

Perceptions of Baccalaureate Nursing Students Before and After Placement on a Behavioral Health Unit

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Introduction

The focus of this paper is to determine if the Baccalaureate nursing student has changed their preconceived perceptions of their training in nursing education as well as fears or anxieties for being on a Behavioral Health unit both prior to and after placement. Both inpatient and outpatient behavioral health units provide clinical interventions for mental health or substance use diagnosis in medically staffed psychiatric supervised treatment environments.

Information from this research will enhance the future education of the undergraduate in the behavioral health specialty area. The clinical rotation on an acute unit for nursing students may be challenging as well as anxiety provoking. As faculty, the intent is to provide the best clinical experience that is constructive to learning, to reduce negative attitudes or misperceptions that the students may have regarding clients with a mental illness.

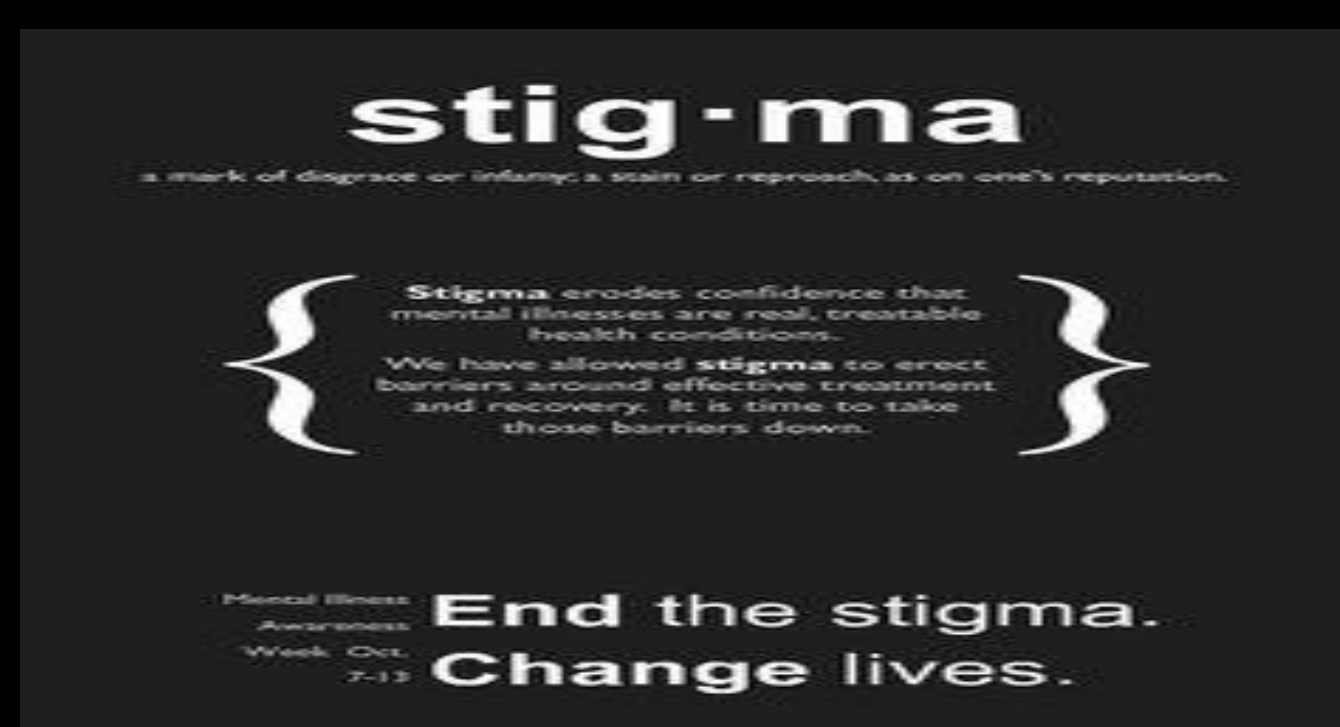
The question is how to best efficaciously generate knowledge acquisition of mental and emotional disorders and promote therapeutic communication within the context of a clinical placement for students in a baccalaureate nursing program?

This research study may not specifically be a measurement tool to identify specific teaching strategies but rather lead the pathway towards the enhancing of the clinical education of bachelor degree undergraduate nursing students in behavioral health nursing.

The intent is to provide a glimpse of different areas or gaps in student knowledge, as well as changes in perceptions, that once identified, might indicate a necessity to investigate methodologies available for faculty to provide the best teaching practices for active learning.

Purpose Statement

The main focus as a professor of nursing is to prepare the student nurses for practice in an environment that they might encounter when they enter the profession. The utilization of a framework to organize the development of the program in designing courses and clinical practicum experience becomes paramount in this changing environment of mental health. The concerns of today also may be related to the consequences of insurance changes within the psychiatric illness continuum of care that is provided for patients today. Recent changes within the acute setting require that more patients are discharged to outside services and clinics. The student must be competent not only in the content that is required on the licensing examination but provided the foundation in meeting the quality care outcomes for this mental health population. The reduction of anxiety and stress by implementation of support services, and better communication between faculty and students may increase positive influences of well-being for the baccalaureate nursing students. The focus upon research to provide the best possible evidenced based practice in nursing education for future behavioral health clients is imperative to generate a future of well-prepared professional nurses.



Literature Review

A review of the literature reveals a scarcity of recent studies concerning stigma associated with behavioral health clinical experiences in undergraduate nursing education. Emphasis upon health promotion, crisis interventions, behavioral and coping mechanisms is necessary for the promotion of wellness.

Immersion clinical practice as reported in a study by Tratnack, S.A., O'Neill, C.M. & Graham, P. (2011), reported that the nursing students' knowledge and exposure to a variety of patients with different mental illnesses over a 6-day period consecutively vs multi week without other academic classes generated positive outcomes inclusive for client progression and greater collegial staff interactions. Providing attention to student fears, faculty can intervene accordingly and proactively. (Ratanasiripong, P., Park, J.F., et.al. (2015).

Ganzer, C.A. & Zauderer, C. (2013) explored results when faculty provide pre-clinical time for the students to provide insight into concerns and perceptions prior to their clinical experience. Through discussion, simulations, and clarifying the role of the students on the unit, they were able to provide feedback for any misperceptions that the students may have had and their concerns resulting in reduction of anxiety and advancement of clinical reasoning prior to the behavioral health experience.

The stressors that confront students in nursing education curriculum programs may in fact be related to the increased difficulty with their ability to cope. Timmins, Corroon, Byrne, Mooney (2011) study reported upon the necessity to prepare and provide support resources as an adjunct to student achievement. In this research the 246 students were queried with a questionnaire that revealed several stressors such as with clinical placements, the relationships with clinical staff, exams or assignments, etc. The coping mechanisms described that the students were communicating with supportive friends, counselors, parents, etc. In the behavioral health clinical units, faculty should be mindful of the stressors students are experiencing and provide feedback to encourage verbalization of any fears, or related program stress.

Nursing in behavioral health continues to be an area of selection that few students go on to pursue post-graduation. Happell, B. & McAllister, M. (2014). Hayman-White, K. and Happell, (2005) reported on a research study that included 802 nursing students in Australia. This study utilized a self-report scale "designed to assess (1) preparedness for the behavioral health field, (2) attitudes toward mental illness and consumers of behavioral health services, and (3) attitudes toward behavioral health nursing, including career preferences. The findings revealed a disposition for the students surveyed to include perceptions of unpopularity with behavioral health illness, as well as anxieties. The positive aspects revealed that with educational preparedness, it will affect the student's beliefs, encouraging interest in this field of nursing post graduation." (p.191).

A systematic review completed by Happell & Gaskin (2012), reported upon studies that had measured or investigated the effectiveness of education upon attitudes towards behavioral health nursing by undergraduate nursing students. The results indicated that "Investigations into the effectiveness of education as a strategy for improving attitudes towards behavioral health nursing have yielded promising findings. Although the differences in research methods between studies prevents statistical synthesis of their findings, the general pattern of results appears to suggest that providing students with more classroom education on behavioral health nursing and longer clinical placements contributes to positive changes in student attitudes towards behavioral health nursing." (p.155).

Methodology

A descriptive, non-experimental study design was used to explore whether and in what ways that psychiatric nursing students in a baccalaureate nursing program have been influenced pre and post rotation in an acute behavioral health unit as well as in outpatient service settings. A comparative survey was designed to explore whether the perceptions of the students had been altered by the immersion within this educational experience.

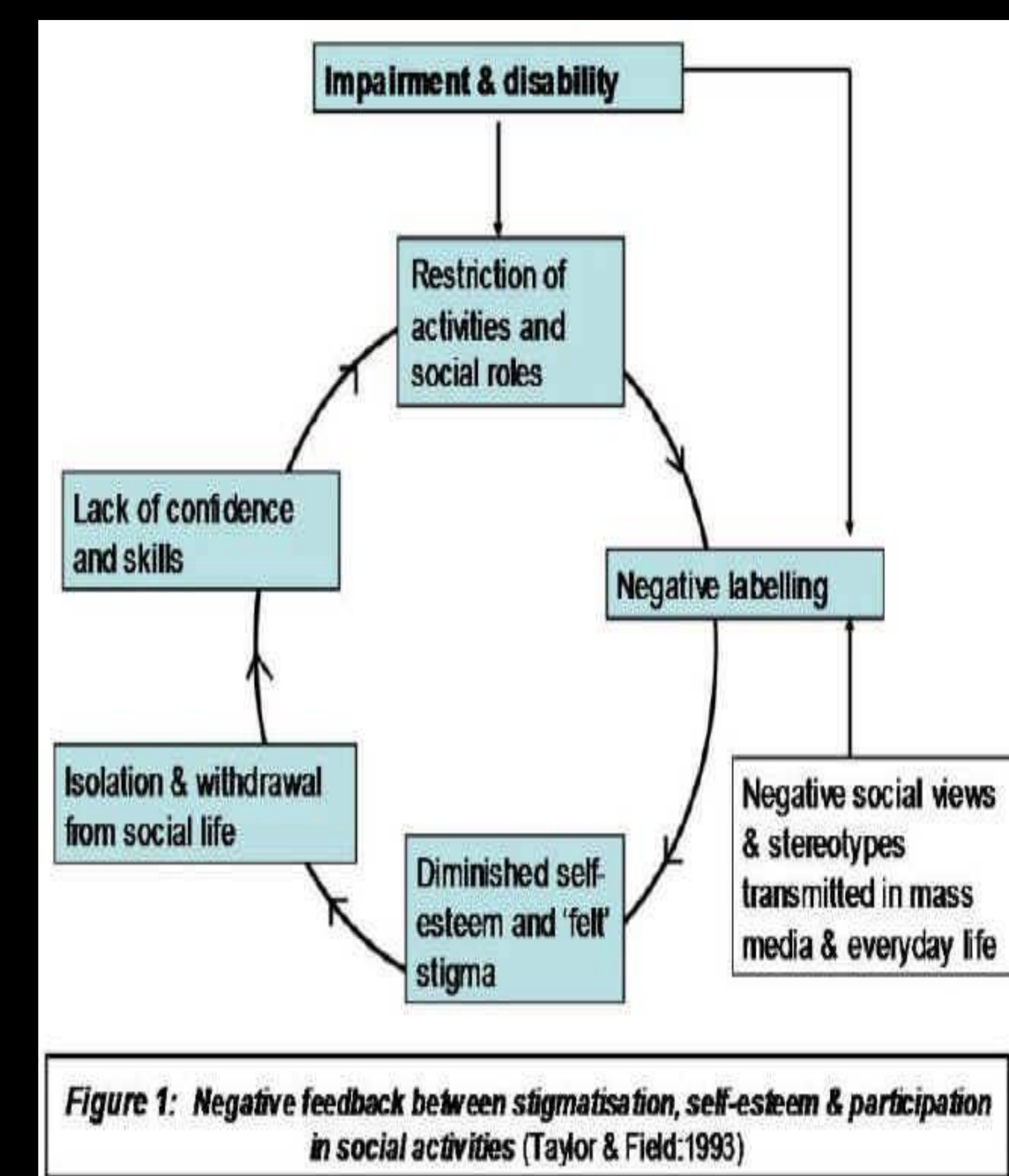
Results Table 1 Summary Distribution of Statistical t-Test (N = 27)

Statements	t	df	Sig.	95% confidence Interval of the Difference	
				Lower	Upper
1. I do not have any fears or apprehensions concerning a mental health unit.	-2.77	52	.008	-1.40	-.226
2. With my educational background I have the determination to complete a therapeutic communication process with my patients.	-1.08	52	.281	-.631	.187
3. This clinical rotation with mental health clients will be a valuable experience for my nursing career.	.806	52	.424	-.165	.387
4. As a nursing student I will be safe and secure while on this unit.	-2.09	52	.041	-.724	-.016
5. If the clients are disruptive on the unit I know that resources are available for me that will be supportive.	-1.43	582	.164	-.627	.108
6. My education has provided me with the knowledge concerning the medications required for the clients.	-1.87	52	.066	-.689	.023
7. I will be able to establish boundaries with the mental health client.	.707	52	.483	-.204	.426
8. I feel competent to complete a psychosocial assessment.	-2.36	52	.022	-1.02	-.085
9. I am prepared to participate in interdisciplinary meetings.	.550	52	.585	-.516	.294
10. The previous education has prepared me to now acquire a foundation in mental health nursing.	-1.98	52	.053	-.745	-.004

Table 2 Summary Distribution of Students Mean Score on Pre & Post Statements (N = 27)

Statements	N	Pre-test Mean	SD	N	Post-test Mean	SD
1. I do not have any fears or apprehensions concerning a mental health unit.	27	2.48	1.01	27	3.29	1.13
2. With my educational background I have the determination to complete a therapeutic communication process with my patients.	27	3.85	.86	27	4.07	.61
3. This clinical rotation with mental health clients will be a valuable experience for my nursing career.	27	4.55	.50	27	4.44	.50
4. As a nursing student I will be safe and secure while on this unit.	27	3.74	.71	27	4.11	.57
5. If the clients are disruptive on the unit I know that resources are available for me that will be supportive.	27	3.96	.80	27	4.22	.50
6. My education has provided me with the knowledge concerning the medications required for the clients.	27	3.51	.80	27	3.85	.45
7. I will be able to establish boundaries with the mental health client.	27	3.88	.42	27	3.77	.69
8. I feel competent to complete a psychosocial assessment.	27	2.92	.91	27	3.48	.80
9. I am prepared to participate in interdisciplinary meetings.	27	3.55	.75	27	3.66	.73
10. The previous education has prepared me to now acquire a foundation in mental health nursing.	27	3.55	.80	27	3.92	.54

You can't tell just by looking at someone what they are dealing with inside.....



Conclusions

Questions to ask: Is the faculty keeping up with current educational changes that need to be in place for the success of their students? Is faculty concurrently reviewing as well their own curriculum to be in harmony with current standards of practice? The reduction of stigma as well as the promotion of emotional, mental and social well-being should be included in the relationship between mind and body with emphasis upon health promotion, crisis interventions, behavioral and coping mechanisms.

References

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Figure 1: Statistical Significant Survey Questions N = 27

