Student Stress: A Question of Balance

There is no question that anesthesia education is highly stressful. Some stress is to be expected and to be motivational. Yet, how much stress is a normal part of education and how much is counter-productive has not been well researched in the anesthesiology literature. More importantly, how students can cope has not been extensively researched and remains an ongoing concern for the nurse anesthesia profession.

The few studies of anesthesiology student stress document the most common stressors and note their time sequencing. Second-year students have less stress, and practicing nurse anesthetists have more coping resources than do students. The reports further emphasize the importance and need for a proactive, supportive, structured process designed to help nurse anesthesia students deal with the multiple stressors inherent to their education. Being overwhelmed with stress can lead to feelings of failure, low self-esteem, and helplessness, and may put the student at risk for physical and mental problems—even chemical abuse or other inappropriate behaviors. Other studies have shown that low social support and little decision-making authority also contribute to student distress and may correlate to grade point average.

An anesthesiology career means working in a stressful environment with unpredictable workloads, advanced technology, harsh lighting and ambient noise, frequent shifts in priorities, and difficult coworkers. Often, the requirements for life and death decision-making, long working hours, altered sleep and eating patterns, and juggling family commitments further increase stress levels. Students must also deal with the shift from being a competent registered nurse to graduate student, resulting in immediate changes in financial status, residence, family relationships, and personal time. Further, the student must master large amounts of complex materials in a short time; assess complex and unusual patient health problems; develop independent, critical reading, listening and thinking abilities; and clearly articulate problem-solving solutions in a professional, confident manner. Nurse anesthesia students are highly motivated, achievement-oriented individuals with high expectations—traits that can magnify these stressful circumstances. Resources to help students cope may not be readily available, or students may not be fully aware of how much these pressures can affect their physical and mental health. Students may be reluctant to seek help for fear of appearing weak, or because the environment does not recognize or encourage the need for such resources.

History notes that the physical changes in response to stress were an essential adaptation for meeting natural threats. Likewise, in today’s world the stress response can be an asset for raising levels of performance during critical events such as graduate school, job interviews, important meetings, or in situations of actual danger or crisis.

However, persistent stress causes all parts of the body’s functional ability (the brain, heart, lungs, vessels, and muscles) to become chronically over- or under-worked. This may produce physical or psychological damage over time. Short-term, acute distress can also lead to harmful behavior.

How Does Stress Affect Learning?

Stress is a response to change. It is difficult to measure because individuals react very differently to change and vary widely in the effectiveness of their coping. Also, a stressful situation for one person may not be for another.

According to a useful model for understanding student stress, individuals can perceive stressful events as either “challenging” or “threatening” (Lazarus, RS. (1966). Psychological Stress and the Coping Process. New York: McGraw-Hill.). When students see their education as a challenge, stress can bring a sense of competence and an increased capacity to learn. When education is seen as a threat, however, stress can elicit feelings of helplessness and a foreboding sense of loss.

Both too little and too much stress may inhibit learning. Stress—if it is short-term and not too severe—can actually help memory. Stress causes more glucose to be delivered to the brain, which makes more energy available to neurons. This, in turn, enhances memory formation and retrieval. On the other hand, prolonged, stress can impede the glucose delivery and disrupt memory.

Another stressful aspect of nurse anesthesia education is the subtle but pervasive process of being socialized into a profession. Students take the new skills they are learning and absorb them...
as fundamental parts of their personalities. The transformation of a nurse into a nurse anesthetist is a period of adjustment to a new role which, if successful, creates the new status of belonging to a unique social group.

Research indicates that students and nurse anesthetists develop multiple mechanisms to deal with daily stress. Coping strategies can be separated into two categories: positive and negative. Positive coping skills or functional coping strategies consist of family support, social support, religion, exercise, clubs, spirituality, mentoring, and talking to friends. Negative coping skills or dysfunctional coping strategies, such as illegal drug use, alcohol abuse, and promiscuous sexual behavior, have profound life-long implications. A student’s coping strategies will affect their well-being as well as influence their academic performance.

Awareness of the damage stress can cause and learning to recognize symptoms are critical to a student’s well-being. Stress symptoms include exhaustion, loss of/increased appetite, headaches, crying, sleeplessness, and oversleeping. Individuals may escape through alcohol, drugs, or other compulsive behavior. Feelings of alarm, frustration, or apathy may also accompany stress. Unmanageable stress and ineffective coping may contribute to clinical depression, leading to suicidal thoughts—a tragic consequence that could be avoided by greater self-awareness.

Faculty and Student Interactions
Nurse anesthesia faculty should keep in mind that the goal is not to eliminate all stress but to help students develop a variety of coping skills. The guiding principle of stress reduction is to take a preventive approach to avoid negative aspects of stress. Raising awareness and giving students realistic warnings, recommendations, and reassurances supported by constructive feedback improves faculty-student relationships. While faculty cannot be responsible for the overall well-being of students, they do have a responsibility to recognize signs of stress in students and help them cope.

Faculty should provide active intervention, establish student support groups, and employ mechanisms to reduce stress. For example, faculty can help students by avoiding continual reference to the National Certification Examination; providing frequent, constructive, and honest feedback; specifying expectations; and conveying to students that learning clinical skills and new technologies are progressive “steps” on the path to success.

Faculty should encourage students who need more than self-help strategies to seek professional counseling or therapy. In times of crisis, employing debriefing strategies and encouraging students to express feelings are paramount. Students should be encouraged to contact the facility employment assistance program (EAP) if one exists. In addition, the U. S. Government Substance Abuse and Mental Health Services Administration, www.samhsa.com, offers many recommendations. Students are more likely to accept and act upon these suggestions if a good student-teacher relationship already exists and if teachers understand stress ramifications.

For students, a sense of humor and a support system are probably the best stress reducers. Recommended coping strategies include: 1) establishing good study habits, 2) managing time wisely, 3) learning positive self-talk, 4) learning how to relax, 5) forming or joining a student support group, and, 6) getting plenty of sleep and eating right.

The Council on Accreditation of Nurse Anesthesia Educational Programs (COA) standards require that schools have a fair and equitable process, nondiscrimination, limits on hours worked, and a mechanism to address complaints, grievances, and student concerns. Students should be informed of program policies and processes. Further, students should remember that faculty members have their own set of stressors and may at times feel overwhelmed.

If not appropriately addressed, stress and its many symptoms can harm dynamic working and learning environments as well as individuals. The amount of control a person feels affects how much of a stress response his or her body produces. A little pressure can help students and perform and achieve goals. With too much pressure, stress escalates and performance falls. The challenge lies in keeping a healthy balance between too little or too much response the pressures, whether the cause is difficult colleagues, priorities and deadlines, or just life in general.

For students, the tests will come tomorrow, next week, next month, and with the Certification Examination. For faculty, the test is in recognizing stress and meeting the learning challenges of students. As practitioners, the more we know and understand about stress, the more proactive we all can become in achieving balance and perspective in our professional careers.

It is the mind that makes the body!

Sojourner Truth

The Council for Public Interest in Anesthesia (CPIA) promotes patient safety through consumer education and practitioner risk reduction strategies. AANA Director of Practice Sandra Tunajek, CRNA, DNP, is the primary staff member responsible for the all the CPIA activities and the Wellness Project as well as the staffing for the AANA Peer Assistance Advisors Committee. Questions and comments may be addressed to stunajek@aana.com or (847) 655-1115.