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Abstract

Background: Psychiatric/mental health nursing is one of the core courses for undergraduate nursing students, but the complex and abstract nature of much of the psychiatric mental health course content makes it a challenge for many students. The aim was to examine the relationship between academic stress and self-control among faculty of nursing students. Descriptive co-relational design was utilized to achieve the aim of the study. This study was carried out at Faculty of Nursing, Menoufia University. A convenient sample of 180 students selected from the previous selected setting. Three tools were used for data collection (tool one): A structured interviewing questionnaire to assess socio-demographic characteristics of the students as age, gender, residence and parent's education, (tool two): Nursing education stress scale (academic stress subscale), (tool three): Self-control scale. Results: There was a highly statistically significant relationship between academic stress and self-control among faculty of nursing students. Conclusion: It was concluded that there was a highly statistically significant negative correlation between academic stress and self-control among faculty of nursing should be given to the student to help them relive their academic stress and disturbed levels of self-control.

Keywords: Academic stress; Self-control; Nursing students.

INTRODUCTION

Nursing is one of the most stressful professions in the world. Nursing students face stressful events in their study period that lead to negative consequences in their academic, professional and personal life (Damayanthi, 2014). In addition to class room learning, they have to acquire skills in laboratories and clinical settings, and undergo extensive evaluation processes consisting of theory and practical examinations that lead to a complex learning environment. Evidence indicates that there is an inverse relationship between anxiety and lack of professional knowledge and skills, poor patient care and clinical performance among nursing students (Rathnayake and Ekanayaka, 2016).

Nursing colleges are now recognized as a stressful environment that often exerts a negative effect on the academic performance and psychological well-being of the students. Too much stress can cause physical and mental health problems, reduce self-esteem and may affect students' academic achievement (Al-Gamal, Alhosain, and Alsunaye, 2018).

Academic stress is the anxiety and stress that comes from schooling and education. Students report experiencing academic stress at predictable times each semester with the greatest sources of academic stress resulting from taking and studying for exams, grade competition, and the large amount of content to master in a small amount of time. There are lot of

stress related to studies, homework, tests, reading, concentration and other academic competitions. Student faces a lot of stress due to imbalance of academic and social performance and time management for extracurricular activities (Ramadan and Ahmed, 2015). Academic stress is very common as the students are more worried about their carrier. Student academic stress level also depends a lot on attitude of teachers towards them. Fear of academic failure related to these tasks is a definite stressor. The stress level among students varies when work is given as challenges or threat. The pressure to perform well in the examination or test and time allocated makes academic environment very stressful (Nazir and Jan, 2017).

Students in psychiatric and mental health nursing courses can be a challenging task. Until students experience their first interaction with a patient who has psychiatric problems, they may not know what to expect. The problems of nursing students regarding psychiatric nursing course, which illustrated as fears concerning building relationships with psychiatric patients, uncertainties of following ambiguous, knowledge, lack of abstract guidance, feelings of lack of competency and limitation (Vandyk, Lalonde, Merali, Wright, Bajnok, et al., 2018).

Academic stress can influence one's level of selfcontrol. On the contrary, self-control also influences how an individual reacts to stress. Students with high self-control have better ability to cope with stressful events (Galla and Wood, 2015). Students with lower stress are better self-regulators. In addition, students with chronic stress frequently struggle to self-regulate caused by their inability to match their arousal state with their current circumstances (Hj Ramli, Alavi, Mehrinezhad, and Ahmadi, 2018). It was found that students with higher self-control were better able to be mindful and think before reacting. Even when experiencing the same amount of stress, students with higher self-control exhibited fewer symptoms than those with lower self-control, affirming that students with higher self-control are better able to cope with stressful situations (Reed, 2017).

Self-control refers to a fundamental human capacity to control one's thoughts, feelings, and behaviors by post decisional inhibition, which allows individuals to overcome momentary temptations in service of future-oriented goals (Grund and Carstens, 2019). To achieve successful self-control, one must have both intrinsic and extrinsic motivation consistent with their goal of achieving behavior for a certain period. Higher self-control is associated with high well-being, including good mental health, ability to maintain effective social relationships, and adaptive functioning in home or college. Self-control abilities facilitate goal oriented actions and optimal adjusting to emotional and cognitive challenging stimulating throughout successful regulation of feelings, emotions, behaviors, and cognitions (Baker, 2018).

Successful self-control can be achieved through mindfulness that can play an important role in our daily functioning. Mindfulness can be a helpful practice to handle the process of self-control. It means the state of being aware of the present feeling and the surrounding without having the sense of being judgmental. Because it plays a significant role in reducing stress, improving emotion-regulation, and developing greater awareness. It is suggested that mindfulness training could help students to stay focused in class, because college is filled with distractions and tend to act with awareness. Students with higher levels of mindfulness often have high levels of self-control (Yusainy, Chan, Hikmiah, and Anggono, 2019).

It is important for the clinical instructors and clinical educators to help the students feel comfortable working in the mental health environment and is able to learn from their experiences. They can do this by providing support and encouragement, assisting the student to identify transferable skills that they can take away with them to whatever clinical setting during their career, identifying a starting point with students that consider the student's current perceptions of mental health nursing and then foster the connection between skills regardless of setting. Clinical instructors indicated that this is important so the student departs with a positive image of mental health nursing and the need to care for the 'person' in all settings (Hooper, Browne, and O'Brien, 2016). So, the aim of this study was to examine the relationship between academic stress and self-control among Faculty of Nursing Students.

The Significance of the Study

The prevalence of academic stress among nursing students in Egypt was 31.1%, 48.2%, and 20.7% for low, moderate, and high academic stress levels respectively (Mayhob and Hashem, 2019). Today stress levels among nursing students have been going

up dangerously due to the pressure of their academic or cultural activities. The process of education is a very stressful experience and nursing students encounter a great deal of academic, personal and social stress during their academic activities. Although some degree of stress is essential to stimulate and motivate students to achieve their goals, academic stress can be a barrier for concentrating, problem solving, decision making, and other necessary abilities for students' learning. These problems lead to poor psychological wellbeing that interfere with learning and limit the academic performance of students and lower productivity, increase suicidal thoughts and minimize quality of life (Manap, Hamid, and Ghani, 2019).

Therefore, further teaching and learning methods are needed to improve students' competency and to prevent students' from having negative experience around psychiatric nursing practicum (Yong-Shian, Selvarajan, Chng, Tan, and Yobas, 2016).

The Current Study was Aimed at

Examine the relationship between academic stress and self-control among Faculty of Nursing Students.

Research Questions

What is the level of academic stress among Faculty of Nursing Students?

What is the relationship between academic stress and self-control among Faculty of Nursing students?

Theoretical and Operational Definitions

Academic stress is theoretically defined as a state of distress induced by a student's appraisal of excessive academic demands i.e. overloaded homework, examinations (Shahrouri, 2016). It is the product of a combination of academic-related demands that exceed the adaptive resources available to an individual (Cole, Nonterah, Utsey, Hook, Hubbard, et al., 2015). Academic stress in the present study was operationally defined as the total score of students' academic stress that was measured by nursing education stress scale (academic stress subscale) which was developed by (Rhead, 1995), which is modified to be fit for psychiatric nursing students and used by the researcher.

Self-control is theoretically defined as a fundamental human capacity to control one's thoughts, feelings, and behaviors by post decisional inhibition, which allows individuals to overcome momentary temptations

in service of future-oriented goals (Grund and Carstens, 2019). Self-control in the present study was operationally defined as the score of students self-control that was measured by self-control scale which was developed by (Abdullah, 2007), and used by the researcher.

SUBJECTS AND METHOD

Research Design

Descriptive correlational design was employed to achieve the aim of the study.

Research Setting

This study was carried out at the Faculty of Nursing, Menoufia University.

Sample

Sample size was calculated at power 80%, confidence level 95%, and margin of error 5%, accordingly the calculated sample size was 180 students by using the following equation:

$n = [\text{DEFF*Np} (1-p)] / [(d^2/Z^2_{1-\alpha/2} * (N-1) + p*(1-p)]]$

Subjects

A convenient sample of 180 students was selected from the chosen setting who had the following inclusion and exclusion criteria Inclusion criteria: fourth year psychiatric nursing students, Exclusion criteria : students who have any history of chronic physical illness e.g. diabetes mellitus or others and any history of psychiatric illness e.g. depression because these illnesses may lead to stress and will interfere with the results.

Tools of Data Collection

The following tools were used to achieve the aim of the study:-

Tool one: A structured Interviewing Questionnaire

It was designed by the researcher based on pertinent literature to assess socio-demographic characteristics of the students it include students age, gender, residence and parent's education (Bahadır-Yılmaz, 2016).

Tool Two: Nursing Education Stress Scale (NESS)

It was developed by Rhead (1995) to assess education stress among nursing students generally. It was tested for its validity by a panel of experts. It was an English scale contains 32 items; the nursing education stress

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scale uses two subscales 16 items for each, first one to measure academic stress and second one to measure clinical training stress among nursing students in general. It was translated to Arabic and was translated back to English and modification done to be fit for psychiatric nursing students, Responses are rated on a 3-point Likert scale ranging from 1-3, "Disagree, partially agree, and fully agree". The academic stress subscale was used by the researcher

Scoring System

score less than 24 no academic stress, score range from 24-32 mild academic stress, score range from 33-40 moderate academic stress, score range from 41-48 refer to severe academic stress.

Tool Three: Self-Control Scale

This scale was originally developed by Abdullah (2007). It was an Arabic scale used to evaluate the self-control of adolescents. It consists of 26-items. Questions number 3, 4,11,12,16,17,20,25 with reversal score Responses are rated on a 4-point Likert scale ranging from 1-4, "Scarcely, sometimes, much, and too much".

Scoring System

Score below 39 refer to no self-control, score ranged from 39-65 refers to low self-control, score ranged from 66-91 refers to moderate self-control and score ranged from 92-104 refers to high or extremely self-control.

Validity of the Tools

The validity of the study tools were ascertained by a jury of five professors experts in the field of psychiatric nursing and psychiatric medicine to test their content validity and to examine the face validity in terms of whether that reflected the concepts intended to measure and to determine its clarity to reach consensus on the best form to be implemented. Following the judgment of the experts, some items were modified to fit the psychiatric nursing students.

Reliability of the Tools

The internal consistency of the questionnaire was calculated using Cronbach's alpha coefficients. The reliability of the tools were done using test - retest reliability and proved to be strongly reliable at 0.86 for tool two and at 0.90 for tool three.

Procedure

Administrative Approval

Before starting any step in the study, an administrative approval was obtained from directors of psychiatric nursing department after explanation of the purpose of the study.

Ethical Consideration

An informed consent was obtained from every participant who accepts to participate in the study after complete description of the aim, nature and confidentiality of the study.

A Pilot Study

A pilot study was conducted in order to test the reliability and validity of the questionnaire items and clarity of questions. A total of 10% of the sample were recruited for the pilot study. All subjects included in the pilot study met the inclusion criteria for. The pilot study revealed minimal modifications in the questionnaires. Subjects in the pilot study were excluded from the main study sample.

Data Collection

data collection was done by interviewing with the students at faculty of nursing in the lecture hall; each interview lasted for 30-40 minutes depending on the response of the interviewee. The data was collected from September 2018 to December 2018.

Statistical Analysis

The collected data were organized, tabulated and statistically analyzed using SPSS version 20.0. Graphic were done using excel program. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables. Mc Nemar test, Fischer exact test, Anova (F) test, Chi-square test (χ 2) and t-test were used. Level of significance was set as highly significant level as P value < 0.001 and significant level as P-value <0.05 while P value of >0.05 indicated non-significant.

Limitations of the study

No limitations had been found.

RESULTS

Table (1): Socio-demographic characteristics of the studied students (N =180): This table shows that the mean age of the studied students is 21.3 ± 0.58 ,

more than two third 68.9% are female, almost two third 66.1% are from rural areas, nearly half 45.0% their daily expenses are enough only, Almost all 95.0% are living with both parents ,their mean fathers age is 53.2±5.92, more than one third 37.8% their fathers education are university or high education, more than half of them 52.8% their fathers have governmental job, mean age of their mothers are 46.9±4.69, more than one third 34.4% their mothers education is university or high education, nearly three quarters 70.0% their mothers are not working, almost all 93.3% their parents relationship are understanding and respectful.

Figure 1: Academic stress levels among the studied students: This figure shows that there is mild and moderate academic stress among the studied students (42.2%, 50%) respectively.

Table(2):Relationshipbetweensocio-demographic characteristics and academic stresslevels of the studied students (N=180):This tablereveals that there is no statistically significant relationbetweensocio-demographiccharacteristicsandacademic stresslevels of the studied students, exceptfathereducationand fatherjobwith a university ornon-governmental job.

Figure 2: Self-control levels among the studied students: This figure shows that more than two thirds of the studied students (70.6%) have low self-control.

Table (3): Relation between socio-demographic characteristics and self-control levels among the studied students (N =180): This table reveals that there is no statistically significant relation between socio-demographic characteristics and self-control levels of the studied students except for student daily expense and father education, where no self-control is among students with daily expenses enough and save (70%), and students of father with university or higher education (46.7%).

Table (4): Relation between academic stress and self-control among the studied students (N = 180): This table reveals that there is a highly statistically significant relation between academic stress and self-control among the studied students at p-value (0.006).

Table (5): Correlation between academic stress and self-control (N =180): This table shows that there is a highly statistically significant negative correlation between academic stress and self-control levels at p- value (0.007). It means when academic stress levels increases self-control levels decreases.

	Socio-demographic characteristics	Studied st	udents (N=180)
		No.	%
Age / years	Mean ±SD	21	.3±0.58
	Range		20 - 22
Gender	Male	56	31.1
	Femal e	124	68.9
Residence	Urban	61	33.9
	Rural	119	66.1
Daily expense	Enough only	81	45.0
	Enough and save	78	43.3
	Not enough	21	11.7
Living with	Both parents	171	95.0
	Relatives	2	1.10
	Friends	7	3.90
Father age	Mean ±SD	53	3.2±5.92
	Range	2	42 - 72
Father education	Illiterate	32	17.8
	Primary	41	22.8
	Preparatory	14	7.80
	Secondary	25	13.9
	University or higher	68	37.8

 Table 1. Socio-demographic characteristics of the studied students (N = 180)
 Particular

Father job	Governmental employee	95	52.8
	Nongovernmental employee	56	31.1
	Not work	29	16.1
Mother age	Mean ±SD	46	.9±4.69
	Range	Z	40 - 61
Mother education	Illiterate	44	24.4
	Primary	38	21.1
	Preparatory	17	9.40
	Secondary	19	10.6
	University or higher	62	34.4
Mother job	Governmental employee	49	27.2
	Nongovernmental employee	5	2.80
	Not work	126	70.0
Parents relationship	Understanding and respectful	168	93.3
	Non understanding and non-respectful	12	6.70



Figure 1. Academic stress levels among the studied students.

Table 2. Relationship between socio-demographic characteristics and academic stress levels of the studied students (N=180)

Socio-demographic			Academic stress levels								
characteristics		No (N=3)		Mild (N=76)		Moderate (N=90)		Severe (N=11)		Test of sig.	P value
		No.	%	No.	%	No.	%	No.	%		
Age / years	Mean ±SD Range		±0.58 -22	21.4:	±0.57 -22		±0.55 -22		±0.56 -22	K= 0.227	0.821 (NS)
	Kange	20	-22	20	-22	20	-22	20	-22	0.227	(113)
Gender	Male Femal e	1 2	33.3 66.7	22 54	28.9 71.1	27 63	30.0 70.0	6 5	54.5 45.5	χ ² = 3.04	0.637 (NS)
Residence	Urban Rural	2 1	66.7 33.3	26 50	34.2 65.8	30 60	33.3 66.7	3 8	27.3 72.7	χ ²⁼ 1.66	0.644 (NS)
Daily expense	Enough only Enough and save Not enough	1 2 0	33.3 66.7 0.00	32 38 6	42.1 50.0 7.90	42 36 12	46.7 40.0 13.3	6 2 3	54.5 18.2 27.3	χ ²⁼ 7.29	0.295 (NS)
Living with	Both parents Relatives Friends	3 0 0	100 0.00 0.00	73 1 2	96.1 1.30 2.60	85 1 4	94.4 1.10 4.40	10 0 1	90.9 0.00 9.10	χ ² =1.48	0.960 (NS)
Father age	Mean ±SD Range		±5.25 - 66	53.4: 44	±6.27 - 63		±6.26 - 66		±6.28 - 63	K= 0.621	0.535 (NS)

Open Access Journal of Nursing V2. I1. 2019

					1		1	1			
Father	Illiterate	1	33.3	9	11.8	19	21.1	3	27.3	χ^2	0.040*
education	Primary	0	0.00	20	26.3	20	22.2	1	9.10	=21.8	(S)
	Preparatory	0	0.00	5	6.60	5	5.60	4	36.4		
	Secondary	1	33.3	12	15.8	10	11.1	2	18.2		
	University or	1	33.3	30	39.5	36	40.0	1	9.10		
	higher										
Father job	Governmental	2	66.7	34	44.7	57	63.3	2	18.2	χ^2	0.020*
	Nongovernmental	1	33.3	30	39.5	18	20.0	7	63.6	=14.9	(S)
	Not work	0	0.00	12	15.8	15	16.7	2	18.2		
Mother age	Mean ±SD	47.1	±4.52	46.9:	±4.79	46.7	±4.78	46.6	±4.66	K=	0.178
0	Range	42	- 55	40	-58	40	-58	40	-60	0.279	(NS)
Mother	Illiterate	1	33.3	17	22.4	22	24.4	4	36.4	χ²	0.550
education	Primary	0	0.00	17	22.4	18	20.0	3	27.3	=10.7	(NS)
	Preparatory	0	0.00	9	11.8	8	8.90	0	0.00		
	Secondary	1	33.3	6	7.90	9	10.0	3	27.3		
	University or	1	33.3	27	35.5	33	36.7	1	9.10		
	higher										
Mother job	Governmental	0	0.00	23	30.3	25	27.8	1	9.10	χ ²	0.604
	Nongovernmental	0	0.00	3	3.90	2	2.20	0	0.00	=4.54	(NS)
	Housewife	3	100	50	65.8	63	70.0	10	90.9		
Parents	Understanding	3	100	72	94.7	83	92.2	10	90.9	X2=	0.864
relationship	and respectful									0.737	(NS)
	Non	0	0.00	4	5.30	7	7.80	1	9.10		
	understanding										
	and non-										
	respectful										

K: Kruskal Wallis test S: Significant NS: Non significant



Figure 2. Self-control levels among the studied students

Table 3. Relation between socio-demographic characteristics and self-control levels among the studied students (N = 180)

Socio-demogra	Self-control levels								
		No (N=30)		Low (N=127)		Moderate (N=23)		χ ²	P value
		No.	%	No.	%	No.	%		
Age / years	Mean ±SD	21.6	±0.50	21.2±0.57		21.4±0.58		F	0.066
	Range	20 - 22		20 - 22		20 - 22		2.76	(NS)
Gender	Male	11	36.7	34	26.8	11	47.8	X2	0.103
	Female	19	63.3	93	73.2	12	52.2	4.54	(NS)

Residence	Urban	9	30.0	45	35.4	7	30.4	X2	0.794
	Rural	21	70.0	82	64.6	16	69.6	0.460	(NS)
Daily expense	Enough only	7	23.3	64	50.4	10	43.5	X2	0.013*
	Enough and save	21	70.0	49	38.6	8	34.8	12.6	(S)
	Not enough	2	6.70	14	11.0	5	21.7		
Living with	Both parents	29	96.7	120	94.5	22	95.7	X2	0.436
	Relatives	0	0.00	1	0.80	1	4.30	3.78	(NS)
	Friends	1	3.30	6	4.70	0	0.00		
Father age	Mean ±SD	54.6	±5.30	52.7	±5.39	53.4:	±6.51	F	0.453
	Range	45	- 63	44	- 66	42 -	- 72	0.796	(NS)
Father	Illiterate	3	10.0	20	15.7	9	39.1	X2	0.001**
education	Primary	4	13.3	35	27.6	2	8.70	25.1	(HS)
	Preparatory	1	3.30	8	6.30	5	21.7		
	Secondary	8	26.7	16	12.6	1	4.30		
	University or higher	14	46.7	48	37.8	6	26.1		
Father job	Governmental	14	46.7	71	55.9	10	43.5	X2	0.746
	Nongovernmental	11	36.7	37	29.1	8	34.8	1.94	(NS)
	Not work	5	16.7	19	15.0	5	21.7		
Mother age	Mean ±SD	48.0	±4.80	46.8	±4.00	46.9	±5.29	F	0.652
	Range	42	- 58		-58	40	-61	0.428	(NS)
Mother	Illiterate	4	13.3	33	26.0	7	30.4	X2	0.482
education	Primary	8	26.7	25	19.7	5	21.7	7.51	(NS)
	Preparatory	1	3.30	14	11.0	2	8.70		
	Secondary	4	13.3	11	8.70	4	17.4		
	University or higher	13	43.3	44	34.6	5	21.7		
Mother job	Governmental	9	30.0	33	26.0	7	30.4	X2	0.904
	Nongovernmental	1	3.30	4	3.10	0	0.00	1.04	(NS)
	Housewife	20	66.7	90	70.9	16	69.6		
Parents	Understanding and	28	93.3	120	94.5	20	87.0	X2	0.412
relationship	respectful							1.77	(NS)
	Non understanding	2	6.70	7	5.50	3	13.0		
	and non-respectful								

F: ANOVA test S: Significant NS: Non significant HS: highly significant

Studied variable	No (N=30)		Low (N=127)		Moderate (N=23)		χ ²	P value
	No.	%	No.	%				
Academic stress levels								
No	1	3.30	2	1.60	0	0.00		
Mild	18	60.0	53	41.7	5	21.7	18.2	0.006**
Moderate	11	36.7	66	52.0	13	56.5		(HS)
Severe	0	0.00	6	4.70	5	21.7		

** HS: highly significant

 Table 5. Correlation between academic stress and self-control (N =180)

S	tudied variable	Academic stress		
		r	P value	
	Self-control	-0.410	0.007**(HS)	

HS: highly significant

DISCUSSIONS

The academic context can put high demands on selfcontrol and thus cause psychological strain. Academic tasks may in general require high self-control, because lectures are often complicated, schedules are usually fixed not allowing for flexible planning and decision making, and academic projects are increasingly complex (Externbrink, Diestel, and Krings, 2019).¹ So the aim of this study was to examine the relationship between academic stress and self-control among Faculty of Nursing Students.

The results of the current study revealed that the mean age of the studied students is 21.3±0.58; more than two third 68.9% were female (table 1). This could be due the number of female students was higher than male students and the study was carried out among students of fourth year and this is appropriate age for them. This result in the same line with Elsayes and Obied (2018) they revealed that the highest percent of the participant nursing students (66%) aged between 21-23 years and majority of them (81.2%) were female. Also Dhanpal and Paul, (2015) they found that the significant numbers of students their age was 21 years and were females (80%). This result was contradicted with Ramadan & Ahmed (2015) they found that more than half of the studied sample was in age 19 years.

The results of the current study revealed that almost two third of the studied students 66.1% were from rural areas (table 1). This might be due to nature of the governorate which is filled up with rural areas and the high expense to live in urban area. This result was in harmony with Elsayes and Obied (2018) who studied" Association between senior nursing students' perceived stress and learning environment in clinical practice". They illustrated that high percent of the students (70.5%) lived in villages. This result contradicted with Ramadan and Ahmed (2015) they found that slightly more than half of the studied sample was from urban areas.

The results of the current study revealed that nearly half of the studied students 45.0% their daily expenses was enough only (table1). This might be due to the low living condition as a result of high expenses of life. This result was in harmony with Elsayes and Obied (2018) they illustrated that majority (84.8%) of the nursing students' family income was sufficient.

The results of the current study revealed that almost all of the studied students 95.0% are living with both parents, more than one third 37.8% their fathers education are university or high education, more than one third 34.4% their mothers education is university or high education(table 1). This might be due to nature of the culture in the governorate to be lived with both parents and the motivation from the parents to have high graduation. This result was contradicted with Ramadan and Ahmed (2015) they found that half of the participants 60.0% were live in separate home and father and mother educational level of the nursing students sample was secondary education.

The results of the current study revealed that the students mean father's age was 53.2±5.92 (table1). This result same with Ramadan and Ahmed (2015) they found that the student's father age was from 55 to less than 65 years old and mother age was from 45-55 year respectively.

The results of the current study revealed that there was a mild and moderate academic stress level among the studied students (figure 1). This might be due to the nature of the psychiatric nursing course, the over loaded with so many assignments to do and the nature of the clinical placement in psychiatric department which is known as anxious and stressful. This study was on the same line with Dhanpal and Paul (2015) they found that nursing students suffer from significant amount of academic stress and anxiety, academic stress level, 70% of respondents had more stress, 13.34% had average stress, and 16.66% had less stress. These findings were similar to the findings of a study conducted in Ireland with Mohebi, Sharifirad, Shahsiah, Botlani, Matlabi, et al. (2012) they revealed that student nurses were having moderate academic stress.

This result was also in the same line with Lu, Mumba, Lynch, Li, Hua, et al. (2019) they stated that physical status of the patients, condition of the client assigned, interaction with staff nurse, insufficient time, handling an emergency situation, being in a new environment and exposure to contagious diseases, are significantly associated with nursing student stress.

Moreover, this result was also in harmony with Yasmin, Hussain, Parveen, and Gilani (2018) they mentioned that academic and clinical stress sources and coping mechanisms are statistically significant, and their study was considered as a cornerstone that

gives strong support towards coping strategies of nursing student against academic and clinical stress. It highlighted that there were number of clinical and academic stressors that hinder good performance of student. These results substantiate the belief that aspects of the practice environment affect student nurse academic performance and most importantly, the quality of care delivered on clinical placement to the patient.

The result of the present study showed that there was a statistically significant relation between student father job and academic stress, where student of father with non- governmental job have severe academic stress (Table 2). This could be due to unemployed fathers were over loaded because they had many stressors and responsibilities toward home and childcare so they were anxious and may transferring it to their teens when dealing with them and possibly affect the style of coping with stress. This result was contradicted with Senturk and Dogan (2018) they determined that there was no statistically significant relation between father working condition and the academic and practical training stress. Moreover, Rathnayake and Ekanayaka (2016) they found that there was no relation between father job and academic stress among nursing students.

The result of the present study showed that there was a statistically significant relation between student father education and academic stress, where the high percentage of academic stress levels are among student of father with a university or high education (Table 2). This could be due to as the fathers were more educated they know the value of education and forcing and putting more stress on their teens to study hard. This result was in harmony with Amr, El-Gilany, El-Moafee, Salama, and Jimenez (2011) they found that there was a statistically significant association between the level of academic stress and socio-demographic variables such father's education It was observed that as parents' educational level increased, academic stress scores increased. This result was contradicted with Agacdiken, Mumcu-Bull, and Ozdelikara (2016) they found no statistically significant relation was determined between educational level of the nursing students' fathers and academic stress of nursing students. This result was contradicted also with Aslan and Akturk (2018) they found there was no relation between nursing student's fathers' education and their academic stress.

The result of the present study showed that more than two thirds of the studied students have low selfcontrol (figure 2). This could be due to the overstress that they were facing through life and the academic stress which they were experiencing. This result was also in harmony with de Angulo (2018) who found that most of the nursing students had low to moderate self-control.

The result of the present study showed that there was a statistically significant relation between student's daily expenses and self-control where no self-control is among students with daily expenses enough and save (table 3). This could be due to the nature of these students living in high economic class or the welfare of these students they are feeling that they are over other students and did not respect the values of self-control. This result was also contradicted with Yung (2012) they found that adolescents' monthly household income were not associated with selfcontrol at a statistically significant level. This result was contradicted with Kaygusuz, Duyan, Oksal, & Duvan, (2015) they revealed that the participants' their daily expenses have no impact on their selfcontrol.

The result of the present study showed that there was a statistically significant relation between student's fathers education and self-control where no selfcontrol is among students with father with university or higher education (table 3).This could be due to highly educated father may be busy with their work and don't have enough time for monitoring and teaching their teens the values of self-control. This result was contradicted with Jo & Zhang (2014) they found that there was no significant relation between parent's educational level and the self-control.

The result of the current study revealed that there was a highly statistically significant relation and negative correlation between academic stress and self-control levels of the experimental group post nursing intervention (Table 4). This could be due to the negative effect of stress on the student self-control; they may lose their control due to over stress. This result was in accordance with Kechter, Black, Riggs, Warren, Ritt-Olson, et al. (2019) they illustrated that high levels of stress are negatively associated with executive functioning, such as self-regulation and higher levels of perceived stress restricted the students' ability to utilize executive functioning skills,

such as critical thinking strategies for complex action and overrides emotional responses from engaging in goal-directed behavior.

Moreover, Gavriel-Fried, Ronen, Agbaria, Orkibi, and Hamama (2018) they revealed that conceptualization of self-control given as a set of skills that help people overcome stress and disturbing emotions, self-control skills are positively associated with positive emotions. Also the result was on the same line with Hj-Ramli, Alavi, Mehrinezhad, and Ahmadi (2018) they revealed that there was a significant relationship between academic stress and self-regulation. They showed that there was a significant negative relationship between academic stress and self-regulation among undergraduate students in Malaysia. In addition, a significant negative correlation was found between academic stress and mindfulness among undergraduate students in Malaysia. This result was contradicted with Uma and Manikandan (2013) they stated that the self-control did not show any significant independent influence on academic stress.

The psychiatric mental health clinical instructors and the clinical educators should give health education and teaching to the students regarding the causes and symptoms of unhealthy levels of academic stress and prepare them to take proactive action to reduce harm, communicate and raise issues of concern with responsible person, accept and cooperate with any referrals to the occupational health service, accept opportunities for counseling when recommended, be aware of the positive contribution of active self-care in the management of academic stress related problems, and ensure that they are aware of and use the existing benefits and support systems available to them (Davis and Morganson, 2019).

CONCLUSION

Based on the findings of this study and research questions, it was concluded that: there was a highly statistically significant relation and negative correlation between academic stress and self-control among faculty of nursing students. In so doing, the current study managed to answer the aim of the study and research question.

RECOMMENDATIONS

Based on the previous findings of the present study, the following recommendations are suggested: Develop an educational program about the effect of behavioral therapy techniques on academic stress and low self-control, develop training courses in communication skills to nursing educators that enable them to work effectively with students and the hospital administrators should develop continuous educational programs for their staff on the appropriate way to deal with students and train the students on cognitive behavioral programs to modify the way of thinking.

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Citation: Shereen Roushdy Hashem, Mona Abd El-Rahim Al Nagar et al. The Relationship between Academic Stress and Self-Control among Faculty of Nursing Students. Open Access Journal of Nursing. 2019; 2(1): 51-63.

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