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Anxiety Alleviating Intervention Strategies: Applicability for Nursing Students

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Abstract

College attendance is considered a period of transition during which students are vulnerable to mental health issues. College nursing students have additional stressors other college students do not have to face. In addition to the intense theoretical learning encompassed in a nursing program, nursing students are required to perform clinical and critical thinking skills. Nursing students are thrust into the professional environment while still developing their knowledge base, which can be a great source of anxiety. Research has found that college student anxiety can have a detrimental effect on the student's learning process. Several different interventional strategies that have been utilized to alleviate anxiety in college students will be discussed. Recommendations regarding different interventional strategies that can be utilized to alleviate nursing student anxiety, some of which may be used preventatively will be presented. Further, recommendations regarding future research to assess the applicability of some interventional strategies with nursing students will be outlined.

Keywords: anxiety, college students, interventional strategies, nursing students

College is a time of great transition in a person's life. Periods of transition can be a cause of great stress. The surgeon general has determined that college attendance is one such period of transition in life that can potentially lead to problems with mental health (Brown & Schiraldi, 2004; Department of Health and Human Services [DHHS], 1999). An American College Health Association's Fall 2011 Executive Summary of the National College Health Assessment II (2012) survey of 27,774 college students found that 86.1% of college students (91% of females and 76.4% of males) reported feeling overwhelmed by all they had to do at some point within the last 12 months and 53.5% of college students (58.8% of females and 42.7% of males) reported being overwhelmed by all they had to do in the last two weeks. College students' feelings of being overwhelmed can be accompanied by feelings of anxiety or may lead to feelings of anxiety. According to the fall 2011 National College Health Assessment II, 49.9% of college students (55.4% of females and 38.4% of males) reported experiencing overwhelming anxiety at some point in the last 12 months. In addition, 12% of college students (14.5 % of females and 6.6% of males) stated they had been diagnosed or treated by a professional within the last 12 months for anxiety. This represents a 5% increase in anxiety diagnosis or anxiety treatment for college students since 2000 (American College Health Association's National College Health Assessment II [ACHA-NCHA II], 2012). As the fall 2011 National College Health Assessment II shows, anxiety in college students is a growing issue.

Anxiety is a natural occurrence in most people's lives at one point or another often experienced by individuals prior to a significant experience in their lives. Anxiety is an apprehensive uncomfortable feeling combined with an autonomic response being sent from the autonomic nervous system (North America Nursing Diagnosis Association [NANDA], 2011). Spielberger and Reheiser (2004) describe state anxiety as "an episodic experience of the emotion

brought on by a specific situation” and trait anxiety as “an enduring temperament or predisposition to experience the state of anxiety frequently” (p. 56). Every person’s experience of anxiety and how they react to the occurrence is unique to them. Physiological characteristics of anxiety can include: a) increase in blood pressure, pulse, and respirations; b) dizziness, light-headedness; c) perspiration; d) frequent urination; e) flushing; f) dyspnea; g) palpitations; h) dry mouth; i) headaches; j) nausea and/or diarrhea; k) restlessness; l) pacing; m) pupil dilation; n) insomnia, nightmares; o) trembling; and p) feelings of helplessness and discomfort. Behavioral characteristics of anxiety can include: a) expressions of helplessness; b) feelings of inadequacy; c) crying; d) difficulty concentrating; e) rumination; f) inability to problem-solve; and g) preoccupation (NANDA, 2011).

More than forty million adult Americans experience anxiety disorder issues every year (Mental Health America, 2012). Since college students are already vulnerable to experiencing mental health issues due to being in a transitional period of their lives and given the prevalence of anxiety experienced by college students; it is important for faculty to be aware of how vulnerable their students are, be vigilant in observing students for signs and symptoms of anxiety that may be interfering with a student’s learning process, and be able to intervene to help students in need.

Rationale

Research has shown that college student anxiety can have a detrimental effect on learning, including: interfering with memory, concentration, and problem-solving skills; potentially leading to poor academic and clinical performance, and decreased academic accomplishments (Cook, 2005; Kang, Choi, & Ryu, 2009). When students become anxious the

brain releases hormones to help the body effectively respond to the stress by increasing the arousal level. If the student remains at a heightened arousal level it can interfere with the retrieval of data from their short term memory and prevent the storage or processing of new data (Bowie, 2010).

While the stressors each college student faces are unique to each individual there frequently are similarities. College nursing students have additional stressors other college students do not have to face. In addition to the intense theoretical learning encompassed in a nursing program, nursing students are required to perform clinical and critical thinking skills simultaneously (Kang et al., 2008). Nursing students are thrust into the professional environment while still developing their knowledge base which can be a great source of anxiety for nursing students. In 1997, a general health questionnaire showed that 67% of nursing students experienced significant stress levels, which exceeded the stress levels of medical students (Consolo, Fusner, & Staib, 2008). The surgeon general believes that the anxiety caused by transitions in life can be treated through various types of interventions (Brown & Schiraldi, 2004; DHHS, 1999). There are various types of interventional strategies that can potentially be utilized with students, including: educational strategies and complementary therapies.

Purpose

This scholarly paper has two purposes. The first is to explore current research that focuses on alleviating college student anxiety through the use of various interventional strategies. The second is to generate recommendations of interventional strategies for nursing students, as well as suggest future research exploring the efficacy of interventional strategies with nursing students.

Literature Review

Autogenic Training

A randomized control trial study with three parallel arms examined the anxiety reducing effect autogenic training can have on nursing students (Kanji, White, & Ernst, 2006). The three parallel arms of this study were autogenic training, laughter therapy, and no treatment.

Autogenic therapy is a relaxation technique utilizing suggestion, focuses on stress prevention, and is comprised of six different exercises. The exercises are performed in a step-by-step manner through mental concentration and self suggestion. When performing autogenic training thoughts are centered on relaxing the muscles by encouraging the body to feel heavy, then focusing upon feeling warm, then work on controlling the heart rate, next thoughts are occupied by slowing the respirations, then focus on feeling warmth in the abdominal area and conclude with noticing how having a cool head feels.

There were 93 participants in this study from one university in the United Kingdom and all the participating nursing students had been through at least one clinical rotation in their nursing program. The participants' complementary therapy lasted eight weeks after which state and trait anxiety scores were assessed. The state anxiety score showed a significant reduction compared to both the laughter therapy and the control group, while the trait anxiety score only showed significant improvement between the autogenic training group and the control group. Unlike the autogenic training group, laughter therapy was not practiced at home, which may have altered some of the results of this study. This study had a couple limitations, which included a small sample size and a high dropout rate.

Despite the high dropout rate this study implies that autogenic training is an effective interventional treatment for reducing anxiety levels in nursing students. One big benefit of

autogenic training is that once taught it can be practiced independently without further support from a therapist.

Cognitive Behavioral Approach

A comparative study examined the efficacy of two college courses for reducing college students' subclinical symptoms of anxiety and depression (Brown & Schiraldi, 2004). This study compared a classroom based cognitive-behavioral approach to a conventional stress management approach (STRESS). They hypothesized that by teaching college students how to combat their irrational thought processes and by teaching them cognitive behaviors, the students would be better equipped to respond to feelings of anxiety and symptoms of depression. Ninety-nine full time university college students ages 18- 25 participated in this study. The students were broken up into two groups, the cognitive-behavioral group with 27 students and the STRESS intervention group with 72 students.

The cognitive-behavioral approach led to significantly lower anxiety symptoms at the post-tests with the cognitive-behavioral group showing a significant decrease in anxiety and depression while the STRESS intervention group failed to experience a change. One limitation of this study was that it was only performed at one university with a small sample size. The significance of the study results is increased though due to the similarity between the components utilized with the students in the cognitive-behavioral approach group and the STRESS intervention group.

Despite the small sample size this study shows that the cognitive-behavioral approach has promise as an effective complementary intervention for reducing anxiety levels in college students and lays the foundation for future research with nursing students.

Diaphragmatic Breathing

The stress reducing benefits of diaphragmatic breathing were examined in a comparative study with 21 university nursing students as the participants (Consolo et al., 2008). This study compared student heart rates and their performance on cognitive exams and clinical lab practicum exams before and after using diaphragmatic breathing to see if heart rate would decrease and if exam performance would improve. Nursing students performed diaphragmatic breathing exercises prior to taking a cognitive test and a clinical test. The students' heart rates were measured and monitored for changes due to the diaphragmatic breathing exercises. In this research study, with nursing students, practicing diaphragmatic breathing prior to tests yielded conflicting result related test scores and no significant difference in heart rate. Limitations of this study included a small sample size from a single school. The fact that exams increase in difficulty as the semester progresses may have led to inaccurate results as well.

This study failed to show that diaphragmatic breathing is an effective interventional strategy for reducing nursing student anxiety. More research is required to establish that diaphragmatic breathing is effective at reducing nursing student stress levels.

Inviting Teaching Behaviors

The effect of 'inviting teaching behaviors' on nursing student anxiety in the clinical setting was explored utilizing a descriptive, correlational, and comparative design (Cook, 2005). One hundred and twenty-three junior and 106 senior nursing students, from ten National League for Nursing Accreditation Commission (NLNAC) approved Baccalaureate programs in the United States, who were enrolled in nursing courses with a clinical participated in this study. 'Inviting Teaching Behaviors' encourage the learner to realize their potential, abilities, value or self-worth, and responsibility. Five core concepts of 'Inviting Teaching Behaviors' include

respect, intentionality, care, trust, and optimism. This study showed that personally and professionally 'Inviting Teaching Behaviors' performed by clinical nursing faculty influenced the nursing students' state anxiety levels during clinicals. This study also showed that junior and senior nursing students had similar state anxiety levels which indicates that senior nursing students may require just as much if not more emotional support, compared to junior nursing students, since they face increasingly demanding and complex clinical assignments. This is a strong study due to how representative the sample size was making the results generalizable to different types of students and academic settings.

This study proposes that 'Inviting Teaching Behaviors' are an effective interventional strategy for reducing anxiety levels in nursing students. 'Inviting Teaching Behaviors' can be utilized with a diverse nursing student population.

Meditation

The effects of transcendental meditation on college students' experiences of stress, anxiety, depression, and perfectionistic thoughts were examined through a comparative study (Burns, Lee, & Brown, 2011). A total of 43 undergraduate college students from two groups participated in the study. Group One consisted of 27 first year seminar students and Group Two was comprised of 16 students that were recruited separately. The students from both groups were trained in transcendental meditation. Results from the study showed that for both Group One and Group Two there were significant decreases in self reported stress, trait anxiety, and perfectionistic thinking with transcendental meditation. Limitations of this study, included: a small sample size with no control group and it was not a blind study. Also the post-test scores may have been altered due to the decreased levels of stressors over time. Thus the findings for this study should be considered suggestive and further research is required.

A study utilizing a non-equivalent, control group, pre-test/post-test design examined a stress management program for nursing students utilizing mindfulness meditation (Kang et al., 2009). This study sought to verify the effects of mindfulness meditation on nursing students' anxiety, stress, and depression. Thirty-two Korean female junior and senior nursing students participated in this study and were randomly assigned to two groups, either the mindfulness meditation group or the control group. For this study, mindfulness meditation included: a scan of the body, meditative breathing, and meditative walking. These three components were followed by self-reflection comprised of recognizing your good points, development of a sense of appreciation, and a sense of acceptance of your mortality. This study reported that mindfulness meditation significantly reduced anxiety levels, significantly reduced stress levels, and while the depression scores decreased significantly post treatment in the experimental group the depression level was not significantly different between the two groups. This study had a few limitations. First of all, it utilized a small sample size, thus it is not completely generalizable and the pre-intervention values were not equal. The strength of this study is that the results support other research findings.

A pilot study utilizing a pre-test/post-test design sought to determine whether co-meditation reduces anxiety and promotes relaxation in a nursing school setting (Malinski & Todaro- Franceschi, 2011). There were 26 participants (nursing students, staff, and faculty) for the quantitative portion of this study with 14 of these participating in the qualitative portion, as well. Participants were assessed for state and trait anxiety, blood pressure readings, pulse, and respirations. Co-meditation involves two individuals working together where one facilitates the meditation process for the other person. For this study, the co-meditation process took 20 to 30 minutes with a relaxation phase and three additional phases. Results from this pilot study showed

that state and trait anxiety scores were reduced through the use of co-meditation. Systolic blood pressure, pulse rates, and respiratory rates were also decreased after co-meditation, while diastolic blood pressure was not decreased. This pilot study was performed with only a small sample group, but it did show a probability of anxiety reduction with co-meditation.

Further research is required to provide evidence that transcendental meditation is an effective complementary intervention for college students. No research has been done to examine the effect of transcendental meditation with nursing students. Kang, Choi, and Ryu (2009) study showed that mindfulness meditation was an effective complementary intervention for reducing anxiety in Korean nursing students at one university. Further research is required to determine if mindfulness meditation is an effective complementary intervention for a diverse group of nursing students. Since the study performed by Malinski and Todaro- Franceschi (2011) utilized such a small sample size, further research is required to prove that co-meditation is an effective complementary intervention for reducing nursing student anxiety.

Mentoring

A pilot study performing qualitative research explored whether mentoring triads reduced nursing student anxiety, thus potentially improving their learning process (Locken & Norberg, 2005). Participants for this qualitative study were 50 nursing students in their second or third trimester of a five trimester nursing program. For this research study, a mentor triad consisted of a nursing student, a faculty member, and a staff nurse at the students' clinical site that worked with them throughout a semester during their clinical rotation. The students' clinical skills and critical thinking abilities were measured at the beginning and end of this study. The qualitative data from this research study found triad mentoring to be a successful intervention for reducing student anxiety. This mentoring format allowed the student and mentors to develop a trusting

relationship while giving the students control over setting up their clinical schedule. Working with nurse mentors had additional benefits which included students' feeling welcome in the clinical environment by their nurse mentor, students' being able to freely ask questions and having them answered in a timely fashion, and increased opportunities to practice clinical nursing skills.

Another pilot study performing qualitative research examined the anxiety reducing effect of clinical peer mentoring for beginning nursing students (Sprengel & Job, 2004). Thirty baccalaureate freshman nursing students paired with 30 baccalaureate sophomore nursing students participated in this qualitative research. For this research study, each baccalaureate freshman nursing student was paired with a baccalaureate sophomore nursing student for their first clinical experience. This qualitative study found that the freshman nursing students' anxiety and confusion were decreased with clinical peer mentoring. Clinical peer mentoring also encouraged greater student responsibility, promoted active learning, and clinical prep improved. Clinical peer mentoring helped foster collegial relationships and has the potential to encourage the current nursing students to participate in mentoring during their future nursing career. One limitation of this study was that it had a small sample size from only one nursing school. Also no comparison was done and no post assessment regarding actual anxiety levels with clinical peer mentoring.

Despite the small sample sizes these studies suggest that mentoring triads and clinical peer mentoring can be effective interventional strategies for reducing nursing student anxiety. Further research regarding both mentoring triads and clinical peer mentoring with large, diverse sample sizes would help solidify the beneficial effect of these two interventional strategies.

Mind and Body Interventional Strategies

A randomized controlled trial utilizing a pre-test/post-test design evaluated college students' responses to a six week mind and body intervention that utilized relaxation response and cognitive-behavioral interventions (Deckro et al., 2002). This study exposed the subjects to six mind and body intervention sessions, which lasted 90 minutes each. Participants for this study included 128 college students who were randomly assigned to one of two groups. There were 63 students in the experimental group and 65 students in the waitlist control group. Components of the relaxation response, included: diaphragmatic breathing, progressive muscle relaxation (including brief relaxation exercises), mindfulness, guided imagery, and yoga stretches. Cognitive-behavioral interventions, included: affirmations, identification of automatic thoughts, challenging cognitive distortions or ruminations, and goal setting. Participants attended lecture, participated in discussions on lecture topics, and individually practiced relaxation response techniques.

Results from the intervention group showed a significant improvement in their psychological distress and a significant decrease in their state anxiety and perceived stress. This six week mind and body intervention may be helpful as a preventative intervention. This study had a few limitations including the fact that the participants, mainly female students, volunteered for the study thus it may not accurately represent the student body. There was a 30% dropout rate and only 43% of the participants in the experimental group attended all 6 training sessions.

Another randomized controlled trial utilizing a pre-test/post-test design, furthering Deckro et al. 2002 research, evaluated the effectiveness of four distinct mind and body interventions on reported perceived stress, anxiety, and health promoting behaviors in college students (Winterdyk et al., 2008). Ninety-one Canadian college students participated in this

study with 18 students per experimental group (physical exercise in the form of aerobic exercise and strength training; nutrition education; trained relaxation response techniques; and cognitive behavior therapy) and in the control group. All four interventional strategy sessions were approximately 60-minutes in length. Each included the following procedures: lecture/presentation of weekly stress management module; discussion and demonstration of a new aspect of the intervention modality; engagement in the weekly activity pertaining to mind and body relaxation skills; and a brief summary of the session. Participants practiced the skills they learned a minimum of 2-3 times during the intervening week and every student was given a “personal reflective journal” to keep track of their thoughts and feelings regarding their particular mind/body interventional strategy.

This study found that the exercise and relaxation response group provided a significant decrease in psychological distress. While the nutrition group showed a significant decrease in perceived stress. The cognitive-behavioral group proved to decrease state and trait anxiety in the college students. Limitations of this study included a small sample size that volunteered for the study with only 78% actually completing the study. The qualitative data from the study did illustrate that students felt the interventions reduced psychological distress, anxiety, and their perceptions of stress.

Deckro et al. (2002) found that a six week mind and body intervention effectively reduced the anxiety levels of college students. Research needs to be done to determine whether a six week mind and body interventional strategy is effective for reducing anxiety levels in nursing students. Winterdyk et al. (2008) broke down the different interventional components of Deckro et al. (2002) study to determine the effect of each component. Despite the small sample size, this study showed that a cognitive-behavioral complementary intervention decreased state and trait

anxiety in college students. Further research is required with nursing students to determine the anxiety alleviating effects of the four different types of interventional strategy, including: physical exercise in the form of aerobic exercise and strength training; nutrition education; trained relaxation response techniques; and cognitive behavior therapy.

On-Line Stress Management Intervention

A randomized controlled trial with three parallel arms was performed to evaluate the efficacy of *MyStudentBody–Stress* (an interactive, online, multimedia program) to reduce college students' level of perceived stress, increase college students' health promoting behaviors, and increase college students' adjustment to college life stressors (Chiauszi, Brevard, Thurn, Decembrele, & Lord, 2008). The three parallel arms of this study were *MyStudentBody–Stress*, a control website containing health information often found in pamphlets offered in counseling centers, and no treatment. Participants for this study include 240 college students between 18-24 years of age scoring 14 or greater on the 'Perceived Stress Scale' from 10 different 4 year colleges in the United States. Forty students were chosen from each college. For this study, it was determined that participants needed to score 14 or greater on the 'Perceived Stress Scale', since that is the national mean score for individuals between 18 and 29 years of age. This multimedia online interactive program presents college students with individualized motivational stress management with online stress management tools, stress management strategies, and peer stories regarding personal experiences of stress.

By providing treatment online, this program was able to benefit individuals who are uncomfortable expressing their personal issues in a public, face to face environment. By having this intervention, *MyStudentBody–Stress*, online it allows college students in need to anonymously access the information at a time of day that is convenient for them and places some

of the responsibility for their health back into their own hands. The stress management subscale of the Health Promoting Lifestyle Profile II and the anxiety subscale of the College Adjustment Scales showed decreased scores for the *MyStudentBody–Stress* group compared to the other two groups. The study also found significant student satisfaction with the *MyStudentBody–Stress*. The participant sample for this randomized controlled trial was very representative, thus results may be generalizable to different types of students and academic settings. Though brief this intervention demonstrates the positive effect an online multimedia program like *MyStudentBody–Stress* can have on college students.

This study shows that an interactive, online, multimedia program like *MyStudentBody–Stress* is an effective interventional strategy for college students, but it did not examine the anxiety reducing capabilities of this interventional strategy. Further research is required to determine if an interactive, online, multimedia program like *MyStudentBody–Stress* would be effective with nursing students and its ability to effectively decrease nursing student anxiety.

Simulated Clinical Experiences

A study explored the effect working with a human patient simulator, prior to a first clinical experience, had on baccalaureate nursing students (Bremner, Aduddell, & Amason, 2008). This study focused upon the baccalaureate nursing students self confidence and comfort levels as evidenced by their anxiety levels. The study utilized an experimental design with randomized intervention groups. Four different variables included in this study are: student learning styles, student coping styles, anxiety level of students, and using the human patient simulator. This study compared the anxiety level of students from two different semesters that either worked with the human patient simulator or had to practice their clinical skills in the skills lab. One hundred and forty-nine sophomore baccalaureate nursing students who were randomly

assigned to one of two groups participated in this study. There were 71 nursing students in the human patient simulator group and 78 nursing students in the control group (normal clinical lab group). The state anxiety level was assessed prior to the experiment, trait anxiety levels were assessed at the end of the experiment prior to the first clinical experience in a hospital setting and one week after the students first clinical. This study found that utilizing the human patient simulator did decrease the students' anxiety level as evidenced by the difference in the student's trait scores one week after their first clinical experience; while the control group had increased levels of anxiety. Limitations of this study were the small sample size from a single nursing school.

A randomized controlled trial analyzed the effect a preclinical simulated experience had on nursing students' anxiety (Gore, Hunt, Parker, & Raines, 2010). Participants for this study included 70 junior baccalaureate nursing students enrolled in a fundamentals and health assessment course. Spielberger's State-Trait Anxiety Inventory (STAI) was utilized to analyze the effect of having a simulated clinical experience prior to the junior level nursing student's first clinical day. Simulation provided the nursing students with an opportunity to perform hands on patient care in a safe environment where they can ask faculty questions, have their critical thinking skills assessed, and begin to build self confidence as a novice nurse thus providing the student with a significant learning experience. The results from this study showed a statistically significant decrease in anxiety scores for students that experienced the preclinical simulation versus the control group. Limitations of this study were that it had a small sample size from only one college and that the self reported anxiety levels may be subjective. The validity of this study was increased since there were similar results for both the pilot study and the larger study.

Bremner, Aduddell, and Amason (2008) demonstrate the benefit of utilizing human patient simulators as an interventional strategy for decreasing nursing student anxiety. The use of human patient simulators to prepare nursing students for their first clinical experience greatly reduced student anxiety. Gore, Hunt, Parker, and Raines (2010) study reveals the anxiety alleviating benefits of using a simulated clinical environment to prepare nursing students for their first clinical experience. Despite the small sample sizes, both of these studies suggest that the use of simulation prior to a first clinical experience decreases the anxiety level of novice nursing students. Further research with a larger sample size from several nursing schools in the United States would help solidify the anxiety alleviating benefits of using a simulation.

Recommendations

Interventional Strategies for Nursing Students

Interventional strategies nurse educators can implement preventatively with nursing students include the use of 'Invitational Education Theory', created by Novak and Purkey in 2001, which can be incorporated into nursing programs thus encouraging students to realize their potential and their value. A complementary intervention strategy is meditation whether it is co-meditation, mindfulness meditation, or transcendental meditation. Meditation can be incorporated into nursing programs encouraging nursing students to develop skills to use when in anxiety producing situations. Another interventional strategy is mentoring, both mentoring triads and peer mentoring. Mentoring can be incorporated into nursing programs thus encouraging the development of trusting collegial relationships which can lead to decreased anxiety levels. A final interventional strategy that can be implemented in nursing programs as a preventative measure for reducing anxiety is simulation. Simulation can be incorporated into nursing

programs at various points to help build students confidence with patient care and the healthcare environment.

Future Research of Interventional Strategies with Nursing Students

Further research is required with several of the intervention strategies to assess their efficacy for use with nursing students. Additional research regarding the anxiety alleviating benefits of autogenic training with undergraduate nursing students in the United States would definitely be helpful to establish autogenic training as an effective anxiety alleviating interventional strategy with nursing students. Further research is needed to examine the different forms of meditation and their applicability for use with nursing students. Several large randomized controlled trial research studies with diverse participant groups of undergraduate nursing students in the United States would be favorable to examine the anxiety alleviating benefits of different forms of meditation. Additional investigations are necessary to examine mentoring triads and forms of peer mentoring to establish their anxiety alleviating advantages with nursing students. Several large randomized controlled trial research studies with diverse participant groups of undergraduate nursing students in the United States would be advantageous to examine the anxiety alleviating benefits of the different forms of mentoring. Research is required to determine the efficacy of using a mind and body interventional strategy to decrease anxiety with nursing students. A large randomized controlled trial research study with a diverse participant group of undergraduate nursing students in the United States, to examine the anxiety alleviating benefits of a mind and body intervention, such as physical exercise in the form of aerobic exercise and strength training; nutrition education; trained relaxation response techniques; and cognitive behavior therapy would be valuable.

Conclusion

Research has established the prevalence of anxiety in nursing students. The detrimental effects anxiety can have on nursing students' learning process has been well recognized. Thus, it is important for nurse educators to be aware of how vulnerable their students are to developing anxiety, be attentive to nursing students observing them for signs and symptoms of anxiety, and intervene when students need help. Nurse educators play a pivotal role in the development of new nurses and it is imperative that nurse educators intervene when it appears that anxiety is interfering with their students learning process.

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