

Assessing Stress Endured by Students Throughout Their Nursing Education at Alriyada College for Health Sciences Using AMOS

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Abstract

Stress is a universal problem among nursing students it generally arises from new clinical experiences that students endure, as well as the challenging academic workload offered concurrently with clinical and personal stressors the students face in their everyday lives. **Objective:** This study was carried out to assess stress endured by students throughout their nursing education at Alriyada College for Health Sciences **Methodology:** The study was conducted in a descriptive cross-sectional design carried out with 233 nursing students in Alriyada College for Health Sciences. In the data collection, 'Stress in Nurse Education Questionnaires (SINE)' was used. For the analysis of the data, descriptive statistics, Student t test, One-way ANOVA, and Pearson correlation were used. The significance level was set at $p < 0.05$ for all statistical tests. The correlation and regression between each question of the Academic and practice stress questionnaire and latent predicate Academic and practical stress identified by the AMOS program. **Results:** The majority of students (89.2%) liked the profession while studying 84.3% liked clinical practice whereas more than three-quarters of them 78.9 % agreed that the nursing education curriculum is heavy. It was found that more than half of students suffer from moderate levels of stress (68%) , academic stress represents 69.5% and practical stress percentage was 70%. Most of the studied students showed a significant relation between academic and practical stress with age and educational level (0.024*, 0.014*) (0.049*,0.018*) respectively and there is an appositve strong correlation between academic stress and practical stress (pearson correlation 0.750**) strong correlation. It was also, found that inadequate support from tutors has an appositve strong correlation with academic stress $r=.72$ $B=1.38$. Feeling inadequately prepared to help with the emotional needs of a patient and his family has appositve strong correlation with practical stress ($r=.72$ $B=1.38$). **Conclusions:** As a result of this study, it was determined that the stress experienced by the students during their nursing education was moderate level.

Keywords: Nursing student, nursing education, stress.

Introduction

Nursing education is a rigorous and demanding process that requires students to acquire a wide range of knowledge and skills to provide safe and effective patient care(Bhurtun et al., 2021). However, the training and education required to become a nurse can also be a significant source of stress for nursing students. Stress can be defined as a state of mental or emotional strain or tension resulting from adverse or demanding circumstances. Stressors, on the other hand, are the specific events or chronic pressures that place demands on an individual, leading to stress. These stressors can be internal or external and may vary widely from person to

person. Stress is a common experience among nursing students, as they face numerous challenges and demands during their education (Lavoie-Tremblay et al., 2022). These challenges can include heavy workloads, long hours of study and clinical practice, high academic expectations, and the responsibility of caring for patients. Additionally, nursing students often have to balance their academic responsibilities with personal and family obligations, which can further contribute to their stress levels (Leslie et al., 2021).

The impact of stress on nursing students is multifaceted and can have negative consequences on their mental, emotional, and physical well-being. High levels of stress can

lead to burnout, anxiety, depression, and decreased academic performance. Moreover, stress can also affect the quality of patient care provided by nursing students, as it can impair their ability to think critically, make sound decisions, and communicate effectively with patients and their families. Understanding the factors that contribute to stress among nursing students is crucial to developing effective interventions and support systems to mitigate its negative effects. Several studies have identified various stressors experienced by nursing students, including academic demands, clinical experiences, lack of social support, and fear of making mistakes (Yuhuan et al., 2022). However, it is important to note that stress levels can vary among individuals and can be influenced by personal characteristics, coping strategies, and support systems. By examining the factors that contribute to stress as academic workload, clinical rotations, support systems, and personal factors, and the impact of stress on nursing students' well-being and academic performance (Adedokun, 2024).

Despite the importance of addressing these stressors, there is a lack of comprehensive research assessing the stress levels endured by nursing students throughout their education. This knowledge gap hinders the development of effective interventions and support mechanisms to promote student well-being and success. Existing studies have highlighted the prevalence and impact of stress on nursing students. Iqbal et al., 2022, conducted a pilot study measuring stress levels across nursing students, demonstrating the high levels of stress experienced by nursing students (Iqbal et al., 2022). Zhang et al., 2022 explored the anxiety experienced by nursing students in the clinical learning environment and proposed interventional strategies to manage stress. However, there is a need for a more comprehensive assessment of stress levels throughout the entire nursing education process. (Zhang et al., 2022). The limited research on stress levels in nursing students during their education creates several problems. Without a comprehensive understanding of the specific stressors that nursing students encounter, educational institutions and faculty members struggle to offer tailored support and interventions. This can lead to insufficient

support systems that do not effectively address the unique challenges and stressors experienced by nursing students (Lavoie-Tremblay et al., 2022). Secondly, the impact of stress on nursing students' academic performance and overall well-being requires further investigation. While studies have shown a correlation between stress and decreased academic performance (Deng et al., 2022), a more in-depth examination of this relationship is necessary. Understanding the specific ways in which stress affects nursing students' ability to learn, retain information, and perform in clinical settings can inform the development of effective strategies to improve academic outcomes. (Chust Hernández et al., 2022; Elsaid Awad Dawa et al., 2024). Therefore, there is a critical need for research that comprehensively assesses the stress levels experienced by nursing students throughout their education to address these issues effectively (Labrague, 2024).

This research will provide valuable insights into the experiences of nursing students and inform the development of interventions and support systems to promote their well-being. Nursing education can be a stressful experience for students, with potential negative consequences on their well-being and academic performance. Assessing the stress levels endured by nursing students throughout their training is essential to develop effective support systems to mitigate the negative effects of stress. By understanding the factors that contribute to stress and its impact on nursing students, educators, and healthcare institutions can work towards creating a supportive and nurturing learning environment for nursing students (Aryuwat et al., 2024).

Research Questions:

1. What are the factors contributing to stress among nursing students during nursing education among Al-Riyada College nursing students?
2. What is the relationship between the levels of stress experienced during nursing education and the socio-demographic characteristics of nursing students at Al-Riyada College?

Objective

The aim of this study is to assess the stress levels endured by nursing students throughout their nursing education among Al-Riyada College nursing students.

Methodology

Study Design: A quantitative, descriptive cross-sectional design was used in this study.

Study Setting: The present study was conducted at Al-Riyada College for Health Sciences, during the academic year 2023-2024 in Jeddah, kingdom of Saudi Arabia.

Sampling Techniques: The convenience sampling method was used for nursing students in the academic year 2023–2024. The study sample will consist of students who agree to participate in the study and answer all of the questions the sample size was 233 students as calculated by Rasoft, when a margin of error of 5% and a confidence level of 95%

Inclusion Criteria:

1. The student who is willing to participate in the study.
2. Students at different stages in nursing education
3. Participants who provide informed consent.

Exclusion Criteria:

1. Intern students.
2. Students on leave of absence.

Data Collection Instruments: one tool was used to collect data**Stress in Nurse Education Questionnaires (SINE):**

The questionnaire included two parts:

Part I: demographic questionnaire:

It is composed of items related to students as the students' characteristics as: age, gender, academic level, economic level, parents' education level, willingly selecting nursing education, liking the profession while studying, their opinion in clinical practice & education curriculum. (Annexure- A).

Part II: Stress in Nurse Education Questionnaires (SINE):

The Stress in Nursing Education Questionnaire (Rhead, 1995). The SINE questionnaire was adopted in the current study. It is a modified version of the Nurse Stress Scale, which incorporates academic stressors and was designed specifically for use within nursing education, to assess the stress experienced by nursing students during nursing education. The questionnaire of the four-point Likert type consists of 32 items. The questionnaire consists of two subdimensions that include 32 items, the response of each question was answered on a 5-point Likert-type scale. The score range for this questionnaire is 0–128, and higher scores indicate greater stress. (Rhead, 1995)

Scoring system

- Mild stress >42
- Moderate 43-84
- Sever stress <85

Data Collection Process:

- The investigators obtained written permission from the authorities of the college, before the collection of data. The purpose of the study was explained to the students and informed consent was obtained. To gain their cooperation, all subjects were guaranteed confidentiality. The data will be collected from the students were resting in their classes in break time.
- The researchers made contact with the Educational Affairs Department and obtained permission to meet students during class time or even in the lobby. Every student was given an informed consent form and the characteristics assessment questionnaire before the distribution of the questionnaires, by the primary researcher. Participants' voluntary consent was explained as well as their right to withdraw from the study at any time without consequence.
- The data was collected by means of questionnaires distributed. The researcher was the only person distributing and responding to concerns.
- Participation will take approximately 15 - 20

minutes to fill up the Questionnaire.

Pilot study:

A pilot study was conducted for 10% (24 participants) to clarify the validity of the questionnaires and to test the research feasibility, clarity, internal consistency, and objectivity of the tools as well as to estimate the time needed for data collection. The modifications were done accordingly. The study sample did not contain any of the pilot study's samples.

Statistical Data Analysis:

The researcher made data coding easy to enter into the computer by using Statistical

Package for Social Sciences (SPSS for Windows, version 25). Descriptive statistics were applied such as frequency, percentages, mean, and standard deviation. Reliability of the study tools was done using Cronbach's Alpha. A significant level value was considered when $p < 0.05$ and a highly significant level value was considered when $p < 0.001$. No statistical significance difference was considered when $p > 0.05$.

Table I shows Factors analysis and validity of the questionnaire

There is strong validity of the questionnaire where whereas the KMO test for academic stress questionnaire and Practical stress questionnaire were 0.904, 0.915 respectively.

Bartlett's Test of Sphericity significance was 0 and Cronbach's Alpha was 0.903, and 0.927 respectively.

Items	Total	Academic stress questionnaire	Practical stress questionnaire
Kaiser-Meyer-Olkin Measure of Sampling Adequacy. (KMO)	0.927	0.904	0.915
Bartlett's Test of Sphericity significant	0.000	0.000	0.000
Cronbach's Alpha Validity	0.949	0.903	0.927

Ethical Consideration:

Permission to carry out the study was obtained from the administration after explaining the aim of the study. The consent form was provided to participants, and obtained after explaining to them about their rights to participate, refuse, or withdraw at any time. Total confidentiality of any obtained data is guaranteed. The data that was collected did not include names or identifying personal data. Moreover, information obtained from students was treated confidentially and privacy was assured for all participants, each of them had a code to ensure the anonymity of collected data.

Results

Table (II): Shows frequency distribution of participants according to demographic characteristics. More than half of the studied students (53.4%) had an age range between 22 and 24 years and middle economic level (53.4%, 64.1%) respectively and 40.4% of the studied students were third year of college. Around one-third of them had university

mother and father educational level status (32.3, 31.8%) respectively, while more than half had low educational level. Additionally, most of the studied students (91.5%) were willingly selecting nursing education. The majority of students (89.2%) liked the profession while studying 84.3% liked clinical practice whereas more than three-quarters of them 78.9 % agreed that the nursing education curriculum is heavy. **Table (III): Describes the Total Variance Explained by Questionnaire.** The questionnaire was divided into 2 factors which explain 41.66% total Variance (Figure 1, Table IV) **Table IV Parades Stress in Nursing Education questionnaire (SINE), and sub-scale score.** It was found that more than half of students suffer from moderate levels of stress (68%) with which academic stress representing 69.5% and practical stress percentage was 70%. **Table V Presents a comparison between studied students' Academic stress and the Practical stress of participants according to demographic characteristics (one-way ANOVA).** Most of the studied students showed a significant

relation between academic and practical stress with age and educational level (0.024*, 0.014*) (0.049*, 0.018*) respectively. **Table VI, Figure 2: Configures the Correlations between Academic stress and Practical stress.** There is an appositve strong correlation between academic stress and practical stress Pearson Correlation 0.750** strong correlation. **Figure 3,4,5,6,7:** Displays A strong correlation between academic stress and practical stress and students age $R^2 = 0.706$, educational level $R^2 = 0.714$, economic level $R^2 = 0.775$, Mathers' education level $R^2 = 0.861$ and father's education level $R^2 = 0.761$ **Figure 8,9:** Illustrates the correlation and regression

between each question of Academic stress questionnaire and latent predicate Academic stress by using AMOS program regarding it was found that inadequate support from tutors has appositve strong correlation with academic stress $r = .72$ $B = 1.38$. **Figure 10,11:** Explains the correlation and regression between each question of the Practical stress questionnaire and latent predicate practical stress by using the AMOS program, it was found that feeling inadequately prepared to help with the emotional needs of a patient and his family has an appositve strong correlation with practical stress $r = .72$ $B = 1.38$.

Table (II): Shows the frequency distribution of participants according to demographic characteristic

Demographic characteristic		Frequency	Percent
Age by years	18< 20	23	10.3
	20<22	66	29.6
	22< 24	119	53.4
	>24	15	6.7
Your educational level	first year of college.	29	13.0
	second year of college	39	17.5
	the third year of college	90	40.4
	fourth year of college	65	29.1
Economic level	Good	71	31.8
	Middle.	143	64.1
	Bad.	9	4.0
Mother education level	Illiterate	46	20.6
	Primary education	56	25.1
	High school	49	22.0
	University	72	32.3
Father's education level	Illiterate	29	13.0
	Primary education	52	23.3
	High school	71	31.8
	University	71	31.8
Are you willingly selecting nursing education?	Yes	204	91.5
	No	19	8.5
Do you like the profession while studying?	Yes	199	89.2
	No	24	10.8
Do you like clinical practice?	Yes	188	84.3
	No	35	15.7
Is the nursing education curriculum heavy?	Yes	176	78.9
	No	47	21.1

Table III shows the Total Variance Explained by the questionnaire

The questionnaire was divided into 2 factors which explain 41.66% total Variance (Figure 7, Table V)

Total Variance Explained (jumping point)									
Factor	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	12.515	39.109	39.109	11.969	37.404	37.404	5.189	16.217	16.217
2	1.948	6.087	45.196	1.363	4.258	41.662	2.542	7.944	24.161
3	1.399	4.371	49.567	.932	2.912	44.574	2.496	7.799	31.960
4	1.236	3.862	53.429	.680	2.126	46.700	2.218	6.930	38.890
5	1.085	3.390	56.819	.827	2.584	49.284	2.167	6.770	45.660
6	1.067	3.333	60.153	.593	1.852	51.136	1.752	5.475	51.136
7	.987	3.083	63.236						
8	.928	2.899	66.135						
9	.866	2.706	68.841						
10	.786	2.458	71.299						
11	.702	2.195	73.494						
12	.690	2.156	75.649						
13	.661	2.066	77.716						
14	.636	1.988	79.704						
15	.587	1.834	81.538						
16	.550	1.720	83.258						
17	.544	1.699	84.957						
18	.495	1.547	86.504						
19	.438	1.368	87.871						
20	.432	1.349	89.220						
21	.397	1.240	90.460						
22	.379	1.185	91.645						
23	.368	1.150	92.795						
24	.346	1.081	93.877						
25	.312	.975	94.851						
26	.294	.919	95.771						
27	.292	.913	96.684						
28	.250	.781	97.465						
29	.236	.737	98.202						
30	.212	.664	98.866						
31	.193	.605	99.470						
32	.170	.530	100.000						

Total Variance Explained (jumping point)									
Factor	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	12.515	39.109	39.109	11.969	37.404	37.404	5.189	16.217	16.217
2	1.948	6.087	45.196	1.363	4.258	41.662	2.542	7.944	24.161
3	1.399	4.371	49.567	.932	2.912	44.574	2.496	7.799	31.960
4	1.236	3.862	53.429	.680	2.126	46.700	2.218	6.930	38.890
5	1.085	3.390	56.819	.827	2.584	49.284	2.167	6.770	45.660
6	1.067	3.333	60.153	.593	1.852	51.136	1.752	5.475	51.136
7	.987	3.083	63.236						
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28	.250	.781	97.465						
29	.236	.737	98.202						
30	.212	.664	98.866						
31	.193	.605	99.470						
Extraction Method: Maximum Likelihood.									

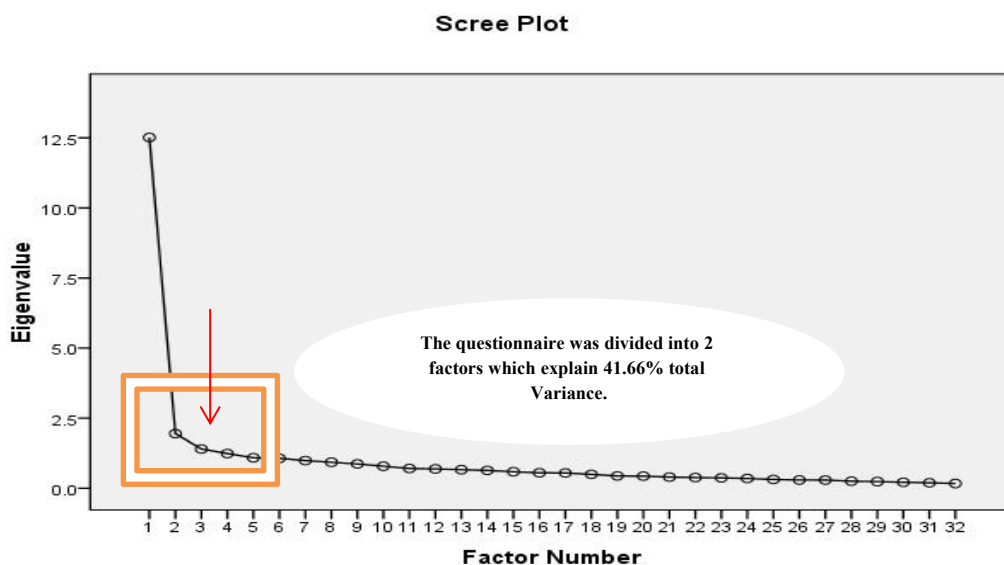


Figure 1: Elbow point

Table (IV): Shows the Stress in the nursing education questionnaire (SINE) and sub-scale score.

	SINE	%	Practice stress	%	academic stress	%
Mild>42	29	13	42	19	39	17.5
Moderate43-84	151	68	156	70	155	69.5
Sever<85	43	19	25	11	29	13
number	223	100	223	100	223	100
max	116		59		57	
min	10		4		6	
Mean ±SD	SD	59.4±19.6	SD	29.8±9.9	SD	29.5±9.9

Table (V): Shows a comparison between studied students' Academic stress and the Practical stress of participants according to demographic characteristics (one-way ANOVA)

Variables		Academic stress	Sig	Practical stress	Sig
Age by years	18<20 years	29.65±10.465	0.024*	31.13±11.391	0.014*
	20-22 years	28.76±10.779		29.68±11.609	
	22> 24 years	28.96±8.609		28.19±10.533	
	> 24 years	37.13±14.412		37.93±12.809	
your educational level	First-year	28.69±13.821	0.049*	25.90±13.203	0.018*
	second year	28.85±9.255		27.77±11.753	
	the third year of college	27.99±9.716		29.16±10.685	
	fourth year	32.42±8.626		32.94±10.288	
economic level	Good	29.66±11.835	0.292	31.23±11.954	0.0054*
	Middle.	29.13±9.008		28.39±10.796	
	Bad.	34.56±11.081		35.78±11.421	
education level	Illiterate	30.98±11.180	0.584	29.28±12.192	0.952
	Primary education	28.30±8.095		29.16±9.818	
	High school	30.00±10.932		30.37±10.756	
	University	29.21±10.206		29.60±12.303	
father's education level	Illiterate	31.10±11.490	0.504	28.93±13.323	0.912
	Primary education	29.88±10.439		29.98±9.745	
	High school	30.03±10.298		30.28±11.265	
	University	28.10±8.976		28.89±11.681	
Are you willingly selecting nursing education?	Yes	29.54±9.544	0.973	29.58±10.963	0.954
	No	29.26±15.033		29.74±14.787	
Do you like the profession while studying?	Yes	29.67±9.968	0.515	29.72±11.088	0.617
	No	28.25±11.121		28.50±13.125	
Do you like clinical practice?	Yes	29.38±9.968	0.926	29.53±10.957	0.855
	No	30.29±10.786		29.91±13.152	
Is the nursing education curriculum heavy?	Yes	29.25±9.537	0.440	29.77±10.954	0.645
	No	30.53±11.962		28.91±12.606	

Table (VI): Correlations between Academic stress and Practical stress (person correlation)

**. Correlation is significant at the 0.01 level (2-tailed).	Academic stress	Practical stress
	Pearson Correlation	0.750** Strong correlation
	Sig. (2-tailed)	0.000
	N	223

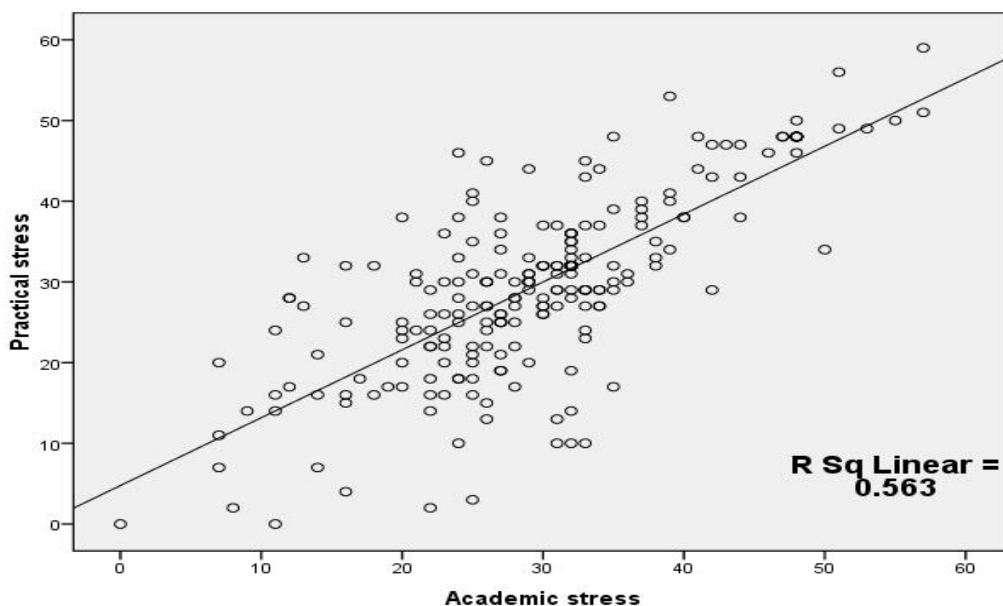
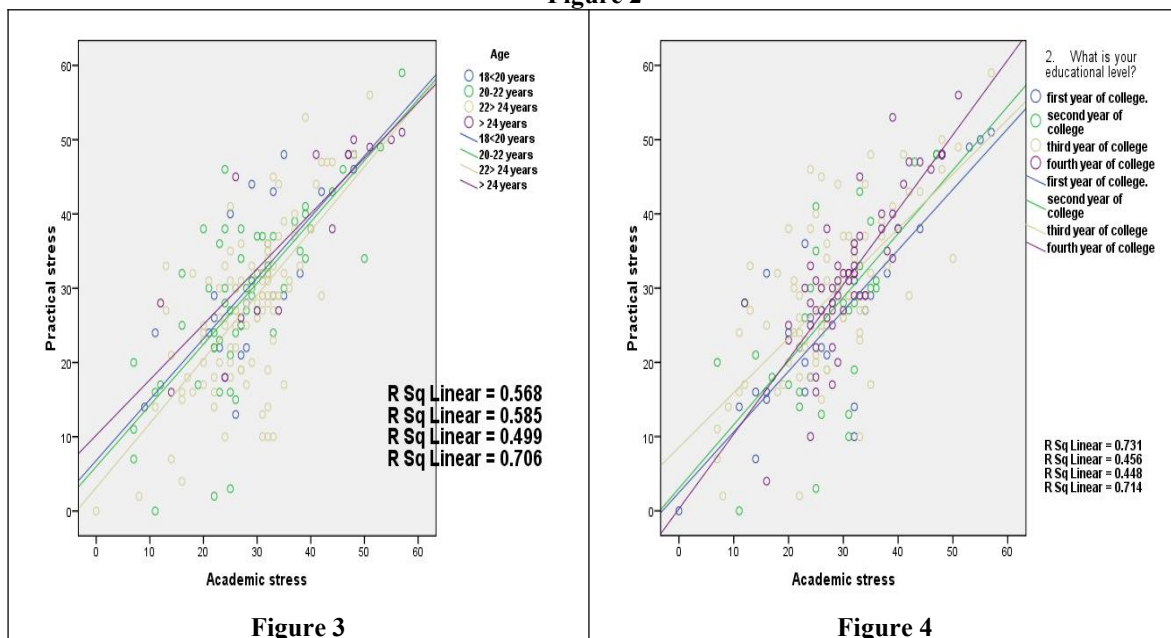


Figure 2



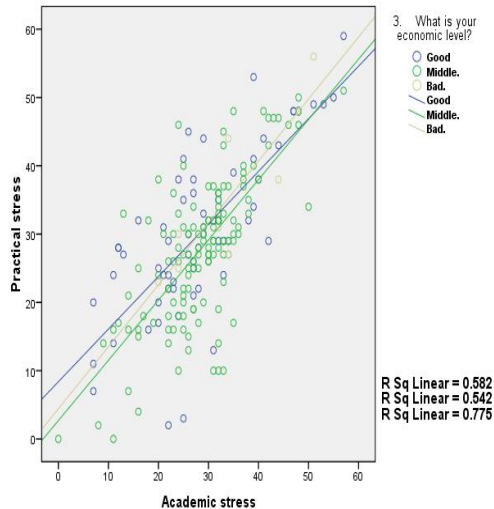


Figure 5

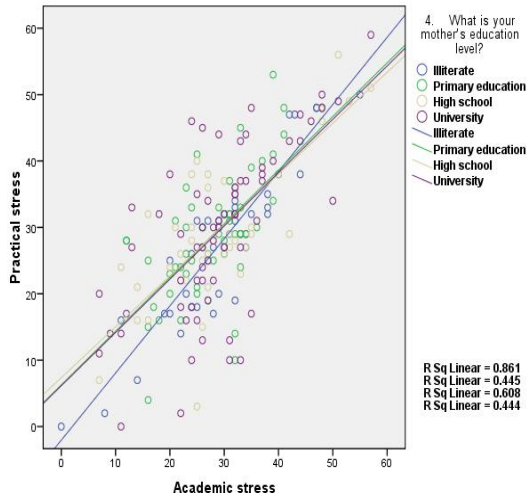


Figure 6

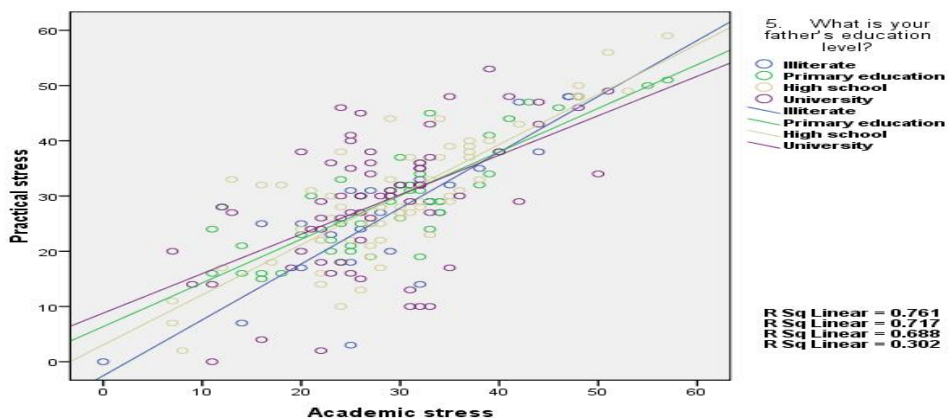
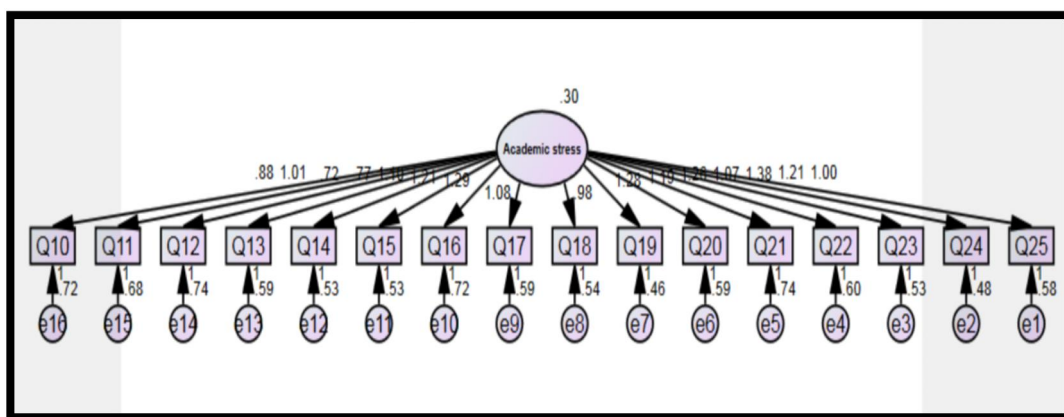


Figure 7



Beta coefficient + - Figure 8

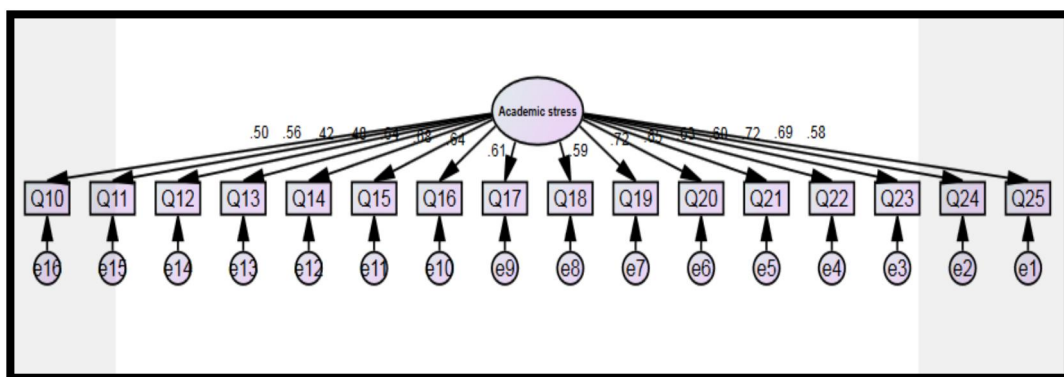


Figure 9

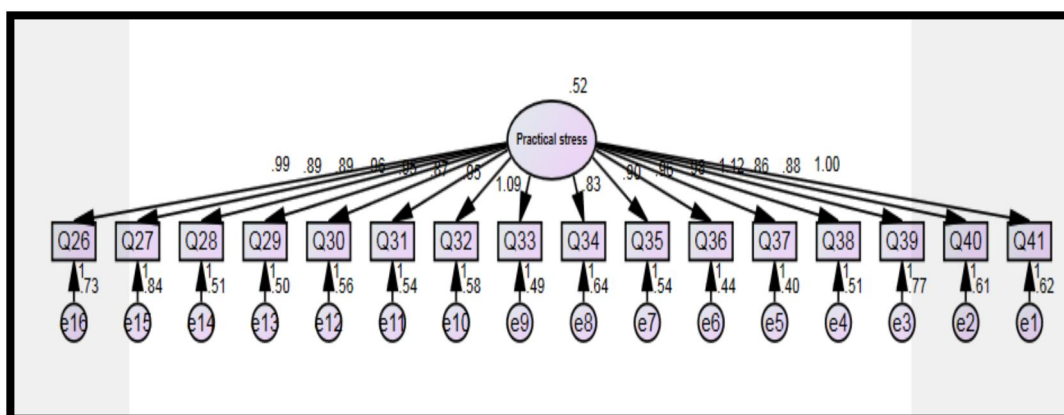


Figure 10

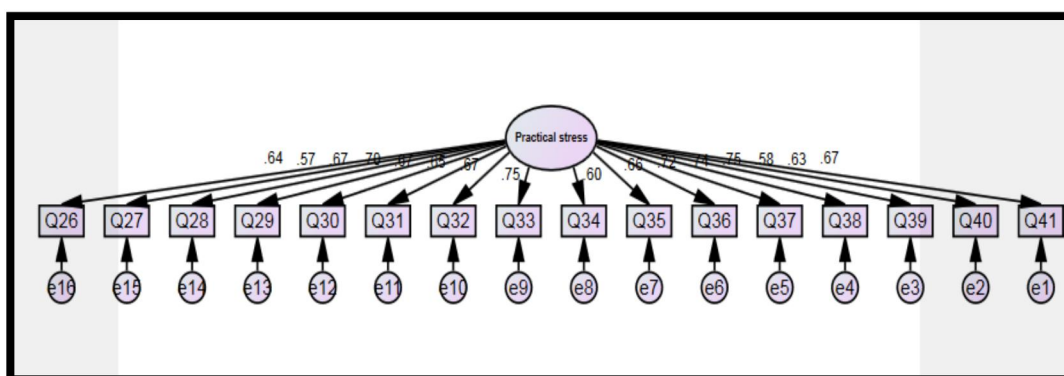


Figure 11

Discussion:

The general objective of this study was to assess stress endured by students throughout their nursing education at Alriyada Collage for Health Sciences This particular chapter will present a discussion of the significant findings of the study.

Demographic characteristic

The findings of the study revealed that more than half of the students had an age range between 22 to 24 years while the economic level was middle. These findings support previous research which found that the average age of the

students who included in the study was 23.4 years (Mussi et al., 2020). In terms of the economic level, a study done by Kaplan and his colleagues (2023) found that more than half of the students had a moderate economic level (Kaplan et al., 2023).

This study found that most of the students were in their third year of college. The present finding seems to be consistent with another study which found that almost half of the students are in their third academic year (Neumbe et al., 2023).

The results of the study indicated that a significant number of the student's parents had a low level of education. The present finding came online with other research which found that the majority of students' parents graduated from primary school (Kaplan et al., 2023).

Nursing students whose parents have a low level of education may represent a group that is breaking the cycle of limited educational opportunities in their families. This could reflect their determination, resilience, and access to support systems (e.g., scholarships, mentorship, or community programs) that enable them to pursue higher education. This finding could highlight the transformative potential of nursing education in providing upward mobility for individuals from disadvantaged backgrounds. Additionally, the findings of this study reveal that a significant majority of the students willingly choose nursing education. This finding is in the same line with another study which found that most students chose a nursing degree as their first option for university studies (Hernández et al., 2022). The results of the study indicated that most of the students like the nursing profession while studying. This result seems to be consistent with another study done by Neumbe and his colleague (2023) which found that more than half of the students who were included in the study had a positive attitude toward the nursing profession (Neumbe et al., 2023). Furthermore, the study findings revealed that a significant number of the students liked the clinical practice. This result is congruent with a qualitative study which found that the students who were in the study felt a positive emotion toward clinical practice, particularly related to the patient's improvement and their connection with the nursing profession (González-García et al., 2020). Lastly, the findings of this study indicated

that more than three-quarters of the students agreed that the nursing education curriculum is heavy. This finding seems to be inconsistent with the study done in Jeddah Saudi Arabia, which found that a considerable number of students agreed that the nursing academic workload was heavy (Aghaei et al., 2021).

In addition, this study found that the student had moderate academic stress. This result may be due to the challenging academic workload such as frequent quizzes and assignments that are required during the studying of nursing. This finding is consistent with another study done at Ibn Sina National College for Medical Science in Jeddah, Saudi Arabia found that the student had a moderate level of academic stress (Allam, 2025).

Lastly, this study found that the student had moderate practical stress. A likely explanation is that the unfamiliar environment nursing students may face during the practical training, high patient expectations, and the pressure to apply theoretical knowledge to practical situations. This result seems to be consistent with another study which found that the students had moderate levels of practical stress (Mohamed et al., 2024).

The Correlations between Academic stress and Practical stress

In addition, this study found that there was a positive and significant relationship between academic stress and practical stress. A likely explanation is that the students face high expectations in both academic and practical sides as they are expected to maintain good academic standards as the profession involves life-and-death situations. This finding is in the same line with a cross-sectional study done among 318 nursing students found that there is a positive strong correlation between academic stress and practical stress (Senturk & Dogan, 2018).

Comparison between studied students' Academic stress and Practical stress of participants according to demographic characteristics.

The current study found that there was a significant difference between academic and practical stress with age. This result may be due to the students' adjustment to the academic and practical demands in this period of age which may affect their levels of stress. This result is contestant with another study which found that

there was a relationship between levels of stress and student age (**Aljohani et al., 2021**). Furthermore, the current study found that there was a significant difference between academic and practical stress with educational level. This finding could reflect the fact that students in different levels of nursing education could be more exposed to numerous academic and practical stressors such as more complex information and new clinical areas with serious patient conditions. Inconsistent with another study that found that students' academic stress was significantly correlated with the student's educational level (**Mohamed et al., 2024**). Additionally, another study found that there was a significant difference between practical stress and the level of education (**Aljohani et al., 2021**).

Furthermore, the findings of this study indicated that there was a strong correlation between academic stress and practical stress and economic level. This finding could be due to the pressure that the students face as it is a private college, and it may be stressful to maintain the costs of studying and focus on the challenging academic and practical workload. On the other hand, a study found that there is no significant relationship between economic level and nursing stress levels (**Aslan & Akturk, 2018**).

In addition, the findings of this study indicated that there was a strong correlation between academic stress and practical stress and mothers' education level and father's education level. A possible explanation is that when parents have high levels of education that may affect the student's way of dealing with academic and practical stress and demonstrate a further constructive approach to solving the stressors. On the other hand, students from families with low educational attainment may face significant barriers to accessing nursing education, such as financial constraints, lack of academic preparation, or limited knowledge about the application process. The presence of a significant number of such students in nursing programs could indicate that targeted efforts (e.g., financial aid, outreach programs, or academic support) are helping to overcome these barriers, but there may still be room for improvement. Many of these nursing students may be first-generation college students, meaning they are the first in their families to pursue higher education. These students often face unique challenges, such as navigating the

complexities of higher education without familial guidance, balancing family responsibilities, or feeling out of place in academic settings and these challenges contribute to students' stress levels. Another study found that there is a relationship between the mother's education level while there is no relationship between the father's level of education and nursing student stress levels (**Aslan & Akturk, 2018**).

The study results revealed a strong positive correlation between inadequate tutor support and academic stress among nursing students, emphasizing the critical role tutors play in guiding students through the rigorous demands of nursing programs. When tutors have no time to provide sufficient guidance, feedback, or encouragement, students often experience heightened anxiety, self-doubt, and frustration, which can lead to poor academic performance, burnout, or even attrition. Nursing students already face significant stress due to the challenging nature of their coursework and clinical responsibilities, and the lack of adequate support exacerbates these pressures these results come online with a study done by Mazalova who found that Nursing students' perceived stress and clinical learning experience when they hindered with no enough tutorial support. (**Mazalová et al., 2022**).

It was found also, that feeling inadequately prepared to address the emotional needs of patients and their families has a strong positive correlation with practical stress among nursing students and healthcare professionals. This lack of preparedness often stems from insufficient training in communication skills, empathy, and emotional support, leaving individuals feeling overwhelmed and uncertain in emotionally charged situations. As a result, they may experience heightened stress, self-doubt, and burnout, particularly when dealing with sensitive scenarios such as end-of-life care or delivering difficult news. Addressing this issue requires enhanced training programs that focus on emotional intelligence, patient-centered communication, and coping strategies to better equip healthcare workers to manage both their patients' emotional needs and their stress levels effectively, these results are supported also by (**Ramluggun et al., 2023**).

Implications For Nursing Practice

Assessing the stress endured by students throughout their nursing education has significant implications for nursing practice. Understanding the sources and levels of stress can help educators and healthcare institutions develop targeted interventions to support students' mental and emotional well-being, ultimately fostering resilience and reducing burnout. By identifying stressors such as academic pressure, clinical demands, and work-life balance challenges, nursing programs can implement strategies like mentorship, counseling services, and stress management workshops. This proactive approach not only enhances students' ability to cope but also prepares them to manage stress in their future nursing roles, promoting a healthier work environment and improving patient care outcomes. Addressing student stress is essential for cultivating a sustainable nursing workforce capable of delivering high-quality care in demanding healthcare settings.

Conclusion and Recommendations

In **conclusion**, the present study highlights the significant impact of academic, and clinical pressure on students' stress, mental health, and overall well-being. Findings underscore the need for nursing programs to prioritize stress assessment and implement evidence-based interventions, such as peer support groups, mindfulness training, and accessible counseling services, to mitigate these challenges. **Recommendations** include integrating stress management education into the curriculum, fostering a supportive learning environment, and conducting regular evaluations to identify at-risk students. By addressing these issues proactively, the faculty can enhance students' resilience, academic success, and preparedness for the demands of the nursing profession, ultimately contributing to a healthier workforce and improved patient care outcomes.

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