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The quality of student nurses' education, instructor, the environment, and students' stress: what is the relationship? – reflection of one student's lived anxieties and the interventions used for success

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Nursing is considered an art and science and as a nursing educator, I have the responsibility of making sure I teach student nurses in a manner reflective of the same. I consider teaching clinical instruction and didactic as an art and science (Malaska, 2015). What I have found in my seven years of teaching relates to instructor behaviors, poor quality teaching and a negative learning environment result in poor student outcomes demonstrated by students' anxieties, stress, tests and exams scores. In addition, didactic instruction is lacking in relevant clinical scenarios to illustrate the concepts combined with limited clinical experiences students have a difficult time understanding the material. The gap must be bridged consistently between didactic and clinical. Students become anxious which compounds their stresses in juggling nursing school, work, family, and studies in an accelerated nursing program. Anxieties and test anxieties are real and assigning blame to the student is not helping the situation. A degree in teaching does not automatically make one an effective instructor. I have given much thought to this. I use a combination of strategies including the nursing process and a concept map to diagnose the learning issues from the student's perspective, plan the interventions with the student and execute same using a timeline as a guide. Educators must commit to using insight, self-reflection to determine whether behaviors, communication, listening, and body language skills portrayed is conducive to a positive learning environment. Using the same teaching skills for the same subjects/class year after year does not guarantee successful student learning. Effective teaching is not a one size fits all. Teaching, nursing education must employ reflective practice to improve student nurses outcomes (Horton-Deutsch & Sherwood, 2016). The focus must shift to creating a nurturing learning environment, inspirational to the students similar to the therapeutic healing environment, we create for the patient. Consider the student who has test anxieties, experiences with instructors who did not teach the content, lack of instructor accountability, and no one is listening. We cannot give up on students who are invested in learning, struggling to learn what was not even taught, just like we do not give up on patients when they seem uninterested or have difficulty understanding their care and treatment. We must exercise self-awareness, internal reflection and review whether strategies used in the past is effective with current semester group. We must rewire our thinking, use a combination of skills and strategies including emotional intelligence, mindfulness, maintain competencies using evidence-based practice teaching skills, listening and therapeutic communication and provide the appropriate learning and testing environment to prepare the student nurse for the 21st century of healthcare delivery. I will discuss the strategies used for one student with test anxiety and other anxieties from lack of education instruction and perceived lack of support in one month and her successes in retaking and passing four courses' final HESI exams within the month. Her reflections will support the strategies employed that helped her and her subsequent success in passing the EXIT HESI six weeks later.

Biography

Reezena H Malaska is a Summa cum Laude graduate of the Doctor of Nursing Practice program (DNP, Healthcare Systems Leadership, Dec 18, 2016), Chamberlain College of Nursing; Trauma Critical Care RN and Adjunct Clinical Instructor/Faculty for BSN/ADN/LPN programs. She is a graduate of the RGN program from Oxford Brookes University, MSN from American Sentinel University, BSN from Chamberlain College of Nursing (former Deaconess College of Nursing) and Critical Care Certification (CCRN) from American Association of Critical Care Nursing. She is a Trauma Critical Care RN and has worked consistently at the bedside whilst teaching as Adjunct Nursing Instructor, Program Manager and LPN Instructor for a private college January to September 30, 2017. She has two publications with a peer reviewed journal and several E-Radio blog interviews with iNurse radio (International Nurses Association, 2015) on various topics and issues in nursing. She was a Guest Speaker at the 12th annual Observation Management Physician's Summit Conference, Chicago, April 2015 (World Congress/NAPA) and Guest Speaker/Moderator at the International Nursing Conference October 3-5th, 2016 (World Congress) held in Vancouver, Canada.

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