaire for proposal defence Printing for slide proposal defence	0.10/page 0.50/page	10 pages 2 copies 30 pages 2 copies	RM 2 RM 30
Printing of FYP final report	0.10/page	60 pages	RM 6
Grand Total (RM)			RM 50

APPENDIX H: GANTT Chart

Activity	Year / Months											
	2024				2025							
	Sep	Oct	Nov	Dec	Jan	Feb	Mac	Apr	Mei	Jun	July	
Determination of Research Title												
Literature Review												
Meeting with the supervisor												
Submit Oral Defence Slide												
Proposal Defence												
Submission of the first draft												
Ethical Approval												
FYP 1: Submission of Research Proposal												
Data Collection												
Data Analysis												
Writing up a report												
Poster Presentation & Submit the final draft												
FYP 2: Submission of Final Project												

APPENDIX I: Turnitin Similarity Index Report (Pages with Percentages)

FYP final draft			
ORIGINALITY REPORT			
11%	5%	9%	4%
SIMILARITY INDEX	INTERNET SOURCES	PUBLICATIONS	STUDENT PAPERS
PRIMARY SOURCES			
1	Osama Alkouri, Ahmad M. Al-Bashaireh, Yousef Aljawarneh, Zainab Albikawi et al. "Perceived stress, coping mechanisms, and influential factors among undergraduate nursing students during ICU clinical placements: A cross-sectional study", PLOS One, 2025 Publication	2%	
2	Waled A.M. Ahmed, Badria M.A. Mohammed. "Nursing students' stress and coping strategies during clinical training in KSA", Journal of Taibah University Medical Sciences, 2019 Publication	1%	
3	www.researchgate.net Internet Source	<1%	
4	Submitted to Holy Name University Student Paper	<1%	
5	www.eajournals.org Internet Source	<1%	
6	www.mdpi.com Internet Source	<1%	
7	systematicreviewsjournal.biomedcentral.com Internet Source	<1%	
8	msocialsciences.com Internet Source	<1%	

9	www.rhcp.org.br Internet Source	<1 %
10	Submitted to Sharjah Education Academy Student Paper	<1 %
11	Submitted to Our Lady of Fatima University Student Paper	<1 %
12	Ayman Mohamed El-Ashry, Shahira Shehata Harby, Abeer Arafa Gomaa Ali. "Clinical stressors as perceived by first-year nursing students of their experience at Alexandria main university hospital during the COVID-19 pandemic", Archives of Psychiatric Nursing, 2022 Publication	<1 %
13	Submitted to University of Ulster Student Paper	<1 %
14	Insaf A. Shaban, Wejdan A. Khater, Laila M. Akhu-Zaheya. "Undergraduate nursing students' stress sources and coping behaviours during their initial period of clinical training: A Jordanian perspective", Nurse Education in Practice, 2012 Publication	<1 %
15	www.frontiersin.org Internet Source	<1 %
16	www.internationalbiosafety.org Internet Source	<1 %
17	Waddah Mohammad D'emeh, Mohammed Ibrahim Yacoub. "The visualization of stress in clinical training: A study of nursing students' perceptions", Nursing Open, 2020 Publication	<1 %
bu.edu.eg		

18	Internet Source	<1 %
19	Christine K.L. Chan, Winnie K.W. So, Daniel Y.T. Fong. "Hong Kong Baccalaureate Nursing Students' Stress and Their Coping Strategies in Clinical Practice", Journal of Professional Nursing, 2009 Publication	<1 %
20	Salman H. Alsaqri. "Stressors and Coping Strategies of the Saudi Nursing Students in the Clinical Training: A Cross-Sectional Study", Education Research International, 2017 Publication	<1 %
21	H-C. Li, L. S. Wang, Y-H. Lin, I. Lee. "The effect of a peer-mentoring strategy on student nurse stress reduction in clinical practice", International Nursing Review, 2011 Publication	<1 %
22	Submitted to Tung Wah College Student Paper	<1 %
23	Submitted to SUNY, Binghamton Student Paper	<1 %
24	Sheila Sheu, Huey-Shyan Lin, Shiow-Li Hwang. "Perceived stress and physio-psycho-social status of nursing students during their initial period of clinical practice: the effect of coping behaviors", International Journal of Nursing Studies, 2002 Publication	<1 %
25	Submitted to Capella University Student Paper	<1 %
26	Dalia Toqan, Ahmad Ayed, Malakeh Z. Malak, Bahaaeddin M. Hammad, Mohammed	<1 %

ALBashtawy, Mohammed Hayek, Imad Thultheen. "Sources of Stress and Coping Behaviors among Nursing Students Throughout Their First Clinical Training", SAGE Open Nursing, 2023

Publication

27	Submitted to Institut Pendidikan Guru Malaysia	<1 %
	Student Paper	

28	Lorena Gutiérrez-Puertas, Verónica V. Márquez-Hernández, Gabriel Aguilera-Manrique, Guadalupe Molina-Torres et al. "Coping strategies and stressors of nursing students in the care of sex trafficking victims", International Journal of Mental Health Nursing, 2021	<1 %
	Publication	

29	Submitted to The Hong Kong Institute of Education	<1 %
	Student Paper	

30	currencymart.net	<1 %
	Internet Source	

31	Submitted to NEOMA BS	<1 %
	Student Paper	

32	Submitted to PCI College	<1 %
	Student Paper	

33	Hanadi Y Hamadi, Nazik M. A. Zakari, Ebtesam Jibreel, Faisal N. AL Nami, Jamel A. S. Smida, Hedi H. Ben Haddad. "Stress and Coping Strategies among Nursing Students in Clinical Practice during COVID-19", Nursing Reports, 2021	<1 %
	Publication	

Submitted to MAHSA University

34	Student Paper	<1 %
35	Submitted to Munster Technological University (MTU) Student Paper	<1 %
36	Submitted to Ngee Ann Polytechnic Student Paper	<1 %
37	Submitted to University of Sunderland Student Paper	<1 %
38	www.aarc.org Internet Source	<1 %
39	Lulin Zhou, Arielle Doris Kachie Tetgoum, Prince Ewudzie Quansah, Joseph Owusu-Marfo. "Assessing the effect of nursing stress factors on turnover intention among newly recruited nurses in hospitals in China", Nursing Open, 2021 Publication	<1 %
40	pdfs.semanticscholar.org Internet Source	<1 %
41	www.gcu.ac.uk Internet Source	<1 %
42	Gould, Connor J.. "The Experiences of Clinical Placement Belonging Among Nursing Students with Racially and Ethnically Minoritized Identities: An Interpretive Descriptive Study", The University of Western Ontario (Canada), 2023 Publication	<1 %
43	dissertations.mak.ac.ug Internet Source	<1 %
44	dspace.uef.fi Internet Source	<1 %