PERCEPTIONS OF THE NURSING PROFESSION AND ACADEMIC AS WELL AS WORK-RELATED STRESS AMONG NURSING STUDENTS IN PUNJAB, PAKISTAN

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Abstract
Background: Healthcare quality stands as a fundamental priority for governments together with providers and consumers. The delivery of healthcare services depends on how healthcare professionals view their work and the extent of academic and work-related stress they experience during their training. There is a shortage of research about nursing students' views of their profession and their stress levels in Punjab. Methods: The study employed a descriptive cross-sectional survey to evaluate nursing students' views about nursing as a profession and their academic and work-related stress levels in three private nursing institutions of Lahore (Akhtar Saeed College of Nursing, Al-Aleem Institute of Nursing and Ittifaq College of Nursing). The study involved 200 students who participated through purposive sampling. The researchers collected data through a structured self-administered questionnaire which they analyzed using SPSS version 26.0 for descriptive and bivariate statistical analysis. Results: The majority of students maintained positive views about nursing with an average perception score of 71.6 ± 5.3 and almost all students agreed that nursing provides a chance to help humanity (91%) yet only half believed nursing received equal status as other health professions (52%). The students experienced high academic stress which reached 48.3 ± 8.8 due to examinations and workload but work-related stress averaged 19.7 ± 4.8 and death and dying and uncertainty in patient treatment were the most stressful aspects. The study revealed significant correlations between stress levels and student demographic characteristics including training level (p = 0.001), age (p = 0.018), parental education (p < 0.05) and hospitalization experience (p < 0.05). Conclusion: Nursing students in Punjab maintain favorable opinions about their profession yet

experience substantial academic and work-related stress which requires proper coping mechanisms from educators and facilitators.

INTRODUCTION

Healthcare delivery depends on nursing as a fundamental pillar which stands among the world's most trusted professions according to Stone (2019). Nursing operates as a profession which combines technical elements with compassion and ethics and human service delivery according to Horton and colleagues (2007). Perceptions about nursing differ across different settings because they are influenced by social-cultural elements and educational factors together with professional factors. Multiple research studies conducted in Zambia, Poland and Turkey demonstrate nursing students see nursing as an honorable practice that cares for others but they encounter barriers related to professional image and recognition within healthcare systems (Zulu & Ngoma, 2015; Marcinowicz et al., 2016; Başkale & Serçekuş, 2015).

The situation in Pakistan matches other countries because students base their career decisions on cultural norms and social status together with personal ambitions. Future nurses in Punjab perceive nursing as a way to help people while they express doubts about how nursing professionals are perceived and their future career potential (Patidar et al., 2011). Research has shown that Asian countries along with Korea have identical patterns where nursing students develop professional values and attitudes during their undergraduate studies (Bang et al., 2011; Hoeve et al., 2016). The research indicates that studying nursing students' perception towards nursing helps maintain their motivation and develop their professional identity to address recruitment challenges in the field. The training environment places substantial academic and work-related stress on nursing students because of their heavy coursework along with clinical requirements and demanding educational standards. Research across different countries demonstrates that nursing education stress affects students worldwide since Jamaican, Saudi Arabian and Turkish students experienced examination pressure along with heavy workloads and clinical responsibilities (Aslan & Akturk, 2018; Graham et al., 2016; Hamaideh, Al-

Omari, & Al-Modallal, 2017). The academic stress in Pakistan results from heavy workloads and time constraints and teaching methods which negatively impact students' performance and their well-being (Cestari et al., 2017). The analysis of nursing perception-stress relationships among Punjab students needs evaluation because it helps create strategies which promote positive nursing professional attitudes alongside stress reduction during educational periods.

1. Materials and Methods

The research design used descriptive cross-sectional survey methods with purposive sampling as the selection approach. The research selected 200 nursing students from three private nursing institutes in Lahore which included Akhtar Saeed College of Nursing, Al-Aleem Institute of Nursing and Ittifaq College of Nursing.

The survey instrument underwent testing with 49 nursing students to verify its clarity and reliability. The survey instrument contained questions that measured nursing profession perceptions together with stress levels in academic and work environments. The Cronbach's alpha scores of 0.70 for perception and 0.93 for academic and work-related stress confirmed internal consistency which indicated satisfactory reliability.

The data collection process used self-administered structured questionnaires for data collection. The data analysis included descriptive statistics like counts and percentages along with means and standard deviations while inferential statistics used Chi-square tests and independent t-tests and one-way ANOVA to analyze variable relationships. The Statistical Package for Social Sciences (SPSS) version 26.0 performed all statistical analyses.

The study maintained ethical standards throughout its duration. All participants gave their voluntary consent before data collection started. The research maintained absolute confidentiality and anonymity for all participants throughout the study.

2. Results

Table 1. Socio-demographic Characteristics of Nursing Students (N = 200)

Variable	Category	n (%)
Level of nursing training	First-year	70 (35.0)
	Second-year	58 (29.0)
	Third-year	72 (36.0)
Age (in years)	<18	5 (2.5)
	18–24	190 (95.0)
	≥25	5 (2.5)
Sex	Male	64 (32.0)
	Female	136 (68.0)
	Christian	22 (11.0)
	Hindu	12 (6.0)
	Others	4 (2.0)
Education of Father	No education	80 (40.0)
	Some education	120 (60.0)
Education of Mother	No education	126 (63.0)
	Some education	74 (37.0)
Family members in Nursing	Yes	28 (14.0)
	No	172 (86.0)
Most influential person to choose nursing	Father	54 (27.0)
	Mother	44 (22.0)
	Others (teachers, relatives, peers)	102 (51.0)
Chronic health condition	Yes	32 (16.0)
	No	168 (84.0)

The research included 200 nursing students in its participant pool. The student population consisted of 36.0% third-year students followed by 35.0% first-year students and 29.0% second-year students. The research participants consisted mainly of 18–24-year-old students who made up 95.0% of the total. The

study participants consisted of 68.0% females and 32.0% males. The educational level of fathers reached 60.0% while mothers reached 37.0% but fathers and mothers without education made up 40.0% and 63.0% respectively. The survey revealed that 14.0% of students had at least one family member working as a nurse. The decision to pursue nursing came from teachers and relatives and peers for 51.0% of students and from fathers for 27.0% and mothers for 22.0%. The survey revealed that 16.0% of participants had chronic health conditions while 84.0% of respondents did not have any health issues.

Table 2. Feelings and Perceptions towards Nursing Profession among Participants (N = 200)

S/No	Perceptions towards Nursing Profession	Strongly Agree n (%)	Agree n (%)	Not Sure n (%)	Disagree n (%)	Strongly Disagree n (%)
1	An opportunity to serve humanity	176 (88.0)	20 (10.0)	2 (1.0)	1 (0.5)	1 (0.5)
2	An opportunity for personal growth	90 (45.0)	92 (46.0)	12 (6.0)	6 (3.0)	0 (0.0)
3	A caring profession	88 (44.0)	94 (47.0)	10 (5.0)	6 (3.0)	2 (1.0)
4	A way to get recognition in society	30 (15.0)	86 (43.0)	60 (30.0)	18 (9.0)	6 (3.0)
5	A dignified and respectful profession	72 (36.0)	88 (44.0)	28 (14.0)	9 (4.5)	3 (1.5)
6	A means to earn merit	120 (60.0)	62 (31.0)	15 (7.5)	3 (1.5)	0 (0.0)
7	Equal recognition with other health professions	22 (11.0)	80 (40.0)	54 (27.0)	32 (16.0)	12 (6.0)
8	Women's profession	25 (12.5)	40 (20.0)	20 (10.0)	78 (39.0)	37 (18.5)
9	Similar to a cleaner's job	8 (4.0)	26 (13.0)	40 (20.0)	82 (41.0)	44 (22.0)
10	To assist medical doctors	50 (25.0)	106 (53.0)	20 (10.0)	18 (9.0)	6 (3.0)
11	No appreciation from people/patients	10 (5.0)	54 (27.0)	70 (35.0)	52 (26.0)	14 (7.0)
12	Not independent because nurses don't make own decisions	40 (20.0)	94 (47.0)	32 (16.0)	24 (12.0)	10 (5.0)
13	Not important in patient care	6 (3.0)	6 (3.0)	8 (4.0)	74 (37.0)	106 (53.0)

14	I will not encourage my children to join	12 (6.0)	20 (10.0)	38 (19.0)	62 (31.0)	68 (34.0)
15	I regret having joined it	6 (3.0)	12 (6.0)	30 (15.0)	82 (41.0)	70 (35.0)
16	I am satisfied and happy in nursing	62 (31.0)	92 (46.0)	30 (15.0)	10 (5.0)	6 (3.0)
17	A tiring and risky job	70 (35.0)	94 (47.0)	14 (7.0)	18 (9.0)	4 (2.0)
18	After joining, I had a negative image of nursing	6 (3.0)	20 (10.0)	18 (9.0)	90 (45.0)	66 (33.0)
19	Has a good career ladder/advancement	56 (28.0)	88 (44.0)	44 (22.0)	10 (5.0)	2 (1.0)

The majority of nursing students held positive views about the profession because they strongly agreed that nursing allows them to serve humanity (88.0%) and promotes personal development (91.0% combined strongly agree/agree) and maintains professional dignity (80.0%). The majority of participants saw nursing as both a caring profession (91.0%) and a way to gain merit (91.0%). The perception about equal recognition with other health professions was split between agreement and disagreement (51.0% agree/strongly agree vs. 22.0% disagree/strongly disagree) and many people viewed nursing as both physically demanding and dangerous (82.0%). Some participants maintained negative stereotypes about nursing by calling it a "women's profession" (32.5% agree) or comparing it to a "cleaner's job" (17.0% agree). More than three-quarters of participants expressed contentment and joy about their professional choice (77.0%) but a small number of respondents regretted their decision to become nurses (9.0%) and would not recommend nursing to their children (16.0%).
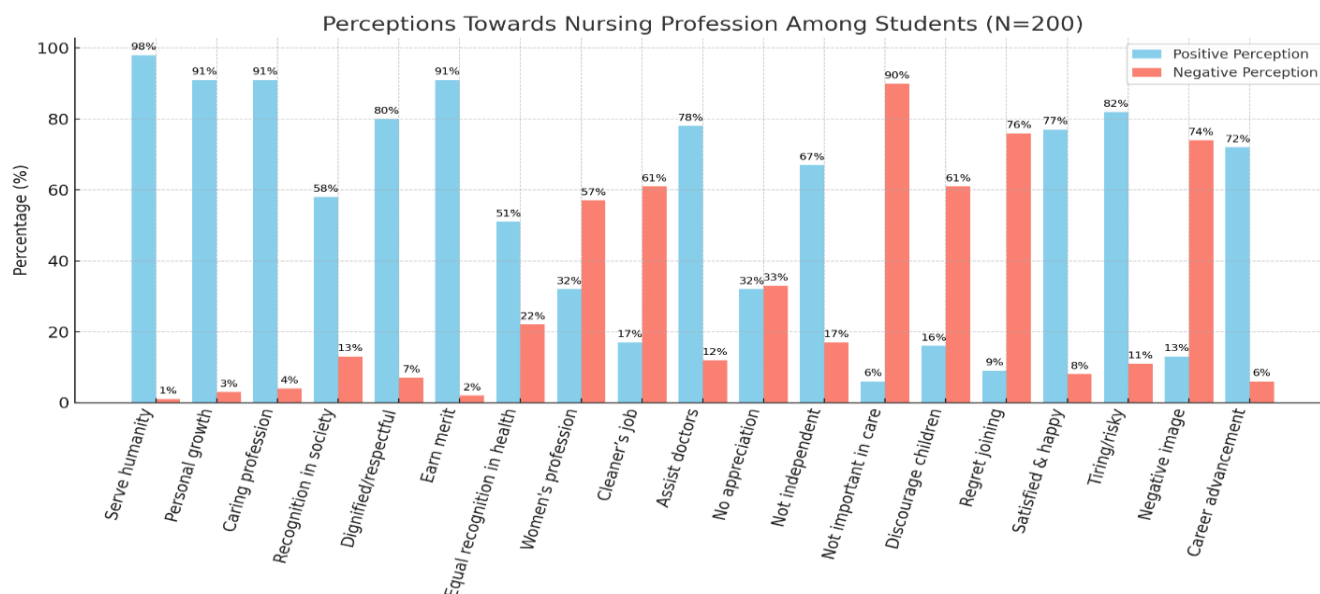

Figure 1: Trend of Perception towards Nursing Profession among Students

Table 3. Academic and Work-Related Stress among Participants (N = 200)

S/No	Academic Stressor	Severe Stress n (%)	Stressful n (%)	Moderate Stress n (%)	Little Stress n (%)	Never Stress n (%)
1	Course workload	25 (12.5)	110 (55.0)	45 (22.5)	15 (7.5)	5 (2.5)
2	Writing assignments to standard	18 (9.0)	80 (40.0)	72 (36.0)	25 (12.5)	5 (2.5)
3	Preparing for examinations	52 (26.0)	95 (47.5)	34 (17.0)	15 (7.5)	4 (2.0)
4	Meeting personal needs while studying	20 (10.0)	60 (30.0)	70 (35.0)	35 (17.5)	15 (7.5)
5	Meeting academic demands	30 (15.0)	90 (45.0)	55 (27.5)	18 (9.0)	7 (3.5)
6	Theoretical content difficulty	26 (13.0)	80 (40.0)	70 (35.0)	20 (10.0)	4 (2.0)
7	Personal standards of achievement	22 (11.0)	60 (30.0)	80 (40.0)	30 (15.0)	8 (4.0)
8	Time management	20 (10.0)	65 (32.5)	70 (35.0)	35 (17.5)	10 (5.0)
9	Academic writing requirement	18 (9.0)	75 (37.5)	70 (35.0)	30 (15.0)	7 (3.5)
10	Assignment and workload	40 (20.0)	85 (42.5)	55 (27.5)	15 (7.5)	5 (2.5)
11	Pressure to keep up with peers	15 (7.5)	60 (30.0)	75 (37.5)	35 (17.5)	15 (7.5)
12	Teaching methodologies	15 (7.5)	55 (27.5)	80 (40.0)	35 (17.5)	15 (7.5)
13	Long lectures (>1 hour)	35 (17.5)	70 (35.0)	50 (25.0)	30 (15.0)	15 (7.5)
14	Attendance at classes	10 (5.0)	25 (12.5)	40 (20.0)	50 (25.0)	75 (37.5)
15	Relationship with lecturer	20 (10.0)	25 (12.5)	35 (17.5)	65 (32.5)	55 (27.5)

Total Academic Stress Score: Mean ± SD = **49.8 ± 8.5**; Min–Max: 24–76

Most nursing students experienced high academic stress because they found examination preparation (73.5% severe/stressful), course assignments (67.5%) and assignment requirements (62.5%) to be the most challenging. The main stressors for students included academic requirements (60.0%), theoretical content difficulty (53.0%) and assignment workload (63.0%).

Students experienced moderate stress levels when it came to achieving their personal standards and managing their time effectively (40.0% and 35.0% respectively). The majority of students (62.5%) experienced minimal stress when attending classes. Students did not view their relationships with

lecturers as a significant source of stress since 60.0%
of them reported no stress in this area.

Table 4. Work-Related Stressors

S/No	Work Stressor	Severe Stress n (%)	Stressful n (%)	Moderate Stress n (%)	Little Stress n (%)	Never Stress n (%)
1	Death and dying of patient	55 (27.5)	70 (35.0)	40 (20.0)	25 (12.5)	10 (5.0)
2	Uncertainty in patient treatment	32 (16.0)	85 (42.5)	50 (25.0)	25 (12.5)	8 (4.0)
3	Conflict in workplace	28 (14.0)	80 (40.0)	55 (27.5)	30 (15.0)	7 (3.5)
4	Lack of knowledge and skills	42 (21.0)	70 (35.0)	55 (27.5)	28 (14.0)	5 (2.5)
5	Taking care of patients	8 (4.0)	45 (22.5)	75 (37.5)	52 (26.0)	20 (10.0)
6	Clinical environment	18 (9.0)	70 (35.0)	55 (27.5)	40 (20.0)	17 (8.5)

Total Work-Related Stress Score: Mean ± SD = **20.3 ± 4.9**; Min–Max: 8–32

The majority of students experienced work-related stress primarily because of patient death and dying (62.5% severe/stressful), patient treatment uncertainty (58.5%), and workplace conflict (54.0%). The majority of students (56.0%) found the lack of professional knowledge and skills to be either severe or stressful. The majority of students reported moderate stress levels when caring for patients (37.5%) and working in the clinical environment (27.5%). The majority of students reported minimal stress from patient care activities (36.0%) and clinical environment responsibilities (28.5%).

Table 4. Bivariate Relationship between Socio-Demographic Characteristics and Perception towards Nursing Profession, Academic and Work-Related Stress (N = 200)

Socio-demographic Variables	Total	Perception towards NP (M±SD)	p-value	Academic Stress (M±SD)	p-value	Work-related Stress (M±SD)	p-value
Level of training							
First-year	70	74.10 ± 4.20	**0.001***	47.90 ± 8.20	0.118	20.50 ± 4.30	0.049*
Second-year	58	70.20 ± 5.10		50.30 ± 9.10		19.60 ± 5.20	
Third-year	72	71.00 ± 5.40		47.00 ± 8.90		18.90 ± 4.80	
Age (years)							
<18	4	69.00 ± 6.80	0.622	52.10 ± 9.30	0.310	20.00 ± 3.90	**0.018***
18–24	192	71.40 ± 5.10		48.20 ± 8.70		19.80 ± 4.60	

≥25	4	75.20 ± 7.10		53.10 ± 8.10		17.10 ± 4.20	
Father's education							
No formal education	84	71.00 ± 5.40	0.201	47.10 ± 8.90	0.031*	19.30 ± 5.00	0.324
Some education	116	72.00 ± 5.00		49.80 ± 8.20		20.00 ± 4.60	
Mother's education							
No formal education	128	71.50 ± 5.30	0.688	47.50 ± 8.80	0.009	19.40 ± 4.80	0.128
Some education	72	72.10 ± 5.00		50.60 ± 8.30		20.40 ± 4.70	
Chronic health condition							
Yes	30	72.30 ± 6.10	0.542	49.20 ± 9.70	0.421	19.10 ± 5.10	0.488
No	170	71.60 ± 5.20		48.10 ± 8.60		19.80 ± 4.70	

The perception levels regarding nursing profession differed substantially based on training level since first-year students achieved the highest mean score of 74.10 ± 4.20 (p = 0.001). The level of academic stress remained consistent between different training levels and age groups but students whose fathers or mothers had some formal education experienced higher stress levels (49.80 ± 8.20 and 50.60 ± 8.30 respectively, p = 0.031 and p = 0.009). The level of work-related stress increased with both training year and student age (p = 0.049 and p = 0.018 respectively). The perception levels and academic stress and work-related stress did not show any significant differences based on chronic health condition.

3. Discussion

The research data showed students maintained positive attitudes about nursing as a profession especially first-year students who scored the highest perception scores. Research indicates nursing students worldwide including those in Zambia Poland and Turkey view nursing as an honorable profession which they find rewarding but their views are shaped by their cultural background and educational system (Zulu & Ngoma, 2015; Marcinowicz et al., 2016; Başkale & Serçekuş, 2015). Nursing students in Punjab and Jordan demonstrate strong motivation to serve humanity and make meaningful contributions to healthcare according to research (Patidar et al., 2011; Al-Jarrah, 2013).

The research showed academic stress affected students yet students with well-educated parents experienced higher stress levels. Research from Jamaica Saudi Arabia and Pakistan confirms that nursing students experience academic stress because of their workload and examination demands and the expectations from their parents and institutions (Brown et al., 2016; Aedh et al., 2015; Parveen & Inayat, 2017). Younger and first-year students experienced higher work-related stress according to our findings because they had minimal clinical experience and faced difficulties adapting to demanding healthcare settings. Research from Korea and Bhutan showed that early clinical training exposure led to increased stress levels among students (Bang et al., 2011; Khesar Gyalpo University of Medical Sciences of Bhutan, 2018).

Students in Nigeria and India view nursing as a caring profession but they face ongoing challenges regarding recognition and workplace stress (Wu et al., 2016; Swarna, 2015). The research findings demonstrate the necessity for academic and clinical environments to provide support for students who need help managing stress while maintaining professional values.

4. Conclusion

The nursing students in Punjab had positive views about their profession but they faced significant academic and work-related stress especially from examinations, workload and clinical responsibilities. The findings suggest that nursing educators and clinical facilitators should incorporate stress management training, mentorship and supportive teaching methods into nursing curricula. Strengthening coping strategies and providing institutional support will not only reduce stress but also enhance professional commitment and the overall quality of healthcare delivery.

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