

Academic Stress: Coping Strategies by Nursing Students



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ABSTRACT: Students across a wide range of industries and educational levels frequently feel academic stress. It is defined as the body's and mind's reaction to the demands and strains of education, such as homework, projects, exams, and clinical training. Particularly when it comes to juggling the demands of their education and their clinical training and practicum, nursing students confront special stresses. To uncover practical coping mechanisms that assist nursing students in their academic endeavors, this study examines the coping mechanisms used by these students to deal with academic stress. Data were gathered from 196 nursing students at St. Michael's College of varying academic levels using a descriptive-correlational study approach. The study looks at how respondents' characteristics, academic stress, and the coping mechanisms they use—such as problem-, emotional-, and avoidant-focused coping mechanisms—relate significantly. The results add to the understanding of how nursing students cope with academic stress by highlighting the importance of including stress management programs into the nursing curriculum to teach a variety of student-specific coping mechanisms. A preliminary investigation including thirty-two nursing students yielded significant information for improving the research questionnaire. Results revealed that there exist notable differences in the academic pressures experienced by the respondents when classified based on their profile. The stresses related to personal time management do not significantly differ according to age, sex, parental marital status, or family rank, except for year level, where fourth-year students exhibit greater stress levels. However, there are notable differences in the stresses associated with academic burden according to age and year level. Participants who are 20 years of age or younger report feeling less stressed than older participants, while first-year students report feeling more stressed than second- and third-year students. In conclusion, the results show that year level and age have a major impact on the stress that academic overload causes for the respondents. To lessen academic stress and improve students' general well-being, recommendations include encouraging peer-to-peer connection to create a friendly environment in educational institutions and advocating for self-care techniques. Important insights from nursing students helped to improve the research technique. One suggestion is to create a welcoming atmosphere in educational institutions by encouraging self-care behaviors and peer-to-peer engagement lessen the burden of school and improve the general wellbeing of children. These suggestions are pertinent to nursing educators and educational establishments that aim to provide nursing students with all-encompassing assistance in efficiently handling academic stress, therefore enhancing their general welfare and scholastic achievement.

KEYWORDS: Nursing Students, Academic Stress, Coping Strategies, Stress management, Well-being

1.0 INTRODUCTION

Students frequently encounter the phenomena of academic stress over a range of disciplines and educational levels. It is defined as the body's and mind's reaction to the demands and strains of education, such as homework, projects, exams, and clinical training. Particularly when it comes to balancing the demands of their coursework, practicum, and clinical training, nursing students encounter significant challenges. The academic climate in college is one of the high expectations. Academic pressure, an abundance of information, unrealized goals, and restricted possibilities combined with intense competition led to stress in the classroom. The demands of nursing education are high, and the curriculum is demanding. Similar demands apply to undergraduate nursing students as they do to other college students in addition to a demanding curriculum and clinical proficiency prerequisites. Nursing students have several requirements before their clinical assignment, which means they must complete lengthier study hours due to lack of free time in addition to constant exams, research papers, and other tasks.

Previous studies have shown that academic stress is the most prevalent nursing students' psychological state (Ramli et al. 2018). High course expectations, numerous assignments, peer pressure, tests, time management issues, and personal struggles including family separation, identity development, and student-worker duties are frequently blamed for this stress (Kumaraswamy, 2013). Stress levels are also influenced by the interactions that clinical rotation participants have with patients (Ramli et al. 2018).

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One research on nursing students' coping mechanisms and academic stress among undergraduate students (Luo et al.'s "Nursing students: An Integrative Review" (2021) revealed that nursing students had academic stress at a frequency of 61.3% overall, with a range of 15% to 87%. Problem-focused coping accounted for most coping techniques utilized (71.4%), with emotion-focused coping coming in second (63.7%). Additionally, the study discovered that students' stress levels were lower when they combined emotion- and problem-focused coping mechanisms.

2.0 OBJECTIVES OF THE STUDY

The research investigated the connection between academic stress and the coping mechanisms used by SMC Iligan City nursing students. This research specifically aimed to respond to the following questions such as What is the Profile of the respondents, what are the academic stressors in terms of Academic Workload and Personal Time Management, Is there a significant difference between the respondents academic stressors when group according to their profile, what are the different coping strategies in terms of Problem Focused Coping, Emotion-Focus Coping and Avoidant Coping, is there a significant difference of the respondents' coping strategies when group according to their profile and lastly, is there a significant relationship between the academic stress and coping strategies of the respondents.

3.0 METHODS

The study on academic stress and coping strategy of Nursing students at St. Michael's College, Iligan City utilized Purposive sampling, a nonprobability sampling approach that aims to gather a sample of people who are informed about the issue of interest and can supply the data required for the study. In the context of academic stress and coping strategies among nursing students, the researcher selected participants who are currently enrolled in a nursing program and have experienced academic stress. The investigator could, furthermore, consider other factors like age, gender, and past expertise with academic pressure on choosing study subjects.

The research tool used in the investigation included of a self-made survey questionnaire constructed based on readings, experience, interviews, and observation and proven coping measures derived from the Lazarus and Folkman short coping scale using Likert scale with the strongly agree to strongly disagree answer types provided insightful information on the participants' coping mechanisms and levels of academic stress tactics. The ability to include original questions allows for specificity and customization according to the goals of the research. To ensure the reliability of the research instrument, a pilot test was conducted with a subset of participants and utilized appropriate statistical analysis, such as calculating reliability coefficients like Cronbach's Alpha.

The researcher employed quantitative methods such as basic and inferential statistical tools of treating the data for analyses suited according to the research problem. These descriptive statistical tools were used to describe the respondents' profiles, measure the average location and variation of the respondents' self-assessment on their level of academic stressors and their coping strategies using frequency and percentage equivalent, Mean and Standard Deviation and Mann-Whitney U Test and Kruskal-Wallis H Test, Shapiro-Wilk test, Spearman Rho Correlation to determine the significant relationship of the respondents' academic stressors and coping strategies of the nursing students. These tools were appropriate since the data sets are continuous but not normally distributed.

4.0 RESULTS AND DISCUSSION

Table 1. Frequency and Percentage Distribution of the Respondents' Profile

| Profile | | Frequency | Percent |
|--------------------|------------------------|-----------|---------|
| Sex | Female | 182 | 92.9 |
| | Male | 14 | 7.1 |
| Age | 20 years old and below | 122 | 62.2 |
| | 20 years old above | 74 | 37.8 |
| Year Level | First Year | 99 | 50.5 |
| | Second Year | 57 | 29.1 |
| | Third Year | 27 | 13.8 |
| | Fourth Year | 13 | 6.6 |
| Rank in the Family | First to Third | 128 | 65.3 |

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|-------------------------------|-------------------|-----|------|
| | Fourth to Seventh | 68 | 34.7 |
| | | | |
| Parents Marital Status | Married | 188 | 95.9 |
| | Separated | 8 | 4.1 |

Basing on the results on the demographic profile of nursing students on their sex, age, year level, rank in the family, and parents' marital status at St. Michael's College in Iligan City, majority of the respondents are female (92.9%) aging 20 years old and below (62.2%), with the First Year level (50.5%) as majority of the respondents ranking either the first to third child in their family (65.3%) or the fourth to seventh child (34.7%) and majority of the respondents have parents who are married (95.9%).

Table 2.1 Level of Academic Stressors of the Respondent in terms of Academic Workload

| Indicators | Mean | SD | Qualitative Interpretation |
|---|-------------|-------------|----------------------------|
| 1. Excessive assignments in every subjects. | 3.24 | 1.312 | <i>Sometimes</i> |
| 2. Preparation for examination. | 3.09 | .921 | <i>Sometimes</i> |
| 3. Difficulty in excelling my quizzes. | 1.73 | .830 | <i>Never</i> |
| 4. Return Demonstration. | 2.75 | 1.120 | <i>Sometimes</i> |
| Over-all Mean | 2.70 | .549 | <i>Sometimes</i> |

According to the research findings, respondents' perceptions of their academic burden are often characterized by a moderate degree of stress. While many components, like the challenge of performing well on tests, appear to be less stressful overall, others, like a high volume of assignments and return demonstrations, cause respondents to feel more stressed, while there is some variation in their experiences. The results offer educators and institutions useful information on how to address certain stressors and put tailored interventions in place to help students manage their academic burden.

Table 2.2 Level of Academic Stressors of the Respondent in terms of Personal Time Management

| Indicators | Mean | SD | Qualitative Interpretation |
|--|-------------|-------------|----------------------------|
| 1. I have difficulty organizing my school works. | 3.87 | .715 | <i>Very Often</i> |
| 2. I am having a hard time setting my own goals especially coping with deadline. | 3.90 | .835 | <i>Very Often</i> |
| 3. I am usually struggling in delegating responsibilities. | 4.44 | .848 | <i>Always</i> |
| 4. It's very difficult prioritizing school activities. | 4.31 | 1.118 | <i>Always</i> |
| 5. I don't know how to multitask. | 3.66 | .900 | <i>Very Often</i> |
| Over-all Mean | 4.04 | .402 | <i>Very Often</i> |

The level of academic stressors of the respondents in terms of personal time management reveals that the nursing students stated that they were under a great deal of academic stress. On the qualitative interpretation scale, "Very Often" is the result of a mean score of 4.04 for all five factors.

"I usually struggle with delegating responsibilities" (4.44) and "It's very difficult to prioritize school activities" (4.31) were the two indications with the highest mean scores. This shows that these areas of personal time management are particularly challenging for the responders.

"I don't know how to multitask" (3.66) was the indicator with the lowest mean score. This implies that respondents could have greater faith in their multitasking skills than in other facets of their own time management. Additionally, there was a slight tilt in the answer distribution towards the higher end of the qualitative interpretation scale. Regarding personal time management, 60% of the respondents said they experienced academic stress "Very Often," but only 40% said they experienced it "Always." These

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results imply that student time management skills need to be developed through interventions, especially in the areas of delegation and priority. Providing students with tools and assistance to help them develop their multitasking skills may also be beneficial.

Table 2.3 Summary of the Respondents' Level of Academic Stressors

| Scoring Scale | Academic Workload | | | | Personal Time Management | | | |
|---------------|-------------------|--------------|-------------|------------------|--------------------------|--------------|-------------|-------------------|
| | f | % | M | QI | f | % | M | QI |
| 1.00 – 1.79 | 16 | 8.2 | 1.73 | Never | | | | |
| 1.80 – 2.59 | 75 | 38.3 | 2.32 | Rarely | | | | |
| 2.60 – 3.39 | 81 | 41.3 | 2.98 | Sometimes | 10 | 5.1 | 3.10 | Sometimes |
| 3.40 – 4.19 | 23 | 11.7 | 3.59 | Very Often | 100 | 51.0 | 3.82 | Very Often |
| 4.20 – 5.00 | 1 | 0.5 | 4.25 | Always | 86 | 43.9 | 4.40 | Always |
| Total | 196 | 100.0 | 2.71 | Sometimes | 196 | 100.0 | 4.04 | Very Often |

M – Mean

A summary of the respondents' level of academic stress in terms of academic workload and personal time management revealed that most respondents reported moderate levels of stress (between 2.60 and 3.39) related to their academic burden, indicating that they typically face academic stresses. Furthermore, a large portion of respondents reported high levels of stress (4.04) on this category, indicating that personal time management is a substantial cause of stress. Educational institutions may utilize this information to create customized treatments and support systems that cater to the unique pressures that students experience.

Table 3.1 Results of the Analyses on the Respondents' Level of Academic Stressors in Terms of Academic Workload When Classified According to Their Profile

| Profile | | Academic Workload | | Statistical Value | p-value |
|------------------------|------------------------|-------------------|----|-------------------|---------|
| | | Mean | QI | | |
| Sex | Female | 2.71 | S | 1093.50 | .373 |
| | Male | 2.59 | R | | |
| Age | 20 years old and below | 2.62 | S | 3358.50 | .002 |
| | 20 years old above | 2.84 | S | | |
| Year Level | First Year | 2.57 | R | 14.559 | .003 |
| | Second Year | 2.87 | S | | |
| | Third Year | 2.77 | S | | |
| | Fourth Year | 2.88 | S | | |
| Rank in the Family | First to Third | 2.73 | S | 3995.50 | .341 |
| | Fourth to Seventh | 2.64 | S | | |
| Parents Marital Status | Married | 2.71 | S | 542.00 | .178 |
| | Separated | 2.47 | R | | |

**Significant at 0.01 level (*Highly Significant*) *Qualitative Interpretation (QI): R – Rarely; S – Sometimes*

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Difference between **age** and **year level** denotes significance at adjusted p-value using Bonferroni corrections

Results on the Analyses of Respondents' Level of Academic Stressors in Terms of Academic Workload when classified according to their profile including sex, age, year level, family position, and parents' marital status shows statistically significant difference in the mean academic workload between female and male respondents ($p = 0.373$). Female respondents reported a slightly higher mean workload, indicating that they sometimes experience more academic stressors compared to their male counterparts. The mean academic burden differs significantly ($p = 0.002$) between respondents who are 20 years of age or less and those who are older. The somewhat greater mean workload demonstrated by respondents who were 20 years of age and older suggests that they occasionally encounter more academic stresses.

The mean workload for students varies all throughout year levels in a statistically significant way ($p = 0.003$). Compared to other year levels, first-year students often report a slightly lower mean workload, indicating that they seldom experience greater academic stresses.

The mean academic burden does not differ statistically significantly throughout family rankings ($p = 0.341$). The mean academic burden for respondents with married and single parents does not differ statistically significantly ($p = 0.178$).

Significant differences in the amount of academic effort across various demographic profiles are highlighted by the study's findings. A strategy to managing academic stresses that is more successful can be achieved by considering these variations to design support methods and focused treatments to certain groups.

Table 3.2 Results of the Analyses on the Respondents' Level of Academic Stressors in Terms of Personal Time Management When Classified According to Their Profile

| Profile | | Personal Time Management | | Statistical Value | p-value |
|------------------------|------------------------|--------------------------|----|-------------------|---------|
| | | Mean | QI | | |
| Sex | Female | 4.04 | VO | 1184.00 | .656 |
| | Male | 3.97 | VO | | |
| Age | 20 years old and below | 4.02 | VO | 4211.00 | .425 |
| | 20 years old above | 4.06 | VO | | |
| Year Level | First Year | 3.99 | VO | 8.628 | .055 |
| | Second Year | 4.03 | VO | | |
| | Third Year | 4.09 | VO | | |
| | Fourth Year | 4.28 | A | | |
| Rank in the Family | First to Third | 4.00 | VO | 3699.50 | .080 |
| | Fourth to Seventh | 4.10 | VO | | |
| Parents Marital Status | Married | 4.04 | VO | 538.50 | .169 |
| | Separated | 3.90 | VO | | |

Qualitative Interpretation (QI): VO – Very Often; A - Always

The results of the Analyses on the Respondents' Level of Academic Stressors in Terms of Personal Time Management When Classified According to Their Profile revealed qualitative scale, "Very Often" is represented by the mean score of 4.04 for personal time management stress. This suggests that the group is under a lot of stress when it comes to managing their own time. Males and females do not vary statistically significantly in terms of personal time management stress. The difference between the somewhat lower stress levels reported by those under 20 and those over 20 is not statistically significant.

Students in their fourth year of study report the most stress, with third- and second-year students following closely behind. Stress levels are lowest among first-year students. There is a statistically significant difference here. The stress levels of children in the first through third and fourth through seventh grades are comparable and do not differ significantly.

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Table 4.1 Level of Coping Strategies of the Respondent in terms of Problem Focused Coping

| Indicators | Mean | SD | Qualitative Interpretation |
|--|-------------|-------------|----------------------------|
| 1. I discuss issues with clinical instructors, family, seniors or friends and classmates and ask for their opinions. | 4.26 | .986 | Always |
| 2. When I encounter conflicts in my academic study and activities, I will first arrange and plan. | 4.37 | 1.022 | Always |
| 3. I simplify the question and make it easy to solve. | 3.64 | 1.006 | Always |
| 4. I use a calm and optimistic attitude to think about how to cope with the problem | 4.49 | .947 | Always |
| 5. I stay up finishing my homework until midnight. | 4.40 | .931 | Always |
| Over-all Mean | 4.23 | .382 | Always |

Level of Coping Strategies of the Respondent in terms of Problem Focused Coping, respondents utilized to deal with difficult academic situations. The data provided insights into the frequency with which respondents apply various strategies for coping by presenting mean scores, standard deviations, and qualitative interpretations for five variables. The overall mean presents an in-depth understanding of the respondents' most prevalent coping strategy. Respondents demonstrated a diverse and active approach to problem-solving through seeking support, planning, and positive thinking as highly valued strategies.

Table 4.2 Level of Coping Strategies of the Respondent in terms of Emotion Focused Coping

| Indicators | Mean | SD | Qualitative Interpretation |
|--|-------------|-------------|----------------------------|
| 1. I try to adjust my mindset and allow myself to be happier. | 4.11 | 1.161 | Very Often |
| 2. I talk with classmates or friends, or disclose to my online friends. | 4.91 | .443 | Always |
| 3. I let myself calm down first and think of how to reconcile the negative emotions. | 4.35 | 1.078 | Always |
| 4. I eat and have fun to decrease the stress first. | 4.95 | .243 | Always |
| 5. I consider it to be a type of self-challenge. | 2.69 | 1.140 | Rarely |
| 6. I give up and blame God for being unfair when I face stress. | 1.09 | .389 | Never |
| Over-all Mean | 3.68 | 3.26 | Very Often |

The data on the level of coping strategies employed by the respondents in terms of emotion-focused coping provides information on the emotional coping mechanisms respondents use to deal with stress. On the qualitative scale, "Very Often" is the interpretation of the mean score of 3.68 for all six factors. This implies that, while there may be some variation in particular activities, respondents usually adopt emotion-focused coping techniques. Emotional self-control and social support are identified as the main coping mechanisms. Self-care and distraction are important components of stress management. Self-challenge and positive reframing are less common but have the potential to be promoted as resilience-building techniques. There seems to be little externalization of blame, suggesting that responders accept responsibility in a healthy way.

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Table 4.3 Level of Coping Strategies of the Respondent in terms of Avoidant Coping

| Indicators | Mean | SD | Qualitative Interpretation |
|---|-------------|-------------|----------------------------|
| 1. I generalize that I have bad luck when I face stress. | 3.02 | .856 | <i>Sometimes</i> |
| 2. I leave aside the problem first. | 4.79 | .710 | <i>Always</i> |
| 3. I passively let nature take its course. | 3.38 | 1.038 | <i>Sometimes</i> |
| 4. I am used to leaving aside the problem and not handling it for the time being. | 4.76 | .701 | <i>Always</i> |
| 5. I make myself numb by (e.g. drinking alcohol) or I leave the problem aside. | 1.09 | .524 | <i>Never</i> |
| Over-all Mean | 3.41 | .331 | <i>Very Often</i> |

Level of Coping Strategies of the Respondent in terms of Avoidant Coping shows that on the qualitative scale, "Very Often" is the interpretation of the mean score of 3.41 obtained from all five indications. This implies that respondents generally use avoidant coping mechanisms to a modest extent. On the other hand, various individuals adopt different specialized behaviors. Two of the most common avoidant coping techniques are procrastination and issue avoidance. The incidence of negative attributions and passivity is modest. There is no evidence of substance usage as a coping strategy, suggesting that stress management techniques may be beneficial. The average overall mean of 3.41 indicates that avoidant coping methods are often used by respondents. The respondents' great degree of consistency in applying these tactics is indicated by the low total standard deviation of 0.331.

Table 4.4 Summary of the Respondents' Level of Coping Strategies

| Scoring Scale | Problem Focused | | | | Emotion Focused | | | | Avoidant Focused | | | |
|---------------|-----------------|-------|----------|-----------|-----------------|-------|----------|-----------|------------------|-------|----------|-----------|
| | <i>f</i> | % | <i>M</i> | <i>QI</i> | <i>f</i> | % | <i>M</i> | <i>QI</i> | <i>f</i> | % | <i>M</i> | <i>QI</i> |
| 1.80 – 2.59 | | | | | | | | | 4 | 2.0 | 2.40 | <i>R</i> |
| 2.60 – 3.39 | 5 | 2.6 | 3.12 | <i>S</i> | 46 | 23.5 | 3.24 | <i>S</i> | 51 | 26.0 | 3.05 | <i>S</i> |
| 3.40 – 4.19 | 47 | 24.0 | 3.79 | <i>VO</i> | 139 | 70.9 | 3.78 | <i>VO</i> | 136 | 69.4 | 3.54 | <i>VO</i> |
| 4.20 – 5.00 | 144 | 73.5 | 4.41 | <i>A</i> | 11 | 5.6 | 4.33 | <i>A</i> | 5 | 2.6 | 4.24 | <i>A</i> |
| Total | 196 | 100.0 | 4.23 | <i>A</i> | 196 | 100.0 | 3.68 | <i>VO</i> | 196 | 100.0 | 3.41 | <i>VO</i> |

M – Mean; *Qualitative Interpretation (QI)*: *A* – Always, *VO* – Very Often, *S* – Sometimes, *R* – Rarely

The level of each coping strategy used by respondents in the problem-focused, emotion-focused, and avoidant-focused categories revealed Problem-focused (4.23) and emotion-focused (3.68) coping strategies have the highest average scores among respondents, both of which are interpreted as "Always" on the qualitative scale. This suggests a high propensity to deal with issues head-on and control feelings while under pressure.

The least effective coping strategy is avoidant-focused (3.41), which is read as "Very Often" and indicates a considerable dependence on avoidance as a coping method. Overall, there is a modest preference for using problem-focused methods over emotion-focused ones.

Compared to the avoidant-focused category, which has a higher number of respondents in the "Sometimes" group, both problem-focused and emotion-focused methods have a bigger percentage of respondents in the "Always" category.

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Table 5.1 Results of the Analyses on the Respondents' Level of Coping Strategies in Terms of Problem Focused when Classified According to Their Profile

| Profile | | Problem Focused | | Statistical Value | p-value |
|------------------------|------------------------|-----------------|----|-------------------|---------|
| | | Mean | QI | | |
| Sex | Female | 4.24 | A | 1016.00 | .198 |
| | Male | 4.10 | VO | | |
| Age | 20 years old and below | 4.20 | A | 3655.50 | .023* |
| | 20 years old above | 4.29 | A | | |
| Year Level | First Year | 4.20 | A | 10.027 | .031* |
| | Second Year | 4.27 | A | | |
| | Third Year | 4.15 | VO | | |
| | Fourth Year | 4.48 | A | | |
| Rank in the Family | First to Third | 4.19 | VO | 3648.50 | .058 |
| | Fourth to Seventh | 4.30 | A | | |
| Parents Marital Status | Married | 4.23 | A | 706.00 | .765 |
| | Separated | 4.18 | VO | | |

*Significant at 0.05 level

Qualitative Interpretation (QI): A – Always; VO – Very Often

Difference between **year level** denotes significance at adjusted p-value using Bonferroni corrections.

According to the study, the respondents' level of coping strategies in terms of problem-focused coping, classified according to their profile varies depending on the age and year level of the respondents. A possible need for specialized interventions to improve problem-focused coping methods in these groups is indicated by the considerably lower mean scores reported by respondents who were under 20 years old and those who were in their first year of study. Problem-focused coping mechanisms did not significantly differ based on other demographic characteristics as sex, parental marital status, or family rank. The respondent population's unique demographic groupings can benefit from customized assistance programs based on these findings.

Table 5.2 Results of the Analyses on the Respondents' Level of Coping Strategies in Terms of Emotion Focused when Classified According to Their Profile

| Profile | | Emotion Focused | | Statistical Value | p-value |
|--------------------|------------------------|-----------------|----|-------------------|---------|
| | | Mean | QI | | |
| Sex | Female | 3.69 | VO | 1225.00 | .808 |
| | Male | 3.63 | VO | | |
| Age | 20 years old and below | 3.67 | VO | 4409.00 | .782 |
| | 20 years old above | 3.70 | VO | | |
| Year Level | First Year | 3.71 | VO | 1.610 | .657 |
| | Second Year | 3.65 | VO | | |
| | Third Year | 3.66 | VO | | |
| | Fourth Year | 3.67 | VO | | |
| Rank in the Family | First to Third | 3.65 | VO | 3751.50 | .106 |
| | Fourth to Seventh | 3.73 | VO | | |

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|------------------------|-----------|------|----|--------|------|
| | | | | | |
| Parents Marital Status | Married | 3.69 | VO | 511.50 | .120 |
| | Separated | 3.52 | VO | | |

Qualitative Interpretation (QI): VO – Very Often

Analysis of Emotion-Focused Coping Strategies by Profile revealed an average score of 3.68, which corresponds to "Very Often" on the qualitative scale. This suggests that while under stress, there is a moderate to high amount of general participation in emotional regulation. Emotion-focused coping techniques, in contrast to problem-focused coping, do not exhibit significant differences according to the investigated demographic characteristics. This shows that respondents, irrespective of their upbringing, have a comparable propensity to self-soothe and participate in emotional regulation to handle stress.

Table 5.3 Results of the Analyses on the Respondents' Level of Coping Strategies in Terms of Avoidant Focused when Classified According to Their Profile

| Profile | | Avoidant Focused | | Statistical Value | p-value |
|------------------------|------------------------|------------------|----|-------------------|---------|
| | | Mean | QI | | |
| Sex | Female | 3.40 | VO | 953.50 | .106 |
| | Male | 3.49 | VO | | |
| Age | 20 years old and below | 3.44 | VO | 3561.50 | .011* |
| | 20 years old above | 3.36 | S | | |
| Year Level | First Year | 3.44 | VO | 5.467 | .141 |
| | Second Year | 3.36 | S | | |
| | Third Year | 3.38 | S | | |
| | Fourth Year | 3.42 | VO | | |
| Rank in the Family | First to Third | 3.42 | VO | 3886.50 | .203 |
| | Fourth to Seventh | 3.38 | S | | |
| Parents Marital Status | Married | 3.41 | VO | 704.00 | .752 |
| | Separated | 3.43 | VO | | |

*Significant at 0.05 level

Qualitative Interpretation (QI): VO – Very Often ; S - Sometimes

Based on several demographic variables the study investigated the extent to which respondents utilized avoidant-focused coping mechanisms. According to the qualitative scale, "Very Often" is the interpretation of the mean score of 3.41 for avoidant-focused coping mechanisms. This suggests a generally somewhat high dependence on avoidance as a stress-reduction strategy. Avoidant-focused coping techniques exhibit less variance across demographic groups than problem- and emotion-focused coping techniques. This indicates a very constant propensity, independent of background, to adopt avoidance as a stress-reduction strategy, akin to emotion-focused coping. Still, additional research is necessary given the statistically substantial age-based difference in avoidance (younger responders utilizing it more).

Table 6. The correlation coefficients and p-values that examine the relationship between academic stress and coping strategies of the respondents.

| Variables | | Correlation Coefficient | p-value |
|-------------------|-----------------|-------------------------|---------|
| Academic Workload | Problem Focused | .036 | .619 |
| | Emotion Focused | -.093 | .194 |

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|---------------------------------|-------------------------|-------|------|
| | Avoidant Focused | -.021 | .773 |
| Personal Time Management | Problem Focused | -.120 | .095 |
| | Emotion Focused | .129 | .071 |
| | Avoidant Focused | .000 | .998 |

This data demonstrates the relationship that respondents' various coping mechanisms and academic stress have. For most associations, the correlation coefficients are often low and insignificant. This implies that respondents' choice of coping mechanisms may not be significantly influenced by academic stress. According to the results, coping mechanisms may be more significantly shaped by variables other than academic stress. Although certain correlations provide some indications, they are insufficient to make firm inferences on causal links.

CONCLUSION

Respondents' coping mechanisms did not seem to be directly impacted by academic stress. Although there was considerable subtlety in personal time management, its influence was restricted to certain coping strategies. Remarkably, respondents' choice of coping mechanisms was not significantly influenced by the amount of academic stress they experienced. This implies that other variables may have a greater impact on how they react to stress. More fascinating insights were provided by personal time management. It appeared to have an impact on respondents' dependence on avoidance as a coping strategy, but it didn't seem to alter how they approached issues or controlled their emotions. These results present a nuanced picture. It's unclear how personal time management affects other coping mechanisms, but it appears to explicitly push respondents away from avoidant coping. This study creates more opportunities than it shuts. The research demonstrated the complex interactions between stress, time management, and coping mechanisms even though research did not prove a causal relationship between academic stress and coping mechanisms. To fully understand the complex network of variables affecting how students manage academic pressure, more study is essential.

RECOMMENDATION

Because of the demanding workload, clinical rotations, and ethical dilemmas they encounter throughout their studies, nursing students are particularly susceptible to emotional and academic strain. Promoting student success and preparing them for the nursing profession requires an understanding of their coping mechanisms and how they affect different outcomes. This study may help develop focused interventions and educational initiatives that give nursing students practical stress-reduction techniques.

It could improve the wellbeing of students, their academic standing, and their general readiness for the nursing field. To better support student achievement and mental health, nursing educators, program directors, and healthcare organizations may find the findings insightful. It would be important to address ethical concerns about confidentiality and provide informed consent, working together to collect and use data with healthcare organizations and nursing schools. The practical effect of the study would be enhanced by collaboration with nursing schools and healthcare facilities for the purpose of data gathering and possible intervention implementation. Publishing the research findings and sharing them with nursing educators, students, and healthcare professionals through seminars, conferences, and publications might be beneficial.

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