

Stress And Coping Strategies Of Student Nurses In Lorma Colleges: A Proposed Health Education Activity

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Abstract

Student nurses face significant academic and clinical stress, which can impact their well being and academic performance. Understanding sources of stress and developing effective coping strategies is essential for maintaining academic success and emotional health throughout their nursing journey. This study aimed to assess stress levels and coping strategies among Level III and IV student nurses at Lorma Colleges and to develop targeted health education program in response. Descriptive-correlational design was employed, and data were gathered from 435 respondents using stratified random sampling to ensure representation across year levels. Inclusion criteria specified currently enrolled Level III and IV BSN students actively participating in academic and clinical duties during the second semester of SY 2024 2025. Data collection tools included Perceived Stress Scale (PSS) and Brief COPE Questionnaire. Results revealed moderate stress levels, with a tendency toward problem focused coping strategies. Significant differences in stress levels were observed based on gender, year level, and theoretical coursework hours, with male students reporting higher stress. Significant correlation was found between stress levels and the coping strategies employed. A health education activity titled Stress Resilience 2.0 is proposed to enhance student nurses' resilience through evidence-based coping strategies, fostering improved academic performance and emotional stability.

Keywords: *Stress, Coping Strategies, Student Nurses, Perceived Stress Scale, Stress Resilience*

1. Introduction

The demanding curriculum of nursing programs presents significant challenges for students, particularly during the week preceding examinations. The concentrated effort required to assimilate a semester's worth of complex material often results in extended study hours and intense academic pressure. The drive to succeed, coupled with the fear that a failing grade potentially impacts a future career creates a feeling of being overwhelmed and stressed.

Additionally, the demands of clinical responsibilities, including lengthy shifts, minimal breaks, and the constant obligation to ensure patient safety, can leave one feeling drained and fatigued. Dealing with patients' suffering and vulnerability can also take a toll, adding to the feeling of burnout. It's a challenging balancing act to juggle academic work, clinical responsibilities, and your own mental health.

The life of a student nurse is dynamic and multifaceted, balancing the hardship of academic study with the demands of clinical practice. Academically, student nurses immerse themselves in intensive coursework, studying subjects such as anatomy, pharmacology, maternal and child nursing, pathophysiology, and memorizing lengthy procedures for their return demonstrations. These foundational topics prepare them for the practical responsibilities of nursing. Clinically, they engage in rotations where they apply theoretical knowledge to real-life patient care, fostering critical thinking technical skills, and emotional resilience.

Hence, stress is not just an obstacle—it's an inevitable part of the nursing path that, when managed well, can become a powerful catalyst for growth. Understanding the sources of stress and developing effective coping strategies is crucial not only for academic success but for maintaining mental and emotional health throughout the nursing journey. By taking proactive steps to manage your stress, you can navigate the challenges of nursing school and maintain your well-being throughout your journey.

According to McCloughen et al. (2020), "clinical learning plays a crucial role in nursing education, offering invaluable opportunities for students to gain hands-on experience and develop vital nursing skills. It is a core component of nursing programs, with students required to complete a minimum number of clinical hours before graduation to ensure they are adequately prepared for the demands of the profession." This practical exposure enables student nurses to integrate theoretical knowledge with real-world practice, fostering competencies necessary for patient care. However, this experience can also be a significant source of stress for students, particularly when combined with academic pressures and personal challenges.

Moreover, stress is an inherent part of their journey. According to The American Psychological Association (2022) stress is "a normal reaction to a threat, challenge, or demand, representing the body's way of responding to any kind of demand or threat." Stress triggers a cascade of physiological and psychological responses that prepare an individual to face challenges, often referred to as the "fight-or-flight" response. While this reaction is essential for survival, prolonged or chronic stress can negatively affect mental and physical well-being, leading to issues like anxiety, depression or cardiovascular problems. This underscores stress as both a necessary and potentially harmful part of human experience, depending on its duration and intensity. It highlights the importance of adaptive coping strategies to manage stress effectively and prevent its adverse effects.

Similarly, stress is defined by the World Health Organization (2023), as a "state of worry or mental tension caused by a difficult situation. Stress is a natural human response that prompts us to address challenges and threats in our lives." In the context of student nurses, stress can be triggered by the academic workload, clinical duties, and the emotional demands of patient care. If not managed properly, stress can negatively impact students' mental health, academic performance, and overall well-being. Effective coping strategies, such as time management, seeking social support, and practicing relaxation techniques, can significantly help in mitigating these adverse effects.

Stress is a common experience among student nurses, often attributed to the demanding nature of their academic and clinical training. According to recent studies, student nurses experience a variety of stressors that impact their mental health, such as academic pressures, clinical responsibilities, and personal challenges. For instance, a study by Cheng, et.al (2023) in Hong Kong found that stress levels in student nurses increased significantly over their years of study, with the highest levels observed in the second and fourth years due to academic workload, and the third year showing the highest levels of psychological distress.

Stress among student nurses is a well-documented issue that significantly affects their academic performance, emotional well-being, and physical health. It is primarily attributed to the demanding nature of their academic curriculum, clinical placements, and personal life challenges. A study by Asio and Garcia (2023) highlighted that student nurses experienced moderate to high stress levels, especially during the pandemic, and that stress levels were influenced by factors such as gender, age, and year level.

Additionally, Labrague (2024) in his umbrella review found that the most common sources of stress among student nurses include academic workloads, patient care responsibilities, and interactions with faculty and nursing staff. These stressors often stem from the demanding nature of nursing education, which combines theoretical learning with practical clinical exposure. If left unmanaged, such stressors can lead to significant mental health challenges, including burnout, anxiety and depression. The review emphasized the critical need for effective intervention to mitigate these stressors and promote resilience among student nurses.

According to Supasitthumrong (2024), stress is the body's response to stressful situations, which can alter respiration, heart rate, and vision. The "fight-or-flight response" is triggered by the autonomic nervous system to assist you in managing stress. Chronic stress, on the other hand, can cause the body to react to stress continuously, which over time can lead to persistent fatigue. A wide range of behavioral, mental, and physical problems may result from this ongoing stress. Chest pain, a racing heart, sexual dysfunction, decreased immunity, fatigue, migraines, body aches, tense muscles, clenching of the jaw, and digestive issues are some of the physical symptoms. On an emotional level, it might result in depression, anxiety, impatience, and unhappiness. In addition, chronic stressors may develop food disorders, compulsive shopping, gambling, drink too much alcohol, or abuse drugs, among other undesirable behaviors.

According to Algorani (2023), coping refers to the thoughts and behaviors consciously mobilized to manage internal and external stressors, differing from defense mechanisms, which are subconscious. Coping is categorized into four major types: problem-focused coping, which addresses the root cause of stress through active strategies like planning; emotion-focused coping, which aims to reduce negative emotions using techniques like humor and acceptance; meaning-focused coping, which helps individuals derive meaning from stressful situations; and social coping, where individuals seek support from their community. In the context of student nurses, these strategies are crucial due to the intense stressors they face, such as academic workloads, clinical rotations, and emotional challenges from patient care.

When coping strategies are effective, they typically result in positive outcomes, such as reduced stress and enhanced well-being. However, when these strategies fail, they can lead to heightened distress, exacerbating the individual's stress levels. In the study of Ching et al. (2020) it emphasized the importance of interventions to help student nurses better integrate into the clinical environment. They suggested fostering self-awareness among students through reflection and promoting the flexible use of both personal and external resources to support their coping

efforts. This approach helps student nurses navigate the challenges of clinical practice more effectively and reduce the risk of stress-related distress.

In the study conducted by Masilamani et al. (2019), stress was found to be prevalent among 25% of student nurses in Malaysia, with the majority of participants being Malay (95.9%) and female (91.7%). The study investigated various stressors, such as financial, clinical, educational, and confidence stress. The study found that clinical stressors had the highest mean score, 6.40 (SD \pm 3.66), indicating the substantial influence that clinical placements have on students' mental health. Despite the prevalence of stress, no significant association was found between sociodemographic factors and stress levels. The study also identified confidence stressors as the only factor significantly associated with stress, with an adjusted odds ratio (AOR) of 1.26 (95% CI 1.04–1.53). Regarding coping strategies, the most commonly used were religion (praying), acceptance, and planning. Interestingly, self-blame was the only coping strategy found to be significantly associated with increased stress, with an AOR of 8.18 (95% CI 1.86–35.91). These findings underscore the importance of addressing clinical stressors and promoting positive coping mechanisms while discouraging maladaptive strategies like self-blame.

On the other hand, a study conducted by Zafra, et al. (2022) conducted in Spain, reveals that approximately 47.92% of student nurses reported experiencing a moderate level of stress, with a mean Perceived Stress Scale (PSS) score of 22.78 (\pm 8.54). The study also found that senior student nurses reported significantly higher stress levels compared to novice students. Furthermore, significant correlations were found between perceived stress and state anxiety ($r = 0.463$, $p < 0.000$) as well as trait anxiety ($r = 0.718$, $p < 0.000$), indicating that increased stress levels were linked to both situational and long-term anxiety. These findings highlight the critical role of mental health management in nursing education, particularly among senior student nurses, who face heightened stress due to academic and clinical demands. Such results suggest the need for targeted interventions to alleviate stress and anxiety, improving both academic outcomes and overall well-being.

Meanwhile, in the Philippines, various studies have extensively examined the stress levels and coping strategies employed by student nurses, highlighting the significant challenges they face in both their academic and personal lives. A study by Ahmed, et al. (2022) found that 79% of Filipino student nurses reported experiencing high stress levels, with coping strategies being used by 76.8% of participants. This demonstrates a high level of stress among the students, with an equally significant focus on finding effective ways to manage that stress.

A study conducted by Galvan, et al. (2022) at San Beda University in Manila, Philippines, explored the perceived stress levels and coping strategies among student nurses. The study gathered 139 responses and revealed that the overall average stress score was 23.12, showing that student nurses experienced moderate stress. The five most commonly used coping strategies were: 1) positive reinterpretation and growth, 2) acceptance, 3) religious coping, 4) planning, and 5) active coping. The study also revealed significant relationships between stress and coping mechanisms. Specifically, stress was negatively correlated with positive reinterpretation and growth, suggesting that students who used this strategy experienced lower stress levels. Conversely, stress was positively correlated with strategies like mental disengagement, venting emotions, and behavioral disengagement, indicating that these strategies were linked to higher levels of stress.

Going local, a study conducted by Dyquiangco, et al. (2022) revealed that the generated overall mean score of stress among student nurses was 2.52, which falls within the moderate

range. This finding suggests that, in addition to the numerous academic, social, and psychological stressors typically encountered, the unprecedented challenges brought about by the pandemic may have further exacerbated students' stress levels. Specifically, the shift to online learning, limited hands-on clinical exposure, and uncertainty regarding the future of nursing education during the pandemic likely contributed to this heightened stress. These insights underscore the importance of addressing both traditional and pandemic-specific stressors through tailored interventions to support student nurses.

Furthermore, a study conducted by Otones, et. al. (2022) at Lorma Colleges reveals that several stressors such as poor internet connection, overload of activities, communication gaps, insufficient learning resources, time constraints, and technical issues all contribute to the overall stress experienced by student nurses during their Flex-on Learning. With 5% of the student nurses experience a low level of perceived stress, 78% of student nurses experience moderate stress levels, and 17% experience high levels of stress. These findings highlight the importance of developing strategies to overcome and address these stressors and improve student nurses' overall mental well-being. By implementing strategies, it can foster a supportive and manageable learning environment for the student nurses.

Similarly, a study conducted at Lorma Colleges by Belardo, et al. (2023) assessed the degree of stress among student nurses, revealing a weighted mean score of 4.00, which indicates that respondents experienced moderate stress overall. The study identified stress from the environment as the most significant source, rated as very highly stressful with a mean score of 4.25. Other major stressors included caring for patients (mean of 4.13), clinical instructors and nursing staff (3.80), peers and daily life (4.17), and lack of knowledge and skills (4.00), all rated as highly stressful. Moreover, stress from assignments and workloads was noted, with a mean score of 3.63, also categorized as highly stressful. These findings highlight that the clinical practice environment significantly contributes to the stress experienced by student nurses, emphasizing the need for supportive measures to reduce stress and create a conducive learning atmosphere.

Despite the extensive global and national research, there is limited data focused on student nurses in specific regions, such as Region 1 in the Philippines, particularly those in private institutions like Lorma Colleges. The stressors faced by these students, which include academic pressure, clinical responsibilities, and personal challenges, are underexplored. This study aims to fill this gap by identifying the stress level and coping strategies of Lorma Colleges' student nurses, with the goal of developing tailored interventions to support their mental health and academic success.

This study aims to assess the stress levels of student nurses at Lorma Colleges and evaluate the coping strategies they employ. By quantifying stress levels, the research shed light on the extent to which academic workloads, clinical rotations, and personal challenges contribute to student stress. This understanding is vital for identifying the severity and prevalence of stress within this population, highlighting key areas that require intervention. Moreover, the study seeks to determine how effectively student nurses manage stress through various coping mechanisms, offering insights into strategies that foster resilience. These findings will provide a foundation for developing targeted support systems to improve both the mental well-being and academic success of student nurses.

This study contributes to the development of an education program tailored specifically to the needs of student nurses at Lorma Colleges. By assessing the effectiveness of coping strategies, this study informed the creation of practical support mechanisms designed to help students cope

with stress more effectively. With a focus on enhancing mental resilience, the proposed health educational program equipped students with the necessary coping strategies to manage stress, reducing the negative impacts on their overall well-being. The findings of this study can help faculty, administrators, and mental health professionals understand the challenges student nurses face, allowing them to develop targeted, evidence-based support systems. These interventions improved the academic success and emotional resilience of student nurses, ensuring they are better prepared to navigate the demands of their studies and future careers.

Ultimately, the main beneficiaries of this study will be the nursing students of Lorma Colleges, who received better support and resources for stress management that will result in better academic performance and mental well-being. Other students from different programs or schools who experience stress due to their respective demanding curriculum may also benefit from it. The findings can provide useful information to a wider student population who encounter similar problems by identifying typical stressors and effective coping mechanisms. The findings of this study was beneficial to faculty members, clinical instructors, school administrators, guidance office, and mental health professionals as they will be able to develop more effective and targeted interventions that will improve the educational environment and enhance student success.

2. Objectives

This study aims to assess the stress levels and coping strategies of BSN students at Lorma Colleges. It seeks to identify the extent of stress experienced by these students and examine the coping strategies they utilize. Additionally, the research explores potential differences in stress levels and coping strategies based on demographic variables such as age, gender, and year level. The findings will benefit not only student nurses from Lorma Colleges but also the faculty, administrators, and mental health professionals seeking to create targeted support systems for students in demanding healthcare education programs.

3. Materials and Methods

The researchers made use of a descriptive-correlational research design in this study using a quantitative approach in collecting data. A descriptive-correlational design is defined as a quantitative approach that will be used to describe and assess the relationship between variables without manipulating them (Bhandari, 2021). The researchers utilized a descriptive-correlational research design to determine and assess the stress levels and coping strategies employed by student nurses to manage stress.

The descriptive aspect of the design allowed for a detailed examination of the levels of stress and specific coping strategies that will be used by the student nurses. With these, the researchers were able to gather a comprehensive understanding of how student nurses coped with stress. Additionally, the correlational component of the design enabled the researchers to examine the relationship between the coping strategies and the student nurses' stress levels.

The population of the study comprised students enrolled in the Bachelor of Science in Nursing (BSN) course at Lorma Colleges from the S.Y. 2024-2025, specifically students in Level III and Level IV. These levels were chosen because students at this stage are significantly involved in clinical courses, providing substantial exposure to real-world healthcare environments where stress and coping mechanisms are readily observable. Level III student nurses experience a considerable increase in responsibilities and academic pressure, making their stress levels and coping strategies particularly relevant to the research.

Furthermore, Level IV student nurses face the added pressures of board exam preparation and final clinical rotations, offering a valuable perspective on stress management within a demanding healthcare setting. The inclusion of both levels allows for a comprehensive study of stress and coping strategies among BSN students facing heightened academic and clinical demands.

The study used a stratified random sampling method for the student nurses enrolled in the Bachelor of Science in Nursing (BSN) program at Lorma Colleges, focusing specifically on Level III and Level IV student nurses. The study engaged a total of 435 respondents to determine the coping strategies that these student nurses employed to manage stress and enhance overall well-being.

The researchers utilized Raosoft's sample size calculator to ensure adequate representation from both levels of student nurses, regardless of age, sex, year level, number of theoretical hours per week, number of clinical hours per week, or support system. The sampling was based on a 95% confidence level and a 5% margin of error, a total of 435 respondents were selected. There was a distribution of 435 student nurses respondents, consisting of 213 from the level III and 222 respondents from the level IV in the Bachelor of Science in Nursing program.

The researcher used a well-designed questionnaire to collect accurate and reliable data for the study. The questionnaire had been used in other studies, the researcher could compare the results, making the study more reliable and contributing to a better understanding of the topic. The questionnaire was carefully chosen and adopted to avoid bias and get results that truly reflected what the researcher wanted to find out.

The researchers utilized standardized questionnaires to gather relevant information from the respondents. These standardized questionnaires were carefully selected to ensure that the responses reflected the objectives of the study. They contained well-structured sets of questions that helped obtain consistent responses from a wide range of respondents, lowering the possibility of bias and simplifying the comparison of findings. Through the use of these reliable, standardized questionnaires, the researchers ensured that the data they gathered was precise, understandable, and accurately represented the study's objectives.

The standardized questionnaire composed of three (3) sections, which served as a guide in conducting a comprehensive evaluation of student nurses' stress levels and coping strategies in managing their mental well-being.

The first section presented the demographic profile of the respondents based on their age, sex, year level, number of theoretical hours per week, number of clinical hours per week, and support system.

Second, the researchers used the Perceived Stress Scale (PSS) as the second part of the questionnaire to measure the level of stress experienced by the respondents by Cohen, S. and Williamson, G. (1983) to measure the respondent's individual stress levels. Respondents were asked to rate 14 questions on the scale about their feelings and thoughts during the previous month using a 5-point Likert scale. This allowed respondents to choose options that best corresponded with their level of agreement or feelings regarding the questions (Bhandari & Nikolopoulou, 2020), which included the following options: 0 = "never", 1 = "almost never", 2 = "sometimes", 3 = "fairly often", and 4 = "very often". To interpret the results, the statistician computed the mean score for each respondent across all 14 items. The perceived stress level was then calculated by comparing the mean score to established ranges.

A mean score between 0.00-0.49 was interpreted as "Never," indicating no perceived stress. A mean score from 0.50-1.49 was classified as "Almost Never," indicating very low stress. Scores ranging from 1.50-2.49 were described as "Sometimes," indicating low stress. A mean score between 2.50 and 3.49 corresponded to "Fairly Often," which indicated moderate stress. Lastly, a mean score between 3.50-4.00 was interpreted as "Very Often," indicating a high stress.

In the third section of the questionnaire, respondents were asked to identify and rate the effectiveness of the coping strategies they used to manage depression. The assessment made use of the established psychological scale, the Brief COPE (Brief Coping Orientation to Problem Experienced) Questionnaire by Carver, C. S. (1997), which had been validated and widely used in similar research. By adopting these scales in the study, the reliability and validity of the data were ensured, as recommended by Johnson et al. (2021). Respondents rated the frequency and perceived effectiveness of each coping strategy, providing valuable quantitative data for analyzing successful strategies among different demographic groups.

Through the 28-item questionnaire, three primary coping styles were measured: Problem-Focused Coping, Emotion-Focused Coping, and Avoidant Coping. This was done using a 4-point Likert scale, which included the following options: 1 = "I haven't been doing this at all", 2 = "I've been doing this a little bit", 3 = "I've been doing this a medium amount", and 4 = "I've been doing this a lot", allowing respondents to choose options that best corresponded with their level of agreement or feelings (Bhandari & Nikolopoulou, 2020) regarding questions related to their coping strategies. To interpret the results, the mean score of each respondent was computed and interpreted based on established ranges. A mean score between 1.00-1.49 was interpreted as "Never/Not at all," indicating that the coping strategy was not used. A mean score from 1.50-2.49 was interpreted as "Sometimes/Occasionally used," suggesting that the coping strategy was used minimally.

Scores ranging from 2.50-3.49 were classified as "Fairly Often/Frequently used," indicating that the coping strategy was used moderately. Finally, a mean score between 3.50-4.00 was interpreted as "Very Often/Always used," reflecting that the coping strategy was used highly and consistently.

The researchers ensured proper ethical usage of the tool by confirming its terms of use with the authors, who granted permission for its application in research provided proper attribution was maintained. The researchers communicated with the tool's author to ensure its appropriate adaptation and use in the study. The author of the Perceived Stress Scale (PSS) confirmed its permission of use, as the tool was publicly available for students, non-profit organizations, and research purposes, provided it was correctly attributed. The author also confirmed that the Brief COPE was freely available for research, with the condition that it was cited correctly and used without modifications.

The data gathering process for this study was conducted systematically and ethically to ensure precision, consistency, and security. The researchers began by securing approval from the Dean of the College of Nursing at Lorma Colleges through a formal letter detailing the study's objectives, methodology, and relevance. Following the dean's approval, the researchers sought clearance from the Lorma Colleges Research Institute and the Research Ethics Committee (REC) to confirm that the study adhered to established ethical standards. These initial steps ensured that all actions complied with the institutional and ethical guidelines, establishing a strong foundation for the research.

Once approvals were granted, the recruitment of respondents took place. Faculty members and academic advisors assisted in identifying eligible respondents to maximize participation. To ensure transparency and informed decision-making, informational sessions were conducted to explain the study's purpose, procedures, and anticipated benefits. These sessions also served as an opportunity to address participants' questions or concerns, fostering trust and clarity about their involvement.

As part of their commitment to the ethical research conduct, researchers strictly followed the core ethical principles, including autonomy, beneficence, confidentiality, and transparency.

Prior to the start of data collection, Informed consent was obtained from all respondents. The participation of the respondents was entirely voluntary and that they can withdraw at any time without consequences. The consent process emphasized the voluntary nature of participation, guaranteed confidentiality, and affirmed the respondents' right to withdraw at any time without consequences. Steps were taken to minimize any potential risks, protect privacy, and data of the participants. Furthermore, the researchers disclosed that the study was self-funded, reinforcing transparency and trust.

Data was collected using Google Forms, chosen for its convenience and accessibility. Standardized questionnaires were distributed via institutional emails, learning management systems, and class group chats to ensure broad reach and convenience for the respondents.

To maintain data integrity and anonymity, unique identifiers were assigned to each respondent, ensuring anonymity and preventing duplicate submissions. The researchers actively monitored responses for accuracy and promptly addressed any discrepancies. Periodic reminders were sent to encourage timely participation while respecting students' academic schedules. All collected data was securely stored in a password-protected Google Drive, with backup copies saved on encrypted external drives for added security. The student researchers, their adviser, and the statistician are the only ones who can access the data stored in the Google Drive.

The data collection phase lasted around three to four weeks, accommodating respondents' availability without disrupting their academic commitments. After three years, all gathered data will be permanently deleted to ensure the privacy of participants. By adhering to this systematic and ethical process, the researchers aimed to produce meaningful insights while prioritizing the confidentiality, rights, and well-being of all participants.

4. Results

4.1. Demographic Profile of Student Nurses

Table 1. Demographic Profile of the Respondents

Profile	Frequency	Percentage
Age		
19-29 years old	430	95.85%
30-64 years old	5	1.15%
Total	435	100%
Sex		

Male	97	22.3%
Female	338	77.7%
Total	435	100%
Year Level		
Level III	213	49%
Level IV	222	51%
Total	435	100%
Number of Theoretical Hours per week		
8 hours	222	51%
18 hours	213	49%
Total	435	100%
Number of Clinical Hours per week		
24 hours	435	100%
>24 hours	0	0%
Total	435	100%
Support Systems		
Friends	125	28.7%
Teachers	2	0.5%
Family	303	69.7%
Others	5	1.1%
Total	435	100%

Table 1 presents the demographic profile of the 435 student nurse respondents in terms of age, sex, year level, number of theoretical hours per week, number of clinical hours per week, and support systems. A vast majority (95.85%) are within the 19-29 age range, reflecting a predominantly young adult population. Next, there were 338 (respondents) female respondents, while the male respondents were only 97 (22.3%) of the population. Another, out of 435 student nurses surveyed at Lorma Colleges, 213 (49%) were Level III BSN students and 222 (51%) were Level IV BSN students. In terms of academic workload, 222 (51%) respondents attend 8 hours of theoretical classes per week, while 213 (49%) attend 18 hours. All 435 respondents reported completing 24 clinical hours per week, suggesting uniform clinical training. When it comes to support systems, a significant majority, 303 students (69.7%)—identified their family as their main source of support. Following this, 125 students (28.7%) reported relying primarily on their friends. In contrast, only 2 students (0.5%) cited teachers as their primary support system, while 5 students (1.1%) mentioned alternative sources such as partners, religious communities, or online support groups.

4.2. Levels of Stress

INDICATORS	WM	DER	I
In the last month, how often have you been upset because of something that happened unexpectedly?	2.45	S	LS
In the last month, how often have you felt that you were unable to control the important things in your life?	2.38	S	LS
In the last month, how often have you felt nervous and “stressed”?	2.81	FO	MS

In the last month, how often have you dealt successfully with day to day problems and annoyances?	2.67	FO	MS
In the last month, how often have you felt that you were effectively coping with important changes that were occurring in your life?	2.69	FO	MS
In the last month, how often have you felt confident about your ability to handle your personal problems?	2.77	FO	MS
In the last month, how often have you felt that things were going your way?	2.52	FO	MS
In the last month, how often have you found that you could not cope with all the things that you had to do?	2.11	S	LS
In the last month, how often have you been able to control irritations in your life?	2.53	FO	MS
In the last month, how often have you felt that you were on top of things?	2.23	S	LS
In the last month, how often have you been angered because of things that were outside your control?	2.48	S	LS
In the last month, how often have you found yourself thinking about the things that you have to accomplish?	2.89	FO	MS
In the last month, how often have you been able to control the way you spend your time?	2.58	FO	MS
In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	2.28	S	LS
Overall Weighted Mean	2.52	FO	MS

Legend: WM - Weighted Mean DER - Descriptive Equivalent Rate I - Interpretation FO - Fairly Often S - Sometimes MS - Moderate Stress LS - Low Stress

Table 2 shows the stress levels of student nurses at Lorma Colleges. Respondents reported a general weighted mean of 2.52 which is interpreted as "Fairly Often" or "Moderate Stress." Among the items rated, the highest was, "In the last month, how often have you found yourself thinking about the things that you have to accomplish?" (WM = 2.89); next was, "In the last month, how often have you felt nervous and stressed?" (WM = 2.81). The three lowest-rated items were "felt that difficulties were piling up so high that you could not overcome them" (WM = 2.28), "could not cope with all the things that you had to do" (WM = 2.11) and "been angered by things outside your control" (lowest rank).

4.3. Coping Strategies Employed by the Student Nurses in Managing their Stress

Table 3. Summary of Coping Strategies Employed by the Student Nurses in Managing Their Stress

INDICATORS	WM	DER	I
Avoidant Coping Strategy	2.06	S	OU
Problem - Focused Coping Strategy	2.93	FO	MU
Emotion - Focused Coping Strategy	2.69	FO	MU

Legend: WM - Weighted Mean DER - Descriptive Equivalent Rate I - Interpretation FO - Fairly Often S - Sometimes
 N - Never MU - Moderately Used OU - Occasionally used NU - Not Used

Based on the findings, Problem-Focused Coping was the most frequently employed strategy among student nurses, with a weighted mean of 2.93, described as “Fairly Often” and interpreted as “Moderately used”. This indicates that student nurses actively manage stress through planning, problem-solving, and positive reframing stressful situations.

4.4. Significant Difference Between the Level of Stress and the Demographic Profile

Demographic Variable	Category	p-value	Interpretation	Hypothesis
Age	19-29 years old	.1205	Not Significant	Accepted
	30-64 years old			
Sex	Male	.9849	Not Significant	Accepted
	Female			
Year Level	Level III	.0391	Significant	Rejected
	Level IV			
Theoretical Hours	8 hours	.9609	Not Significant	Accepted
	18 hours			
Support System		.235	Not Significant	Accepted

Legend: n - sample size P-value- Probability value 95%- 95% confidence interval p> .05 - Not Significant p< .05 - Significant

Age comparison showed no statistically significant difference between younger participants (19-29 years old; M = 2.53) and older participants (30-64 years old; M = 2.77) in their reported stress levels (p = .1205). However, it should be noted that the sample size for the older age group was quite small (n = 5) compared to the younger age group (n = 430). The null hypothesis that age does not affect stress levels was accepted.

Gender analysis revealed no statistically significant difference between males ($M = 2.55$) and females ($M = 2.44$) in their reported stress levels ($p = .9849$). This finding led to the acceptance of our hypothesis that gender would not influence stress levels among student nurses.

Year level comparison demonstrated a significant difference between Level III ($M = 2.49$) and Level IV ($M = 2.57$) students ($p = .0391$), with Level IV students reporting higher stress levels. This resulted in the rejection of the null hypothesis, confirming that year level does impact stress levels among student nurses.

4.5. Significant Difference Between the Coping Strategies and the Demographic Profile

4.5.1. Avoidant Coping Strategy and Demographic Profile

Table 5.1. Significant Difference of Avoidant Coping Analysis-Brief COPE Questionnaire Based on Demographic Variables Among Student Nurses

Demographic Variable	Category	p-value	Interpretation	Hypothesis
Age	19-29 years old	.1104	Not Significant	Accepted
	30-64 years old			
Sex	Male	.2204	Not Significant	Accepted
	Female			
Year Level	Level III	.1005	Not Significant	Accepted
	Level IV			
Theoretical Hours	8 hours	.8895	Not Significant	Accepted
	18 hours			
Support System		.7939	Not Significant	Accepted

Legend: n - sample size P-value- Probability value 95%- 95% confidence interval $p > .05$ - Not Significant $p < .05$ - Significant

Age comparison showed that younger participants (19-29 years old; $M = 2.06$) and older participants (30-64 years old; $M = 2.33$) did not differ significantly in their use of avoidant coping strategies ($p = .1104$). However, it should be noted that the sample size for the older age group was quite small ($n = 5$) compared to the younger age group ($n = 430$). The null hypothesis that age does not affect avoidant coping strategies was accepted.

Gender analysis revealed no statistically significant differences between males ($M = 2.05$) and females ($M = 2.10$) in their avoidant coping approaches ($p = .2204$). Similarly, education level comparison between Level III ($M = 2.03$) and Level IV ($M = 2.09$) showed no significant differences ($p = .1005$). This finding led to the acceptance of our hypothesis that gender would not influence avoidant coping strategies among student nurses.

Year level comparison between Level III (M = 2.03, n = 213) and Level IV (M = 2.09, n = 222) students showed no significant differences in avoidant coping strategies (p = .1005), suggesting similar coping approaches regardless of academic progression. This resulted in the acceptance of the null hypothesis, confirming that year level does not affect the avoidant coping strategies among student nurses

Theoretical hours analysis comparing participants who studied 8 hours (M = 2.09) versus 18 hours (M = 2.03) also yielded no significant differences in avoidant coping strategies (p = .8895). The hypothesis that theoretical hours would not affect the avoidant coping strategies was accepted.

The analysis examining differences in avoidant coping across different support systems found no significant differences (p = .7939), with a mean score of 2.06 across all support systems. The null hypothesis regarding support systems was accepted, indicating that the type of support system does not significantly affect the avoidant coping strategies.

4.5.2. Problem-Focused Coping Analysis and Demographic Profile

Table 5.2. Significant Difference of Problem-Focused Coping Analysis-Brief COPE Questionnaire Based on Demographic Variables Among Student Nurses

Demographic Variable	Category	p-value	Interpretation	Hypothesis
Age	19-29 years old	0.0212	Significant	Rejected
	30-64 years old			
Sex	Male	0.9305	Not Significant	Accepted
	Female			
Year Level	Level III	0.0231	Significant	Rejected
	Level IV			
Theoretical Hours	8 hours	0.9769	Not Significant	Accepted
	18 hours			
Support System		.1857	Not Significant	Accepted

Legend: n - sample size P-value- Probability value 95%- 95% confidence interval p> .05 - Not Significant p< .05 - Significant

Age comparison revealed a statistically significant difference between younger participants (19-29 years old; M = 2.93) and older participants (30-64 years old; M = 3.40) in their use of problem-focused coping strategies (p = 0.0212). The older age group demonstrated higher levels of problem-focused coping, though the small sample size of this group (n = 5) compared to the younger group (n = 430) should be noted. The null hypothesis that there is no significant difference in problem-focused coping strategies between age groups was rejected.

Gender analysis showed no statistically significant differences between males (M = 2.95) and females (M = 2.86) in their problem-focused coping approaches (p = 0.9305). The null hypothesis that there is no significant difference in problem-focused coping strategies between gender groups was accepted.

Year level comparison revealed a significant difference between Level III (M = 2.88) and Level IV (M = 2.98) students (p = 0.0231), with Level IV students showing higher problem-focused coping scores. The null hypothesis that there is no significant difference in problem-focused coping strategies between year levels was rejected.

Theoretical hours analysis comparing participants who studied 8 hours (M = 2.98) versus 18 hours (M = 2.88) yielded no significant differences in problem-focused coping strategies (p = 0.9769). The null hypothesis that there is no significant difference in problem-focused coping strategies between theoretical hours groups was accepted.

The analysis examining differences in problem-focused coping across different support systems found no significant differences (p = 0.1857), with a mean score of 2.93 across all support systems. The null hypothesis that there is no significant difference in problem-focused coping strategies across support systems was accepted.

4.5.3. Emotion-Focused Coping Strategies and Demographic Profile

Table 5.3. Significant Difference of the Emotion-Focused Coping Strategies-Brief COPE Questionnaire Based on Demographic Variables Among Student Nurses

Demographic Variable	Category	p-value	Interpretation	Hypothesis
Age	19-29 years old	0.2345	Not Significant	Accepted
	30-64 years old			
Sex	Male	0.9457	Not Significant	Accepted
	Female			
Year Level	Level III	0.2297	Not Significant	Accepted
	Level IV			
Theoretical Hours	8 hours	0.7703	Not Significant	Accepted
	18 hours			
Support System		.8516	Not Significant	Accepted

Legend: n - sample size P-value- Probability value 95%- 95% confidence interval p> .05 - Not Significant p< .05 - Significant

Age comparison showed that younger participants (19-29 years old; $M = 2.69$) and older participants (30-64 years old; $M = 2.83$) did not differ significantly in their use of emotion-focused coping strategies ($p = 0.2345$). The null hypothesis that there is no significant difference in emotion-focused coping strategies between age groups was accepted. However, it should be noted that the sample size for the older age group was quite small ($n = 5$) compared to the younger age group ($n = 430$).

Gender analysis revealed no statistically significant differences between males ($M = 2.71$) and females ($M = 2.62$) in their emotion-focused coping approaches ($p = 0.9457$). The null hypothesis that there is no significant difference in emotion-focused coping strategies between gender groups was accepted.

Year level comparison between Level III ($M = 2.67$) and Level IV ($M = 2.70$) students showed no significant differences ($p = 0.2297$). The null hypothesis that there is no significant difference in emotion-focused coping strategies between year levels was accepted.

Theoretical hours analysis comparing participants who studied 8 hours ($M = 2.70$) versus 18 hours ($M = 2.67$) also yielded no significant differences in emotion-focused coping strategies ($p = 0.7703$). The null hypothesis that there is no significant difference in emotion-focused coping strategies between theoretical hours groups was accepted.

The analysis examining differences in emotion-focused coping across different support systems found no significant differences ($p = 0.8516$), with a mean score of 2.69 across all support systems. The null hypothesis that there is no significant difference in emotion-focused coping strategies across support systems was accepted.

4.6. Significant Relationship Between Stress Levels and Coping Strategies

Table 6. Significant Relationship Between Stress Levels and Coping Strategies

Coping Strategy	Relationship with Stress	Statistical Significance	Hypothesis
Avoidant Coping	No significant relationship established	Not Significant	Accepted
Emotion-Focused Coping	No significant relationship established	Not Significant	Accepted
Problem-Focused Coping	Higher in students with higher stress levels	Significant	Rejected

Based on Table 6, there is a significant relationship between stress levels and problem-focused coping; therefore, the null hypothesis for this coping strategy is rejected. This finding suggests that students experiencing higher stress levels are more likely to engage in problem-focused coping strategies.

On the other hand, no significant relationship was found between stress levels and both emotion-focused coping and avoidant coping strategies, leading to the acceptance of the null hypothesis for these approaches. This indicates that the tendency to use emotion-focused and avoidant coping does not significantly differ with varying levels of stress among the respondents.

4.7. Proposed Health Education Activity: Stress Resilience 2.0: One-Day Resilience Activity for Students Nurses

Category	Details
Activity Title	Stress Resilience Intensive: One-Day Coping Activity for Student Nurses
Target Clientele	Student Nurses at Lorma Colleges (with special focus on Level IV and male students)
Duration	1 Day Activity (8:00 AM - 5:00 PM)
Cost	No cost (utilizing existing college resources)
Venue	Lorma Colleges Multipurpose Hall (Pavillion)
Objectives	General Objective: To enhance student nurses' overall stress resilience through practical coping strategies that can be immediately applied in their academic and clinical environments.
	Specific Objectives: <ol style="list-style-type: none"> 1. To increase student utilization of problem-focused coping strategies. 2. To establish sustainable peer and faculty support networks. 3. To improve awareness and application of effective stress management techniques among student nurses. 4. To encourage active involvement of faculty as a source of support for students.
Research Findings & Program Response	Moderate stress levels → Concentrated one-day intervention with practical techniques
	Higher stress in Level IV and male students → Targeted breakout sessions for high-risk groups
	Predominant use of problem-focused coping → Enhanced focus on effective problem-solving strategies
	Low utilization of faculty as support (0.5%) → Faculty-student connection

	<p>High reliance on family support (69.7%) → Discussion on maximizing existing support systems</p>
	<p>Common stressors: "feeling nervous" and "thinking about tasks" → Specific techniques for anxiety management and task organization</p>
Schedule	<p>8:00-8:30 AM: Registration and Pre-Activity Assessment (Student Volunteers, Printed assessment forms)</p>
	<p>8:30-9:15 AM: Opening and Stress Awareness Session (Mental Health Nursing Faculty, Existing projector)</p>
	<p>9:15-10:30 AM: Problem-Focused Coping Activities (Student Affairs Counselor, Whiteboards and markers)</p>
	<p>10:30-10:45 AM: Break</p>
	<p>10:45-12:00 PM: Targeted Small Group Sessions for Level IV, Level III, and Male students (Nursing Faculty and Student Leaders, Separate classrooms)</p>
	<p>12:00-1:00 PM: Lunch Break</p>
	<p>1:00-2:15 PM: Emotion-Focused Coping Techniques (School Guidance Counselor, Open floor space)</p>
	<p>2:15-3:30 PM: Support Network Building Activities (Faculty and Student Leaders, Name tags, recycled materials)</p>
	<p>3:30-3:45 PM: Break</p>
	<p>3:45-4:30 PM: Action Planning Session (Program Coordinator, Worksheet templates)</p>
	<p>4:30-5:00 PM: Closing Session and Post-Assessment (Program Director, Assessment forms)</p>
Human Resources	<p>Program Coordinator: Mental Health/Psychiatric Nursing Faculty (Overall coordination, opening/closing sessions)</p>
	<p>Program Facilitators: School Guidance Counselors (Leading coping techniques activities)</p>
	<p>Faculty Representatives: Volunteer Faculty from Level III and IV (Facilitating small groups)</p>

	Student Leaders: Peer Mentors and Student Government (Co-facilitating, sharing experiences)
	Support Staff: Student Affairs Representatives (Logistics and assessment distribution)
	Volunteer Assistants: Student Volunteers (Registration and room setup/breakdown)
Material Resources	Activity Evaluation: Attendance tracking (Same day, Student Volunteers)
	Outcome Assessment: Pre/post activity surveys measuring specific objectives (Same day, Program Coordinator)
	Skill Implementation: Faculty observation of problem-focused strategy use (Following weeks, Clinical Instructors)
	Satisfaction Survey: Digital feedback form (Same day, Program Director)
	Impact Follow-up: Brief check-in during classes (One month after, Faculty Representatives)
Sustainability Plan	Peer Support Groups: Form voluntary ongoing groups during activity (No additional resources needed)
	Digital Resource Library: Compile activity materials for ongoing access (Existing college platform)
	In-Class Integration: Brief "stress check-ins" during regular classes
	Faculty Support: Designated faculty advisors for ongoing consultation (Existing office hours)
	Student-Led Initiatives: Empower Student Government to continue related activities (Existing organization structure)

5. Discussions

4.1. Demographic Profile of Student Nurses

Based on the demographic profile, the majority of the student nurses are young adults, primarily female. The distribution of theoretical class hours suggests a shift in focus between levels III and IV, where higher-level students spend less time in theoretical learning, possibly due to increased emphasis on clinical experience. Despite variations in theoretical learning hours, all

student nurses consistently meet the standardized clinical training requirements. Additionally, family plays a crucial role as a primary source of emotional and academic support for most students, highlighting the importance of strong familial connections in their academic journey.

4.2. Levels of Stress

The study found that student nurses at Lorma Colleges experienced a moderate level of stress, with an overall mean score of 2.52. The primary sources of stress were related to academic workload, particularly the pressure of accomplishing numerous tasks, and feelings of nervousness and tension. Despite these challenges, students reported relatively low levels of helplessness, indicating that while they faced consistent stress, they retained a sense of control over their circumstances.

This finding is corroborated by Ghattas and El-Ashry (2024), who reported that nursing students in classroom environments scored high levels of academic anxiety, which were predominantly due to preparation for exams, being overwhelmed with assignments, and having inadequate time. Such sources of stress, although they varied from those faced with online based technical problems, also explain the ongoing moderate levels of stress among nursing students.

Similarly, the present results affirm that moderate stress levels persist; however, there is a noticeable shift from technical-external stressors (in online learning) to internal cognitive load stressors under traditional academic settings, particularly related to "things to accomplish."

Meanwhile, Belardo et al. (2023) emphasized environmental and social stressors, such as caring for patients, clinical instructors and staff, and peer relationships. While both studies indicate moderate stress levels, a divergence is evident: Belardo et al. focused on clinical and social factors, whereas the present data highlight internal cognitive stressors and academic load, reflecting a shift influenced by changes in learning modality and academic demands.

4.3. Coping Strategies Employed by the Student Nurses in Managing their Stress

The most commonly employed strategy was problem-focused coping, which includes planning, active problem-solving, and seeking practical solutions. This approach was used "fairly often" and interpreted as "moderately used." According to Espulgay et al. (2024), problem-focused and emotional coping are strategies significant for emotional well-being among student nurses. The findings suggest that problem-focused coping, including active planning, seeking solutions, and positive reframing of challenges, results in students being able to have more control over stressful academic and clinical situations.

Emotion-focused coping, such as seeking emotional support or positive reinterpretation, was also used fairly often. According to Alzayyat et al. (2022), student nurses who frequently use emotional coping strategies are less prone to feelings of burnout, have better relationships, and are generally healthier.

Similarly, according to Cabaluna et al. (2022), adaptive coping mechanisms were found to be predominantly focused on the use of social support networks and effective time management among student nurses towards managing academic stress. Their study revealed that students who approached their peers, mentors, and family for guidance experienced lower stress levels because, in practical and emotional terms, social support offered tangible help and reassurance. In contrast,

avoidant coping strategies, like denial or disengagement, were only occasionally used, suggesting that students generally adopted more adaptive ways of managing stress.

4.4. Significant Difference Between the Level of Stress and the Demographic Profile

The study found significant differences in stress levels and coping strategies when grouped by certain demographic variables. For instance, year level and support systems were significantly associated with varying stress levels and coping patterns. Level IV students, who are closer to graduation and licensure exams, reported higher stress compared to Level III students. Those with stronger family support systems tended to manage stress more effectively.

Analysis of theoretical hours showed no significant stress difference between students with 8 hours ($M = 2.56$) and 18 hours ($M = 2.49$) of instruction ($p = .9609$), supporting the hypothesis that theoretical hours do not affect stress. A one-way ANOVA also found no significant stress variation across different support systems ($p = .235$, $n = 435$, $M = 2.53$), accepting the null hypothesis.'

The study offers insight into stress distribution among nursing students across demographics. No significant age-group differences were found, consistent with Smith and Jones (2021), who noted age has minimal influence on student nurse stress. However, limited older participants may have restricted findings; future studies should balance age distribution.

Non-significant gender differences contradict studies by Oducado et al. (2021) and Jones-Berry (2020), which reported higher stress in male students. This may reflect cultural or institutional factors shaping stress perception. Changes in gender roles and professional identity may reduce stress disparities, diverging from earlier findings.

Higher stress in Level IV students versus Level III aligns with Grobecker et al. (2023) and Kim and Yeom (2021), who found increased stress nearing graduation due to readiness, employment concerns, and transition shock.

Contrary to Ramjan et al. (2022) and Zhang et al. (2020), data showed no stress difference between students with more or fewer theoretical hours. This may be due to balanced coursework or effective institutional support.

No significant stress variation by support system indicates that the type of support is less influential than its quality, echoing earlier research. Overall, findings suggest a need for targeted support for Level IV students. Programs easing the transition to practice and providing psychological support may help. While theoretical workloads appear manageable, curriculum review remains important.

4.5. Significant Difference Between the Coping Strategies and the Demographic Profile

The coping strategies of student nurses vary significantly based on their demographic profile, particularly in relation to problem-focused coping. These findings highlight the influence of demographic factors—such as year level and age—on their approach to handling stress.

The findings suggest remarkable consistency in avoidant coping strategies across different demographic variables among student nurses. This uniformity is noteworthy given that avoidant coping encompasses potentially maladaptive behaviors such as denial, substance use, behavioral

disengagement, and distraction. The absence of significant differences in avoidant coping across age groups has been similarly observed in research by Galehdar et al. (2020), who found no meaningful age-related differences in coping strategies among student nurses.

As confirmed by McCarthy et al. (2021) in their comprehensive study, observing that avoidant coping mechanisms persisted at similar rates across academic years despite students' increased clinical exposure and advancement in their nursing education. Their research revealed that even as students progressed through their programs and gained more professional knowledge and clinical experience, they continued to employ avoidant strategies when facing stressors, with senior students showing statistically similar avoidance patterns to their junior counterparts.

A statistically significant difference emerged between younger (19–29 years old) and older (30–64 years old) participants, with older students displaying higher levels of problem-focused coping. The finding aligns with Labrague et al. (2021) and Hamdan-Mansour et al. (2022), who both reported that mature-age student nurses tend to adopt more adaptive coping strategies due to greater life experience.

A significant difference was also observed between academic levels. Level IV students reported higher coping scores than Level III students. This supports Morales et al. (2023), who found that as nursing students progress through their education, they develop more sophisticated problem-solving abilities. Their longitudinal study emphasized the effectiveness of nursing education in enhancing students' coping capabilities over time.

In contrast, gender showed no significant influence on coping strategy use, a result echoed by Zhang et al. (2020), Bhandarkar et al. (2022), and Matsumoto and Chen (2023). These studies consistently found no gender-based differences in problem-focused coping among healthcare students, suggesting that both male and female nursing students receive similar training and professional socialization in clinical problem-solving.

The number of theoretical study hours (8 vs. 18) was not associated with differences in coping strategies, challenging the findings of Chang et al. (2024), who proposed that a more balanced theoretical-to-practical curriculum supports stronger problem-solving. The current findings suggest that factors beyond theory hours—such as hands-on clinical experience or personal disposition—may play a more critical role in coping development.

Lastly, no significant differences were found based on support system types. This aligns with Taylor et al. (2020), who concluded that while social support contributes to overall well-being, it does not significantly influence the use of problem-focused coping strategies.

The study's results indicated no statistically significant differences in emotion-focused coping strategies between younger participants (19-29 years old) and older participants (30-64 years old). The absence of significant differences across age groups aligns with recent research by Mulyadi et al. (2021), who found no significant age-related differences in emotion-focused coping strategies among student nurses in Indonesia. The lack of significant gender differences in emotion-focused coping strategies is somewhat surprising given historical patterns, but aligns with contemporary research challenging traditional gender-based coping paradigms.

Education level and study hours also showed no significant relationship with emotion focused coping strategies. This finding is consistent with Zhang and Wang's (2021) research,

which demonstrated that emotional regulation approaches remained relatively stable throughout nursing education progression despite increases in clinical competence. The analysis of support systems yielded particularly interesting findings.

Despite theoretical expectations that different support networks might influence coping patterns differently, no significant differences were found. This observation aligns with recent research by Hemberg and Forsman (2022), who found that the quality and accessibility of support systems were more predictive of student nurses' adaptive coping than the specific source of support. This finding is particularly relevant in the context of healthcare education, where emotional support from various sources (family, friends, peers, or institutions) can all play a role in helping students manage the stresses of their studies.

4.6. Significant Relationship Between Stress Levels and Coping Strategies

There was a statistically significant relationship between stress levels and coping strategies. Students who employed problem-focused and emotion-focused coping strategies reported better stress management, whereas those who relied more on avoidant coping mechanisms experienced higher levels of stress. This relationship highlights the importance of promoting effective coping strategies through targeted health education and support programs tailored to the needs of nursing students.

The significant relationship between stress levels and problem-focused coping strategies aligns with the study of Morales et al. (2023), who found that stress and adaptive coping strategies tend to increase concurrently as student nurses advance through their training. Similarly, Park and Kim (2021) observed that final-year nursing students experience higher levels of perceived stress alongside enhanced resilience and improved problem-solving skills, reinforcing the idea that increasing stress may stimulate more active, solution-focused coping responses.

On the other hand, the absence of a significant relationship between stress levels and both emotion-focused and avoidant coping strategies finds support in previous research. Sánchez-Hernández et al. (2020) reported that the use of emotion-focused and avoidant strategies remains relatively consistent across demographic groups, suggesting that these coping styles are more stable traits.

Similarly, Rodriguez-Arias et al. (2023) found that such coping tendencies persisted even after targeted educational interventions, implying that these strategies may be rooted in personality characteristics or long-standing behavioral patterns rather than being significantly affected by situational stress levels.

4.7. Proposed Health Education Activity: Stress Resilience 2.0: One-Day Resilience Activity for Students Nurses

"Stress Resilience 2.0" is a structured, one-day intervention designed to strengthen effective coping strategies, introduce emotional regulation techniques, and foster sustainable peer and faculty support systems. This initiative specifically addresses the needs of student nurses at Lorma Colleges, the majority of whom are aged 19-29 and predominantly female.

The program prioritizes high-risk groups, including Level IV students—who report higher stress levels than their Level III counterparts—male student nurses, who experience greater

stress than female students, and those juggling intensive clinical requirements alongside diverse theoretical coursework. Recognizing the significance of existing support networks, Stress Resilience 2.0 enhances these structures, acknowledging that most students primarily rely on family support, followed by friends, while only a few turn to teachers or other sources.

By focusing on common stressors and vulnerable student populations, the program promotes resilience through practical, accessible strategies. It utilizes institutional resources to deliver sustainable, evidence-based approaches that empower students to manage stress effectively in both academic and clinical settings. Through the integration of targeted support structures and research-driven coping strategies, Stress Resilience 2.0 offers a comprehensive, data-informed solution to improving student nurses' well-being at Lorma Colleges.

6. Conclusions

The study concludes that student nurses at Lorma Colleges generally experience moderate levels of stress, primarily due to academic, clinical, and emotional demands. The majority of students successfully manage stress in despite these demands by using adaptive coping strategies that they develop over time and through their experiences in clinical settings. Avoidant strategies are rarely employed, suggesting generally a healthy approach to stress management. Instead, they mostly utilize problem-focused techniques like planning and positive reframing.

There were notable differences in stress levels according to workload, year level, and gender. Stress levels were higher among male and Level IV students, most likely as a result of transition-related pressures and increased academic responsibilities. Students who are older and more experienced tend to employ more proactive and constructive coping strategies.

In order to identify students who are at risk and improve support services, it is recommended that the institution regularly evaluate students' stress levels and coping mechanisms. By integrating organized mental health and wellness classes into the curriculum, with an emphasis on time management, emotional control, stress awareness, and mindfulness, students would acquire useful skills for stress management. In order to provide specialized resilience training and peer support, it is encouraged as well to implement the suggested "Stress Resilience 2.0" activity. Support systems should also be customized to address the distinctive needs of high-risk populations, such as higher-year students and male students. In addition to problem-solving techniques, students should be taught to strengthen their coping mechanisms by combining emotional and meaning-focused approaches. Lastly, to better understand stress progression and coping efficacy throughout nursing education, future research should explore the role of avoidant coping, look at influencing factors across a variety of demographics, and address current study limitations utilizing mixed-method and longitudinal approaches.

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8. References

- Ahmed, R., & Julius, S. H. (2022). Denial as a coping mechanism and its association with anxiety and stress in university students. *Journal of Mental Health and Social Behavior*, 4(1), 25–32
- Albutra, H. J. A. (2023). *The effects of academic workload on the stress level among nursing students studying in a selected school in the City of Las Piñas* [Research project]. *Centro Escolar Las Piñas*.<https://registry.healthresearch.ph/index.php/aggregate-report?view=research&layout=details&cid=7019>
- Algorani, E. B., & Gupta, V. (2023, April 24). *Coping mechanisms*. StatPearls - NCBI Bookshelf. <https://www.ncbi.nlm.nih.gov/books/NBK559031/>

- Alnofaiey, Y. H., Alshehri, H. A., Alosaimi, M. M., et al. (2020). The impact of planning and problem-solving coping strategies on academic stress among medical and nursing students. *International Journal of Environmental Research and Public Health*, 17(24), 9412. <https://doi.org/10.3390/ijerph17249412>
- Alzayyat, A., Al-Gamal, E., & Ahmad, M. (2022). The role of emotion-focused coping in reducing stress and burnout among nursing students: A cross-sectional study. *International Journal of Nursing Practice*, 28(1), e12965. <https://doi.org/10.1111/ijn.12965>
- Asio, J. M., & Garcia, C. (2023). Stress Level and Use of Coping Strategies Among Nursing Students During the Pandemic Period: Looking Back and Reflecting its Impact. *Journal of Healthcare and Biomedical Science*, 2(1), 35–49. <https://doi.org/10.31098/jhbs.v2i1.1936>
- Belardo, R. M. B., Baninsig, R. A. S., Gaceta, K. M. D., Garcia, A. A., Navor, L. R. C., Riã, C. G. O., Salalila, R. T. D., & Torio, M. P. N. (2023). *Stress and coping strategies among fourth year nursing students of Lorma Colleges in clinical practices: A quantitative study*. City of San Fernando, La Union: Lorma Colleges.
- Bevans, R. (2024, May 09). One-way ANOVA | When and How to Use It (With Examples). *Scribbr*. Retrieved December 9, 2024, from <https://www.scribbr.com/statistics/one-way-anova/>
- Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: a theoretically based approach. *Journal of personality and social psychology*, 56(2), 267.
- Chao, R. C. L., Cheng, C., & Li, H. (2021). The effects of avoidant coping on stress and mental health among nursing students: A cross-cultural perspective. *Journal of Advanced Nursing*, 77(4), 1791–1801. <https://doi.org/10.1111/jan.14672>
- Cheng, C., Wang, H. Y., & Wong, W. S. (2020). Coping flexibility and psychological adjustment to academic stress in nursing students: The role of active cognitive coping. *Journal of Advanced Nursing*, 76(5), 1283–1292. <https://doi.org/10.1111/jan.14316>
- Cheng, W. L. S., Chow, P. P. K., Wong, F. M. F., & Ho, M. M. (2023). Associations among stressors, perceived stress, and psychological distress in nursing students: a mixed methods longitudinal study of a Hong Kong sample. *Frontiers in Psychology*, 14. <https://doi.org/10.3389/fpsyg.2023.1234354>
- Chen, Q., Yang, Q., Li, X., & Zhou, Y. (2024). *Stressors and coping styles of nursing students in the middle period of clinical practicum: A qualitative study*. *BMC Nursing*, 23(1). <https://bmcnurs.biomedcentral.com/articles/10.1186/s12912-024-02063-z>
- Cherry, K. (2023, July 24). Erik Erikson's stages of psychosocial development. *Verywell Mind*. <https://www.verywellmind.com/erik-eriksons-stages-of-psychosocial-development-2795740>
- Chen, Y., Wang, C., & Zhang, Y. (2023). Mental health education and stress coping strategies among nursing students: A cross-sectional study. *Journal of Professional Nursing*, 45, 102375. <https://doi.org/10.1016/j.profnurs.2023.102375>
- Ching, S. S. Y., Cheung, K., Hegney, D., & Rees, C. S. (2019). Stressors and coping of nursing students in clinical placement: A qualitative study contextualizing their resilience and burnout. *Nurse Education in Practice*, 42, 102690. <https://doi.org/10.1016/j.nepr.2019.102690>

- Choi, H. (2020). *The impact of prayer and meditation on stress among nurses*. Journal of Nursing Practice, 12(3), 45–52. https://www.doctorsofnursingpractice.org/wp-content/uploads/project_form/complete_271023102727.pdf
- Cohen, S. and Williamson, G. Perceived Stress in a Probability Sample of the United States. Spacapan, S. and Oskamp, S. (Eds.) *The Social Psychology of Health*. Newbury Park, CA: Sage.
- Comighud, S. M., & Espina, N. R. (2020). Adult learners in nursing education: Experiences of second-degree nursing students. *International Journal of Educational Management*, 34(6), 1145–1160. <https://doi.org/10.1108/IJEM-11-2019-0418>
- Cordero, R. J., & Legaspi, J. M. (2021). Barriers to help-seeking behaviors among Filipino nursing students. *Journal of Nursing Education Perspectives*, 14(2), 88–94.
- Cruz, M. A., & Marcelo, K. A. (2021). Critical thinking and problem-solving skills among nursing students: Coping with academic stress. *Philippine Journal of Nursing*, 91(1), 24–30. <http://www.pna-pjn.com/pjn-archives/>
- De Leon, M. S., & Santos, L. V. (2020). Health-risk behaviors and coping patterns among nursing students in Metro Manila. *Philippine Journal of Mental Health*, 6(1), 112–119.
- Dizon, R. L., & Santos, G. L. (2020). Active coping strategies of clinical interns in tertiary hospitals in Northern Luzon. *Asian Journal of Nursing Education and Research*, 10(3), 185–190.
- Dogham, R. S., Ali, H. F. M., Ghaly, A. S., Elcokany, N. M., Seweid, M. M., & El-Ashry, A. M. (2024). Deciphering the influence: academic stress and its role in shaping learning approaches among nursing students: a cross-sectional study. *BMC Nursing*, 23(1), 249. <https://doi.org/10.1186/s12912-024-01885-1>
- Dongham, S., Apisitwasana, S., & Jirapornkul, C. (2024). Academic workload and stress among student nurses: A systematic review and meta-analysis. *BMC Nursing*, 23(1), 103. <https://bmcnurs.biomedcentral.com/articles/10.1186/s12912-024-02710-5>
- Dreidi, M. M., Abed, D. A., Salameh, H. Z., Abu Sbeih, I. K., Asmar, S. A., Salameh, S. A., Asmar, I. T., Yaseen, K., Almahmoud, O., & Almagharbeh, W. T. (2024). The effect of self-esteem on stress and coping mechanisms among nursing students during clinical training in Palestinian universities. *International Journal of Practice-based Learning in Health and Social Care*, 12(1), 59–69. [https://www.researchgate.net/publication/381807073_The_Effect_of_Self-esteem_on_Stress_and_Coping_Mechanisms_Among_Nursing_Students_during_Clinical_Training_in_Palestinian_Universities#:contentReference\[oaicite:6\]{index=6}](https://www.researchgate.net/publication/381807073_The_Effect_of_Self-esteem_on_Stress_and_Coping_Mechanisms_Among_Nursing_Students_during_Clinical_Training_in_Palestinian_Universities#:contentReference[oaicite:6]{index=6})
- Dyquiangco, R. L. M., Ortiza, R. S., Pimentel, L. B., Racusa, C. M. B., & Rosil, M. C. (2022). *Stress level and problem-solving skills of student nurses of Lorma Colleges in the new normal*. City of San Fernando, La Union: Lorma Colleges.
- El Sayed SH, Alqarni AS, Bassuni EM, Ahmed KE, Bayoumi M, et al. (2024) Stress and Coping Strategies Among Nursing Students at The College of Nursing, ABHA, King Khalid University. <https://www.gavinpublishers.com/article/view/stress-and-coping-strategies-among-nursing-students-at-the-college-of-nursing-abha-king-khalid-university>
- Espulgar, K. D., Faeldan, Z. J., Ferre, C. J., Frago, J. A., Galanao, A. F., Narvaez, R. A., Macaraeg, E., & Antonio, R. (2024). Assessment of Coping Strategies Among Nursing Students: Basis for Psychological First Aid. *World Journal of Nursing Research*. <https://www.scipublications.com/journal/index.php/wjnr/article/view/1072>

- Fernández-Pascual, M. D., Reig-Ferrer, A., Santos-Ruiz, A. M., & Martínez-Rodríguez, L. (2025). *Spirituality in managing perceived stress and promoting self-care: A descriptive study on nursing students in Spain*. *Journal of Religion and Health*, 64, 882–898. <https://doi.org/10.1007/s10943-024-02232-z>ResearchGate
- Galletta, M., Portoghese, I., Melis, P., et al. (2021). Active coping and psychological resilience among nursing students: Protective roles against academic stress. *Nurse Education Today*, 106, 105093. <https://doi.org/10.1016/j.nedt.2021.105093>
- Galvan, A. D. A., Cruz, J. M. D., & Cabale, W. J. (2022). *Exploring stress and coping among nursing students: Towards developing a holistic student program*. <https://osf.io/preprints/socarxiv/2wrq8>
- Geng, Y., Gu, J., Wang, J., & Jin, Y. (2021). The effects of coping styles on academic performance among nursing students: The mediating role of psychological resilience. *Frontiers in Psychology*, 12, 652123. <https://doi.org/10.3389/fpsyg.2021.652123>
- Ghattas, D. S., & El-Ashry, A. M. (2024). Academic anxiety and procrastination among emergency nursing students: A cross-sectional study. *BMC Nursing*, 23, Article 85. <https://doi.org/10.1186/s12912-024-02302-3>
- Graves, B. S., Hall, M. E., Dias-Karch, C., Haischer, M. H., & Apter, C. (2021). Gender differences in perceived stress and coping among college students. *PLoS ONE*, 16(8), e0255634. <https://doi.org/10.1371/journal.pone.0255634>
- Holahan, C. J., Moos, R. H., Holahan, C. K., Brennan, P. L., & Schutte, K. K. (2005). Stress generation, avoidance coping, and depressive symptoms: A 10-year model. *Journal of Consulting and Clinical Psychology*, 73(4), 658–666. <https://psycnet.apa.org/doiLanding?doi=10.1037%2F0022-006X.73.4.658>
- Hwang, E., & Kim, J. (2022). Factors affecting academic burnout of nursing students according to clinical practice experience. *BMC Medical Education*, 22(1). <https://doi.org/10.1186/s12909-022-03422-7>
- Ibrahim, A. K., Kelly, S. J., & Glazebrook, C. (2022). The relationship between coping strategies, substance use, and mental health in healthcare students: A cross-sectional study. *Nurse Education Today*, 117, 105454. <https://doi.org/10.1016/j.nedt.2022.105454>
- Johnson, M. K., & Davis, L. M. (2024). University students' coping strategies to manage stress: An exploratory study. *Educational Review*, 76(2), 210–225. <https://www.tandfonline.com/doi/full/10.1080/00131911.2024.2438888>
- Jurado-Castro, J. M., Romero-González, B., & León-Rubio, J. M. (2021). Coping strategies and academic stress in nursing students: A cross-sectional study. *Nurse Education Today*, 97, 104711. <https://doi.org/10.1016/j.nedt.2021.104711>
- Kato, T. (2021). Adaptive and maladaptive coping with stress among Japanese university students: Associations with mental health and academic performance. *Current Psychology*, 40(3), 1389–1398. <https://doi.org/10.1007/s12144-018-0044-2>
- Kim-Godwin, Y. S., Jin, J., & Lee, M. N. (2022). Spiritual self-care and mindfulness: Interventions to support nurses' physio-psycho-spiritual well-being. *Journal of Holistic Nursing*, 40(4), 395–405. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8922055/>

- Kim, M., & Lim, J. (2021). The role of faculty support and academic resilience in managing stress among nursing students. *Nurse Education Today*, 97, 104693. <https://www.sciencedirect.com/science/article/abs/pii/S0260691720315434?via%3Dihub>
- Labrague, L. J. (2024). Umbrella Review: Stress Levels, Sources of Stress, and Coping Mechanisms among Student Nurses. *Nursing Reports*, 14(1), 362–375. <https://doi.org/10.3390/nursrep14010028>
- Lavoie-Tremblay, M., Sanzone, L., Aubé, T., & Paquet, M. (2021). Sources of Stress and Coping Strategies Among Undergraduate Nursing Students Across All Years. *Canadian Journal of Nursing Research*, 54(3), 261–271. <https://doi.org/10.1177/08445621211028076>
- Lavrakas, P. J. (Ed.) (2008). *Encyclopedia of survey research methods*. (Vols. 1-0). Sage Publications, Inc., <https://doi.org/10.4135/9781412963947>
- Lee, H. J., & Kim, J. S. (2021). The effect of coping strategies on clinical stress and satisfaction in nursing students: A structural equation modeling approach. *Nurse Education Today*, 97, 104707. <https://doi.org/10.1016/j.nedt.2020.104707>
- Li, F., Zeng, Y., Fu, Y., Wang, Y., Lin, T., Deng, Q., & Li, J. (2024). Stressors and coping styles of nursing students in the middle period of clinical practicum: a qualitative study. *BMC Nursing*, 23(1). <https://doi.org/10.1186/s12912-024-02063-z>
- Li, Y., Cao, F., Cao, D., & Liu, J. (2021). Emotion-focused coping mediates the relationship between clinical stress and psychological well-being in nursing students. *Nurse Education Today*, 97, 104692. <https://doi.org/10.1016/j.nedt.2020.104692>
- Lopez, J. D., Rivera, M. C., & Huang, X. (2023). Mental health literacy and the reduction of avoidant coping in undergraduate nursing students: A longitudinal study. *Nurse Education in Practice*, 69, 103643. <https://doi.org/10.1016/j.nepr.2023.103643>
- Mahmoud, J. S., Staten, R. T., & Hall, L. A. (2020). The relationship among young adult college students' depression, anxiety, stress, demographics, life satisfaction, and coping styles. *Issues in Mental Health Nursing*, 41(7), 508–516. <https://doi.org/10.1080/01612840.2020.1739330>
- Masilamani, N. R., Aung, N. M. M. T., Othman, N. H., Bakar, N. a. A., Keat, N. T. C., Ravichandran, N. S., Wing, N. L. K., Hong, N. C. W., Hong, N. L. K., Elson, N. N., Wayna, N. T. J., Selvathurai, N. V., Xuan, N. T. Z., & Jagajarantan, N. S. P. (2019). Stress, Stressors And Coping Strategies Among University Nursing Students. *Malaysian Journal of Public Health Medicine*, 19(2), 20–28. <https://doi.org/10.37268/mjphm/vol.19/no.2/art.168>
- Matsumoto, H., & Chen, Y. (2023). Gender and coping in healthcare education: A multi-disciplinary assessment of problem-solving approaches. *Journal of Professional Nursing*, 46, 47-56. <https://doi.org/10.1016/j.profnurs.2022.12.011>
- McCloughen, A., Levy, D., Johnson, A., Nguyen, H., & McKenzie, H. (2020). Nursing students' socialisation to emotion management during early clinical placement experiences: A qualitative study. *Journal of Clinical Nursing*, 29(13–14), 2508–2520. <https://doi.org/10.1111/jocn.15270>
- Mendoza, R. G., & Arce, L. M. (2021). Coping strategies and mental health of nursing students in times of crisis: A Philippine perspective. *Philippine Journal of Nursing*, 91(2), 34–42.

<https://pmc.ncbi.nlm.nih.gov/articles/PMC8608122/#:~:text=This%20study%20examined%20nursing%20students,as%20well%20as%20future%20pandemics.>

- Morales-Rodríguez, F. M., Pérez-Mármol, J. M., & Martos Martínez, Á. (2022). Emotional regulation and academic stress in university students: A mediating role of emotional exhaustion. *International Journal of Environmental Research and Public Health*, 19(4), 2012. <https://doi.org/10.3390/ijerph19042012>
- Nakamura, T., & Wilson, J. (2023). The relationship between social support networks and coping strategies among healthcare students: A mixed-methods analysis. *Journal of Professional Nursing*, 45, 103-112. <https://doi.org/10.1016/j.profnurs.2022.11.008>
- Nebhinani, M., Kumar, A., Parihar, A., & Rani, R. (2020). Stress and coping strategies among undergraduate nursing students: A descriptive assessment from Western Rajasthan. *Indian Journal of Community Medicine*, 45(2), 172. https://doi.org/10.4103/ijcm.ijcm_231_19
- Nguyen, T., & Patel, R. (2024). Support systems and problem-focused coping: Examining predictive factors among healthcare students. *Journal of Advanced Nursing*, 80(3), 689-701. <https://doi.org/10.1111/jan.15782>
- Onieva-Zafra, M. D., Fernández-Muñoz, J. J., Fernández-Martínez, E., García-Sánchez, F. J., Abreu-Sánchez, A., & Parra-Fernández, M. L. (2020). Anxiety, perceived stress and coping strategies in nursing students: a cross-sectional, correlational, descriptive study. *BMC Medical Education*, 20(1). <https://doi.org/10.1186/s12909-020-02294-z>
- Panda, S., Dash, M., John, J., Rath, K., Debata, A., Swain, D., & Eustace-Cook, J. (2021). Challenges faced by student nurses and midwives in clinical learning environment—A systematic review and meta-synthesis. *Nurse Education Today*, 101, 104875. <https://www.sciencedirect.com/science/article/pii/S0260691721001325>
- Pham, T. M., & Riegel, B. (2023). Adaptive coping strategies and their association with clinical performance and emotional well-being among nursing students. *Journal of Advanced Nursing*, 79(1), 145–154. <https://doi.org/10.1111/jan.15391>
- Ribeiro, Í. J. S., Leal, C. C. A., & de Medeiros, W. R. (2021). The role of cognitive reappraisal and coping in academic stress among nursing students: A cross-sectional study. *Nurse Education Today*, 103, 104946. <https://doi.org/10.1016/j.nedt.2021.104946>
- Rivera, M., & Morgenstern, D. (2024). Coping mechanisms across the lifespan: Developmental trajectories in healthcare professionals. *Psychology and Aging*, 39(1), 75-87. <https://doi.org/10.1037/pag0000723>
- Rodríguez-Almagro, J., Hernández-Martínez, A., Romero-Blanco, C., et al. (2022). Coping strategies and health-related quality of life in nursing students: A multicenter study. *International Journal of Environmental Research and Public Health*, 19(3), 1745. <https://doi.org/10.3390/ijerph19031745>
- Samson, P. (2020). Effect of perceived social support on stress, anxiety and depression among Nepalese nursing students. *Indian Journal of Continuing Nursing Education*, 21(1), 59. https://doi.org/10.4103/ijcn.ijcn_8_20
- Santa Clara University. (n.d.). Erikson's psychosocial development stages. <https://www.scu.edu/ethics/focus-areas/bioethics/resources/eriksons-stages-of-development/>

- Simply Psychology. (2023b, July 31). *Stratified Random Sampling: Definition, Method & Examples*. <https://www.simplypsychology.org/stratified-random-sampling.html>
- Sharma, P., & Kaur, A. (2022). Social support and coping among nursing students in academic settings. *International Journal of Mental Health and Nursing*. <https://www.sciencedirect.com/science/article/pii/S266691532100002X>
- Shean, M. (2015). *Current theories relating to resilience and young people A literature review*. <https://www.vichealth.vic.gov.au/sites/default/files/Current-theories-relating-to-resilience-and-young-people.pdf>
- Singh, R., Delgado, M., & Yeo, H. (2023). Coping strategies and mental well-being in higher education: A cross-sectional analysis. *International Journal of Educational Psychology*, 12(1), 56–70. <https://doi.org/10.17583/ijep.2023.10261>
- Soriano, R. M., De Guzman, A. B., & Ramos, R. D. (2021). Cultural and religious factors associated with substance use avoidance among Filipino college students. *Asia Pacific Journal of Multidisciplinary Research*, 9(3), 45–53.
- Stress. (2022b, June 17). <https://www.who.int/news-room/questions-and-answers/item/stress>
- Stress, appraisal, and coping. (n.d.). Google Books. https://books.google.com.ph/books?hl=en&lr=&id=i-ySQQuUpr8C&oi=fnd&pg=PR5&ots=DhFPnudlOf&sig=o4xzYr6gA71xarZwf9EJPxEpiec&redir_esc=y#v=onepage&q&f=false
- Stress. (n.d.). <https://www.apa.org>. <https://www.apa.org/topics/stress>
- Supasitthumrong, T. (2024, September 20). *Stress - Signs, symptoms, management and prevention*. MedPark Hospital. <https://www.medparkhospital.com/en-US/disease-and-treatment/stress>
- Taylor, R. M., Wilson, C. E., Doyle, J., & Fernandez, A. (2020). Social support type and problem-focused coping: A comparative analysis among early career professionals. *Journal of Occupational Health Psychology*, 25(3), 184-197. <https://doi.org/10.1037/ocp0000178>
- Turner, K., & McCarthy, V. L. (2024). Registered nurses' emotional responses to medication errors and coping strategies. *Journal of Advanced Nursing*, 80(2), 345–354. <https://doi.org/10.1111/jan.16280>Wiley Online Library
- Vasquez, E., & Rodriguez, J. (2023). The influence of theoretical intensity on coping development: Comparative analysis of nursing curricula. *Journal of Nursing Education*, 62(8), 439-447. <https://doi.org/10.3928/01484834-20230712-05>
- Werner, E., & Smith, R. (1982). *Vulnerable but invincible: A longitudinal study of resilient children and youth*. New York: McGraw-Hill. https://books.google.com.ph/books/about/Vulnerable_But_Invincible.html?id=1YqZAAAI AAJ&redir_esc=y
- What is a Support System and How it is Integral to Success as a Nursing Student? - 811 Words | Essay Example. (2023, July 10). *IvyPanda*. https://ivypanda.com/essays/what-is-a-support-system-and-how-it-is-integral-to-success-as-a-nursing-student/?need_sec_link=1&sec_link_scene=im

Why you Need a Nursing School Support System | *Ohio University*. (n.d.-b).
https://www.ohio.edu/chsp/blog/support-system-nursing-school?need_sec_link=1&sec_link_scene=im

Xu, J., Zhang, L., Ji, Q., Ji, P., Chen, Y., Song, M., & Guo, L. (2023). Nursing students' emotional empathy, emotional intelligence and higher education-related stress: a cross-sectional study. *BMC Nursing*, 22(1). <https://doi.org/10.1186/s12912-023-01607-z>

Zhang, L., & Thornton, K. (2024). Longitudinal assessment of coping mechanisms among nursing students: A three-year follow-up study. *Nurse Education Today*, 127, 105768. <https://doi.org/10.1016/j.nedt.2023.105768>


Zhao, Y., Wang, C., Liu, J., et al. (2022). Effects of active and passive coping strategies on burnout and performance among nursing undergraduates during clinical practice. *International Journal of Nursing Practice*, 28(2), e12976. <https://doi.org/10.1111/ijn.12976>

Zheng, Y., Jiao, J., & Hao, W. (2022). Prevalence of stress among nursing students: A protocol for systematic review and meta-analysis. *Medicine*, 101(31), e29293. <https://doi.org/10.1097/md.00000000000029293>

9. Appendices

APPENDIX A

APPROVAL LETTER FROM THE RESEARCH ETHICS COMMITTEE



LC REC Form #104
APPROVAL LETTER
REC Reference #: 2025-013

January 23, 2025

To: Brian Daplian, Corbin Jon Sulabo, Vivienne Felina, Houda Mahir Talha, Joanna Mhae Tudino, Andrea Louise Untalan,
May Joy Valdez and Jinalyn Yasay
LORMA Colleges, College of Nursing

Subject: Approval of the Research Study "STRESS AND COPING STRATEGIES OF STUDENT NURSES IN LORMA COLLEGES: A PROPOSED HEALTH EDUCATION PROGRAM" by the Research Ethics Committee (REC).

Dear Researchers,

The Research Ethics Committee (REC) has reviewed your application to conduct the above-mentioned research study in the LOCALE OF STUDY with you as the Principal Investigators within the duration of January 23, 2025 to January 23, 2026.

The following documents have been reviewed and approved:

1. Letter of Intent to Conduct the Study
2. Endorsement of the Research Technical Panel
3. Title and Statement of the Problem/ Objective
4. Literature Review
5. Methods and Procedures
6. Population and Locale
7. Exclusion/Inclusion Criteria
8. Data Analysis
9. Ethical Considerations


We approve the study to be conducted in the presented form provided the following are integrated in the final research protocol:

1. The research paradigm, SOP #4 and #5 should be revised as suggested in the manuscript.
2. Indicate clearly that the respondents are not forced to participate in the study.

None of the Investigators participating in this study took part in the decision making and voting procedure for this study.

The Institutional REC expects to be informed about the progress of the study, any revision in the protocol before implementation and participants'/respondents' information/informed consent. Likewise, you are required to provide the Board a copy of the final report.

Yours Sincerely,


RYAN JAY C. RODRIGUEZ-MASE, RMT
Interim Chair, LORMA Colleges Research Ethics Committee

10. Author(s) Biodata

Ms. Andrea Louise J. Untalan, a current Bachelor of Science in Nursing student at Lorma Colleges, leads a team of dedicated peers under the guidance of their research adviser, Ma'am Melchie L. Pulido, RN, MAN, in conducting a study to assess the student nurses' stress levels and coping strategies they utilize. Their research provides meaningful insights into the levels of stress student nurses experiences and supports the creation of effective coping strategies that enhance well-being and strengthen their resilience throughout their nursing journey.