Stress in Nurse Anesthesia Educators and Students

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Stress is often associated with the environment and is one of the causative factors that place anesthesia providers at an increased risk for substance abuse.[1] Occupational stress is defined by the National Institute for Occupational Stress and Health as "the harmful physical and emotional responses that occur when the requirements of a job do not match the capabilities, resources, or needs of the workers."[2]

In addition to managing complex cases and patients with co-morbidities, conflicts often arise between CRNAs and their anesthesia colleagues, surgeons, operating room personnel, and at times between CRNAs and their patients. Kendrick[3] found that one of the greatest areas of risk affecting the health and performance of CRNAs was the quality of their relations with coworkers. In fact, 60 percent of the respondents in the Kendrick survey reported that a bad feeling between coworkers was a major stressor in their workplace. Cavagnaro's[4] survey findings are similar in that respondents listed "job-related interpersonal conflicts" as their number one stressor.

Additional stressors include working long hours, increased patient acuity levels, workload, and work politics.[4] However, Chipas[5] et al found that the two nurse anesthesia groups most likely to report a high level of stress are student registered nurse anesthetists and nurse anesthesia educators.

Student Registered Nurse Anesthetists (SRNAs)

Stress in SRNAs is well documented in the current nurse anesthesia literature. Wildgust[6] identified the greatest stressors for first-year nurse anesthesia students as information overload, loss of income, relocation, lack of time for one's self and family, and meeting their own expectations. Senior students reported leaving the program as a new graduate and being able to perform satisfactorily in a new setting as their "greatest stressors."

Nurse Anesthesia Educators

CRNAs working with students in the clinical arena experience the same stressors as those mentioned by CRNAs in the survey, along with the additional stress of educating a new learner.[5] Clinical preceptors must manage the case and keep turnover time to a minimum, while also allowing the SRNA time to perform simple tasks and make clinical decisions.

Nurse anesthesia program faculty face additional challenges related to inexperience as educators, budgetary restrictions, curriculum design to incorporate the requirements of doctoral education, and developing teaching methods to capture the attention of the 21st Century learner. An important point to remember is that nursing and nurse anesthesia program faculty are often recruited from clinical practice. Most clinical educators in anesthesia education have minimal exposure to adult learning principles along with little practical experience in educational theory.[7] Teaching of educational principles is not emphasized in most nursing and nurse anesthesia master's and doctoral curricula.[8] Being a good clinician does not ensure that one will become a good educator.[8] "Becoming a nurse educator is not an additive process; that is, it is not a matter of adding the role of educator to that nurse. Being an educator requires a change in knowledge, skills, behavior, and values to prepare for the new roles, settings, and goals shared by the new reference group." [9]

Conclusion

As a nurse anesthesia educator, I have seen the effects of stress on our students and have experienced the challenges of providing a quality clinical and didactic education to new anesthesia learners. SRNAs and nurse anesthesia educators appear to have a higher level of stress as compared to CRNAs as a whole.[5] We know that practitioner well-being is the foundation of optimal, safe patient care.[5] The available data suggest that while some areas of need and methods for stress reduction have been identified, additional research should be conducted to determine the most effective approaches for improving overall health and reducing stress in student nurse anesthetists and in nurse anesthesia educators. In the meantime, the AANA Health and Wellness Committee members encourage you all to be well, recognize the causes of stress in your life, practice healthy coping methods, and be safe anesthesia providers. ∎

References

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