Psychological Problems of Nursing Students in Facing Clinical Practice During the Covid-19 Pandemic

Sulastri(✉) and Siti Fatonah

Department of Nursing, Tanjungkarang Health Polytechnic, Bandar Lampung, Lampung, Indonesia
{sulastri,fatonah}@poltekkes-tjk.ac.id

Abstract. Professional and vocational education institutions as health personnel education institutions are expected to be able to produce ready-to-use health workers. The educational process, the clinical learning load is quite large in vocational education, even the entire professional education process is clinical. During the Covid-19 pandemic, clinical learning does not mean abolishing, hybrid learning must be taken to achieve skills and competency targets. The purpose of this study was to determine the psychological condition of nursing students in undergoing clinical practice during the Covid-19 pandemic. The research design used was a survey research with a sample of nursing students who underwent clinical practice during the COVID-19 pandemic as many as 148 respondents from the Tanjungkarang Health Polytechnic and the Faculty of Nursing, Riau University. The variables studied were students' psychological problems using the instrument-self reporting questionnaire (SRQ) 20. Univariate analysis was used to assess the distribution of psychological problems among respondents. The results showed that most of the respondents had psychological problems as many as 93 respondents (62.8%), while 55 respondents (37.2) even though they were included in the category of normal/normal response range, most of the answers showed mild anxiety. This condition shows the importance of paying attention to psychological problems in disaster conditions, including non-natural disasters, the Covid-19 pandemic.

Keywords: disaster · Covid-19 pandemic · psychological problems · nursing clinical practice disaster · Covid-19 pandemic · psychological problems · nursing clinical practice

1 Introduction

Coronavirus disease 2019 known as COVID-19 is caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV2). COVID-19 was first detected in the city of Wuhan, China, in December 2019. The World Health Organization (WHO) later declared COVID-19 as a public health emergency of international concern. On March 11, 2020 WHO declared COVID-19 in the category of a pandemic. COVID-19 is the first pandemic

S. Februanti et al. (Eds.): MICon 2021, ASSEHR 708, pp. 887–895, 2023.
https://doi.org/10.2991/978-2-38476-022-0_99

caused by a coronavirus. People most at risk of infection are those who have close contact with COVID-19 patients or who care for COVID-19 patients. Healthcare workers who are at the forefront of the COVID-19 pandemic response are at greater risk of being exposed to infection. SARS-CoV2 as the virus that causes COVID-19 is one of a number of potential hazards. Some aspects of potential hazards in the workplace that refer to potential physical, chemical.

Currently a vaccine is available for COVID-19, but this is not a guarantee that someone will not be infected, besides there is no specific treatment for this outbreak. The number of people infected and those who died is increasing day by day. COVID-19 has caused a global health crisis with increasing numbers of people being infected and dying every day. Various countries have tried to control its spread by applying the basic principles of grouping and social testing. Health professionals have become frontline workers globally in the preparation and management of this pandemic. A large-scale health crisis, triggering a restructuring and reorganization of health care delivery to support emergency services, medical intensive care units and continuous care units. Health professionals are mobilizing all their resources to provide emergency assistance in a general climate of uncertainty. Concerns about mental health, psychological adjustment, and recovery of health care workers caring for patients with COVID-19 is beginning to emerge. The disease characteristics of the COVID-19 pandemic, increase the atmosphere of general vigilance and uncertainty, especially among health professionals, due to various causes such as the rapid spread and transmission of COVID-19, the severity of the symptoms it causes within a segment, infected people, lack of knowledge about the disease, and mortality among health professionals (Lu, Stratton, & Tang, 2020; Sohrabi et al., 2020, El-Hage et al., 2020; Iqbal & Chaudhuri, 2020; El-Hage et al., 2020) in [2].

Based on the predictions of a number of experts, the Covid-19 pandemic could last a long time, this is in line with the absence of a vaccine or drug for the Corona virus. However, it is certainly not possible for people to live in quarantine forever or lock down. Slowly the state implements policies New Normal Life (new lifestyle). New Normal Life aims to restore the order of life back to normal so that the socio-economic life of the people who have been slumped for several months becomes normal again. The new lifestyle is to return to normal activities but with health protocols to coexist with Covid-19. "People live daily by getting used to wearing masks, maintaining personal hygiene by washing hands with soap, and maintaining distance, especially in public facilities [3]. The purpose of this study was to determine the condition of the psychological problems of nursing students in conducting clinical practice during the Covid-19 pandemic.

2 Method

The research design applied is survey to describe the psychological condition of the respondents. The sample used was nursing students who underwent clinical practice during the COVID-19 pandemic as many as 150 respondents from the Tanjungkarang Health Polytechnic and the Faculty of Nursing, University of Riau. The variables studied were student's psychological problems. Measuring tools to collect data using instrumentsself reporting questionnare (SRQ) 20. Univariate analysis was used to assess the distribution of psychological problems among respondents. As a result, the variables will

be presented in the form of a distribution table that displays the mean, median, standard deviation and minimum and maximum values.

3 Results

The study was conducted on nursing students who did clinical practice during the Covid-19 pandemic as many as 148 respondents. Analysis of mental emotional problems using the instrumentself reporting questionnare (SRQ) 20.

Characteristics of Respondents

Based on Table 1, it can be seen that most of the respondents were in their late teens (17–25 years), as many as 145 people (96.7%);

Based on Table 2, it can be seen that most of the respondents were female, as many as 133 people (88.7%);

Based on Table 3, it can be seen that most of the respondents were professional students, as many as 68 people (45.3%);

Table 1. Figurean Characteristics of Respondents based on right Age (n = 150)

Age	Amount	%
Late teens	145	96.7
Early Adult	2	1.3
Late Adult	3	2
Amount	150	100

Table 2. K. overview Characteristics of Respondents based on Gender (n = 150)

Gender	Amount	%
Man	17	11.3
Woman	133	88.7
Amount	150	100

Table 3. Description of Respondents' Characteristics by Education Level (n = 150)

Tier Education	Amount	%
D III	31	20.7
D IV	51	34
Profession	68	45.3
Amount	150	100

Based on Table 4, it can be seen that most of the respondents did not feel anxious, as many as 82 people (54.7%);

Based on Table 5, it can be seen that most of the respondents did not show a depression response, as many as 93 people (62%);

Based on Table 6, it can be seen that most of the respondents did not show a trauma response, namely 97 people (64.2%);

Based on Table 7, it can be seen that most of the respondents showed a psychologically affected response when conducting clinical practice during the Covid-19 pandemic, namely 87 people (58%);

Table 4. Characteristics of Respondents Based on Psychological Responses: Anxiety (n = 150)

Worry	Amount	%
Worried	68	45.3
No Worry	82	54.7
Amount	150	100

Table 5. Overview of Ka Respondent characteristics based on rDepression response (n = 150)

Depression	Amount	%
Depression	57	38
No Depression	93	62
Amount	150	100

Table 6. Characteristics of Respondents Based on Acute Stress Response (n = 150)

Stress	Amount	%
Stress	53	35.3
No stress	97	64.7
Amount	150	100

Table 7. Characteristics of Respondents Based on Problem Responses Psychological (n = 150)

Problem psychological	Amount	%
Even Psychological	53	35.3
No Problem	97	64.7
Amount	150	100

The analysis was carried out based on the calculation of the overall answer scores for psychological problems using the SRQ 20 instrument showing the Covid-19 pandemic had a significant impact on the psychological problems of nursing students (58%). However, when analyzing the subvariables of anxiety, depression 38%, and acute stress showed different results, namely anxiety 43.7%, depression 35.3%, and acute stress.

4 Discussion

The results of the analysis of the age of the respondents showed significant differences in psychological responses. This result is in accordance with the results of previous studies that the adolescent age group is more at risk of experiencing PTSD. This study shows the occurrence of a trauma response that is chronic or delayed response. The findings of this study also show that there are differences in trauma symptoms between groups of adolescents [4]. Based on the researcher's observations, there are differences made possible by respondents who are older, more experienced and have better adaptability than younger students.

The results of the analysis show that there is no significant difference in the level of education with psychological problems during practice during the covid-19 pandemic. This result is in accordance with previous research with results showing that there is no relationship between gender, place of work and education level of respondents with anxiety in dealing with the COVID-19 pandemic with p values of 0.827, 0.282 and 0.540 and greater than 0.05. The results of this study are in line with research (Fadli et al. 2020) where the results of his research found that there was no relationship between gender and anxiety in health workers in an effort to prevent Covid-195. Subsequent research shows different results where the higher the level of education, the better the coping ability. Based on the researcher's observations, there is no significant difference between the level of education and psychological problems, because respondents with a bachelor's education level do not experience anxiety while respondents with a d3 Nursing education level experience more anxiety from mild to moderate with a relationship between D3 Nursing education level and panic anxiety level. There were 19 people (61.3%), and undergraduate education level and Nurses with panic anxiety levels were 27 people (52.9%) and 41 people (41%), while those who had no anxiety D3 Nursing were 12 people. People (38.7%) and level undergraduate education without anxiety is 24 people (47.1%) and nurses' education is 27 people (39.7%).

The results of the gender analysis also did not show a significant psychological response.

This result is not in accordance with the results of previous studies that women are more at risk of experiencing PTSD4. Further results show that the overall level of anxiety expressed by female students is higher than male respondents in all categories of anxiety levels. The percentage of students' anxiety level about COVID-19 based on the Hamilton Anxiety Rating Scale (Hamilton, 1969), showed that no anxiety had a value of 10.9%, low anxiety level 9.8%, moderate anxiety level 9.1%. High anxiety level is 15.4%, and very high anxiety level is 54.8%. Furthermore, the results of hypothesis testing regarding the significance of the relationship or differences in anxiety levels between men and women with COVID-19 are tabulated through an independent sample

t-test [6]. Based on the researcher's observations, there was no difference made possible by the relatively equal opportunity for interaction between male and female students so that the coping formed did not differ.

Psychological problems are an unavoidable problem during the Covid-19 pandemic. Many studies have been conducted showing psychological responses in all age ranges and health ranges. Health workers are officers who must be alert and at the forefront of dealing with patients, as well as students who do clinical practice, it is unavoidable to interact with patients.

The results showed that 43.3% of students experienced mild anxiety, 56.7% of students experienced moderate anxiety [7]. The results of the analysis showed that most of the respondents experienced psychological problems (64.9%) and most experienced trauma (83.5%) [8]. There is a lot of anxiety experienced by students during the pandemic. The results of previous studies showed that the anxiety of students who were working on their thesis at the University of HKBP Nommensen Medan, there were 23 (7.3%) students having low anxiety categories, 215 (75.1%) students having moderate anxiety categories, and 79 (17.6%) students have high category anxiety. From the description of the categorization, it is known that the anxiety of students who are working on theses at the University of HKBP Nommensen Medan is more in the moderate category [9].

Anxiety affects student learning outcomes, because it tends to produce confusion and perceptual distortion. Prolonged and continuous anxiety can cause stress to depression if it is not addressed immediately and this is increasing in the conditions of the Covid-19 pandemic with online learning methods. The study, which involved 235 students at the Nahdlatul Ulama University, West Nusa Tenggara, showed that of the 235 respondents, most of them experienced mild anxiety as many as 99 students (42.13%) and 38 students with moderate anxiety (16.17%). The results of research related to stress levels showed that there were several students who experienced mild stress, namely 60 students (25.53%), related to depression levels, 14 students (6.38%) experienced mild depression due to online learning [10].

Stress and anxiety are reactions to threatening and unexpected situations such as in the outbreak of the coronavirus pandemic. Health workers are the most vulnerable to this. Stress-related reactions include changes in concentration, irritability, anxiety, insomnia, reduced productivity, and interpersonal conflicts, in later cases, they will experience more severe psychiatric conditions, separation from family, abnormal situations, increased exposure, fear of COVID-19 transmission. 19, feelings of failure in dealing with poor prognosis, inadequate technical facilities, PPE, tools and equipment, to help treat patients. Health workers have difficulty maintaining physical and mental health conditions that are at risk for psychological disorders such as depression, anxiety, severe stress, and fatigue [2]. Psychological well-being is a condition in which a person's psychological aspects can function properly and positively. The next panel describes how the psychological well-being of parents who have a dual role in the Covid-19 pandemic with participant mothers who work and have children who are in elementary school. The results showed that the Covid-19 pandemic disrupted the psychological well-being of participants. Psychological conditions experienced are stress, fear, and anxiety related

to the dangers of Covid-19 transmission and other conditions stay at home" caused by the Covid-19 pandemic [11].

Further findings showed that out of 32 respondents (36.8%) were in the risk age group with an age range of 45–60 years, and as many as 67 respondents (77%) were female. In terms of the completeness of personal protective equipment (PPE) used by doctors and nurses in 23 health centers in Pontianak city, it is included in the incomplete category, namely (50.6%), when viewed from the application of 3M (maintaining distance, wearing masks, and washing hands) respondents those who applied 3M in the good category reached (33.0%), besides that co-morbidities were also one of the contributing factors to the Covid-19 confirmation rate, health workers with co-morbidities were (42.5%). The results showed that the anxiety response was still experienced. Health workers who tend to feel very anxious (20.7%), [12].

The COVID-19 pandemic has brought disruption to life, including the world of education. Rapid changes require adaptability and distress conditions, especially in field practice learning. Anxiety is an early symptom of students which may have a negative impact on student achievement and learning outcomes. Decreased immunity, depression and a decrease in the quality of education become risk estuaries if anxiety conditions are not treated. In accordance with the results of data analysis in Table 1, the results of the characteristics of respondents based on sociodemographic data show that most of the respondents are 31 people (79.5%) aged 21 years. All respondents, namely 39 people (100%) are women. In the characteristics of the history of medical therapy from mental health doctors, it can be seen that most of them are 38 people (97.4%) are not currently or have been undergoing and carrying out medical therapy from a mental health doctor on a regular basis. In the characteristics of daily activities, most of them, namely 30 people (76.9%) have daily activities in the moderate category. Furthermore, in the family history of mental disorders or a history of members undergoing mental health treatment, it was found that most of the 38 people (97.4%) did not have a family history of mental disorders or a history of members undergoing mental health treatment. In the confirmed history of covid 19 or there is a history of nuclear family members being exposed to covid 19 from the data, the results show that all respondents, namely 39 people (100%) do not have a confirmed history of covid 19 or there is a history of nuclear family members being exposed to covid 19. From the results of the analysis of the characteristics of the respondents, it was also found that most of the 31 people (79.5%) did not have family members who were laid off during the covid 19 pandemic. From the characteristics of family income during the covid 19 pandemic, it was found that the majority of the respondents were 30 people (76.9%) have a family income in the category sufficient to meet their daily needs. The majority of respondents, namely 34 people (87.2%) had experience participating in online learning. The results of this study showed that the characteristics of the indicators of student anxiety experienced mild anxiety symptoms as many as 15 people (38.5%), tension in the mild category as many as 12 people (30.8%) and fear in the mild category as many as 10 people (25.6%) [13]. These results clearly show psychological problems to be the dominant problem in the COVID-19 pandemic.

Other research shows that psychological problems that arise can be in the form of anxiety, depression and post-traumatic syndrome disorder 14151617. Seeing this condition, it needs legal support and protection. Governments and professional organizations try to pay close attention to maximum 1819201.

5 Conclusion

The results of the study show that psychological problems are an unavoidable condition, especially during the Covid-19 pandemic. Various conditions of uncertainty experienced trigger prolonged stress. The virus that is the main cause is able to do mutations, the second wave has a heavier impact than the first wave. Even though a vaccine has been found and most of the health workers, including nursing students, do not seem to be a guarantee that someone will not be infected with COVID-19. This can be seen from the number of health workers who have been vaccinated against COVID-19 and can still be re-exposed to the corona virus.

Acknowledgments. Acknowledgments or support from various parties for the implementation of this research.

1. Director of Poltekkes Tanjungkarang, or permission and opportunity to obtain research funds.

2. The Dean of the Faculty of Nursing, Rian University for his permission to work together as a partner research team.

3. Respondents who are willing to share and participate in this research.

References

1. Specialist P, Occupational K. Protection Guidelines for Workers in Health Service Facilities during the Covid-19 Pandemic. 2020;(April).
2. Rosyanti L, Hadi I, Nursing J, Kendari PK, Nursing J, Kendari PK. HIJP : HEALTH INFORMATION A RESEARCH JOURNAL of Psychological Impact in Providing Health Care and Services for COVID-19 Patients to Health Professionals 1. 2020;12.
3. Rusmala E. Covid-19: The Urgency of Legal Protection for Health Workers. In: 2020. http://new.widyamataram.ac.id/content/news/covid-19-urgensi-perlindungan-law-bagiTenaga-kesehatan#.YCnHxy0VMWo
4. Ali Rahman A, . F, Yusuf LN S, Rusmana N, L Downs L. Prevalence of Ptsd and Characteristics of Post-traumatic Stress Symptoms in Children and Adolescents Victims of Natural Disasters.Educentric. 2016;3(1):1. doi: https://doi.org/10.17509/educentric.v3i1.184
5. Yaslina Y, Yunere F. Relationship between gender, place of work and level of education with nurses' anxiety in dealing with the Covid-19 pandemic. Pros of E-ISSN Pioneer Health Seminar 2622–2256. 2020; 3(1):63–69. https://www.jurnal.stikesperintis.ac.id/index.php/PSKP/article/view/569/286 [Accessed 5 July 2021].
6. Thahir A, Sulastri, Bulantika SZ, Novita T. Gender Differences on COVID-19 Related Anxiety Among Students. Pakistan J Psychol Res. 2021;36(1):71–83. doi: https://doi.org/10.33824/PJPR.2021.36.1.05

7. Febriyanti E and, Mellu A. Anxiety Levels of Nursing Students in Facing the Covid-19 Pandemic in Kupang City. Nurs Updat J Nursing Science P-ISSN 2085–5931 e-ISSN 2623–2871. 2020;11(3):1–6. https://stickesnhm.ejournal.id/NU/index
8. Sulastri, Fatonah S, Amperaningsih Y, Suarni L, Khoiriyah YN. Psychological treatment after the tsunami disaster.Pakistan J Med Heal Sci. 2020;14(2):1485–1490.
9. Ninla Elmawati Falabiba. Overview of Anxiety in Students Working on Thesis Amid the Covid-19 Pandemic 2019;VII:223–235.
10. Komang N, Yanti W. The Impact of the Covid-19 Pandemic on the Psychological Health of Students in the Learning Process. Heal Care Media. 2021;5(1):39-46.
11. Sumakul Y, Ruata SCN. Psychological well-being during the COVID-19 pandemic.JPsychol"Humanlight." 2020;1(1):1–7.
12. Irmayanti A, Trisnawati E, Saleh I, Study P, Community K, Health I. Factors related to anxiety about being infected with COVID-19 in health workers at the Pontianak City Health Center. Health Info. 2021; 10(1):34–42. doi: https://doi.org/10.30644/rik.v8i2.517
13. Goyena R. Journal of Nursing Science. J Chem Inf Model. 2019; 53(9):1689–1699.
14. Meilawati N, Kusuma U, Surakarta H, et al. STUDENT MIDWIFE'S ANXIETY IN FACING NEW HABITS ADAPTATION DURING THE COVID-19 DESEMY IN.2020;2.
15. Furwasyih D, Arifin Y, Femi N. Identification of Midwifery Students' Anxiety towards Online Learning during the COVID-19 Pandemic to the world throughout 2 until the time of society's order of life. The social pandemic of society, including adolescents. The lives of teenagers go hand in hand. Published online 2020:114–121.
16. Covid- KYM. The relationship between anxiety and quality of life in health workers dealing with COVID-19 1. 2020;3(2).
17. Cole CL, Waterman S, Stott J, Saunders R, Buckman JEJ, Pilling S. Adapting IAPT services to support frontline NHS staff during the Covid-19 pandemic : the Homerton Covid
18. Promkes-Kemenkes-RI. KMK No. HK.01.07-MENKES-328–2020 regarding Guidelines for Preventing and Controlling COVID-19 in Offices and Industry. Published online 2020. https://promkes.kemkes.go.id/kmk-no-hk0107-menkes-328-2020-about-panduanpentahanan-control-covid-19-di-perkantoran-dan-industri
19. IDI PB. Doctor protection standards in the Covid-19 era. Published online 2020. Psychological Support (HCPS) pathway. 2020;13:1–12. doi: https://doi.org/10.1017/S1754470X20000148
20. Wawan H. The role of PPNI in protecting nurses in the community during the covid 19 pandemic.Published online 2020