

Variable levels of perceived stress and anxiety reported by physiotherapy students during clinical placements – qualitative data

Deborah Gallasch, Amy Conlon-Leard, Michelle Hardy, Anna Phillips, Gisela Van Kessel, **Kathy Stiller** (Kathy.Stiller@sa.gov.au)



Government
of South Australia

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BACKGROUND

- > Stress/anxiety healthcare students increased during clinical placements.
- > Positive and negative impacts of stress.
- > Limited amount of evidence re PT students.

AIMS

- > Measure **levels of stress and anxiety of PT students during clinical placements**, impact of personal and placement factors on stress/anxiety, **impact of stress/anxiety on academic performance**, students' perceptions of factors influencing levels of stress/anxiety, coping strategies.

METHODS

- > Prospective, mixed methods study.
- > 3rd year PT students from Uni SA, 4 clinical placements in year.
- > 5-week placements at CALHN, 3 sites (TQEH [acute care, primary and ambulatory care, rehabilitation], RAH [acute care], HRC [rehabilitation]).
- > Informed written consent.
- > Outcomes: baseline STAI, VAS perceived stress and anxiety (baseline, weekly over 5 weeks), academic performance, on-line survey at week 5.
- > Descriptive analyses.

PARTICIPANTS

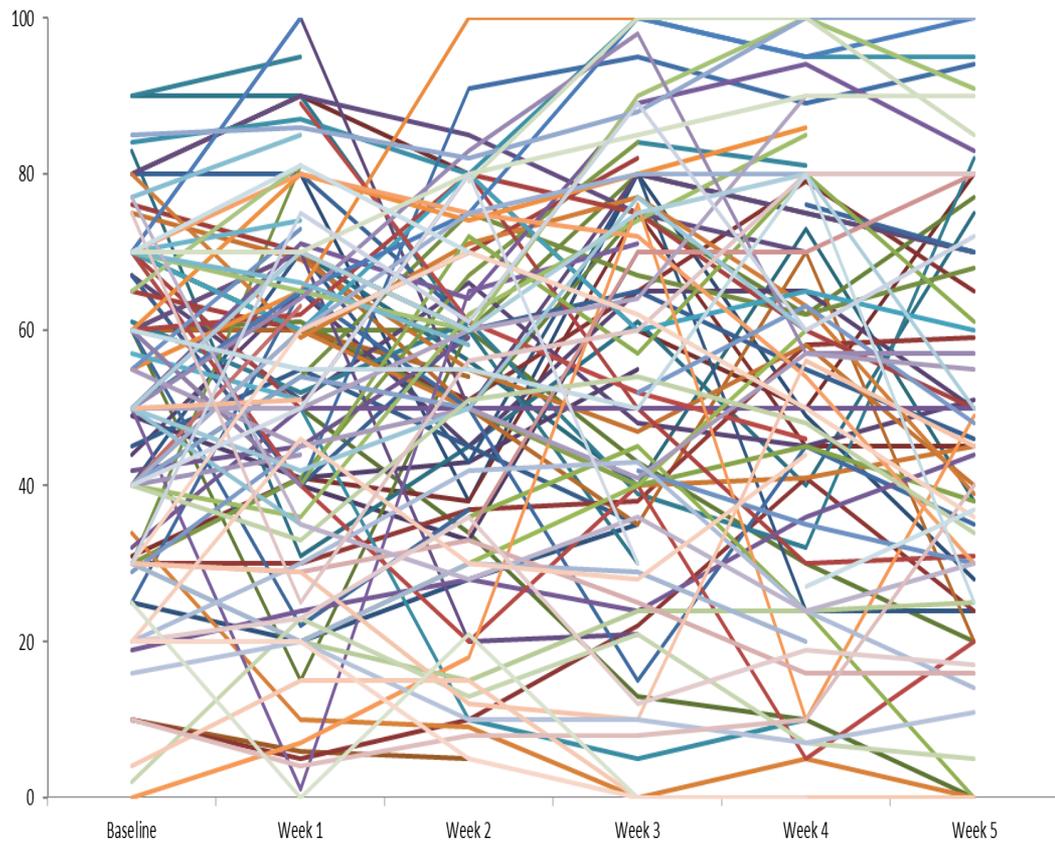
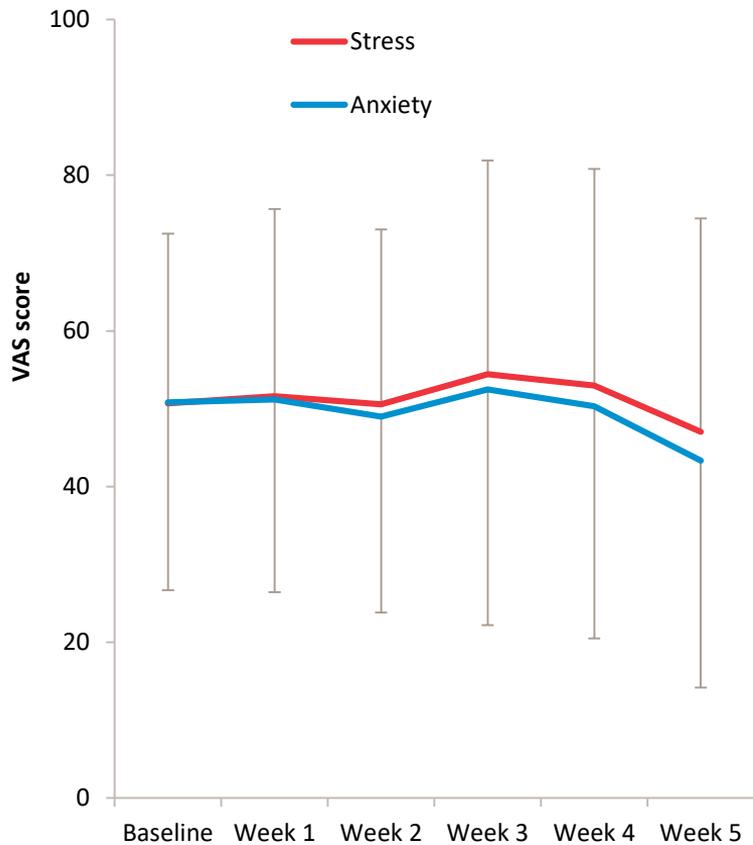
Screened: n = 175

Excluded: n = 16
Declined: n = 15
Withdrew consent: n = 1

Included: n = 159

Gender, n (%)	
Female	85 (54%)
Male	74 (47%)
Age, years, mean (SD)	23 (5)
Included in study, n	
Once	73
Twice	25
Thrice	12

RESULTS - quantitative



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RESULTS - quantitative

- > Baseline and mean VAS stress/anxiety correlated with academic outcomes ($r \leq -0.211$; fair relationship).
- > Baseline VAS stress/anxiety correlated with all other outcomes.
- > Those aware of resources and skill development to manage excessive stress/anxiety had significantly reduced baseline and mean VAS stress/anxiety.

RESULTS - qualitative

Item	Responses - n (%)
Time when more stressed/anxious (n = 70)	Around assessments = 21 (30%) Final days of placement = 12 (17%) Start of placement = 11 (16%)

Quotes...

“Having so much out of hours work to do for this placement has been a struggle, especially as we have more assignments for this placement than any other. I’ve literally been sitting at my computer for 6+ hours every night after placement to get everything done week in week out, and I’ve been on top of starting assignments super early and doing them as I go through. It’s too much.”

Item	Responses - n (%)
Time when less stressed/anxious (n = 66)	Variable = 20 (30%) Final days of placement = 16 (24%) None = 12 (18%)

“Towards the end of placement I have felt much less stress and anxiety because I was more familiar and comfortable with my patients and their conditions.”

“Less stressed in the mornings, as I felt refreshed and positive. As the day progresses and different patients present with challenges and time constraints, it increased.”

Item	Responses - n (%)
Placement factors increasing stress/anxiety (n = 61)	Patient-related = 24 (39%) Assessments = 11 (18%)

“On some occasions I felt out of my depth with the type of patients that I had (e.g. difficult personalities, very high pain levels) so this increased my stress.”

“... every time I see a patient whose condition I haven't treated before or when presenting to my clinical educator I am always anxious that I have missed something or that it wasn't good enough”.

“Having to jump straight in on day two to have our own patients. We possibly could have shared a patient and done more tutorial discussions and shared ideas about doing an assessment, discussing our findings and also how to do EBP to find interventions with our clients.”

Item	Responses - n (%)
Placement factors decreasing stress/anxiety (n = 64)	Support from clinical educator = 42 (66%) Support from peers = 13 (20%)

“Having a supportive clinical educator who eased our way into placement, allowing us to slowly adjust to the demands of the placement and learn how certain procedures may be conducted at the site.”

“Being able to discuss things with my educators without fear of judgement and also their guidance was reassuring that making mistakes is a part of learning, that they were there to help.”

Item	Responses n (%)
Personal factors increasing stress/anxiety (n = 61)	Personal health = 14 (23%) High self-expectations = 11 (18%) Family and relationship stressors = 10 (16%) High baseline stress/anxiety = 9 (15%) Work, other external commitments = 9 (15%)

“The high expectations I set for myself, low confidence levels, procrastination, sometimes I feel like as a student I'm not able to give patients as good care as I would like due to my lack of experience.”

“Unwell parents, issues with own health, recent break up with partner. Other life pressures.”

Item	Responses n (%)
Personal factors decreasing stress/anxiety (n = 63)	Support from family, friends, others = 24 (38%) Exercise = 12 (19%) Sufficient preparation/organisation = 11 (18%) Sleep, diet, relaxation = 10 (16%)

“Having supporting people around you and reducing the load of other things in your life made it easier to focus on placement.”

“Meditation, exercise, counselling, talking with friends.”

“Catching up with friends on the weekend, going to the gym most days. Taking the time each afternoon to chill out.”

Item	Responses n (%)
Did stress/anxiety affect performance? (n = 69)	Yes = 47 (68%) Negatively = 42 (61%) Positively = 5 (7%) No = 19 (28%)

“Excessive high levels of anxiety have really clouded my cognition. Have not been 100% and have not been able to demonstrate what I'm capable of to the point of being a borderline fail for the first time in my life.”

“... high anxiety levels makes my brain feel foggy and I can't answer simple questions which makes me feel more anxious.”

Item	Responses n (%)
Coping strategies to manage stress/anxiety (n = 65)	Support from family, friends, others = 23 (35%) Having a break = 19 (29%) Exercise = 17 (26%) Sleep, diet = 19 (25%) Sufficient preparation/organisation = 13 (20%) Meditation, relaxation, calming strategies = 10 (15%)

“Exercise. Talking to friends and family. Taking one day off per week to do no study. Good sleep every night. Cut back work hours.”

“Venting to family members and going home on weekends, staying organised with my workload, trying to go to bed early, eat healthy and exercise etc.”

“Exercising, spending time with friends, cuddling my dogs.”

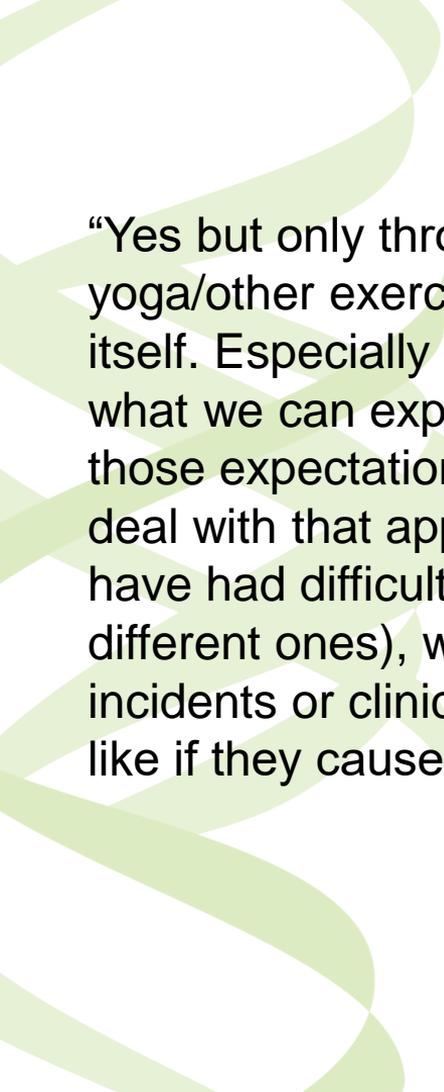
“Genuinely... an alcoholic beverage at the end of the day, time spent switching off.”

Item	Responses n (%)
Stress/anxiety compared to usual levels (n = 71)	A lot more = 19 (27%) Somewhat more = 34 (48%) Much the same = 13 (18%) Somewhat less = 4 (6%) A lot less = 1 (1%)

Item	Responses n (%)
Access to adequate resources and skills to manage excess stress/anxiety (n = 63)	Yes = 52 (83%) University or clinical educator = 21 (33%) Own resources = 19 (30%) Uncertain = 20 (32%) No = 10 (16%)

“... the university has provided us with strategies and potential sources to turn to if need be for managing stress during our studies, plus previous methods used during school studies have allowed me to appropriately and effectively manage my stress levels.”

... cont.



“Yes but only through ... my extracurricular activities such as meditation and yoga/other exercise. I feel like there could be improvements within the degree itself. Especially in preparing us for what our placements will actually be like, what we can expect and what will be expected of us. And if ever we feel like those expectations aren't being met, there should be avenues for how we can deal with that appropriately. Because as it stands I know a lot of people who have had difficulty on placements (not just this particular placement, but many different ones), who have felt like they needed to speak to someone about incidents or clinical educators behaviour but are too scared because they feel like if they cause a fuss their future employment may be affected.”

DISCUSSION

Clinical placements stressful for PT students.

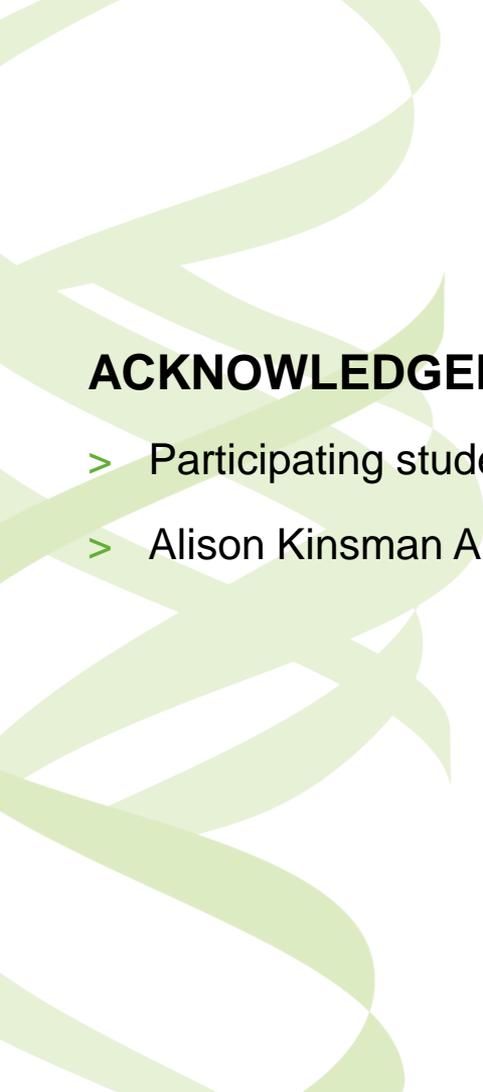
- > Assessment time and patient-related.
- > Support from clinical educator, peers, family, friends important.
- > Placement and personal factors influential, similar to previous research.
- > Adversely affects placement performance.
- > Coping strategies – support, having a break, exercise, diet, preparation, relaxation.
- > Awareness of resources.

LIMITATIONS

- > Sample from one university only.
- > Drop off in response rate over time.
- > Measuring stress/anxiety multifaceted and difficult.

IMPLICATIONS

- > Measure baseline stress/anxiety and target those at risk?
- > Openly discuss stress/anxiety during placements.
- > Regular and frequent reminder re resources for managing excessive stress/anxiety.
- > Reinforce coping strategies.
- > Modification of curriculum and/or clinical placement structure?



ACKNOWLEDGEMENTS

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