

# The Lived Experience of Nursing Students with Mental Health Concerns: Recovering Not Condemned

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Carmen Hust RN, MScN, PhD

# Learning Objectives and Disclosure



**Author: Carmen Hust MScN, PhD, RN**

**Conflict-of-Interest: None**

## **Learning Objectives:**

- Gain an understanding of the lived experience of Nursing students with mental health concerns
- Critique the socio, political, and economic realities that influence the students lived experience and affect student mental well-being (corporate agenda in healthcare and education)
- Dispel nursing myths surrounding nurses with mental health concerns
- Begin to construct curriculum that speaks to and fosters recovering

# Research Problem



- One in five Canadians and as many as one in four youth and young adults struggle with mental health concerns (CMHA, 2012).
- Most mental health concerns begin in young adults (Kessler et al. 2005) and in Canada more than half (65-70%) of this age group is attending post-secondary education (Organisation of Economic Cooperation and Development, 2006, Picot and Hou, 2012) .
- Psychological distress is high among post-secondary students, triggers; financial, relational, developmental, environmental, and social concerns (Ibrahim, Kelly, Adams, and Glazebrook, 2012; Macaskill, 2013).
- The literature seldom explores student mental health concerns as a function of the post secondary institution, and other social, political and economic realities.
- Research that explores nursing students lived experience with mental health concerns is absent in the literature

# Research Questions

What is the experience of nursing students with mental health concerns?

How do nursing students with mental health concerns describe themselves?

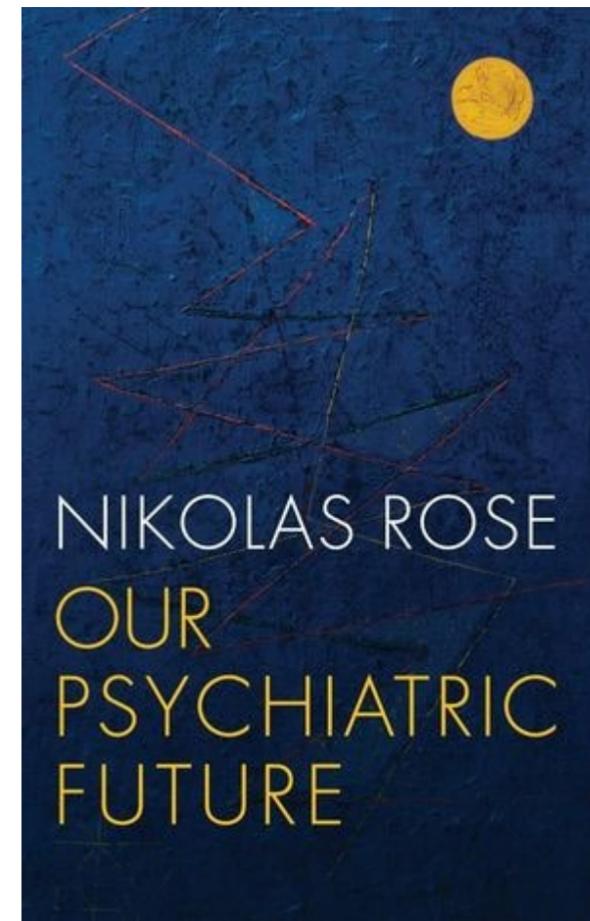
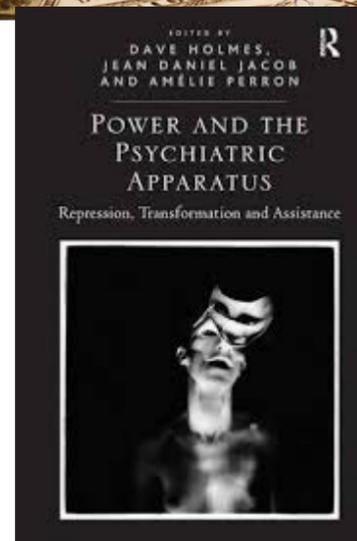
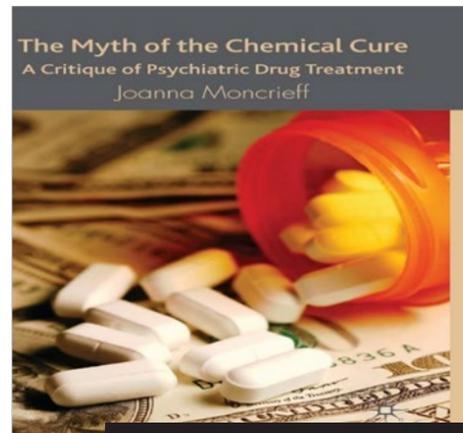
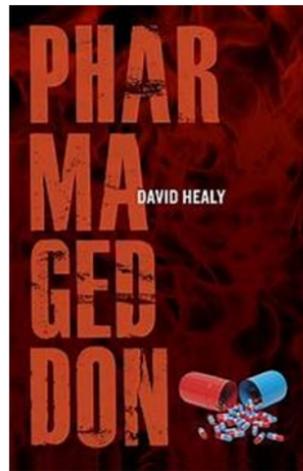
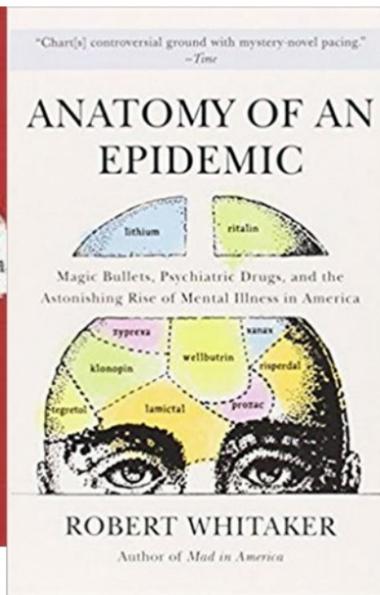
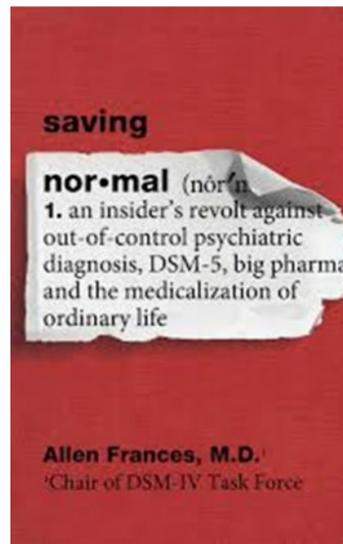
How do nursing students with mental health concerns understand their experience?

How do institutional policies, procedures and technologies help and/or hinder nursing student mental wellbeing?

How do nursing students with mental health concerns make sense of their experience in light of the psychiatric apparatus that permeates student life?



# Psychiatric Apparatus



Ψ  
**MENTAL HEALTH AND MEDICALIZATION**  
Finnish Psychological Association  
September 1, 2014

# Theoretical Framework



Phenomenology  
• *Heideggerian*

Critical theory  
• *Foucault*

Stigma  
• *Goffman*

# Methodology

- Design: Interpretative Phenomenological Analysis
  - Ethics Approval, University of Ottawa
- Semi structured interviews , face to face, open ended questions,
  - First and Second tier question.
  - First tier detailed examination of the lived experience Second tier questions engaged with theory that might support gaining an understanding of the socio, political, and economic realities that might be influencing the students lived experience.
- 12 interviews 45-90 minutes in length
- Interviews were transcribe

# Participants

Participant (Pseudonym)	Age	Sex-	Year of Study	Mental Health Concern	MHC First Onset
Andrew	21	Male	3	Depression Addiction Anxiety	High School
Eleanor	22	Female	4	Depression Anxiety	High School
Jane	29	Female	4	Depression Anxiety OCD Panic	High School
Jessica	22	Female	4	Depression Anxiety Panic	In Nursing School
Julie	18	Female	1	Depression Anxiety	High School
Leila	20	Female	2	Depression Anxiety OCD Eating Disorder	High School
Sasha	22	Female	2	Depression OCD Eating Disorder	High School
Mariam	23	Female	4	Anxiety/ GAD	High School
Mary	21	Female	2	Depression Anxiety	High School
Sophie	20	Female	2	Depression	High School
Summer	18	Female	1	Depression Self-Harm	High School
Winter	18	Female	2	Depression Addiction Eating Disorder	High School

# Findings

## Themes

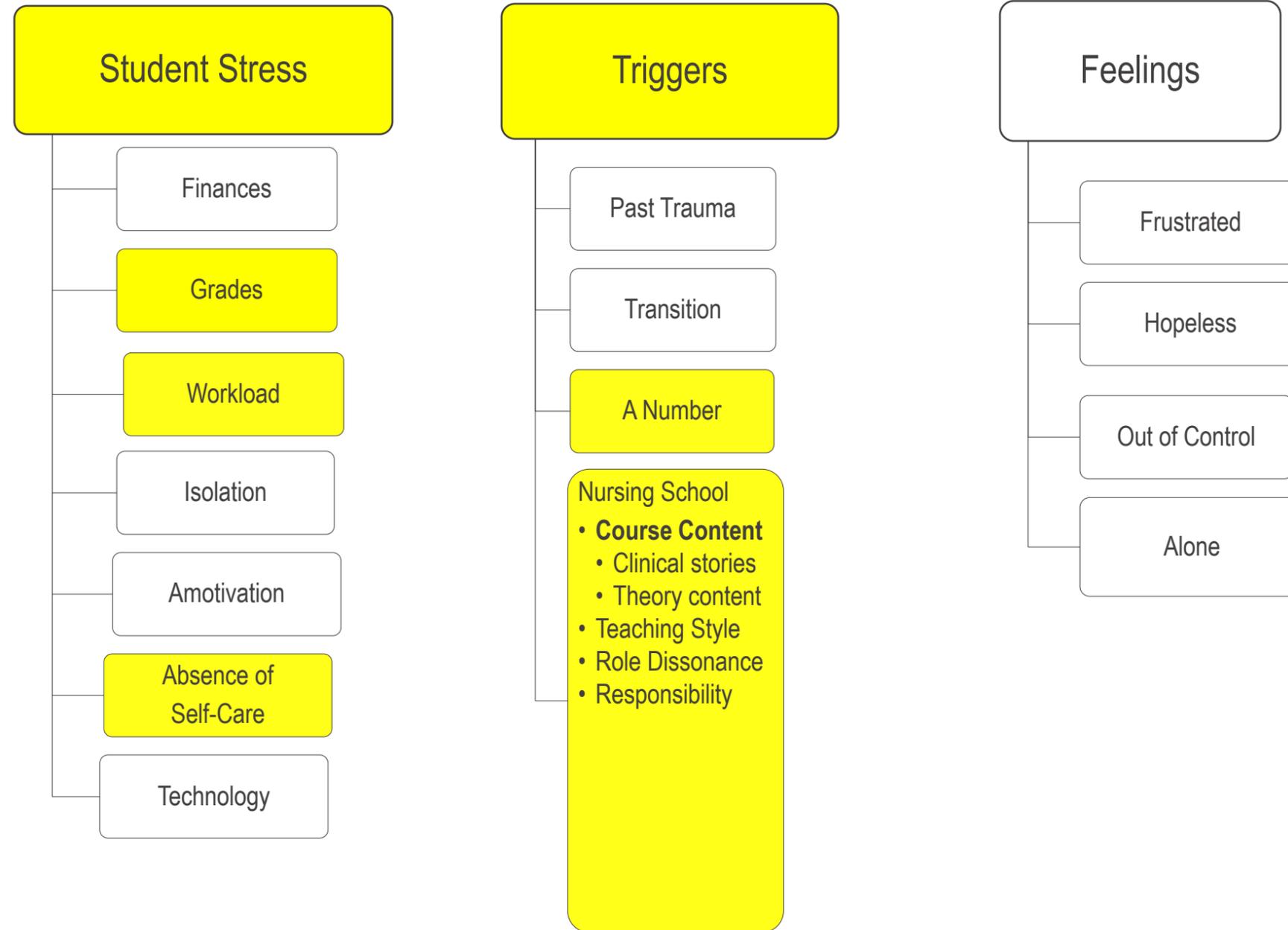
Concerned Self

Psychiatrized Self

Recovering Self



# Concerned Self



# Concerned Self: Student Voices

## Workload

*[I] wake up at 5:30AM and then, then clinical ends at 3:00 PM and then I go home and do whatever work I need to do after clinical and then whatever work I need to do for my three other courses. (...), I go to bed at midnight or 1:00 AM in the morning and wake up again at 5:30 AM and there is literally no time.*

Sasha 232-230

## Grades

*In Nursing you have to get a certain grade (...) if I'm not getting it, maybe I am not good enough to be a nurse and it really does put you down*

Winter 486-489

## Absence of Self Care

*During nursing school you are never going to be any unhealthier (...). You do not have time for the gym. You do not have time to eat. You do not have time to deal with my mental health issues. You do not have time to do things that you enjoy.*

Jane, 571—574

## Being a number

*I feel like your just a number, and that is all you are known as , I haven't has a professor who went out of their way to know my name (...) there is no real connection.*

Julie, 138-144

*You are dumb little student number 8,632.*

Mariam, 467

## Teaching Style

*I feel like a lot of professors are trying to scare us almost, either scare us out of the program or like into something else*

Julie, 575-577

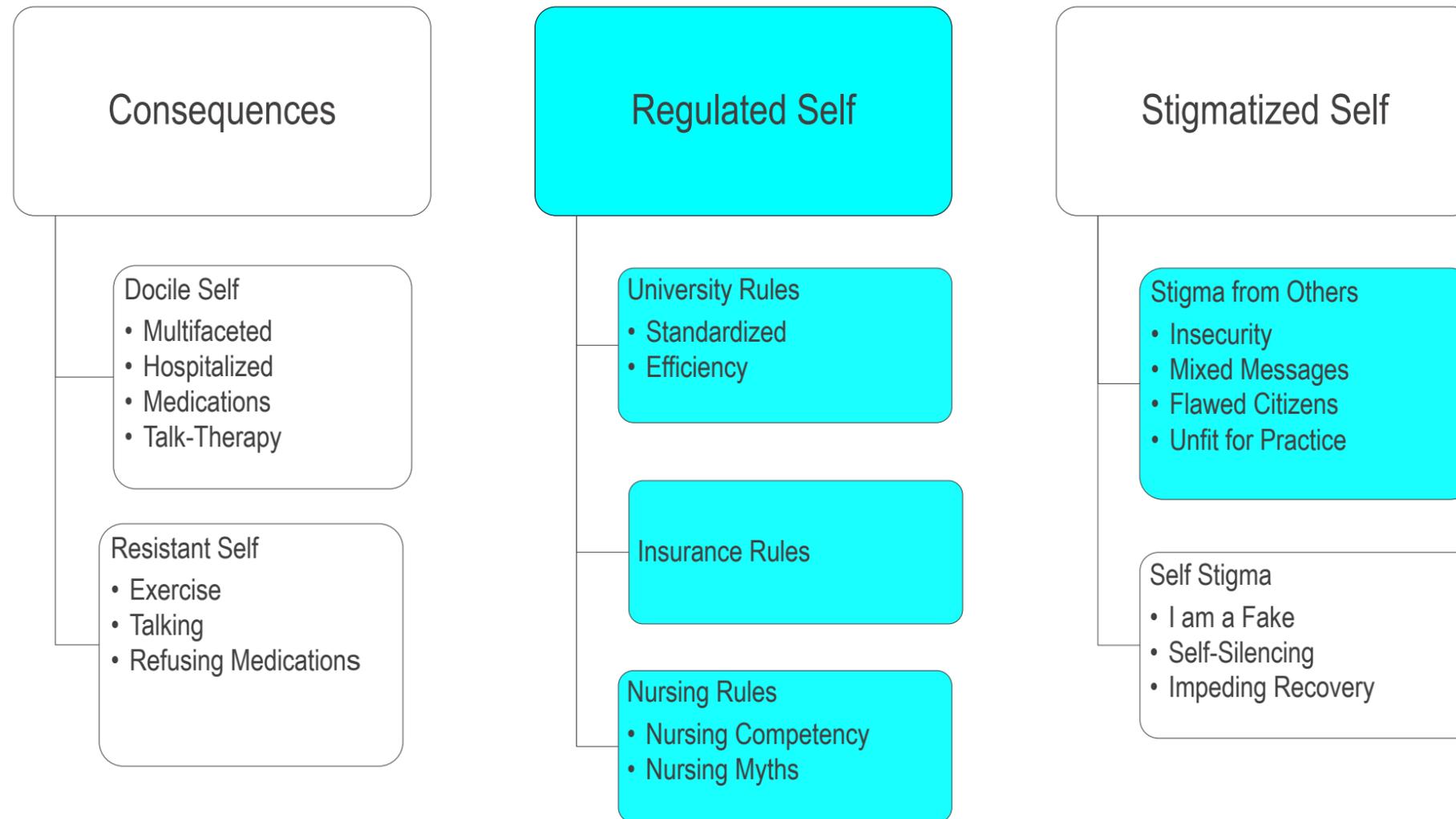
*Honestly the clinical instructor (...) makes or break a placement so I've had really great ones that were really clear and helped you with everything (...) other ones who just weren't really there for us (...) some teachers just make you feel like you're always doing something wrong and aren't really there to help you but just to point out your mistakes.*

Eleanor, 407-417.

*There is a lot of, you must know this, or if you do not know it, your patients will die because you are unprepared.*

Mariam 89-90.

# Psychiatrized Self



# Psychiatrized Self: Student Voices

## University Rules

*[O]nce you start writing an exam, that is it. If you do not finish it. You fail it. I think unfortunately (...) that is an awful policy (...). No makeup (...) and that idea always stuck in the back of my mind. Like you cannot freak out because even if you told them, like I am about to have an anxiety attack. I need to leave this facility. It is still a fail.* Jane, 989-998

*You cannot miss a day of clinical right, so when my anxiety gets really bad like last semester, the first semester of third year, everyone knows it's one of the harder ones (...) we had a lot of exams, a lot of final projects due and I just started panicking, total stress, tons of panic attacks. I think I had 5 in a week* Mary, 174-182

## Insurance Rules

*I was seeing a psychologist at the time. (...) the problem is that it's very expensive and my parents weren't able to afford it anymore. I think that was really hard (...) I had to go write my bio exam and I was really nervous (...) I felt like I couldn't really cope and I got really suicidal and I would say like that was probably the closest I have ever been to actually killing myself,*

Mary, 541-548

## Nursing Rules

*There has always been this philosophy in nursing where nurses went through a hard time when they were in school, so, we got to show these kids what it's like too.* Sasha, 868-870

*The whole idea of nurses eating their young, I think that's why I get really nervous, (...) I would never do anything to upset anyone and so when that person of authority acts aggressive unnecessarily it makes me panic,* Mary, 715-720

*We have a problem in nursing (...), expecting our nurses to be superhuman when they are people too you know.* Mary 493-495

*[A]s a nursing student I feel (...) I cannot have mental health concerns because I am going to be looking after other people (...) I think that maybe in the future in the workplace I'll have to keep that [mental health concern] under wraps, just because I need to be focussed on other people and not myself,* Summer, 980-995

*I find with a mental health issue, especially in the nursing, it doesn't really fit the perfect picture of [nursing] and so I definitely feel like that affects me* Mary, 171-174.

# Psychiatrized Self: Student Voices

## Stigmatized Self

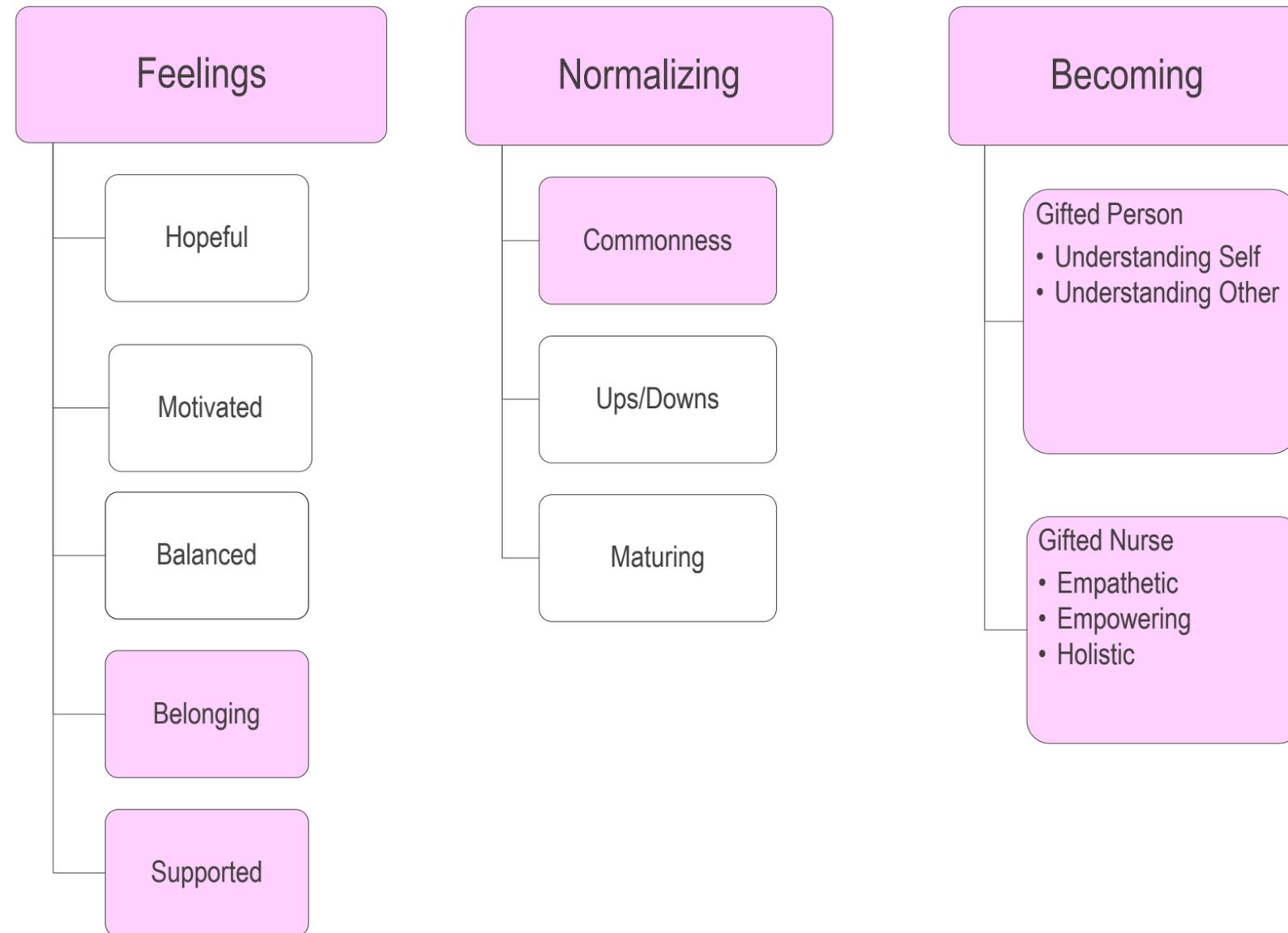
*[A]s much as people say, I am not going to judge you in a particular way because you have a mental health disorder (...) they do. You know, the stigma's still there. (...) because this is a professional program, I feel like I need to hide (...) any signs or symptoms (...) I try to pretend I'm like this person that has it together all the time. Like when my classmates are really anxious and stressed out, I'm the one that tries to comfort them. Sasha, 138-146*

*I would just be kicked out of the program and I feel like (...) it would happen. They would justify it by saying its patient safety Jane, 791-792*

*I want them [patients] to know that they are safe (...) in my hands. I am capable. (...) I am trained. (...) they do not have to worry (...) at one point, I struggled with suicidal ideation or whatever. That does not make me less of a nurse right now. Sasha, 520-524*

*I would not say I have shared any of my mental health concerns with very many students. I do not think I have ever felt that level of comfort; even if I spend a whole semester with these people (...) there is not that level of trust (...) and same with instructors. Jane, 472-475.*

# Recovering Self



# Recovering Self: Student Voices

## Belonging

*So I should have to fit into this perfect image [of a nurse] but I didn't and none of my friends do either, which is good, because then I have people to spend time with. Mary, 403-405*

## Commonness

*I have really awesome friends who'd gone through a lot of mental health issues (...) so they give me space. Summer 147-153*

*I have friends who have had mental health issues, who have been down the same road. So even if I do not directly approach them about what I am thinking, even just knowing I can text them, it will get my mind off things. Leila 165-160*

## Gifted Person

*I would not trade it [mental health concern] for anything. Like I am so fortunate to have gone through what I did. (...) it has made me better able to handle stressful situations like this [nursing school]. I feel (...) I have an advantage on my peers. (...) It is a struggle, but at the same time, I have the tools I need to deal with things.*

*Sasha, 531-538*

## Support

*I didn't use to use people as my support line. I used compulsions. But I find people work a lot better.*

*Sasha, 242-243*

# Recovering Self: Student Voices

## Gifted Nurse

*I think this experience, that I've gone through, has helped me better empathize with people.*

*Andrew, 488-489*

*I think a lot of people in nursing (...) have dealt with a lot of mental health problems and now they are so much more empathetic because of it. They are so much more understanding because of it and they know that people have to keep trying so they have more faith in people*

*Winter 737-742*

*I am really lucky (...). I am going to be a good nurse because of my mental health concern, and I wish people knew that. I wish people knew that I have that different kind of perspective (...) I can empathize and I have been in hospitals. (...) I know it stinks (...) I know nurses can sometimes just kind of brush you aside (...) I'm not going to be that kind of nurse because I know what it feels like to literally be a task.*

*Sasha. 551-558*

# Implications

## How we educate nursing students

- Curriculum that speaks to and fosters recovering
- Dispel nursing myths surrounding nurses with mental health concerns
- Implement teaching strategies to counter loneliness and foster belonging
- Encourage faculty and students to critically appraise the corporate agenda (healthcare, education) and its affect on student mental well-being

## How we practice nursing

- Address mental health stigma in the nursing profession at the bedside, between nurses and as it is demonstrated by regulatory bodies
- Challenge the nursing profession to develop a critical perspective on the pervasive *psy* complex and affinity with the corporate agenda
- Encourage the development of a critical perspective in nursing practice so as to foster recovering

Are there questions and comments?  
Is there a willingness to continue  
the conversation?

Please email Carmen at  
[hustc@algonquincollege.com](mailto:hustc@algonquincollege.com) or  
[carmenhust@gmail.com](mailto:carmenhust@gmail.com)

Thank you for being present and  
participating in this presentation.