

## **Juggling to find balance: hearing the voices of undergraduate nursing students.**

### **Abstract**

Background: accounts of stress are common amongst students on nursing programmes. Prolonged high levels of stress can contribute to poor learning, the development of detrimental health behaviours, attrition and burnout.

Aims: examine the health and wellbeing influences of undertaking a BSc nursing in the UK for 1st year students.

Methods: qualitative narrative analysis of 100 written student reflections on the influences on their health and wellbeing.

Findings: nursing students must juggle multiple competing demands for their physical capabilities, personal resources, income, and time. Students are constantly seeking to achieve balance and personal equilibrium through the use of a variety of coping strategies.

Conclusion: This work calls upon the profession, nursing regulator, nursing programmes within higher education institutions (HEIs), and Health Trusts to review the framework and content of undergraduate BSc nurse education. Programme requirements should enhance the health and wellbeing of students while simultaneously delivering education and practice opportunities necessary to meet professional requirements.

### **INTRODUCTION**

A career in nursing offers numerous and diverse opportunities. However the nursing profession within the United Kingdom (UK) currently faces many challenges; the most pressing is the

recruitment and retention of registered nurses (Nuffield Trust 2019). Given the existing and predicted shortages of registered nursing staff (Buchan et al 2019), it seems constructive to ensure that nursing students are not only appropriately prepared for registration but they are also well supported and nurtured as they develop their nursing knowledge and skills. This study gives voice to the health and wellbeing experiences of 100 1<sup>st</sup> year student nurses through the use of their written narratives. These narratives capture their health and wellbeing experiences as they navigated through the 1<sup>st</sup> year of their UG programme. The study findings identify student responses to programme and personal life stressors; revealing how students juggle the competing demands, attempt to seek equilibrium while managing their lives; all the time endeavouring to find ways of coping, continuing and succeeding on the programme. Finally, this article will discuss the impact of curriculums which acknowledge and are guided by the experiences of students, as ways of addressing and ameliorating potential stressors.

## **BACKGROUND**

There is global recognition of the increasing levels of stress, anxiety and mental health problems experienced by young people attending college and university (Othman et al 2019, Bennion et al 2018, Denovan and Macaskill 2017), with nursing students reporting higher levels of stress, anxiety and depression than other students (Edwards et al 2010, Gurkova and Zelenikova 2018). Individuals view stress in terms of the demands it makes of them and their perceived ability to cope (Clancy and McVicar 2002), it can be viewed as a continuum with prolonged stress culminating in emotional suffering, burnout and mental distress (Waddell –Goad 2016, McVicar 2003).

It is widely documented that nursing is a stressful occupation (Waddell-Goad 2016) and the preparation for such a career is equally stressful (Gurkova and Zelenikova 2018). Middleton (2018) argues that student nurses must work harder than students on other university programmes, managing both theory and shift work practice against a backdrop of financial pressures.

Considerable evidence documents that nursing students find the extensive academic element of

their programmes stressful (Evans and Kelly 2004, Moridi et al 2014,) and although clinical placements provide practical learning opportunities; they are often physically challenging, emotionally exhausting and mentally demanding (Moridi et al 2014, Pulido-Martos et al 2012, Health Education England 2019) (HEE). Placements frequently expose students to the extremes of human life, which if not recognised and carefully managed can impact on student wellbeing (HEE 2019). Overall the high level of stress experienced by nursing students can have a negative impact on quality of life, (Labrague et al 2017) affect academic performance and holistic health (Yildirim et al 2017, Edwards et al 2010) contribute to attrition and burnout ( Lopez et al 2018) have long-term consequences for staff shortages within the profession (Wolf et al 2015).

The complexity of modern healthcare demands highly skilled and registered nursing staff (Oliver 2017); in recognition of this, nursing education for registered nurses became a minimum of a Bachelor in Science (BSc) degree in UK in 2013. Aiken et al's (2018) study which considered patient satisfaction in hospital care within the UK highlights the importance of sufficient numbers of graduate nursing staff for positive patient outcomes, while Aikin et al's (2017:560) work across European hospitals, demonstrates the value of highly skilled nurses, and how reductions in nursing skill by the employment of 'less-educated' healthcare staff reduces patient safety, contributes to preventable mortality and shortages of hospital nurses. These consequences are acknowledged by the Royal College of Nursing (RCN) (2017) in their policy on Safe and Effective Staffing.

In the UK, the nursing programme currently straddles the demands of an apprenticeship style system and undergraduate degree. Students typically undertake a 3 year BSc degree which combines the theory and practice of nursing, within a 45 week academic year. Student nurses within England are required to complete 4600 hours of learning, which includes 2300 hours in NHS partner placements and 2300 hours of theory (NMC 2018), this necessitates a 45 week academic year rather than the 30 week academic year, enjoyed by most other undergraduate students. This has the impact of separating and isolating student nurses; limiting their opportunities to contribute and

experience wider university life (Urwin et al, 2010) and prevents them accessing regular employment to boost personal finances (HEE 2019). This extra 15 weeks for each academic year, which is unfunded by the maintenance loan, is 50% more per year than other undergraduate programmes and can be seen as an additional major stressor for nursing students.

The current shortage of registered nurses has focused attention once more on student attrition, which has remained consistent for some time; current reports from the Health Foundation (2018) maintain that 1 in 4 student nurses do not complete their degree. The reasons for attrition are complex and rarely due to one reason, more often are a combination of personal, organisational, course related, and financial factors (Urwin et al 2010). In addition the introduction of student loans and the removal of the training bursary for student nurses, has contributed to the a reduction in applications, thereby further reducing the number of students working towards registered nurse status (RCN 2018). In an attempt to address these issues the government has recently announced that from September 2020 nursing students in England will receive a £5,000-a-year maintenance grant; further details of the payment are promised (Gov.UK 2019).

## **METHODOLOGY**

### **Participants**

This study adopted a qualitative approach; deeply rooted in the self-reported written narratives of 100 first year student nurses. The work gives voice to the students; their perceptions and experiences of the programme. All adult nursing students in year one are required to undertake a 20 credit (10 ECTS) (level four) academic module entitled 'My Health and Wellbeing', which is taught towards the end of year one. The assessment for this module is a written case study in which students are required to recognise and explore the influences on their own health and wellbeing since commencing the programme. These case studies are the basis of this study. Three academics from the teaching team completed this research. All members of the first year cohort of students

were invited to take part in the study. Voluntary participation was emphasised with guarantees of confidentiality and anonymity. Written consent was gained from all participants. 100 students volunteered to take part in the study. The research team were surprised at the number of students who wanted to take part in the study; students stated that they saw the research as an opportunity to share their experiences with the wider nursing community.

#### Data analysis

Thematic analysis was employed to analyse the data contained within the narratives. For the purposes of this research, Braun and Clark's (2006, p. 79) definition that "Thematic analysis is a method for identifying, analysing and reporting themes (patterns) within data" was deemed to be the most applicable. When coding for patterns, the question of size and prevalence of the themes identified is relevant. However, as Braun and Clark (2006), identify researcher judgement and flexibility in coding is needed as a theme may be given in many sentences or limited to one or two within the data. In addition, themes identified need to be relevant to the aim of the research.

Initially the three person research team each analysed and coded the same 10 essays to cross check interpretations and ensure their approach to coding was consistent. The remaining essays were then sub-divided and thematically analysed with no major new themes being identified. Three dominant themes were selected as having the strongest supporting evidence and reflected all the participants' experiences.

#### **FINDINGS**

From the thematic analysis, nursing students indicated that they were required to juggle multiple competing demands for their time, physical capacities, income and personal resources and were constantly trying to find balance and personal equilibrium. They also revealed the coping strategies they had developed to manage their emotional, mental and physical life and the programme demands.

## Juggling

These nursing students reported the effects on their health and wellbeing of juggling and managing, not only their new roles as university students and going into clinical placements, but also in dealing with their existing roles.

Juggling programme expectations with everyday life was expressed:

*“On a personal level, commencing a demanding degree programme has been challenging and several factors have challenged my health over the duration of the course. Managing my workload, adapting to a new routine and working, long shifts alongside running a household, managing finances and carrying out daily tasks has impacted my physical and mental health.”* (P34, pg4).

*“...having to build a new life in a new town whilst also keeping up with assignments and doing well on placements.....never living on own, never done my own washing, never having to buy own food and never having to sort out budgets so I have enough money to pay my rent and run my care (sic).”* (P11, pg5).

Travelling to and being in clinical placement added to the juggling act with the consequential negative influence on health:

*“The experiences of being on placement in clinical practice also cause a great deal of stress and anxiety...I found my first placement incredible stressful, especially with very long shifts and driving long distances. I am also a single parent and found managing our daily lives with study, placement and meeting the needs of my teenage son very challenging.”* (P36, pg3).

Nursing students also had to deal with external factors and life-events which were out of their control with the subsequent effects:

*“it [childcare] didn’t always succeed and on two occasions I had to leave university early due to childcare failing. This was stressful as I felt like I lost valuable lesson time and was missing out on*

*important information. I then felt guilty about leaving my daughter, I knew it would benefit both our futures, but the emotional stress that the guilt caused from spending longer away from home, the inconsistency of my routine and factoring in study time was hard.” (P7, pg4).*

*“Prior to starting university my mother in law had been struggling with treatment for cancer. Sadly in November she lost this battle. As a family we were bereaved, my children needed supporting, and my husband especially needed more of my attention...Emotionally I faced dilemmas regularly, being torn between studying for our family future and wanting to be at home with them. This challenged my wellbeing as I was often tired, so again concentration took more effort...” (P62, pg 3).*

### **Finding Balance**

As a consequence of juggling competing issues, many students described the experience of their first year as “a balancing act”. They recognised that a key issue in their health and wellbeing was the influence of managing this balancing act.

*“Attempting to find the time to factor in home learning, family time, social life, rest, university, placement and parenting felt impossible and I rarely managed to keep a healthy balance.” (P7, p4).*

The balance between home and work life, or social and work life was difficult to manage, often leading to the neglect of important aspects of wellbeing. There was a perception that the academic workload alongside existing responsibilities had tipped the balance towards a lower level of wellbeing with a consequent experience of being ‘overwhelmed’ or isolated.

*“I struggled with balancing my time between being at university, doing the essential pre-reading before lectures and keeping up my social life with friends and family. I believe this has had an impact on my health and wellbeing due to feeling overwhelmed with adapting to be a student, I have noticed a change within my physical health and mental health.” (P5, pg 4).*

*"...I was struggling financially on a student budget and had immense feelings of guilt placing my son in childcare all week. Maintaining a home and work life balance was becoming less achievable resulting in me not going out or socialising and spending the majority of the time at home studying."* (P35, pg4).

The pressures for the tipping of the balance most often came from the new course demands with a sense of not being able to 'turn the off switch', so that a constant state of alertness to course issues dominated daily life.

*"I also found it was difficult to switch off when I was with the family. I was carrying around the pressure on my shoulders, from the placement and my assignments."* (P1, pg 3).

*"I was afraid to stop...for the fear I might let something slip."* (P7, pg 4).

The constant state of alertness resonates with definitions of stress and the exhaustion experienced when the stress does not alleviate. Concurrently mechanisms for reducing the level of stress, or buffering against stress, such as social life and leisure pursuits were losing out in the balancing act.

Additional pressures which tipped the balance came from family expectations such as trying to please parents or justifying the guilt of parenthood.

*"Parental pressure is also an important source of stress for me as a student; children do not want to disappoint their parents, so they overwork and do everything to reach the goals no matter how much stress it produces. I often place myself under this pressure, especially as I am the first in my family to go to university, despite my parents telling me they are proud of me no matter what."* (P77, p3).

However, it was clear that learning to find the balance was also a feature of the year; finding adjustment and equilibrium was an emergent outcome for a number of students.

## **Coping strategies**



The term stress was referred to by almost all the student participants, with their accounts demonstrating their recognition of how the effects of stress could permeate into all areas of their lives. Ways of coping and managing the symptoms and causes of stress varied dependent on age, previous life experiences, responsibilities and learning gained from their experiences in the first year of the nursing programme. The earlier experiences on the programme provided them with insight and tools which subsequently helped them develop ways of managing and coping. There was also recognition that it was important to be aware of their own feelings and wellbeing and to ensure that their own needs were respected, valued and considered in order to be effective on the programme.

*“Through experiencing stress throughout my first year, I have learned the importance of managing my stress effectively to maintain positive physical and mental health. Strategies I have developed include undertaking physical exercise where possible, resting when needed, ensuring to adequate sleep, being mindful and noticing early warning signs and participating in talking therapies if and when necessary”. (P34, pg5).*

*“this new knowledge [on managing stress] is essential to me as a learner because it has helped me to make a difference to my own health, I now focus on how I am feeling instead of what I need to do, this has helped me to take a step back and take time for myself. For example, if I start to feel stressed while writing an assignment I will take a break and go for a walk instead of playing on my phone or watching the television. This helps me to clear my mind and think clearly, I have also changed my diet, I now focus on eating fruit instead of chocolate during my most stressful times. I have noticed that changing small habits like these have increased my concentration levels, the way I organise myself around university and my social life, I feel like I have more energy and I feel healthier within myself.”*

(P5, pg 6).

Mature students with caring responsibilities had the added workload and responsibility of learning to adapt and manage the demands of shift work within family life.

*"I am also self-aware that nothing is that bad when you break it down into small chunks and keep going. ...for example I must work night shifts on my next placement, I have not experienced this and feel I will find it a challenge, as I have a family to look after. I will need to juggle everything and feel that working a few nights in a row will leave me feeling exhausted. But I will say to myself 'whats the worst that can happen?' I will be tired and out of routine and will have to make small changes to my home life, such as change of bedtime routine and eating. I will put my children to bed earlier and have dinner ready slightly earlier, so I am organised". (P1, pg 3).*

Many students highlighted the importance of social networks, ,with people who shared similar outlook and interests as a coping strategy and a way of enhancing personal health and wellbeing. Seeking out people with comparable interests was a high priority of many students.

*"I struggled to find a group of people to spend time with that had the same interests as me. The pressure to fit in and find a group of friends that I got on well with began to take its toll on my mental well-being. In the time it took me to find a group of people I could socialise with regularly, I had already begun to start doubting my ability to make it through the degree. I had made friends on the course early on, but these relationships were made out of necessity rather than the grounds of mutual interest, and therefore I was unable to form significant relationships". (P66, pg 4).*

## **DISCUSSION**

This study demonstrates a number of important findings, namely that student nurses invest heavily in their nursing programme and work hard to manage the multiple competing demands of this intense three year programme. Many students learn from their experiences over the first year to develop the skill of juggling the numerous demands on their time and resources, constantly seeking to find equilibrium and strategies to help them cope. Transitioning into the programme throws students into a state of competing stressor demands; requiring the reframing of support

mechanisms (McDonald et al 2018). For some students it involves transition between school and university, home and living independently, acquiring and learning major life skills. For other students it often comprises transiting from paid employment or parenthood to becoming a fulltime student; managing family commitments, childcare, household chores, and grappling with academic writing, all on a reduced income. Transition for all students provides many opportunities and benefits, but is also a potential stressor and can negatively impact on academic achievement (Denovan and Macaskill 2016). Ultimately all students must adjust to their programmes, to different ways of living and learning, however obstacles, such as lack of support, or excessive programme demands may affect mental health and wellbeing (Thorley 2017). Much of the literature on transitions for nursing students merely refers to their transition into clinical practice (Macdonald et al 2018) or transition to registered nurse (Collard et al 2019). Whereas in reality student nurses manage multiple transitions within their three years UG programme, from the initial move to university, to the many and various required placements and then to registered nurse. This study reveals that student nurses respond to the challenges; by learning to juggle the competing demands of all aspects of their lives, including; academic learning, practice learning, peer social time, self-care and family time.

The importance of family and friends is evident within this research; the findings demonstrate that many students recognise the personal value of sustaining family relationships and developing likeminded friendships, but face numerous time constraints. The wider literature acknowledges the significance of good social connections for everyone (New Economics Foundation 2014) (NEF) and the importance of supportive family and friends for healthcare staff (HEE 2019). In the findings nursing students discuss the challenges of undertaking the programme as a parent, the cost of childcare, guilt of having to place small children into child care facilities, and the trauma when childcare does not work. The support and importance of friendships and friends and its link to the promotion of student health and wellbeing is well documented, while family support aids university integration even for stressed students (Friedlander et al 2007), conversely a lack of support can escalate stress and health problems (Yamaguchi 2013).

A recurring theme within this research shows how students try to maintain a balance in their lives but for many the requirements of the programme were challenging, often forcing them into a state of 'constant alertness', which negatively influenced family time, and contributed to the adoption of health diminishing behaviours and self neglect. A large percentage of nursing students cite the pressure of academic work, irregular shift work, lack of time and family commitments as contributing factors for poor personal health behaviours (Blake and Harrison's study 2013). While there is wide spread recognition that academic, social and financial pressures are contributing to higher levels of mental distress and poor mental health outcomes amongst many young people at university, with rates higher than in previous generations (Thorley 2017). Finding and using good support systems is essential, not only for success on the programme but also for student personal health and wellbeing and may contribute to reductions in student attrition. Initiatives to address and eradicate sources of stress require a good understanding of the stressors and their influence on students (Waddill-Goad 2016, McVicar 2003). Nursing programmes have an obligation to review the support systems available to students and move to develop mechanisms which are developed in conjunction with the students to ensure they address need.

### **Understanding the student experience of nursing programmes.**

Nursing programmes seek to prepare student nurses to become members of the professional nursing workforce, enabling them to work towards improving healthcare systems which meet population needs and protect the public (World Health Organisation 2009) (WHO). In doing so the nursing regulator and HEI providers have a responsibility to understand how students experience their programmes. The WHO (1986) identifies the impact on health of the settings in which people live and work. This is no different for student nurses, they study and work in multiple environments and work-cultures, all influence and shape their health and wellbeing outcomes. Additionally changes in the higher education landscape and to academic workloads, have increased student/ staff ratios, placed more demands on lecturers' time, increased student groups sizes; making it more

problematic for some students to develop a sense of belonging and develop friendships and reduced staff time for student support (Denovan and Macaskill 2017, Macaskill 2012).

Although nursing programmes across the globe combine academic work, practice simulation and practice placements, the move to higher education settings, for many countries; including Australia, Canada and USA has changed the format and structure of the programmes. These countries currently require practice placement attendance of between 800 to 1000 hours over the duration of the programme, while the UK requires 2300 hours (NMC 2018), which may also involve students travelling long distances, sometimes staying overnight in temporary accommodation and working long shift patterns, including, night duty, weekends and bank holidays, which HEE (2019) acknowledges reduces student opportunities for financial remuneration with part time work. While the ensuing fatigue, contributes to stress and impacts on multiple aspects of life including compromising self-care (Waddill-Goad 2016).

In contrast undergraduate physiotherapy and occupational therapy degrees within England require students to successfully complete 1000 hours in practice in addition to academic work (HCPC 2017), thereby providing a balanced educational experience and enabling these healthcare students the mental space to accommodate their learning and to enjoy and benefit from the wider experiences and opportunities offered by universities. Mitchell (2019) reports Aitkin's challenge to the UK to reduce the number of hours UK student nurses are required to complete, arguing that the current apprentice style model lacks relevance in an age of fast changing knowledge, adding that nurses in the USA are great nurses while undertaking many less clinical hours.

This study has identified that student nurses' work hard to manage, juggle and cope with the multiple requirements of their programme; these student experiences must be recognised and acknowledged by the Nursing and Midwifery Council (NMC) and the wider nursing profession. In order to address attrition and future nursing shortages it is now necessary to take decisive steps. The NMC must initiate an urgent debate within the profession to review the aim and key elements

required within nurse education. Most importantly the profession must be receptive and responsive to the student voice. Hearing the student voice can be achieved in many ways including; consultation, co-creation, participation and being genuinely receptive and responsive to student feedback (Hughes and Spanner (2019)). Additionally nursing programmes in Higher Educational Institutions (HEI) have a duty to reduce excessive academic and placement burdens: programmes should support student health and wellbeing, making it easier for UG BSc students to be happy and healthy.

The authors acknowledge the limitations of this study; the use of student assignments which capture their subjective self reported health and wellbeing experiences. Despite these limitations, the study identifies the genuine and multiple programme stressors for students undertaking undergraduate BSc degrees.

## **CONCLUSION**

This study has presented data which captures student narratives; how they strive to manage, juggle and seek to find strategies to help them continue on nursing programmes. The work has implications for nurse education and curriculum development. Understanding student experiences and the major stressors provides opportunities for the NMC in conjunction with HEIs to ensure that curriculums avoid placing heavy unmanageable burdens on students. Nursing educational frameworks and requirements should encapsulate a realistic understanding of student experiences, thereby enabling the development of curriculum to support and improve student health and wellbeing, whilst meeting professional requirements.

## REFERENCES

Aiken, L., Sloane, D., Griffiths, P., Rafferty, A.M., Bruynee, L., McHugh, M., Maier, C.B., Moreno-Casbas, T., Ball, T.E., Ausserhofer, D., and Sermeus, W., 2017 Nursing skill mix in European hospitals: cross-sectional study of the association with mortality, patient ratings, and quality of care *BMJ Qual Saf* 2017;26

Aiken, L.H., Sloane, D. M., Ball, J., Bruyneel, L., Rafferty, A.M., and Griffiths, P., 2018 Patient satisfaction with hospital care and nurses in England: an observational study. *BMJ Open*

Australian Nursing and Midwifery Accreditation Council (ANMAC), 2012. Standards and review registered nurse. <https://www.anmac.org.au/standards-and-review/registered-nurse>. Accessed 12.12.2019

Bennion, E., Olpin, M.N., and DeBeliso, M. 2018. A comparison of four stress reduction modalities on measures of stress among university students. *International Journal of Workplace Health Management*, 11(1), 45-55.

Blake, H., and Harrison, C., 2013. Health behaviours and attitudes towards being role models. *Br J Nurs*. 22(2):86-94.

Braun, V., and Clarke, V., 2006 Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77–101.

Buchan, J., Charlesworth, A., Gershlick, B., and Secombe, I., 2019 A critical moment: NHS staffing trends, retention and attrition. Health Foundation. [Health.org.uk/sites/default/files/upload/publications/2019/A%20Critical%20Moment\\_1.pdf](https://www.health.org.uk/sites/default/files/upload/publications/2019/A%20Critical%20Moment_1.pdf) Accessed 12.12.2019

Clancy, J. and McVicar, A., 2002 *Physiology and anatomy: a homeostatic approach*. 2nd ed. Stress. Arnold: London

Collard, S.C., Scammell, J., and Tee, S., 2019 Closing the gap on nurse retention: A scoping review of implications for undergraduate education. *Nurse Education Today*. <http://doi.org/10.1016/j.nedt.2019.104253>

Denovan, A., and Macaskill, A., 2017 Stress and subjective well-being among first year UK undergraduate students. *Journal of Happiness Studies*. 18 (2) 505-525.

Edwards, D., Burnard, P., Bennett, K., and Hebden, U. 2010. A longitudinal study of stress and self-esteem in student nurses. *Nurse Education Today*, 30(1),78-84.

Evans W. and Kelly, B., 2004 Pre- registration diploma student nurse stress and coping measures. *Nurse Education Today* 24. 473-482.

Friedlander, L.J., Reid, G.J., Shupak, N., and Cribbie, R., 2007 Social support, self-esteem, and stress as predictors of adjustment to university among first-year undergraduates. *J. Coll. Stud. Dev*. 48, 259–274.

Gov.UK 2019 Prime Minister backs NHS staff with £5,000 annual payment for nursing students. Available from <https://www.gov.uk/government/news/nursing-students-to-receive-5-000-payment-a-year> Accessed 11.02.2020.

Gurková, E., and Zeleníková, R. 2018. Nursing students' perceived stress, coping strategies, health and supervisory approaches in clinical practice: A Slovak and Czech perspective. *Nurse Education Today* 65: 4-10.

Health and Care Professions Council (HCPC). 2017 Standards relevant to education and training. <https://www.hcpc-uk.org/standards/> accessed 12.12.2019

Health Education England 2019 NHS Staff and Learners Mental Wellbeing Commission. Birmingham: HEE.

Health Foundation 2018 One in four student nurses drop out of their degree before graduation. <https://www.health.org.uk/news-and-comment/news/one-in-four-student-nurses-drop-out-of-their-degrees-before-graduation>. Accessed 12.12.2019

Hughes, G., & Spanner, L., 2019 The University Mental Health Charter. Leeds: Student Minds Institute for Public Policy Research. [www.ippr.org/publications/not-by-degrees](http://www.ippr.org/publications/not-by-degrees). 12.11.2019

Labrague, L.J., McEnroe-Petitte, D.M., Papathanasiou, I., Edet, O. B., Tsaras, K., Christos, K.F., Fradelos, E.C., Rosales, R.A., Cruz, J.P., Leocadio, M., and Lucas, K. V. S. 2017. A cross-country comparative study on stress and quality of life in nursing students. *Perspectives in Psychiatric Care* 54(4):469-476.

Lopez, V., Yobas, P., Chow, Y.L., and Shorey, S., 2018 Does building resilience in undergraduate nursing students happen through clinical placements? A qualitative study. *Nurse Education Today*. 67 1-5.

Macaskill, A., 2012 The mental health of university students in the United Kingdom. *British Journal of Guidance and Counselling*. 41 (4) 426-441.

McDonald, M., Brown, J., and Knihnitski, C., 2018 Student perception of initial transition into nursing program: a mixed methods research study. *Nurse Education Today* 64 85-92.

McVicar, A., 2003 Workplace stress in nursing: a literature review. *Integrative Literature Review and Meta-Analyses*. 44 (6) 633-642

Middleton C., 2018 Morale in nursing students: a priority for nurse retention. *Journal Advanced Nursing*. 74(8):1740.

Mitchell, G. 2019 Cut clinical hours to attract students, says leading nurse academic. *Nursing Times* available online <https://www.nursingtimes.net/news/education/cut-clinical-hours-to-attract-students-says-leading-nurse-academic-29-03-2019/> Accessed 23.01.2020

Moridi G, Khaledi S, and Valiee S., 2014 Clinical training stress-inducing factors from the students' viewpoint: a questionnaire-based study. *Nurse Education Practice*. 14(2):160–163.



NEF 2013 Five ways to wellbeing. A report presented to the Foresight Project on communicating the evidence base for improving people's well-being. From [www.neweconomics.org](http://www.neweconomics.org). Accessed 11.02.2020

Nuffield Trust 2019 Closing the gap Key areas for action on the health and care workforce. Overview. [https://www.nuffieldtrust.org.uk/files/2019-03/1553101044\\_heaj6918-workforce-briefing-190320-web.pdf](https://www.nuffieldtrust.org.uk/files/2019-03/1553101044_heaj6918-workforce-briefing-190320-web.pdf) Accessed 12.12.2019

Nursing and Midwifery Council. 2018 Future nurse: standards for proficiency for registered nurses. (accessed 11.12.2019)

Oliver, D., 2017. Why shouldn't nurses be graduates? *BMJ* 2017; 356

Othman, N., Ahmad, F., Morr, C E., and Ritvo, P., 2019 Perceived impact of contextual determinants on depression, anxiety and stress: a survey with university students. *International Journal of Mental Health Systems* 13.17

Pulido-Martos, M., Augusto-Landa, J.M., and Lopez-Zafra, E. 2012. Sources of stress in nursing students: a systematic review of quantitative studies. *International Nursing Review*, 59, 15-25.

RCN 2018 Removing the student nurse bursary has been a disaster. <https://www.rcn.org.uk/news-and-events/news/removing-the-student-nurse-bursary-has-been-a-disaster>. Accessed 12.12.2019

RCN 2017 Safe and Effective Staffing: Nursing Against the Odds. UK Policy Report. London: RCN.

Speziale, H. and Carpenter, D., 2011 *Qualitative Research in Nursing, Advancing the Humanistic Imperative*. Wolters Kluwer: Philadelphia.

Thorley, C., 2017. Not by degrees: Improving student mental health in the UK's universities. Institute for Public Policy Research. [https://www.ippr.org/files/2017-09/1504645674\\_not-by-degrees-170905.pdf](https://www.ippr.org/files/2017-09/1504645674_not-by-degrees-170905.pdf) Accessed 12.12.2019

Urwin, S., Stanley, R., Jones, M., Gallagher, A., Wainwright, P., and Perkins, A., 2010 Understanding student nurse attrition: learning from the literature. *Nurse Education Today*. 30. 202-207.

Waddill-Goad, S., 2016 *Nurse burnout : combating stress in nursing*. Indianapolis: Sigma Theta Tau International.

Wolf, L., Stidham, A.W., and Ross, R., 2015. Predictors of stress and coping strategies of US accelerated vs. generic baccalaureate nursing students: an embedded mixed methods study. *Nurse Education Today* 35 (1), 201–205.

World Health Organisation 2009 *Global Standards for the initial education of professional nurses and midwives*. [https://www.who.int/hrh/nursing\\_midwifery/en/](https://www.who.int/hrh/nursing_midwifery/en/) Accessed 12.12.2019

World Health Organisation. 1986 *The Ottawa Charter for Health Promotion*. Online: WHO <https://www.who.int/healthpromotion/conferences/previous/ottawa/en/> [Accessed 11/11/19]

Yamaguchi, A., 2013 Influences of Social Capital on Health and Well-Being from Qualitative Approach. *Global Journal of Health Science*; Vol. 5, No. 5; 2013

Yıldırım, N., Karaca, A., Cangur, S., Acikgoz, F., and Akkus, D. ,2017. The relationship between educational stress, stress coping, self-esteem, social support, and health status among nursing students in Turkey: a structural equation modeling approach. *Nurse Education Today*, 48:33-39.

## **Keywords**

Health, wellbeing, student nurses, undergraduate BSc programmes, student voices.

## **Sentences**

A qualitative research study, which utilises student nurse narratives of health and wellbeing.

The study investigates the health and wellbeing influences of undertaking a BSc nursing.

Student nurses strive to juggle the multiple competing demands of their programme, attempting to find balance and develop coping strategies.

The profession, regulator and university nursing programmes must be sensitive to student experiences.

The structure, format and content of nurse education must be informed by student experiences.

## **Questions**

Why is it important to listen to student nurses' experiences?

Can nurses be healthy role models if their undergraduate education fails to be receptive to their health and wellbeing needs?

What steps should be taken to ensure that the profession and the nursing regulator are attentive to student nurses' experiences?

What role should student nurses play when the content and format of BSc nursing programmes are discussed and reviewed?