
Psychological Difficulties of Nursing Students - Is There a Difference on Various Levels of Study?

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Abstract

The research of students adapting to university life, difficulties in coping with the academic demands, and personal problems students face during their study is important for a better understanding of their needs in order to prevent possible mental health problems in the student population and increase the overall quality of study. When researching the difficulties that students face, one of the important factors to be taken into account is the type of study, for instance whether they study full or part time.

Since nursing students represent the largest student population at the University of Applied Health Sciences in Zagreb, Croatia, we investigated the differences in the perceived difficulties during studying between full-time undergraduate nursing students and part-time specialist graduate nursing students, most of whom already work as professional nurses.

In a sample of 231 participants, there were 143 undergraduate students with the average age of 26.38 years (90.2% females) and 88 specialist graduate students with the average age of 37.52 years (95.5% females). We examined the frequency of 62 difficulties that students may encounter during their study using a survey by the Student Counselling Centre at the Faculty of Philosophy in Zagreb. On average, nursing students perceived 12 difficulties. The most frequent difficulties all students struggle with are nervousness or tension, financial problems, fear of failure, inefficient time management, insecurity, and

changes in eating habits. There is no significant difference in the total frequency of perceived difficulties between undergraduate and graduate students but we found significant differences between these two groups in the number of students who encountered particular difficulties regarding 13 issues. Undergraduate students face problems with roommates and problems in communication with professors more often than graduate students, while graduate students struggle the most with financial problems and adapting to the study regime. When faced with problems, 65.4% of all students would seek free psychological counselling. Graduate students and students who perceive more difficulties are more willing to seek psychological support.

Introduction

Studying requires adapting to various new life challenges and can be extremely stressful. Stress and its consequences on mental health are associated with reduced engagement with the study, which is associated with a reduced degree of study completion (1).

Adapting to studying is a complex construct within which academic, social, and emotional adaptation is most often examined (Baker, as cited in 2). Adaptation to academic life refers to meeting the requirements of the study, social adaptation implies managing oneself in the faculty environment and interaction with colleagues, while emotional adaptation involves the presence or absence of various signs of emotional discomfort and physical symptoms (2). In evaluating psychological adaptation to study, the most examined variables are stress, self-esteem, and motivational and emotional difficulties (anxiety, depression, psychosomatic symptoms).

The current research on adaptation to study in Croatia has been conducted mostly with students from the University of Rijeka and Zagreb. In researching the dominant problems in psychological adaptation to study with the students of the University of Rijeka, Bezinović and associates found that the most common problems were the fear of failure, exam-related anxiety, difficulties in learning, and taking exams, poor study time management, the feeling of

ineffectiveness in study and the pressures and expectations from their family (3). According to fifteen years of work experience of the Psychological Counselling Centre of the University of Rijeka, students usually seek help because of different academic problems (concentration difficulties, lack of motivation for learning, lack of academic skills, poor time management, examination anxiety etc.), interpersonal problems (problems in relationships with parents, friends or partners), anxiety and depression, and stressful and traumatic experiences (4). Research of psychological problems of students at the University of Zagreb shows that most students face mild disturbances in the form of tension and anxiety, and about one quarter suffers from long-lasting mental problems (5).

Many authors warn that students are at an increased risk of mental health damage. Even mild and moderate mental difficulties can have a significant negative impact on student life but are often not recognized and students are not adequately supported (6). When they are not treated, there is an increased risk they will become chronic (7). Student counselling centres report on the shift in the cause of seeking help from more benign, developmental, and information-related needs to increasingly serious psychological problems (8).

Research consistently confirms the growth in the number of students with serious mental disorders (9). Students have more psychological problems than their peers who are not attending college (9,10,11), as well as the existence of an increased risk of anxiety and depression compared to lower levels of education (12,13). The research by Lenza and associates on the student population of the Faculty of Medicine and Faculty of Law in Osijek found a 2.6-fold increase in depression, anxiety, and phobia when compared with the general population (14).

The perceived presence and growth of psychological disturbances in students may have multiple causes. Students are already a risk group because of their age, as most of the more serious psychological problems appear and are diagnosed before the age of 24 (Kessler, as cited in 15). There is an increasing number of young people enrolling in higher levels of education and some of them have previously existing mental disorders. According to the publicly presented results of the survey "Positive Development of Zagreb Adolescents: Situational Analysis" within the project on positive development of youth in Croatia,

about 30% of high school students reported serious symptoms of anxiety and about 20% reported serious signs of depressive symptoms and stress (16).

Some research suggests that the demands of studying are a direct cause of psychological difficulties in some students (17). In 63.9% of students at the University of Rijeka, anxiety was associated with studying (3). Halfway through the study, 9% of British students who previously had no psychological disturbances developed clinically significant depression levels, with 20% having high anxiety (18). Anxiety disorder, which most commonly occurs during the first year of study, does not diminish during study, while the psychological benefit decreases (12,19). In the UK National Student Community, 80% of students state that they experience stress, 70% lack of energy and motivation, and 55% feel anxiety. The triggers for negative emotions and distress were mostly academic obligations, such as deadlines, exam pressure, coordinating studies with other commitments, and desire for better grades and academic success (20). Emotional problems are associated with various stressors that occur during studies, such as leaving home and demands for independent living, academic pressures and deadlines, and financial problems (9). A particular problem is that many students experiencing distress and psychological difficulties do not seek help (21), and the main reason is the fear of stigmatization (22) that is higher in men (23,24).

Many studies point to increased psychological distress among medical students and other health care providers, among which nursing students are particularly vulnerable (17,25,26). Backović and Jevtić (27) state that even in the case of medical students there is a growing incidence of burnout syndrome during the course of the study and that the burnout should be acknowledged not only as a healthcare problem but also as a psychological problem in the education process.

In a longitudinal study of distress on 232 Norwegian students of nursing, physiotherapy, and occupational therapy, nursing students were significantly more distressed during a three-year study compared to other healthcare students (17). The most significant predictors of psychological distress were the degree of distress at the beginning of the study, the quality of private life, the structure of the study, the subjective learning experience and the degree of support in the student environment. In a literature review, Nerdrum and associates stated that increased psy-

chological distress in nursing students is most commonly associated with the quality of interpersonal relationships, demanding study programs and exams, financial situation, instructors' expectations, and fear of error in working with patients on clinical exercises, lack of correlation between theory and practice in education, the conflict between the students' idealistic motives for choosing a nursing profession and the reality of health practice, the burden of working with severely ill patients and demanding interpersonal situations (17). Some mental health studies of nursing students even suggest increased risk of suicide compared to other students (Goetz, as cited in 19).

Psychological distress in students of health studies increases the risk of anxiety, depression, and suicidal ideation, and it also contributes to lower academic success, drop-out, and cynicism and lack of empathy in working with patients (Dyrbye, as cited in 17).

In Croatia, it is possible to enroll in full-time state-subsidized nursing study and a part time study, which is usually financed by students themselves and is only available for nurses in full employment. Students of graduate, specialist nursing studies, who usually study while working, are on average an older age group when compared with regular undergraduate students. They face specific stressors more often; from financial expenditures for those who finance the study themselves to the lack of time for learning due to the difficulty of aligning study with work and family life. Many already have children, work in shifts, and use annual vacations for learning and taking exams. Due to the increase of growing academic and professional demands, nursing students simultaneously experience stress related to studies and job-related stress (25). All of these study circumstances require additional effort and competence to adapt to study and represent the risk of distress and its consequences on mental and physical health.

Comparison of stress among nurses and police officers who are studying while employed shows that nurses and technicians (especially women) experience statistically significant stress in the form of exhaustion and lack of control, impaired eating and sleep difficulties (26). Roberts and associates (28) found that poor mental health is associated with financial problems and with less time for students who are studying while employed.

Employed students may also be at a greater risk of drop-out because of the workload they are ex-

posed to. Bernardo and associates (29) found in their research, which included over a thousand students from a north Spanish university (University of Oviedo), that those already employed, those over 25 years old, and those who do not enrol in college immediately after high school have a higher drop out risk. Students who work full-time have the highest likelihood of dropping out (Elias, Goldenhersh, Esteban, all as cited in 29).

The work of nurses is considered extremely stressful, and the psychological well-being of future nurses must be an essential component of nursing education (30). Faculties and student institutions should help students overcome all the difficulties that arise during their studies, including psychological ones, and provide them with fast and effective psychological support (31). Even though universities are primarily interested in academic success and completion of study, it is still important to be concerned with the psychological wellbeing of students, as it is directly connected with the positive academic success while, on the other hand, psychological problems significantly disrupt studies and predict poor academic results (9, 18). The analysis of students' psychological difficulties is a prerequisite for assessing which of these difficulties can be prevented by university institutions as well as for developing appropriate aid strategies.

Methods

Participants

The study was attended by 231 first year nursing students of the Zagreb University of Applied Health Sciences (Zdravstveno veleučilište u Zagrebu - ZVU), of whom 143 were in full-time undergraduate and 88 in the specialty graduate study. The average age of students in the whole sample is 30.7 years with SD 9.69 (range 21-56). The sample consists of 92% of women and 8% of men. For 50.4% of students, Zagreb was the place of residence, while 49.6% came to study in Zagreb from other places. 37.7% of all students are married, and 36.8% have children, most often two children (20.8%).

The average age of undergraduate students is 26.38 years, with SD 7.20 (21-47), and graduate students are, on average, 37.52 years old with SD 9.22 (23-56). The share of male participants is 9.8% in the undergraduate and 4.5% in the graduate group of students.

Instrument

We collected data with the instrument used for the DUCAS* project by the employees of the Counseling Center for Students of the Faculty of Philosophy in Zagreb, Rijeka and Zadar (5). In addition to demographic data and study data, we examined the types of psychosocial difficulties and the readiness of the student to seek psychological help. A questionnaire investigating the types of psychological difficulties consists of 62 descriptions of psychological problems, from very common in student population, such as tension and learning difficulties, to more severe difficulties that may indicate serious psychological disorders. The offered responses were dichotomous (yes / no). The reliability of the scale is KR-20 = 0.88. The willingness of a person to turn to help is measured by one question with the offered answers such as yes, I don't know, and no.

The research was approved by the ethics committee of the University of Applied Health Sciences. The data collection was anonymous with the voluntary participation of students, and carried out in small groups.

Results

The main purpose of this research was to determine the most prominent psychological difficulties encountered by nursing students during their study. Table 1 shows percentages of students who encountered a particular difficulty. The difficulties are sorted by frequency of appearance. The difficulties that are encountered in less than 1% of students are not presented.

* The DUCAS project (Developing university counseling and advisory services) took place at the universities of Rijeka, Zadar and Zagreb during the 2007/08 academic year.

Table 1. The percentage of all nursing students who encountered particular difficulties			
		YES	NO
1.	Tension or nervousness	84.8	15.2
2.	Financial problems	61.0	39.0
3.	Fear of failure while studying	51.9	48.1
4.	Ineffective use of time for learning and leisure	48.1	51.9
5.	Changes in nutrition-related habits	42.0	58.0
6.	Uncertainty about the future career	41.6	58.4
7.	Disappointment with the study	41.1	58.9
8.	Lack of motivation	37.7	62.3
9.	Feeling of ineffectiveness while studying	35.5	64.5
10.	Doubt regarding the correct choice of study	34.2	65.8
11.	Strong anxiety about exams	33.3	66.7
12.	Excessive self-criticism	33.3	66.7
13.	Sleeping problems	31.2	68.8
14.	Health problems	30.7	69.3
15.	Difficulties with adapting to the study regime	30.7	69.3
16.	Dissatisfaction with my own body weight	29.4	70.6
17.	Feeling of distrust in other people	29.0	71.0
18.	Difficulties with exams	26.4	73.6
19.	A sense of being misunderstood by the environment	26.4	73.6
20.	Learning difficulties	26.0	74.0
21.	Problems related to love life	24.2	75.8
22.	Lack of awareness of one's abilities	23.4	76.6
23.	Feeling of discouragement about the future	22.5	77.5
24.	Feeling lonely and lacking emotional support	21.6	78.4
25.	Dissatisfaction with my appearance	20.3	79.7
26.	Difficulties in making important decisions	19.5	80.5
27.	General anxiety	18.6	81.4
28.	Depression and a sense of helplessness	17.7	82.3

Table 1. The percentage of all nursing students who encountered particular difficulties			
		YES	NO
29.	Problems with one's relationship with friends	17.3	82.7
30.	Poor communication with professors	16.5	83.5
31.	Concerns about what other people think of me	16.0	84.0
32.	Problems with temporary accommodation (dorm, sub-tenancy)	14.7	85.3
33.	Dissatisfaction with myself	14.3	85.7
34.	Contemplation about leaving the study	14.3	85.7
35.	Problems of coping with the loss of a loved one	13.0	87.0
36.	The pressures and high expectations of the family	11.7	88.3
37.	Disagreements and conflicts with parents	11.3	88.7
38.	Inability to maintain control and entering into conflicts easily	11.3	88.7
39.	Sadness and pain after ending a relationship	10.8	89.2
40.	Feelings of inadequacy	10.8	89.2
41.	Roommate problems	10.0	90.0
42.	Identity problems	10.0	90.0
43.	Occasional aggressive and destructive behaviours	10.8	89.2
44.	Intimate relationship problems	10.4	89.6
45.	Difficulties in adjusting to study location and environment	10.4	89.6
46.	A more lasting sense of dissatisfaction	8.2	91.8
47.	Sex life issues	7.8	92.2
48.	Problems with children	6.9	93.1
49.	Alcoholism in the family	6.5	93.5
50.	Self-loathing	5.6	94.4
51.	Inability to make contact with parents and loved ones	5.6	94.4
52.	Problems in the marriage	3.9	96.1
53.	Overconsumption of alcohol	3.5	96.5
54.	Problems with sexual intercourse	1.7	98.3
55.	Taking drugs	1.3	98.7

The results in Table 1 show that tension or nervousness occurs in a very large percentage. More than half of the participants stated that they were concerned about financial problems and had a fear of failure in their studies. Severe problems such as sexual assault or rape, unwanted sexual relations, thoughts of self-harm or suicide, use of laxatives, vomiting and extreme diets, dealing with crime, domestic abuse, and lack of acceptance from society are experienced by less than 1% of all students. The participants reported an average of 12.11 (SD=7.764) difficulties (D=11), with the lowest indicated number of difficulties being 0 and the highest being 34.

We were also interested in the potential differences between undergraduate and graduate students.

Given the sociodemographic characteristics, the proportion of males, although small in both samples, is statistically significantly smaller in the specialist graduate study program ($\chi^2=8.378$; $p=0.004$), and in this study students are significantly older ($t=17.052$; $p=0.000$). The most common problems that undergraduate students face are tension or nervousness, fear of failure in their studies, dissatisfaction with studies, lack of motivation and changes in nutrition-related habits, while graduate students are mostly burdened by tension or nervousness, financial problems, irrational use of time, fear of failure in their studies, and adapting to the study regime. There is no significant difference between undergraduate and specialist graduate students in the total number

Table 2. Significant differences between undergraduate and graduate study programmes in the frequency of perceived difficulties (N = 231)

Difficulty	χ^2	<i>p</i>	Study programme with a more pronounced difficulty
Lack of motivation	5.146	0.023	undergraduate
Financial problems	17.363	0.000	graduate
Sleep problems	4.500	0.034	graduate
Excessive self-criticism	4.215	0.040	graduate
Learning difficulties	4.298	0.038	graduate
Conflicts with parents	9.466	0.002	undergraduate
Poor communication with professors	15.135	0.000	undergraduate
Grief over ending a relationship	5.864	0.015	undergraduate
Adapting to study regime	19.121	0.000	graduate
Loss of a loved one	5.207	0.022	undergraduate
Roommate problems	21.792	0.000	undergraduate
Overconsumption of alcohol	8.696	0.003	undergraduate
Weak control and conflicts	4.310	0.038	graduate
Problems in marriage	5.699	0.017	graduate
Problems with children	10.462	0.001	graduate

Table 3. Significant gender differences in the frequency of perceived difficulties (N = 231)

Difficulty	χ^2	<i>p</i>	Gender with a more pronounced difficulty
Financial problems	9.081	0.003	female
Feeling of doubt about the choice of studies	7.117	0.008	female
Grief over ending a relationship	10.250	0.001	female
Adapting to the study regime	5.814	0.016	female

of perceived difficulties ($t=0.306$; $p=0.76$) but the chi-square test showed significant differences in the incidence of particular difficulties (Table 2).

Female and male students do not differ significantly in the total number of difficulties, but they differ in the prevalence of four difficulties (Table 3).

Female students are more troubled by financial problems and adjusting to their study regime, and more often doubt their choice of studies, while male students grieve more over ending a relationship.

65.4% of students declared they would seek psychological help if they were able to get it for free and with complete discretion, 28.5% were uncertain and the others would not seek help (6.1%). No significant gender differences were identified in the need for free psychological help. Comparing only those who would or would not seek help by type of study, a significantly higher number of graduate students would seek help ($\chi^2=5.41$; $p=0.02$), and students who would seek help also have more difficulties ($M=12.3$; $SD=7.68$) when compared to 6.6 ($SD=3.99$) reported by those who would not seek help ($t=4.595$; $p=0.000$).

Discussion

Nursing students make up the largest share of all health and medical studies. Despite the digitalisation of the system that facilitates the administrative side of studying and the availability of literature, studying today does not seem easier. The large number of academic requirements that students are exposed to (seminars, colloquiums, professional practice) and the large number of exams in a year seem exhausting to students. Adding to that other responsibilities and problems that accompany student life, the situation may become unbearable for some of them. Finding yourself in a new environment, looking for accommodation or commuting daily, and meeting the requirements of each course are problems that all students face, but some of them are already employed in the profession (students of specialist graduate studies) and have their own families with offspring. Adjusting these additional roles can be very burdensome

for students, leading to an increase in their mental and physical vulnerability, and even burnout. In addition to identifying the main groups of problems that students face, it is important to identify the specificities and differences in their difficulties in particular studies when designing targeted student support. Given that undergraduate and graduate students differ in their characteristics (age, employment, marital status, children, different motivation), it is to be expected that these differences will also reflect on their problems, which is what this paper sought to examine.

For the entire sample of nursing students, tension or nervousness, financial problems, fear of failure in their studies, and ineffective use of time for learning and leisure are at the top of the problem list. Students at the University of Zadar also experienced these same difficulties (32). Changes in eating habits are also very prevalent both in the students studying at the University of Applied Health Sciences and those from the University of Zadar. Nursing students, on average, cite 12 difficulties in this research, while the average for all health studies at the University of Applied Health Sciences is 14 (33). The average number of difficulties of students at the University of Zagreb is much greater, as much as 18.7 (5). Other studies have found fewer difficulties in college students compared to university students (34).

Differences between study programmes

Although there are overlaps, the dominant problems encountered by undergraduate and graduate students are not identical. Given that the two observed groups differ significantly by age (as much as 11 years) and by the number of male participants, differences were expected. The average number of difficulties that bother them does not differentiate undergraduate and graduate students. Tension or nervousness is obviously a universal problem because it is at the top of the difficulties in both samples, and among the top five is the fear of failure in their studies. Undergraduate students are most disturbed by their dissatisfaction with their studies, lack of motivation, and changes in nutrition, and graduate students are most disturbed by financial problems, irrational use of time, and adjustment to their study regime. Undergraduate students perceive significantly more problems with roommates, parents, poor communication with professors, overconsumption of alcohol, grief about ending a relationship, and losing

a loved one. Graduate students have more difficulties with learning and sleeping, problems in marriage and with children, are bothered by excessive self-criticism, and poor control and conflicts. Therefore, we can say that undergraduate students are more likely to face problems typical of the developmental stage of late adolescence. Since most of them are still living with their parents or roommates, many of them are still not in stable emotional relationships and lack assertiveness in communication with authorities. In contrast, specialist graduate students (who belong to the developmental stage of younger adulthood), have more difficulty in reconciling different life roles and are more concerned with financial problems, which is understandable given that they mainly fund their own studies.

Some studies have identified better psychological adjustment for older students (35), but the results of our study do not differentiate these two groups of students by their overall adjustment, but only by the type of problem.

In this study, female and male students do not experience significantly different average number of psychological difficulties, which is not consistent with the findings of most other studies. Our findings should be taken with great caution, since the proportion of males in our study is very small in both observed samples. In general, the findings of other studies are not straightforward, so they may indicate a lower emotional adjustment to studying in female students (Baker, as cited in 2) (3,36), and thus to the study of nursing (37). Extensive research conducted at two of our largest universities (2,35) has indicated there is better adjustment among female students, but the results are complex, since at the University of Rijeka female students show better academic and social adjustment, but weaker emotional adjustment.

Over 60% of nursing students would request free psychological help, which is consistent with the literature (32), with significantly more graduate students compared to undergraduate students. Given that there is a significant age difference between them, we can assume that as people age, they are less burdened with the opinions and condemnation of others, and, on the other hand, more aware of the importance of such assistance. Students who perceive significantly more difficulties are more likely to seek psychological help, which is to be expected. Given that participants in this study are both current and future health professionals, their awareness of

the importance of mental health probably invalidates the experience of stigmatization associated with seeking help.

However, we are aware that the intention of seeking psychological help does not always correspond to the actual seeking of help. Common barriers to seeking professional help are uncertainty about the severity of their own problems, the need to rely on themselves, distrust of the effectiveness of psychological treatments, and lack of knowledge of places where they can seek psychological help (23). For example, although 32.8% of students in Zagreb report a clinically significant degree of psychological distress, only 23.6% of those at risk seek professional help (23). According to a survey by the National Student Union in Scotland, only 30% of students would be willing to disclose their psychological problems, while the rest are worried about what the consequences would be if their colleagues at the university found about it (38). It is important to continually educate students on the importance of psychological support for their good mental health.

No significant difference was found in the willingness to seek psychological help in relation to gender. Such a finding is not expected, as other studies have identified a greater willingness to seek help in female students (24,39,40,41).

Given that the study was conducted among nursing students at only one higher education institution, there is no solid basis for generalizing the results to include other institutions. Nonetheless, we believe that this research makes an important contribution to designing and shaping guidelines to improve support for nursing students, who represent the largest health study program, as well as the largest body of healthcare professionals. This is especially important for specialist graduate students who study and work within their profession at the same time. Their problems may also affect their functioning in the workplace.

Conclusion

We can conclude that undergraduate and graduate nursing students are different populations, who face some of the same but mostly different problems, which is primarily a consequence of their age difference and related different living conditions. Therefore, an approach to students at different levels of study should differ in their content, for example in the topics of offered workshops. Considering the results obtained in our research, workshops on assertive communication would be more appropriate for undergraduate students, while education regarding time management would be more useful to graduate students.

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PSIHIČKE POTEŠKOĆE STUDENATA SESTRINSTVA - POSTOJI LI RAZLIKA NA RAZLIČITIM RAZINAMA STUDIJA

Sažetak

Istraživanja prilagodbe i problema s kojima se susreće studentska populacija važna su za bolje razumijevanje studentskih potreba, povećanje kvalitete studiranja te poboljšanje mentalnog zdravlja samih studenata. Poteškoće s kojima se studenti najviše susreću raznolike su, a važan faktor o kojem treba voditi računa jest i sam način studiranja. Zanimala nas je razlika u problemima prilagodbe kod studenata redovnoga stručnog studija i specijalističkoga (diplomskog) studija sestrinstva, kao jednog od najbrojnijih studija na Zdravstvenom veleučilištu.

Na uzorku od 231 sudionika ispitali smo učestalost pojavljivanja različitih poteškoća s kojima se tijekom studija suočavaju studenti preddiplomskog (N = 143) i diplomskog studija sestrinstva (N = 88), primijenivši anketu koju nam je ustupilo Savjetovalište za studente FFZG-a. Prosječna dob sudionika redovnoga stručnog studija iznosi 26,38 godina (21 - 47), pri čemu među njima prevladavaju studentice (90,2 %), dok je prosječna dob sudionika specijalističkoga (diplomskog) studija sestrinstva 37,52 godine (23 - 56) te isto tako prevladava ženski spol (95,5 %).

Studenti sestrinstva u prosjeku navode 12 poteškoća, a najčešće su nervoza ili napetost, financijski problemi, strah od neuspjeha u studiju, neracionalna upotreba vremena te promjene u navikama hranjenja i nesigurnost. Studenti preddiplomskog i diplomskog studija znatno se razlikuju po 13 poteškoća, ali ne i u ukupnom broju poteškoća koje ih muče. Najizrazitije razlike dobivene su za probleme sa sustanarima,

komunikaciju s profesorima za preddiplomske te za financijske probleme i prilagodbu režimu studiranja za diplomatske studente. U slučaju poteškoća, 65,4 % studenata potražilo bi besplatnu psihološku pomoć, pri čemu znatno više studenata diplomskog studija, a na traženje pomoći spremniji su studenti s većim brojem poteškoća.

Ključne riječi: studenti, sestrinstvo, psihičke poteškoće, prilagodba na studij
