RESEARCH PAPER

Burnout and Self-Care Challenges Among Pre-Licensure Nursing Students: A Scoping Review

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Abstract

Background: Burnout among pre-licensure nursing students is a significant concern in nursing education, characterized by emotional exhaustion, academic stress, and limited engagement in restorative self-care. This formative stage profoundly impacts psychological health, professional development, and nursing workforce retention.

Objective: To map and synthesize the existing literature on burnout and self-care challenges among pre-licensure nursing students.

Methods: A scoping review following the PRISMA-ScR (Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews) checklist was conducted across six academic databases. After removal of 18 duplicates from 516 identified records, 28 peer-reviewed studies met final inclusion criteria.

Results: Included studies consistently identified a high prevalence of burnout among pre-licensure nursing students, characterized by emotional exhaustion, academic and psychological pressure, compounded by heavy workloads, financial strain, clinical training demands, and concerns about professional readiness. Significant barriers to effective self-care were identified, including time constraints, academic competition, and inadequate institutional support.

Conclusions: Burnout and self-care challenges in this population are critical concerns for nursing education and workforce sustainability. Nursing programs must transition from awareness to action by embedding wellness support, mentorship, and structural reforms into the core curriculum to safeguard student well-being and develop a resilient nursing workforce.

Keywords: *Burnout; Self-care; Pre-licensure nursing students; Nursing education; Academic stress; Clinical training; Resilience; Well-being*

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Introduction

Burnout is increasingly recognized as a significant concern among healthcare trainees, with nursing students particularly vulnerable due to rigorous academic demands and emotionally taxing clinical environments. Burnout is typically defined as a psychological syndrome encompassing emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment, commonly measured using validated instruments such as the Maslach Burnout Inventory.[1,2] While extensively studied among practicing nurses, emerging evidence confirms that pre-licensure nursing students experience substantial burnout driven by academic workload, time constraints, and clinical exposure, all of which compromise psychological well-being throughout training.[3,4]

Self-care is acknowledged as a key resiliency factor that can mitigate burnout risk, with common practices including adequate sleep, physical activity, mindfulness, and sustaining social support networks.[5,6] However, nursing students frequently encounter barriers to self-care, most notably high academic demands and the time constraints imposed by clinical training.[7,8] Given the growing recognition of burnout as a prevalent issue, thoroughly understanding both its scope and the specific self-care challenges faced by this population is essential. A scoping review design is particularly suitable for synthesizing literature that encompasses varied research designs and methodological approaches.[9] Accordingly, this review examines burnout and self-care challenges experienced by pre-licensure nursing students.

Research Question

The Population, Concept, Context (PCC) framework guides this scoping review, addressing the following question:

What is known from the existing literature about burnout and perceived self-care challenges among pre-licensure nursing students in academic and clinical training environments?

Objectives

The objectives of this scoping review were to:

1. Map the extent and characteristics of research examining burnout among pre-licensure nursing students.

2. Identify how burnout is defined and measured within this population.
3. Identify reported challenges and barriers to self-care among nursing students.
4. Examine the relationship between burnout and self-care practices.
5. Identify gaps in the literature to inform future research and educational interventions.

Methods

Study Design

A scoping review was conducted to examine existing literature on burnout and self-care challenges among pre-licensure nursing students. The scoping review method is particularly useful for investigating the extent of available literature, especially when it encompasses varied study designs and methodological approaches.[10]

Protocol and Reporting Framework

This review followed the PRISMA-ScR (Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews) checklist to ensure transparency and completeness in reporting. The study protocol was developed prior to the commencement of the search and included research questions, objectives, eligibility criteria, and search strategy.

Eligibility Criteria

Inclusion Criteria

Studies were included if they met the following criteria:

Population: Pre-licensure nursing students enrolled in diploma, associate degree, or bachelor's degree nursing programs leading to initial registered nurse licensure.

Concept: Studies addressing burnout, self-care practices, or barriers to self-care among nursing students.

Context: Academic environments, clinical placements, or simulation settings associated with nursing education.

Types of Evidence: Quantitative, qualitative, and mixed-methods studies published in peer-reviewed journals.

Language: Studies published in English.

Exclusion Criteria

Studies were excluded if they:

Focused on licensed practical nurses (LPNs), licensed vocational nurses (LVNs), or practicing nurses rather than students.

Examined students from other healthcare disciplines without separately reporting nursing student data.

Addressed academic performance or clinical competence without reference to burnout or self-care.

Were editorials, commentaries, or opinion articles without original research data.

Search Strategy

A comprehensive search was conducted across six academic databases: PubMed, CINAHL, PsycINFO, ERIC, Web of Science, and Scopus. Search terms combined keywords and indexed subject headings related to nursing students, burnout, and self-care: “nursing students” OR “student nurses”; “burnout” OR “emotional exhaustion” OR “occupational stress”; “self-care” OR “wellness” OR “coping strategies” OR “resilience”; and “barriers” OR “challenges” OR “obstacles”.

Study Selection

All retrieved records were imported into a reference management program and deduplicated. Two reviewers independently screened titles and abstracts against inclusion and exclusion criteria, followed by full-text review of potentially eligible records. Disagreements were resolved through discussion and consensus, with excluded records and reasons documented. Inter-rater reliability was assessed using Cohen's kappa statistic.

Data Charting

A standardized data charting form was developed to extract key information from each retained study, capturing author(s) and year; country; study aims; sample characteristics (size, demographics, program level); study design; burnout measurement instruments; reported burnout prevalence; identified self-care challenges or barriers; and key findings relevant to the review question. The charting process was iterative, allowing refinement of categories as familiarity with the literature increased.

Data Analysis and Presentation

Descriptive numerical data summarized key characteristics of included studies, including geographic distribution, study design, and sample size. Thematic analysis identified major trends related to burnout and self-care challenges, including academic workload, stressors, institutional influences, and personal barriers. Findings are presented through narrative synthesis, tables, and a PRISMA flow diagram (Figure 1) illustrating the study selection process.

Results

A systematic search of PubMed, CINAHL, PsycINFO, ERIC, and Web of Science/Scopus identified 516 records. Following removal of 18 duplicates, 498 unique records underwent title and abstract screening; 463 were excluded at this stage. The remaining 35 full-text articles were assessed for eligibility, with 7 excluded (3 focused on licensed nurses, 2 did not separately report nursing student data, 2 reported no relevant burnout or self-care outcomes). Ten additional studies were identified through reference

list searching. A total of 28 studies met inclusion criteria (see Figure 1). Study characteristics are summarized in Table 1.

Figure 1: PRISMA Flow Diagram of Study Selection

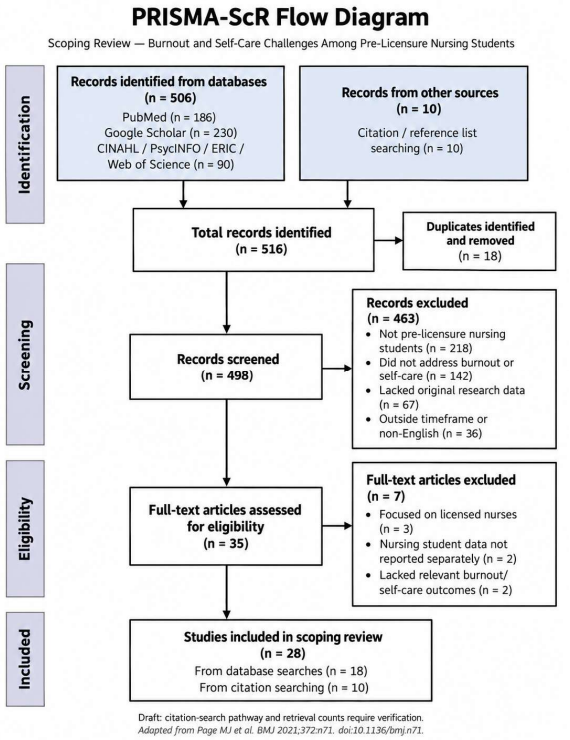


Table 1. Characteristics of Included Studies (N=28)

Author(s) & Year	Country	Study Design	Focus of Study
Bernier Carney et al., 2025[13]	United States	Mixed methods	Sources of stress and mental health challenges among pre-licensure nursing students
Osborne et al., 2025[3]	United States	Cross-sectional	Academic stress and burnout
			prevalence in nursing students
Velando-Soriano et al., 2023[21]	Spain	Systematic review & meta-analysis	Factors contributing to burnout development in nursing students
Baudewyns et al., 2022[35]	Belgium	Cross-sectional	Academic burnout risk among nursing and midwifery students during COVID-19
Kong et al., 2022[1]	China	Systematic review & meta-analysis	Global prevalence and correlates of burnout in nursing students
Gómez-Urquiza et al., 2023[2]	Spain	Systematic review & meta-analysis	Levels and prevalence of burnout among

			nursing students
Andargery et al., 2025[20]	Saudi Arabia	Cross-sectional	Burnout prevalence and associations with self-efficacy and psychological distress
Szwamel et al., 2025[17]	Poland	Cross-sectional	Determinants of burnout among undergraduate nursing students
Parisek et al., 2025[7]	United States	Cross-sectional	Self-care behaviors among pre-licensure nursing students
Burner & Spadaro, 2022[5]	United States	Pilot intervention	Mindfulness-based self-care training to reduce burnout risk
Arian et al., 2023[34]	Iran	Systematic review & meta-analysis	Prevalence of burnout syndrome among nursing students
Li H. et al., 2025[10]	Canada	Scoping review	Integration of psychological well-being and self-care into nursing curricula
Ching et al., 2019[4]	Australia	Qualitative	Stressors and coping strategies in clinical placements
Llewellyn et al., 2024[28]	United States	Educational intervention	Integrating self-care into nursing curriculum
Chachula, 2021[14]	Canada	Exploratory study	Professional quality of life and burnout among nursing students

Gifford & Kwasky, 2024[26]	United States	Educational intervention	Reflective learning strategies for student mental health and self-care
Sist et al., 2022[36]	Italy	Scoping review	Self-care practices among nurses and midwives
Iheduru-Anderson & Foley, 2022[19]	United States	Qualitative	Nursing students' experiences during COVID-19 disruptions
Hughes et al., 2021[15]	United States	Intervention study	Resilience development in pre-licensure nursing students
Ramluggun & Morning, 2025[24]	United Kingdom	Conceptual/educational review	Strategies for integrating self-care into nursing education
McGuinness & Nordstokke, 2021[25]	Canada	Quantitative study	Mindful self-care and resilience in undergraduate students
Phillips & Corcoran, 2024[37]	United States	Commentary	Collaborative approaches to student resilience
Higgins et al., 2025[38]	United States	Cross-sectional	Self-care practices among new graduate nursing students
Charlton & Wofford, 2022[8]	United States	Integrative review	Maladaptive coping behaviors in nursing students
Stubin et al., 2024[22]	United States	Educational review	Leadership, resilience, and self-care development in nursing students

Fairchild & Tully, 2024[39]	United States	Evaluation study	Impact of self-care strategies in nursing curricula
Poindexter, 2022[40]	United States	Commentary	Importance of resilience and well-being in nursing education
Ganchev a & Smith-Peters, 2022[6]	Canada	Educational intervention	Self-compassion and self-care education for nursing students

Conceptualization of Burnout in Pre-Licensure Nursing Students

Burnout in pre-licensure nursing students has been characterized as a multidimensional psychological construct encompassing emotional exhaustion, reduced academic engagement, and diminished professional self-efficacy.[1,2] This population faces stressors unique to student nursing: heavy coursework, clinical performance pressure, and uncertainty about professional readiness. A systematic review by Alsararatee et al.[11] found that burnout negatively impacts academic performance and self-concept, and that many studies conflate academic burnout with general student stress, reflecting ongoing conceptual inconsistency. Compounding this ambiguity is the lack of a consensus definition of self-care in nursing education; Slemon et al.[12] identified three distinct framings—holistic nursing practice, health-promoting lifestyle behavior, and stress-coping activity—that impede cross-study comparisons and curriculum development.

Burnout is associated with reduced confidence in clinical practice readiness and maladaptive coping behaviors including anxiety, depression, and sleep disturbance.[13,3] Resilience and self-efficacy function as protective factors, whereas emotional exhaustion and reduced academic motivation amplify vulnerability.[8,14,15] Most evidence is cross-sectional, and the direction of these relationships cannot be established.[16]

Prevalence of Burnout in Pre-Licensure Nursing Students

The literature consistently documents high burnout prevalence among nursing students globally, though reported rates vary by measurement instrument, sample characteristics, and cultural context.[3,17] Prakash et al.[16] found that 61.7% of undergraduate nursing students in India experienced high academic burnout, with emotional exhaustion and disengagement as primary features. Li et al.[18] applied random forest modeling to Chinese nursing students and identified workload intensity and insufficient institutional support as the strongest independent predictors, framing burnout as a structural outcome of program design rather than individual vulnerability—a finding that challenges Western assumptions linking burnout primarily to personal coping capacity.[8]

Meta-analytic evidence confirms that burnout adversely affects academic performance and student well-being globally.[1,2] A systematic review found that burnout, self-efficacy, academic engagement, and dropout risk are closely interrelated.[11] The COVID-19 pandemic intensified these pressures; nursing students reported heightened emotional exhaustion, frustration, and uncertainty arising from disruptions to academic and clinical environments.[19] While the pandemic constituted an acute stressor, it also highlighted the structural character of burnout in this population.

Academic Stressors Contributing to Burnout

Heavy academic workload is the most consistently identified antecedent of burnout among pre-licensure nursing students. The simultaneous demands of coursework mastery, clinical skill development, and professional identity formation create a cumulative burden associated with emotional exhaustion across multiple settings.[3,20,18] Li et al.[18] identified workload intensity and limited institutional support as the two strongest independent predictors, framing burnout as a structural outcome of program design. Financial stress further compounds academic demands for students managing paid employment alongside their studies. These pressures erode time and psychological resources available for self-care, and their cumulative effect may exceed what individual coping strategies alone can address, requiring institutional-level responses.[21]

Clinical Training Stress and Burnout

Clinical placement is indispensable to nursing education but is consistently identified as a primary contributor to burnout. Managing patient suffering, confronting death, and making clinical decisions under supervision generate emotional exhaustion,

particularly for students early in training.[4] Role ambiguity and inadequate clinical preparation intensify stress and frustration.[22] Ozdemir et al.[23] found that 73.5% of variance in clinical readiness among first-year Turkish nursing students was attributable to academic and relational stressors, suggesting that burnout impairs clinical competence before training concludes. Balancing concurrent patient care and academic responsibilities without adequate program-level support exacerbates clinical burnout risk.[24] Overemphasis on student-level constructs such as stress tolerance may obscure the structural drivers of clinical burnout.

Psychological and Emotional Outcomes of Burnout

Burnout among pre-licensure nursing students consistently correlates with adverse psychological outcomes including anxiety, depression, sleep disturbance, and reduced psychological hardiness. Qualitative findings from nursing students during COVID-19 documented heightened frustration, isolation, and emotional exhaustion arising from concurrent disruptions to academic and clinical environments, alongside concerns about professional competence.[19] Burnout is also associated with diminished compassion satisfaction and reduced confidence in professional role formation.[14] Students with higher burnout experience reduced psychological flourishing; resilience resources moderate but do not eliminate these effects.[25] These findings underscore that burnout carries significant academic and professional consequences, making student psychological health a concern not only for individual well-being but also for the quality and sustainability of future nursing care.

Self-Care Practices Among Pre-Licensure Nursing Students

Self-care is widely recognized as a protective factor against burnout. However, a critical limitation in this literature is the absence of a unified definition: Slemon et al.[12] identified self-care as variously framed as holistic nursing practice, health-promoting lifestyle behavior, or a stress-coping strategy, complicating cross-study comparisons and curriculum development. Despite this heterogeneity, broad consensus exists that adequate sleep, physical activity, mindfulness, and social support are associated with reduced psychological stress. Students who engage regularly in these behaviors tend to experience higher psychological flourishing and professional resilience.[25]

Reflective practice—implemented through structured journaling and facilitated self-awareness exercises—is also identified as an effective self-care strategy that supports emotional regulation and professional growth.[26] Despite the recognized importance of self-care, many nursing students struggle to sustain these practices due to the combined intensity of academic demands and limited institutional support for student wellness.

Barriers to Self-Care in Pre-Licensure Nursing Students

Despite recognizing the value of self-care, nursing students consistently report substantial barriers to engagement. Time constraints imposed by academic workloads and clinical schedules are the most frequently cited obstacle.[7] Martin et al.[27] found in a qualitative study that time pressures were compounded by institutional cultures that implicitly prioritized academic achievement over student well-being, locating barriers not only within individual students but within program structures and organizational norms. This finding underscores that barriers to self-care are partly systemic rather than solely motivational.

Psychological barriers also emerge prominently: students report guilt and conflicting professional duty norms when prioritizing time away from academic work.[27,8] Conceptual ambiguity further compounds these barriers; many students remain uncertain about what evidence-based self-care entails beyond vague notions of rest, limiting their ability to engage in targeted and effective practices.[12] Together, these findings indicate that barriers to self-care are simultaneously individual, psychological, and systemic, requiring multi-level responses.

Coping Strategies and Resilience Among Pre-Licensure Nursing Students

Social support, physical activity, mindfulness, and reflective journaling are consistently identified as adaptive coping strategies that buffer burnout risk.[4,15] Llewellyn et al.[28] demonstrated that formal self-care integration into nursing curricula enhanced students' self-care engagement and reduced burnout-related distress, suggesting that structured curricular delivery is more effective than elective participation. Asghar et al.[29] confirmed that resilience mediates the relationship between academic stress and burnout, such that students with greater psychological resources are partially buffered against high workload effects. Overemphasizing coping and resilience as individualistic constructs, however, risks deflecting attention from structural program factors that generate stress.[27]

Students who employ maladaptive strategies—avoidance, emotional suppression, and social withdrawal—are at greater risk for sustained burnout.[8] This underscores the importance of embedding adaptive coping training within formal nursing curricula rather than leaving it to informal or incidental learning.

Institutional and Educational Interventions Addressing Burnout

Nursing education programs have begun to implement evidence-informed interventions to address student burnout. Burleson et al.[30] identified mindfulness-based education, resilience training, Acceptance and Commitment Therapy, and holistic curricula as yielding statistically significant burnout reductions across quantitative studies; however, the absence of null results in the published literature signals probable publication bias. Peterson et al.[31] found that even a brief stress-education and support course produced meaningful burnout reductions during the COVID-19 pandemic, indicating that targeted low-intensity interventions can be effective in acute high-stress contexts. Strout et al.[32] represent a more rigorous approach—a longitudinal, multidimensional wellness program currently under evaluation.

Uzzell et al.[33] found that embedding well-being content within the core curriculum, rather than offering it as optional programming, was associated with stronger outcomes. Clinical mentorship and faculty responsiveness to student well-being are also identified as protective factors, particularly during early clinical placements.[22,24]

Relationship Between Burnout and Self-Care

The literature documents a consistent inverse relationship between self-care engagement and burnout: students who engage less in self-care report higher emotional exhaustion, while physical activity, mindfulness, and social support are associated with positive psychological outcomes.[5,25] Asghar et al.[29] provided cross-cultural evidence from Pakistan confirming that resilience mediated the relationship between academic stress and burnout, extending generalizability beyond predominantly Western samples. However, most evidence is correlational and cannot establish causality. It remains unclear whether self-care reduces burnout, whether reduced burnout increases capacity for self-care, or whether both are shaped by underlying structural factors such as program culture or student financial security. Addressing this bidirectionality is a priority gap for future research, pointing toward intervention designs that target systemic program conditions alongside individual behavior change.

Discussion

Overview of the Evidence Base

This scoping review maps the current literature on burnout and self-care challenges among pre-licensure nursing students. Burnout emerged consistently as a multidimensional construct driven by academic demands, clinical pressures, and personal factors.[1,2] The majority of studies employed standardized instruments, most notably the Maslach Burnout Inventory and its student version, reflecting methodological heterogeneity across the field. The growing body of evidence affirms that burnout is a complex, multidetermined phenomenon shaped by the interaction of personal, academic, clinical, and institutional variables.[21,34] Although scoping and systematic reviews have begun mapping the intervention landscape,[30,33] the evidence base for effective, scalable programs remains thin relative to the descriptive documentation of the problem—a disparity that nursing education must urgently address.

Patterns Identified Across the Literature

Several consistent patterns emerged. First, high academic workload and program intensity were recurrently identified as primary burnout contributors.[3,17,18] The dual demands of theoretical coursework and clinical practice, compounded by rigorous assessments, characterized the training environment across studies. Second, the clinical environment was a significant stress source; exposure to patient suffering, supervisor pressure, and concerns about clinical readiness placed considerable emotional demands on students, particularly those in early training stages.[4,23] Third, a persistent gap was identified between students' understanding of the value of self-care and their actual ability to engage in it—attributable to time constraints and institutional cultures that implicitly discourage prioritizing well-being.[27,16]

Gaps in Literature

Despite growing evidence, important gaps remain. The predominance of cross-sectional designs limits understanding of burnout trajectories across full nursing programs; longitudinal designs are needed to examine when burnout risk peaks and which students are most vulnerable.[1,34] The literature also remains skewed toward high-income, Western settings, limiting its global applicability.[16,18] A major conceptual gap persists: Slemon et al.[12] demonstrated the absence of a consensus definition of self-care in nursing education, hampering cross-study comparisons and curriculum development. Most urgently, rigorously evaluated intervention studies remain scarce; Burleson et al.[30] identified only six eligible studies, and Alsararatee et al.[11] noted that prevention strategies are seldom implemented with the institutional commitment required for sustained impact.

Implications for Nursing Education and Practice

These findings highlight the need to treat student burnout as an institutional priority rather than an individual problem. Nursing programs should embed wellness content, stress management, and self-care education into the core curriculum rather than offering these as optional components.[33,28,24] Mindfulness-based training, resilience programs, and peer mentorship represent the most consistently supported intervention modalities.[30,11] In clinical settings, faculty mentorship and supervisor responsiveness are

implicated as protective factors, particularly in early clinical placements.[23] Strout et al.[32] provide a model for longitudinal, multidimensional wellness program design. Future research should prioritize prospective designs, achieve definitional consensus,[12] and expand geographic representation to low- and middle-income settings where burnout may be shaped by distinct cultural and structural contexts.

Limitations

The findings should be interpreted with awareness of limitations in the underlying literature. Many included studies relied on self-report measures susceptible to response bias,[3,7] and the predominance of cross-sectional designs limits causal inferences about the relationships among academic stressors, self-care behaviors, and burnout outcomes.[1] Variability in sample sizes constrains the generalizability of individual findings across program types and institutional contexts. Regarding the review process, although multiple databases were searched, some relevant studies may have been missed due to indexing limitations or inconsistent terminology. Restricting the review to English-language, peer-reviewed publications may have excluded relevant work published in other languages or in grey literature. Because the review was scoped to pre-licensure nursing students, studies reporting nursing student data only within broader healthcare student samples were excluded. Finally, as is inherent to scoping reviews, formal methodological quality appraisal was not conducted, precluding assessment of evidence strength.

Conclusion

This scoping review synthesized the current literature on burnout and self-care challenges among pre-licensure nursing students. The evidence consistently demonstrates that these students experience substantial emotional exhaustion and psychological stress arising from the intersecting demands of academic coursework and clinical training.[3,16,18] Burnout is driven by a combination of workload pressures, clinical stressors, and both individual and institutional barriers to self-care.[11,27] Although self-care is widely regarded as a protective factor, the literature reveals inconsistencies in its conceptualization and evaluation that impede the development of scalable interventions.[12,30] These findings underscore the urgent need for nursing programs to transition from awareness to action by embedding wellness support, mentorship, and structural reforms into the curriculum.[33,32] Effectively addressing burnout among pre-licensure nursing students is essential not only for individual well-being but also for cultivating a resilient and sustainable nursing workforce capable of delivering safe, compassionate patient care.

Author Contributions

Timothy C. Ortiz: Conceptualization, Methodology, Investigation, Writing – Original Draft, Writing – Review and Editing, Project Administration. Pinthusorn Pattayakorn: Data Curation, Formal Analysis, Writing – Review and Editing. Justin Schneider: Investigation, Writing – Review and Editing. May San-Rozano: Data Curation, Writing – Review and Editing. Anne Lama: Investigation, Writing – Review and Editing. Kattiya Podimuang: Investigation, Writing – Review and Editing.

Conflict of Interest Declaration

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Data Availability Statement

The data supporting the findings of this review are derived from publicly available peer-reviewed publications cited within the reference list. No new primary data were collected for this scoping review. All included studies are accessible through their respective journal publishers.

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