Effects of Anxiety Reducing Interventions on Performance Anxiety in Graduate Nurses

Georgita Tolbert Washington, PhD, RN-BC, MSN
Alumnus CCRN

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Presenter Disclosure Information

Georgita Tolbert Washington

 Effects of Anxiety Reducing Interventions on Performance Anxiety in Graduate Nurses

- DISCLOSURE INFORMATION:
- The following information exists related to the presentation:
- Partial Funding
 - Epsilon Sigma Chapter
 - Sigma Theta Tau International Honor Society of Nursing
 - East Tennessee State University, Johnson City, Tennessee

Objectives

Discuss the concept of performance anxiety

 Identify those who may be experiencing performance anxiety

 Discuss the implications of the results for nursing

Background



 The laws of supply and demand apply to nurses

Successful transition of new graduates

Interventions needed to facilitate transition

Transition

- Influencing factors
 - Lack of confidence
 - Mistakes
 - New situations
 - Overwhelmed
 - Socialization
 - Self-sufficiency
 - Night shift
 - Physicians
 - Expectations
 - Medications
 - Managing groups of patients
 - New procedures
 - Preceptors

- Unsuccessful
 - Organizational
 - Professional
 - Personal

Oermann & Garvin, 2002; Phillips, 2006; Hyrkas & Shoemaker, 2007

Newhouse, Hoffman, & Hairston, 2007; Goode & Williams, 2004; Pine & Tart, 2007

Performance anxiety

- Anxiety that affects ability to perform
- Previously learned information
- Reaction to a stimulus
 - Different than general anxiety
 - Occurring in certain situations

- Occurs intrapersonally
- Manifested interpersonally



American Psychiatric Association, 2000; American Hospital Association, 2000; Rodenbaugh & Chambless, 2004

Purpose

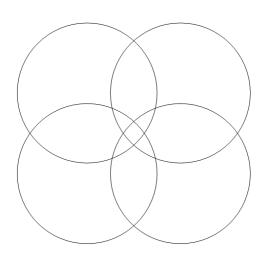
- Verify and clarify level of performance anxiety
- Evaluate effectiveness of anxiety reducing interventions



Theoretical perspective

Interpersonal Relations

- Nurse/patient vs Preceptor/new graduate
- Overlapping phases
 - Orientation
 - Working
 - Identification
 - Exploitation
 - Resolution
- Anxiety
- Relief behaviors (dysfunctional)



Model cases

- Mary
 - Intrapersonal
 - Interpersonal



Intrapersonal





Research Questions

- In the acute care setting
 - Does the level of performance anxiety differ between new graduate nurses who have and have not experienced anxiety reducing interventions?
 - What is the effect of the preceptor/new graduate relationship and perception of social support on performance anxiety in new graduate nurses who do and do not experience anxiety reducing interventions?

Review of the literature

- New graduate transition
- Performance anxiety
- Anxiety & the theory of interpersonal relations
- Nursing students & test anxiety

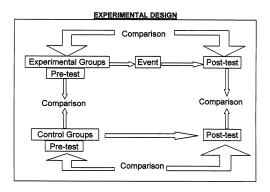
- New professional nurses& performance anxiety
- Preceptor/new-graduate relationship & performance anxiety
- Theory of interpersonal relations
- Performance anxiety reducing interventions

Peplau, 1952, 1991; Meisenhelder, 1987; Forchuck, 1991; Duchscher, 2001; Wright, 2002; Roche, Lamoureux, & Teehan, 2004; Fox, Henderson, & Malko-Nyhan, 2006

Kirchner, 2003; Everhart and Slate, 2004; Valentine, Meyer-Dinkgrafe, Acs, Wasley, 2006; Sonnenmoser, 2006Hinds & Harley, 2001; Reising, 2002; Nolan & Murphy, 2006; Schoessler & Waldo, 2006

- Protection of human subjects
 - IRB approval
- Sample
 - I5-facility health care organization
 - Graduate nurse orientation
 - Nurse residency program

- Research design
 - Quasi-experimental
 - Mixed methods



Data collection tools

- Demographic data
- Relationship form (adapted)
- Clinical Experience
 Assessment form
 (adapted)



 Open ended questions**

 Post intervention statements**



Interventions & Application

Cognitive behavior therapy concepts

Progressive muscle relaxation

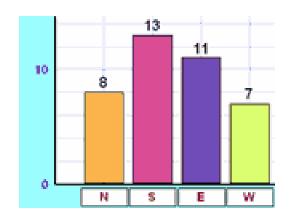
Reflective journaling



Monthly @ residency sessions

Data Analysis Plan & Parameters

- Descriptive
- Mixed modelANOVA
- Chi square
- Moderated regression
- Content analysis



 Methodological limitations

Delimitations



Descriptive statistics

Sample descriptive	Value	Sample descriptive	Value
Sample size	n = 34	Educational preparation	53.3 % AD
Control	42 (25)	First degree	73.5%
Treatment	24 (9 -2)	JCMC	47.1%
Gender	88.2% female	Medical Surgical	35.5%
Age range	67.6% 20 – 29	Personal anxiety	43.8% "very much"
Time RN	70.6% < 3 mos		
Post Study			
One preceptor	39.4%	Five of six sessions	55.9%
> 2 preceptors	60.7%	Personal anxiety	38.2% "very much"

Statistical differences between groups & Reliability Coefficients

Characteristic	Group	Statistical analysis X^2 (df)sig
Length of time as an RN	Treatment – 100% Control – 60% <1 – 3 mos	5.100(1).024
Educational preparation	Treatment – 100% Control – 33.3% BSN	8.571(1).003
Nursing as a second degree	Treatment – 66.7% Control – 12% Yes	10.161(1).001

Measurement tool	Reliability coefficient
PRQ85	.794 (.8793)
Clinical Experience Assessment form	.838 (.82)

Research Question I

 Does the level of performance anxiety differ between new graduate nurses who have and have not experienced anxiety reducing interventions?

Variable & Measurement	Mean(SD)	Mixed model ANOVA F(df)sig
Performance anxiety-Clinical Experience Assessment form	Control Pre - 45.80(1.963) Post - 39.12(1.632) Treatment Pre - 47.56(4.090) Post - 39.11(4.046)	Within groups difference 16.775(1).001* Pre Post*Group effect .228(1).636 Between group difference .067(1).798

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Research Question 2

 What is the effect of the preceptor/new graduate relationship and perception of social support on performance anxiety in new graduate nurses who do and do not experience anxiety reducing interventions?

Intervening variable	Moderated Regression Analysis F(df)sig
Interaction effect of social support on performance anxiety	2.794(3).057
Interaction effect of preceptor/new- graduate relationship on performance anxiety	1.142(3).350

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Post Hoc results

Variable & Measurement	Mean(SD)	Mixed model ANOVA F(df)sig
Preceptor/new graduate relationship – Relationship Form	Control Pre - 3.88(1.922) Post - 3.80(1.658) Treatment Pre - 3.17(.983) Post - 3.67(1.033)	Within groups difference .218(1).644 Pre Post*Group effect .416(1).524 Between group difference .465(1).501
Perceived Social support – PRQ85	Control Pre - 114.40(17.347) Post - 120.20(11.944) Treatment Pre - 119.29(10.111) Post - 131.14(15.093)	Within groups difference 4.613(1).040* Pre Post*Group effect .543(1).467 Between group difference 2.902(1).099

p< .05

Post intervention survey

Statement	Percentage - response
I found the CBT sessions useful	56% "not much"
I found the PMR exercises useful	67% "not much"
I found the journaling useful	67% "not much"
The group interactions during the CBT & PMR sessions were useful to me	38% "some"

Open ended questions

- What were your thoughts while engaging in the CBT exercises?
- What were your thoughts while engaging in the PMR exercises?

THINKING?

- What were your thoughts while engaging in reflective journaling?
- What is your overall evaluation of the usefulness of these sessions in reducing performance anxiety?

Open ended questions

- Four categories
 - Rejection of the intervention
 - No active engagement with the intervention**
 - Attention to the intervention
 - Active engagement with the intervention



Outcomes related to this research

Performance anxiety present in new graduates

- Intervening variable relationship
 - No interaction effect on performance anxiety

- Intervening variable –social support
 - Statically significant increase within groups

Outcomes related to this research

 Increased support – no progress of relationship***

Journaling

Rejection of the intervention

Interventions unnecessary

Outcomes related to the literature – The sample (n=34)

Similarities

Differences

Control vs treatment



- Interventions useful in decreasing performance anxiety
 - Consistent
- Differences between groups
 - Not consistent
- Journaling
 - These results inconclusive

Outcomes related to the literature – research questions

- Relationship
 - Multiple preceptors
 - Dissatisfaction
 - Consistent
- Support
 - Desired and needed
 - Increase is consistent
 - Not a factor
 - inconsistent



Conclusions

- Existence of performance anxiety
- Appropriate level to cope with transition
 - Other factors influence performance anxiety
 - Identify those other factors
 - Small sample
- Instrument modifications

Strengths

- Extends the study of performance anxiety to this population
- Existence demonstrated
- Evaluation of existing tools in this population
- LCSW as expert with the interventions



Limitations

- Small sample size
 - Unclear of effect of these interventions
 - Unable to generalize results
- Non-randomized groups
- Multiple preceptors
- Not all attended all sessions
- No mechanism to determine practice
- Environmental noise

Implications for Nursing

Research

 Further exploration of the preceptor/new graduate relationship

Education

Acknowledge its existence

Practice

 Increased awareness of preceptors, managers, tenured staff, new graduates

The End!

