

A DESCRIPTIVE STUDY TO ASSESS THE IMPACT OF COVID-19 ON NURSING EDUCATION AMONG NURSING STUDENTS IN SELECTED NURSING COLLEGES, JAIPUR

Author's Name: Mr. Mukul Pathak¹, Dr. Jogendra Sharma², Mr. Atul Pareek³ Affiliation:

- **1.** M.Sc. Nursing, Govt College of Nursing, Jaipur, Rajasthan, India.
- 2. Principal, Govt. College of Nursing, Jaipur, Rajasthan, India.
- **3.** Faculty, Govt. College of Nursing, Jaipur, Rajasthan, India.

Corresponding Author Name and Email Id: Mr. Mukul Pathak,

mukul14796@gmail.com

ABSTRACT

Introduction: The COVID-19 pandemic has disrupted nursing education worldwide. This study aimed to assess its impact among undergraduate nursing students in Jaipur, India. Methods: A cross-sectional survey was conducted among 80 BSc Nursing IV year students admitted in 2019-20 across selected nursing colleges in Jaipur. Data on the impact of COVID-19 on nursing education were collected using a structured questionnaire and analyzed using descriptive and inferential statistics. Results: Most students (60%) reported a moderate impact of COVID-19 on their education, while 27.5% and 12.5% indicated low and high impacts, respectively. The mean impact score was 9.43 out of 20. Internet access showed a significant association with the level of impact. Conclusion: COVID-19 has considerably affected nursing education, especially for students lacking robust internet connectivity. Strategies to enhance flexible learning are vital during public health emergencies requiring remote education.

Keywords: Assess, COVID-19, Impact, Nursing education, Nursing student, Nursing college, Impact, Online learning.



INTRODUCTION

Corona virus is a family of viruses that can cause illnesses such as the common cold, severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). In 2019, a new corona virus was identified as the cause of a disease outbreak that originated in China. The virus is known as severe acute respiratory syndrome corona virus 2 (SARS-CoV-2). The disease it causes is called corona virus disease 2019 (COVID-19). In March 2020, the World Health Organization (WHO) declared the COVID-19outbreak a pandemic.¹

The American Association of Colleges of Nursing's new Essentials-standards for professional nursing education-were finalized during the pandemic and reflect these lessons. The need for nurse scientists to conduct emergency response research was made evident. The importance of strong academic-practice partnerships was highlighted for rapid communication, flexibility, and responses to dynamic environments. For the future, nursing education and practice must collaborate to ensure that students and practicing nurses are prepared to address emergencies and pandemics, as well as the needs of vulnerable populations.²

The irresolute time span of the COVID-19pandemic and suspension of clinical teaching and experiences in the healthcare facilities have affected students readiness for the licensure examination. Final-year students face uncertainties regarding completion of the programme and timelines for sitting their licensure examinations. To be able to continue teaching and learning during the COVID-19pandemic, while complying with the COVID-19prevention protocols, many institutions of higher learning switched from the traditional face-to- face teaching and learning to the virtual mode. This approach was also adopted by nursing colleges in the developing and developed countries. Content that was delivered in a combined face-to-face and online teaching and learning hybrid mode went fully online. Content that was previously taught only face-to-face had to be quickly converted to online delivery and teachers were trained to deliver virtual classroom sessions when necessary. This solution, however, limited the skills development and clinical practice placement of students, which is the normal approach in the traditional nursing curricula. Teachers were forced to learn how to navigate and deliver the course content online. Also, student's families and guardians were forced to provide the needed technology and Internet services required to access the classes online. ³



STATEMENT OF THE PROBLEM

"A DESCRIPTIVE STUDY TO ASSESS THE IMPACT OF COVID-19 ON NURSING EDUCATION AMONG NURSING STUDENTS IN SELECTED NURSING COLLEGES, JAIPUR."

OBJECTIVES

- 1. To assess the impact of COVID-19 on nursing education among nursing students in selected nursing colleges, Jaipur.
- To find out the association between impact of COVID-19 on nursing education among nursing students with their selected demographic variable in selected nursing colleges, Jaipur.

METHODOLOGY

In study, a quantitative approach was found to be suitable to assess the impact of covid-19 on nursing education among nursing students. The descriptive design was used for the study. In this study the research variable is the impact of COVID-19 on nursing education among

nursing students. The tool developed and used for data collection was socio-demographic data (5 variables) and Structured Questionnaire (20 questions).

The pilot study was conducted on 08 samples. The tool was found to be reliable and feasible. The reliability of the tool was established by using Kuder-Richardson 20(KR 20) Formula., the reliability of the test was found to be 0.81, which proved that the tool was reliable.



RESULT

Table 1.Socio Demographical Variables of Nursing Students

(N=80)

Demographical variable	Frequency	(%)	
Age group (in years)			
17-18	0	0	
19-20	0	0	
21-22	23	28.7	
23 or above	57	71.3	
Gender			
Male	32	40	
Female	48	60	
Residential area			
Rural	42	52.5	
urban	38	47.5	
Family Income (Monthly)			
below Rs. 15,000	6	7.5	
Rs 15,001-30,000	32	40.0	
Rs 30,001-50,000	36	45.0	
Above Rs 50,000	6	7.5	
Internet Access			
Wi-Fi	15	18.8	
3G	0	0	
4G	30	37.5	
5G	45	43.8	



Table 2. Level of Impact of COVID-19 on Nursing Education among Nursing Students(80)

S.No.	Level of Impact of COVID-19	Frequency(%)		
1	Low impact	22(27.5%)		
2	Moderate impact	48(60.0%)		
3	High impact	10(12.5%)		

Table 3. Association between the Level of Impact of COVID-19 on Nursing EducationamongNursingStudentsandSelectedDemographicVariables(N=90)

Demographical variable	Df	Level of impact		
		Chi-square		
Age group (in years)	2	0.035 ^{NS}		
a) 21-22				
b) 23 or above				
Gender	2	0.895 ^{NS}		
a) Male				
b) Female				
Residential area	2	3.128 ^{NS}		
a) Rural				
b) urban				
Family income (monthly)	6	4.178 ^{NS}		
a) below Rs. 15,000				
b) Rs 15,001-30,000				
c) Rs 30,001-50,000				
d) Above Rs 50,000				
Internet access	4	13.419*		
a) Wi-Fi				
b) 4G				
c) 5G				
	VariableAge group (in years)a) 21-22b) 23 or aboveGendera) Maleb) FemaleResidential areaa) Ruralb) urbanFamily income (monthly)a) below Rs. 15,000b) Rs 15,001-30,000c) Rs 30,001-50,000d) Above Rs 50,000Internet accessa) Wi-Fib) 4G	VariableAge group (in years)2a) 21-222b) 23 or above2Gender2a) Male2b) Female2Residential area2a) Rural2b) urban6Family income (monthly)6a) below Rs. 15,0006b) Rs 15,001-30,0006c) Rs 30,001-50,0004Internet access4a) Wi-Fib) 4G		

NS=Non significant *=Significant



Table.4 Showed Mean, Median, Mode, S.D., Range & Mean % of Level of Impact ofCOVID-19 (N=80)

	Mean	Median	Mode	S.D.	Range	Mean %
Level of impact of COVID-19	9.43	10.00	10.00	4.068	16	47.15

The results of a Chi-square test conducted to assess the association between the level of impact of COVID-19 on nursing education among nursing students and selected demographic variables, based on a sample size of 80 participants.

The calculated Chi-square value for the association between age groups and the impact of COVID-19 was 0.035 with 2 degrees of freedom (Df). The tabulated Chi-square at a 0.05 level of significance (l.o.s) was 5.99. Since the calculated value was less than the tabulated value, the result was non-significant (NS), indicating that there was no significant association between age groups and the level of impact, but by chance, therefore investigator fails to reject null hypothesis(H0).

The calculated Chi-square value for the association between gender and the impact of COVID-19 was 0.895 with 2 degrees of freedom. The tabulated Chi-square at a 0.05 level of significance was 5.99. Similar to the age group, the result was non-significant (NS), suggesting no significant association between gender and the level of impact, but by chance therefore investigator fails to reject null hypothesis (H0).

The calculated Chi-square value for the association between residential areas and the impact of COVID-19 was 3.128 with 2 degrees of freedom. The tabulated Chi-square at a 0.05 level of significance was 5.99. The result was non-significant (NS), indicating no significant association between residential areas and the level of impact, but by chance therefore investigator fails to reject null hypothesis(H0).

The calculated Chi-square value for the association between family income and the impact of COVID-19 was 4.178 with 6 degrees of freedom. The tabulated Chi-square at a 0.05 level of significance was 12.59. The result was non-significant (NS), suggesting no significant association between family income and the level of impact, but by chance therefore investigator fails to reject null hypothesis(H0).

The calculated Chi-square value for the association between internet access and the impact of COVID-19 was **13.419** with 4 degrees of freedom. The tabulated Chi-square at a 0.05 level of



significance was 5.99. The result was significant (S), indicating a significant association between internet access and the level of impact, so not by chance therefore investigator reject null hypothesis(H0) and accepts the research hypothesis(H1).

DISCUSSION

Literature has supported that the transition to online assessments can be done through tutorials and familiarizing students with this modality. This approach reduces the uncertainty and anxiety among students and creates ease in revising assessment methods (Beavis et al. 2012). Another issue brought about by the switch to online delivery and suspension of clinical teaching is the extension in the length of the programme. Initially, students had registered for a four-year programme. In the current situation, it is estimated that the programme will be extended for at least an additional semester to facilitate the much-needed clinical experience and the clinical hours required by the governing bodies (British Columbia College of Nursing Professionals 2020).⁴

This article discusses telenursing and Teach-Back processes with student active engagement that facilitates learning and meets the direct care requirement. The purpose is to share best practice ideas for clinical instructors to educate when clinical settings are unavailable.⁵

The situation affected students' learning opportunities, since clinical placements were suspended, Universities closed and in-person courses moved into online teaching. While lessons and courses rapidly switched into online teaching, in order to safeguard students' education and faculty's activity, it was not possible to manage the pre-clinical activities, such as simulations and labs, in order to support technical and relational competences.⁶

COVID-19 pandemic has necessitated mandatory e-learning in medical and nursing education. How far are developing countries like India (with wide socioeconomic and cultural diversity) geared up for this challenge remains unexplored. At this critical juncture, we aim to evaluate if online teaching methods are as feasible, acceptable, and effective as in-class teaching for medical/nursing students.⁷

Overall, Discussion Findings highlighted the need to develop emergency education preparedness plans that address student wellbeing and novel collaborative partnerships between schools and clinical partners



REFERENCES

- Indu, Angadi Athmavathi K, Angadi S, Mallapur MD. A descriptive study on knowledge regarding covid-19 and its prevention among B.Sc. nursing Ist year students. Int J Curr Res. 2021;13(6).
- 2. Weaver CA, Stanley JM, Michael S, Thomas R, Musil CM. Impact of the COVID-19 pandemic on the future of nursing education. J Prof Nurs. 2022;38(1):145-151.
- 3. Agu CF, Stewart I, Rae T, Oyedele OA, Gaba P, Makanjuola AT, et al. COVID-19 pandemic effects on nursing education: Looking through the lens of a developing country. Nurse Educ Today. 2021;99:104800.
- McFarlane-Stewart N, Rae T, Stewart I, Ugarte G, Maduro G, Cumming J, et al. COVID-19 pandemic effects on nursing education: Looking through the lens of a developing country. Int J Africa Nurs Sci. 2021;15:100337.
- Hargreaves L, Evans TL. COVID-19 pandemic impact on nursing student education: Telinursing with virtual clinical experiences. J Prof Nurs. 2021;37(6):1004-1010.
- Tomietto M, Rappagliosi CM, Sartori R, Battistelli A. Nursing education challenges and innovations during the COVID-19 pandemic: an Italian experience. Acta Biomed. 2020;91(9-S):87-89.
- Singh HK, Joshi A, Singh YK, Malepati RN, Thakur A. A survey of E-learning methods in nursing and medical education during COVID-19 pandemic in India. Nurse Educ Today. 2021;99:104768.