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DESCRIPTION OF ANXIETY, DEPRESSION, AND STRESS IN DIPLOMA NURSING STUDENTS CARING FOR THE ELDERLY DURING CLINICAL PRACTICE

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Abstract

Clinical practice is beneficial in gaining definite experience to achieve professional skills including knowledge, technical and social skills or good communication. However, during the practical placement, often nursing students experience anxiety, depression and stress. This study aims to describe the level of anxiety, depression and stress experienced, identify the factors causing anxiety faced, and identify coping strategies used by D3 Nursing students in overcoming anxiety, depression and stress when caring for the elderly during clinical practice in hospitals. This study uses a mixed method with explanatory sequential design. The study population is D3 Nursing students of Surva Nusantara University who care for the elderly during clinical practice in hospitals, while the sample is total sample of 30 students for quantitative data, and 5 students based on data saturation for qualitative data. Data collection procedures used the DASS 21 (Depression Anxiety Stress Scale 21) instrument for qualitative data, and an online interview using zoom meeting by initiating open-ended questions for qualitative data. Qualitative data is analyzed using SPSS descriptive analysis while qualitative data is analyzed through content analysis. Both quantitative and qualitative found that nursing students were experience anxiety, depression, and stress with various level of anxiety, depression and stress from range of mild to very severe with anxiety occupying the most prominent position compared to the other two conditions. Based on qualitative data, the cause, the symptoms, and copying strategy for anxiety, depression, and stress are also found. The recommendations are directed toward preceptors, nursing students themselves and their junior.

Keywords: Anxiety, depression, and stress level, caring for elderly, nursing clinical practice.

Abstrak

Praktik klinis bermanfaat dalam memperoleh pengalaman nyata untuk mencapai keterampilan profesional, termasuk pengetahuan, keterampilan teknis dan sosial, atau komunikasi yang baik. Namun, selama praktik kerja, mahasiswa keperawatan seringkali mengalami kecemasan, depresi, dan stres. Penelitian ini bertujuan untuk mendeskripsikan tingkat kecemasan, depresi, dan stres yang dialami, mengidentifikasi faktor-faktor penyebab kecemasan yang dihadapi, dan mengidentifikasi strategi koping yang digunakan mahasiswa D3 Keperawatan dalam mengatasi kecemasan, depresi, dan stres saat merawat lansia selama praktik klinis di rumah sakit. Penelitian ini menggunakan metode campuran dengan desain ekplanatory sequential. Populasi penelitian adalah mahasiswa D3 Keperawatan Universitas Surya Nusantara yang merawat lansia selama praktik klinis di rumah sakit, sedangkan sampel penelitian adalah total sampel sebanyak 30 mahasiswa untuk data kuantitatif, dan 5 mahasiswa berdasarkan saturasi data untuk data kualitatif. Prosedur pengumpulan data menggunakan instrumen DASS 21 (Depression Anxiety Stress Scale 21) untuk data kualitatif, dan wawancara daring menggunakan zoom meeting dengan mengajukan pertanyaan terbuka untuk data kualitatif. Data kualitatif dianalisis menggunakan analisis deskriptif SPSS, sedangkan data kualitatif dianalisis melalui analisis isi. Baik secara kuantitatif maupun kualitatif, ditemukan bahwa mahasiswa keperawatan mengalami kecemasan, depresi, dan stres dengan berbagai tingkat kecemasan, depresi, dan stres, mulai dari ringan hingga sangat berat, dengan kecemasan menempati posisi paling menonjol dibandingkan dua kondisi lainnya. Berdasarkan data kualitatif, penyebab, gejala, dan strategi meniru kecemasan, depresi, dan stres juga ditemukan. Rekomendasi ditujukan kepada preceptor, mahasiswa keperawatan itu sendiri, dan junior mereka.

Kata Kunci: Kecemasan, depresi, dan tingkat stres, merawat lansia, praktik klinis keperawatan.



Introduction

Practice clinic as means student health in apply theory and skills practice. In practice clinic student learn and practice For add knowledge in do action professional. Practice clinic allows nursing student For develop care anesthesiology, as well as individual skills and knowledge through exposure simultaneously to experience learning theoretical and practical (Tanamal et al., 2024) . Student success in clinical practice experiences can be influenced by several factors, including the clinical supervisor, the methods used in clinical guidance, the completeness of facilities, and the cooperation of clients and families. Improving the quality of clinical practice learning can be achieved by improving the performance of clinical supervisors. Clinical supervisors play a significant role in the student learning process, providing direct care to patients in hospitals, influencing students' cognitive, attitudinal, and psychomotor competencies in providing nursing care and developing professional organizations (Damanik et al., 2021).

As for the factors that influence experience students. Environment practice supportive clinics, such as culture positive work and effective communication between students and supervisors play a very important role in increase quality learning. On the other hand, limitations time, duration short practice, and attitude negative from student or mentor become obstacle in the learning process (Amar et al., 2019). Availability source Power in the form of amount staff adequate nursing care and complete equipment also affect experience students, as well as lack in matter This hinder achievement objective learning (McTier et al.,

Anxiety identified as factor psycho-social important things that influence experience clinical student nurses. Anxiety experienced by students nursing during learning clinic can hinder the learning process clinics, especially anxiety currently until panic. In addition, depression and stress are also common appear as response to pressure academic and demands practice clinic. Depression can lower motivation learning. concentration. confidence self students, while prolonged stress can influence welfare physical and mental, resulting in fatigue, disturbance sleep, or even decline quality service nursing care provided to patient. With thus, anxiety, depression, and stress is interrelated factors related and important noticed in support experience optimal clinical for student nursing (Nurhidayati & Muhsinatun, 2018) . Based on Basic Health Research Data shows about 10% of group age young that is around 15-24 vears old experience problem disturbance anxiety and depression. Anxiety that occurs in students undergo practice clinic caused by several factors, such as lack of knowledge individual, support family and place lack environment of practice comfortable (Fadhilah et al., 2023).

Clinical nursing education is fundamentally about learning through experience. However, patient needs become the primary focus and can sometimes interfere with student learning as students are confronted with many complex and challenging situations. Gurková & Ziaková (2018) found that there were quite a lot of challenges in clinical practice, including student preparedness, inadequate supervisory relationships between students, clinical staff and schools. Kereh & Rochmawati (2022) mentioning other challenges in the form of declining quality of guidance, lack interdisciplinary practice, loss of opportunities to share learning, lack of focus and decreased motivation to learn, and inadequate competency. Referring to these problems, a more in-depth study is needed regarding the learning experiences of nursing students in clinical practice. Therefore, this study aims to describe the anxiety level of D3 Nursing students in caring for the elderly during clinical practice in hospitals, identify the factors causing anxiety faced by D3 Nursing students in caring for the elderly during clinical practice in hospitals, and



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coping identify students' strategies overcoming anxiety in caring for the elderly during clinical practice in hospitals. Based on the description and phenomena above, the author is interested in conducting a study with the title "Description About Anxiety, Depression, and Stress in Diploma Nursing Students Caring for the Elderly During Practice Clinical".

Methods

This research is a mixed-methods study with a explanatory sequential design, where quantitative data collection is followed by qualitative data collection. Quantitative data is collected by using research instrument DAS 21 (Depression Anxiety Stress Scale 21) and qualitative data is gathered through an online interview using zoom meeting by initiate with open-ended questions. The population in this study is all off the D3 nursing students at Surya Nusantara University who are caring for elderly during practice clinical nursing at the hospital. For quantitative data, the technique sample is using total sampling. Total sampling is a technique by taking sample where amount sample is the same with population, and for qualitative the sample size is determined by the data saturation. The sample criterions are: 1) Student D3 UASN nursing which is still active studying and doing practice clinical nursing and caring elderly. 2) male and female students, 3) and willing to participate for the study. Quantitative data is analyzed using despriptive analyse utilizing the SPSS aplication and for the qualitative data is analysed by content. The results of both are described separately.

Results

Characteristics respondents in this study, covering type gender and age with use sample as many as 30 respondents. The distribution of respondent by gender can be seen in table 1 and by age in table 2.

Table 1. Characteristics Respondents By Gender

Gender	Frequency	Percent
Male	9	30.0
Female	21	70.0
Total	30	100.0

Source: SPSS Output Results, 2025.

The majority of respondents are female, namely as many as 21 people (70%), while respondents male totaling 9 people (29.0%). This shows that female's participation in this study are much far higher compared to male's.

Table 2. Characteristics Respondents Based on Age

on Age			
Age	Frequency	Percent	
19-20 Years	9	30.0	
21-22 Years	17	56.7	
23-24 Years	1	3.3	
25-26 Years	2	6.7	
>30 Years	1	3.3	
Total	30	100.0	

Source: SPSS Output Results, 2025.

Distribution of respondents based on age are describe as follow: some big respondents be in range age 21-22 years as many as 17 people (56.7%) indicating the dominance young adult age group in this study. Furthermore, there were 9 respondents (30%) who were aged between 19-20 years old. Then the older age group relatively a little, with only 1 respondent (3.3%) aged 23-24 years old, 2 respondents (6.7%) aged 25-26 years old, and 1 respondent (3.3%) aged over 30 years.

Table 3. Frequencies and Percentage of Anxiety Level

$A_{\text{II}X}$	icty Level			
	Level	Frequency	Percent	Valid
				Percent
	Normal	4	13.3	13.3
	Light	4	13.3	13.3
	Moderate	11	36.7	36.7
	Severe	6	20.0	20.0
	Very	5	16.7	16.7
	severe			
	Total	30	100.0	100.0

Source: SPSS Output Results, 2025.



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Based on the tabel 3, it is found that the frequency and the percentage of levels of D3 nursing students in caring for elderly patients during clinical practice at Medan Adventist Hospital as follow: that the majority of students experience anxiety above normal levels. Of the total 30 respondents, 11 people (36.7%) are experiencing the moderate anxiety category, 6 people (20.0%) are in the severe anxiety category, and 5 people (16.7%) experience the very sever anxiety.

Table 4. Anxiety Levels Based on gender and Age

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	Anxiety Level					
Factors	Normal	Light	Moder ate	Severe	Very Severe	
	f (%)	f (%)	f (%)	f (%)	f (%)	
Gender	. ,	()	. ,	()	. ,	
Man	1	2	4	2 (22.2)	0	
	(11.1)	(22.2)	(44.4)		(0.0)	
Female	3	2	7	4 (19.0)	5	
	(14.3)	(9.5)	(33.3)		(23.8)	
Age		` ′	· · ·		, ,	
19-20	0(0.0)	0	6	1 (11.1)	2	
Years		(0.0)	(66.7)	, ,	(22.2)	
21-22	3	4	3	5 (29.4)	2	
Years	(17.6)	(23.5)	(17.6)	, ,	(11.8)	
23-24	0(0.0)	0	1 (100)	0 (0.0)	0	
Years		(0.0)		, , ,	(0.0)	
25-26	1	0	0(0.0)	0 (0.0)	1	
Years	(50.0)	(0.0)			(50.0)	
>30	0(0.0)	0	1 (100)	0 (0.0)	0	
Years		(0.0)		` '	(0.0)	

Source: SPSS Output Results, 2025.

Based on the table 4, based on gender the majority of male students experienced mild and moderate anxiety, at 22.2% each, and severe and very severe anxiety at 22.2% each. Although there were fewer male respondents, the proportion of moderate to very severe anxiety was quite high. Meanwhile, female students experienced mild anxiety, at 38.1%, followed by moderate anxiety, at 19.0%, and severe and very severe anxiety at 14.3% each. This shows that female students tend to be more prone to anxiety during clinical practice.

This matter supported by the results by filling the questionnaires that has been answered by the respondents. Many D3 Nursing students

experienced symptoms of depression during their geriatric nursing practice. As for the description of the distribution of depression among D3 Nursing students caring for the elderly during practice at can be seen in tabel 5. Based on the tabel 5, it is known that the majority of students experienced moderate levels of depression, in category currently as many as 14 people (46.7%). Meanwhile, 5 people (16.7%) were recorded experienced very severe depression, and 4 people (13.3%) were in the category heavy depression. In addition, 4 people (13.3%) were classified in mild depression category, and only 3 people (10.0%) were in a normal condition without symptoms of depression.

Table 5. Frequency and Percentage of Depression Level

	Frequency	Percent	Valid
			Percent
Normal	3	10.0	10.0
Light	4	13.3	13.3
Moderate	14	46.7	46.7
Severe	4	13.3	13.3
Very	5	16.7	16.7
Severe			
Total	30	100.0	100.0

Source: SPSS Output Results, 2025.

Depression level of respondents when viewed by gender showed that the majority of male respondents were in the moderate depression category 44.4%, followed by mild depression category and severe depression at 22.2% each, and normal depression at 11.1%. There was no male respondents who experienced very severe depression. Meanwhile, the female respondents were also in the moderate depression category currently by 47.6%, followed by very severe depression of 23.8%, and 9.5 % respectively are in the mild depression, severe, and normal depression categories. Based on age, respondents in the 21–22 age group were mostly in the moderate depression category at 52.9% followed by mild depression by 23.5%, and very severe depression and normal depression were each





at 11.8%. In the 19–20 age group, the severe depression category was the most dominant with a percentage by 44.4%, followed by moderate depression at 33.3%, and very severe depression at 22.2%. Group ages 23-24 years and >30 years each consist from one

respondent, who was in the moderate depression category. Meanwhile, in the group aged 25-26 years, there were two respondents, each in a normal depression and very severe depression categories. The detail can be seen in tabel 6.

Table 6. Depression Levels Based on Characteristics Diploma Nursing Students

	Depression Level				
Characteristics	Nor-mal f (%)	Light f (%)	Moderate f (%)	Severe f (%)	Very heavy f (%)
Gender	_ ` ` /	. ,	. ,		. ,
Male	1 (11.1)	2 (22.)	4 (44.)	2 (22.)	0 (0.0)
Female	2 (9.5)	2 (9.5)	10 (47.6)	2 (9.5)	5 (23.8)
Age					
19-20 Years	0 (0.0)	0 (0.0)	3 (33.3)	4 (44.4)	2 (22.2)
21-22 Years	2 (11.8)	4 (23.5)	9 (52.9)	0 (0.0)	2 (11.8)
23-24 Years	0 (0.0)	0 (0.0)	1 (100.0)	0 (0.0)	0 (0.0)
25-26 Years	1 (50)	0 (0.0)	0 (0.0)	0 (0.0)	1 (50)
>30 Years	0(0.0)	0 (0.0)	1 (100.0)	0(0.0)	0(0.0)

Source: SPSS Output Results, 2025.

As for the picture stress results distribution D3 Nursing student in nurse elderly during practice clinic at Medan Adventist Hospital can be seen in tabel 7.

Table 7. Stress Frequency Distribution

	Frequency	Percent	Valid Percent
Normal	16	53.3	53.3
Light	4	13.3	13.3
Moderate	3	10.0	10.0
Severe	2	6.7	6.7
Very	5	16.7	16.7
severe			
Total	30	100.0	100.0

Source: SPSS Output Results, 2025.

Based on results distribution frequency level stress D3 nursing students in nurse elderly during practice clinic at Medan Adventist Hospital, it is known that part big student is in the category normal stress, namely as many as 16 people (53.3%). Apart from that, there were 4 people (13.3%) who experienced it stress mild, 3 people (10.0%) experienced stress moderate, 2 people (6.7%) are in category stress heavy, and 5 people (16.7%) experienced very

stressful. However Still there is a group students who experience stress at the level currently to very heavy If accumulated reaching 40% of total respondents show pressure psychological still become issue important in context practice clinic.

Based on table 8 can known student most men is in the category normal stress and stress mild, 3 people each (33.3%). Apart from that, there were 2 people (22.2%) who experienced it stress moderate, and 1 person (11.1%) who experienced stress heavy. There is no student male who experience very heavy stress. While that, students Female part big is in the category normal stress as many as 13 people (61.9%). However Thus, each person (4.8%) experienced stress light, stress moderate and stressed severe, and 5 people (23.8%) experienced it very heavy stress. This is show student Female own level more stress diverse and tend to more many have experienced stress outside normal category compared student man. Based on characteristics age, level most normal stress found in the group



age 21–22 years as many as 11 people (64.7%), followed by those aged 19–20 years as many as 3 people (33.3%), and aged 23–24 years as many as 1 person (100%). Stress the lightest most occurs in groups 19–20 years old namely as many as 2 people (22.2%), and stress currently the most found at age >30 years namely 1 person (100%). Meanwhile that, stress heavy experienced by 2 people at the age of 19–20 years (22.2%), and 1 person each at the age of male (11.1%) and female (4.8%).

Table 8 Stress Level Overview Based on Characteristics Diploma Nursing Students

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	Stress Level				
Characteri stics	Nor mal	Light	Modera te	Severe	Very severe
	f (%)	f (%)	f (%)	f (%)	f (%)
Gender					
Man	3 (33.3	3 (33.3)	2 (22.2)	1 (11.1)	0 (0.0)
Female	13 (61.9 %)	1 (4.8%)	1 (4.8%)	1 (4.8%)	5 (23.8%)
Age					_
19-20 Years	3 (33.3 %)	2 (22.2%)	0 (0.0%)	2 (22.2%)	2 (22.2%)
21-22 Years	11 (64.7 %)	2 (11.8%)	2 (11.8%)	0 (0.0%)	2 (11.8%)
23-24 Years	1(10 0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
25-26 Years	1 (50.0 %)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)
>30 Years	0 (0.0 %)	0 (0.0%)	1(100.0 %)	0 (0.0%)	0 (0.0%)

Source: SPSS Output Results, 2025.

Based on interviews with students participating in geriatric nursing clinical practicums, all respondents reported experiencing stress, anxiety, and depression. The following statements were made by respondents:

"During my clinical practicum with elderly patients, I experienced quite a lot of pressure. I experienced high levels of stress, anxiety, and even depression." KI 1

"I felt anxious and had difficulty sleeping the night before the practicum because I was worried about how I would communicate and act during the practicum." KI 2

"I felt anxious because I was afraid of not being accepted or trusted by elderly patients who considered us to be interns." KI 3

"I experienced anxiety when interacting with elderly patients, as well as stress due to the large number of practicum assignments." KI 4

"I experienced stress when dealing with various conditions and complaints from elderly patients, both in terms of their health, financial situation, and overall well-being." KI 5

The analysis revealed several factors that caused stress, anxiety, and depression among respondents during their clinical nursing practice. These included adapting to a new environment, the complex medical conditions of the elderly, tasks that require precision, mood swings in the elderly, communication difficulties due to hearing loss, and difficulties understanding regional languages. Furthermore, the elderly also lacked confidence in the ability of students to care for them. The following are statements from respondents:

"I feel very stressed because I have to adapt to a new environment, deal with patients with complex conditions, and carry out nursing tasks that require precision." KII

"Sometimes I have difficulty communicating because the elderly have hearing loss." KI 1, KI 2

"Communication problems are due to the regional language being difficult for me to



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understand and patients' lack of trust in the students." KI 5

In addition to the environment, assignments, and, of course, patients, several respondents mentioned pressure from clinical supervisors. Here are their statements:

"Sometimes I feel like I don't get enough time for supervision because they (clinical supervisors and ward nurses) are busy." KI 1

"I experience difficulties with supervision because the supervisor doesn't provide enough support during the practicum." KI 3

"I feel like I don't get enough emotional support. Sometimes I'm afraid to ask questions for fear of being perceived as incompetent." KI 4

"There are communication challenges with the supervisor due to the large number of students and limited practicum time." KI 5

The respondents themselves reported several emotional responses they experienced during their clinical practice in geriatric nursing, including worry, fear of making mistakes, nervousness, and a lack of confidence. Furthermore, they felt helpless, lost their enthusiasm, and even cried. They even wanted to quit their practice altogether. However, they had coping strategies that kept them going and prevented them from giving up. **Positive** practices included calming themselves, studying before practice, praying, thinking positively, and reassuring themselves that they were capable of performing the task. Some of them snacked to reduce stress. Here are their statements:

"I try to calm myself, prepare myself by studying beforehand, and remember that my goal is to help patients." KII "I calm myself and pray before starting the activity. I also usually eat a snack to calm myself and listen to music for relaxation." KI2

"I overcome nervousness by thinking positively and building self-confidence." KI3

"I overcome this by praying and reassuring myself that I am capable of carrying out the task." KI4. KI5

Respondents also made several recommendations to clinical supervisors, including: 1) being more active, 2) creating a comfortable environment and providing emotional support, 3) being more motivating, and 4) conducting regular evaluations. Their statements are as follows: "Supervisors and lecturers should be more

supervisors and lecturers should be more active in guiding, providing emotional support, and creating a comfortable practice environment so that students do not feel stressed or alone." KII

"Lecturers can motivate students more so they feel calmer and less nervous during practice." KI 2

"Supervisors should provide motivation and reassure students that they are capable." K13

"For supervisors, I recommend being more active in motivating students to overcome anxiety during practice." KI 4

"For supervisors, they should regularly conduct evaluations and provide support and motivation so that students remain enthusiastic and confident during practice." KI5

Specifically for their juniors, here are some suggestions from respondents:



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"To the juniors, ask more questions to seniors and supervisors." KI2

"To the juniors, I suggest building selfconfidence and studying a lot so you don't feel too anxious during practice." KI3

"My advice to the juniors is to study the theory first and don't hesitate to ask your supervisor or colleagues. Also, use simple therapies to help with selfmanagement." KI4

"My advice to the juniors is to ask lots of questions and keep learning to be better prepared for practice." K15

Discussions

Anxiety is a normal reaction when it remains within reasonable limits and can encourage adaptive behavior to prepare for feared situations. However, anxiety becomes abnormal when it occurs excessively and is disproportionate to the situation at hand. In the world of mental health, anxiety is one of the most common psychiatric disorders found across all age groups (Muhammad A et al., 2021). Based on the results of data analysis, In the aspect of anxiety, the majority of students also showed symptoms of anxiety above normal levels, with details of 11 people (36.7%) in the moderate anxiety category, 6 people (20.0%) experiencing severe anxiety, and 5 people (16.7%) experiencing very severe anxiety, while 4 people (13.3%) were in the mild anxiety category and 4 people (13.3%) were in the normal category. Then the majority of D3 Nursing students experienced a current level of depression of 14 people (46.7%), followed by very severe depression of 5 people (16.7%), severe depression and mild depression, each of 4 people (13.3%), and normal depression of 3 people (10.0%). Meanwhile, for stress levels, most students were in the normal stress category as many as 16 people (53.3%),

followed by mild stress as many as 4 people (13.3%), moderate stress as many as 3 people (10.0%), severe stress as many as 2 people (6.7%), and very severe stress as many as 5 people (16.7%). Although the majority of respondents were in the normal category for the stress aspect, there were also 10 students (40.0%) who experienced moderate to very severe stress, indicating the need for more attention to the psychological condition of students during clinical practice.

This indicates that D3 Nursing students experience various levels of psychological disorders, such as anxiety, depression, and stress during their geriatric nursing practice in hospitals, with anxiety being the most prominent compared to the other two conditions. Although most students indicated that their stress levels were still within the normal category, a significant proportion experienced current to very severe anxiety, indicating that anxiety was the most dominant emotional response felt (Annisa et al., 2024). This can be explained by the context of insufficient responsibility and pressure, and the high emotional moments as nurses for elderly patients, who often have complex physical and psychological needs. Anxiety is likely influenced by the lack of clinical student experience, fear of making mistakes, as well as the academic burden and professional demands of clinical practice assistance clinic (Watiningsih et al., 2024). Then obtained level anxiety dominated by female due to various factor like Female will more sensitive and thoughtful about absence his ability to something things and as for other factors are possible Because nature and openness female like more Lots disclose condition himself and something that is felt, and about anxiety or feeling depressed, whereas male will more think logical and focused to reason current problems faced and tends to will harboring current experienced (Amalia et al., 2023).



This matter means anxiety is disturbance the most dominant psychological experienced by D3 Nursing students during practice nurse elderly at home sick. Anxiety This No only academic influenced by factors professional, but also by characteristics individuals, such as type gender and age at which students Female tend more open in express anxiety and stress emotional feelings. In addition, the complexity condition patient elderly, unpreparedness emotional, as well as lack of experience clinical participate make things worse level anxiety experienced. Therefore that's important for institutions education For provide mentoring programs psychological, training skills more clinical intensive, and create environment supportive practices for students can face challenge practice clinic with more believe self and health mentally.

Depression is a mental disorder generally characterized by feelings of profound sadness, loss of interest or pleasure, decreased energy, feelings of guilt or low self-esteem, sleep disturbances, decreased appetite, fatigue, and difficulty concentrating. This condition can be chronic and recurrent, significantly impairing an individual's ability to carry out daily responsibilities. In its most severe stages, depression can even lead to suicidal thoughts (Endriyani et al., 2022). During clinical practice. several D3 Nursing students experienced significant levels of depression. This was characterized by persistent feelings of sadness, loss of interest in the practice, decreased energy, and feelings of low selfesteem and inability to perform nursing duties optimally. This condition was triggered by various factors, such as pressure from the practice environment, limited communication with elderly patients, lack of guidance from clinical supervisors, and a perceived workload exceeding their capabilities. Some students also reported experiencing sleep disturbances and difficulty concentrating during the practice.

In modern life, stress has become an unavoidable part of life. Whether at school, at work, at home, or in other daily activities, stress can affect anyone. Stress is not limited by age; it can affect children, adolescents, adults, and even the elderly. The main problem arises when a person's stress levels become excessive. If not managed properly, prolonged stress can negatively impact a physical mental person's and Therefore, it is important to recognize and manage stress to prevent it from developing into a more serious disorder (Thasya et al., 2023).

Early signs of anxiety in D3 Nursing students undergoing internships can be seen in various signs that emerge during the internship. Students generally exhibit nervous behavior, performing hesitation when procedures, and often appear unsure of themselves when interacting directly with indicates patients. This experience anxiety in clinical situations that require composure, precision, and effective communication skills.

Conclusions

Most of the D3 Nursing students experienced anxiety, most of the students also showed symptoms of anxiety above normal levels, with details of 11 people (36.7%) in the moderate anxiety category, 6 people (20.0%) experienced severe anxiety, and 5 people (16.7%) experienced very severe anxiety, while 4 people (13.3%) were in the mild anxiety category and 4 people (13.3%) were in the normal category. In the aspect of current depression, there were 14 people (46.7%), followed by very severe depression of 5 people (16.7%), severe depression and mild depression, each 4 people (13.3%), and normal depression of 3 people (10.0%). Meanwhile, for stress levels, most of the students were in the normal stress category of 16 people (53.3%), followed by mild stress of

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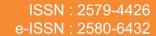
4 people (13.3%), moderate stress of 3 people (10.0%), severe stress of 2 people (6.7%), and very severe stress of 5 people (16.7%).

Based on results research, it is recommended to expand the scope of the study, including the number of respondents and location, and to include additional variables related psychological, social, and academic factors that influence anxiety, depression, and stress in college students. Research could also test interventions, such as stress coping training, psychological counseling programs, or emotion strategies, to evaluate management effectiveness of addressing these three conditions. For hospitals it is expected provide environment supportive and friendly practices for students, with mentor active clinic give guidance, supervision, and support emotional. Hospitals can also Work The same with institutions education in organize training or workshop for increase mental readiness, skills, and ability manage anxiety, depression, and stress, so that learning clinical can walk more optimal.

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