Difficulties Experienced by a Group of Nursing Students during Pandemic Process and Their Coping Strategies: A Qualitative Research

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ABSTRACT

Objective: This phenomenologic study aims to investigate the difficulties experienced by a group of nursing students during the pandemia process thoroughly and to explain coping strategies.

Methods: This research was carried out using the phenomenological method, which is one of the qualitative research methods, to examine the views of nursing students on their pandemic experiences and their coping strategies "Information Form" and "Questionnaire Form" were sent to the students online, and forms that were filled out completely and sent back were included in the content analysis.

Results: Participants mean age was 21.19±1.06. Of the participants, 77.00% were female, 34.4% stated that they live in a metropolis during the pandemia process, while 83.6% mentioned that they were with their family, 31.1% did not leave their homes unless it is necessary. As a result of data analysis, the main themes of difficulties/stressors, stress/anxiety increasing factors, and coping strategies were reached.

Conclusion: Student nurses experience more than one difficulty regarding the pandemia process; some students state that the pandemia process has changed their perception of their profession, and they mostly use positive methods to cope with these difficulties.

Keywords: Pandemic, difficulties, coping, nursing students.

1. INTRODUCTION

The Novel Coronavirus Disease, which was officially announced as the COVID-19 by WHO, has become a pandemic affecting all countries of the world (1). During pandemics, it is possible to experience the following responds: anxieties of individuals about their own health and the health of their relatives, fear of transmission, changes in sleeping pattern or diet, difficulty in attention and concentration, ingravescence of chronic diseases (if any), and increased alcohol or substance use. In a study carried out in China with healthy individuals in the 18-30 age group, 52.1% of participants stated that they felt terrified and anxious due to the COVID-19 outbreak (2). Wang et al. (2020) reported that being a female, being a student, having symptoms similar to COVID-19, negative health perception, high anxiety and depressed mood are risk factors for mental health (3).

Covid-19 pandemic is accompanied by mental symptoms and emotional problems that appear as fear, anxiety, panic, insecurity, and overstress. In the pandemic, "vulnerability" has replaced the perception of "robustness" in the collective consciousness of societies. A large part of the society,

particularly the elderly, those with chronic diseases and healthcare professionals, have had to face stressors that emphasize the weakness in the face of the pandemic, such as quarantine, social distancing, avoiding the virus, and strict hygiene procedures (4).

It is stated that being a healthcare worker during outbreaks creates high levels of biopsychosocial stress, even if not traumatic (4,5). The tools that healthcare workers expressed to be effective in coping with the difficulties that accompany the pandemic process are: using individual positive coping strategies, positive reframing, social support getting from colleagues and family, and positive feedback and support from authorities (6). Identifying the coping strategies of healthcare workers and candidates receiving health education, and making attempts that can improve them could be important in preparing for possible future calamities. Li and Peng (2020) determined that cognitive coping, emotional coping, and social support can significantly reduce anxiety in university students in coping with the anxiety associated with the Covid-19 pandemic; they also stated that social support is

the most effective coping strategy, and behavioral coping significantly predicts anxiety (7).

Coping strategies can be regarded as certain cognitive or behavioral respond towards stressors beyond individual capacities.[7] Individuals to use effective coping strategies in all stressful life events is a protective factor for mental health. In its most generally accepted classification, coping strategies can be defined as positive (functional) and negative (non-functional) coping, and positive strategies reduce the destructive effect of stress (8).

The first COVID-19 case in Turkey was confirmed on March 10, 2020. University students were asked to evacuate their dormitories, so they had to return to their families or friends' homes, and many of them could not even take their personal belongings, on the other hand, student dormitories have been used for quarantine purposes. During this period, face-to-face lectures were postponed for an indefinite time, clinical applications have been delayed indefinitely, and education and training activities have been carried out through online courses (by reducing the hours of many lessons). Besides, curfews have been imposed in many provinces of Turkey, especially in metropolitan areas, on weekends, travel restrictions have been imposed in provinces where the infection is spreading rapidly, and quarantine enforcement has been implemented at different times in many settlements.

This process can be perceived as more stressful considering the similar situations that nursing students may encounter after graduation. Due to the fact that they will work in contact with infected people for a long time in similar situations and because of the fears they might have, it was considered important to clarify the experiences and coping strategies regarding the pandemic. This rapid change will cause stress for nursing students. Although they do not work actively in this process, it is thought that nursing students may experience fears about similar situations they may encounter in their future professional lives. Since they are the occupational group that will work in contact with infected people for the longest time, determining their experiences regarding the pandemic and their strategies of coping with stress may provide evidence for their further attempts. Except for a study focusing on coping strategies of professional nurses and nursing students during the pandemic process (9) and a study on coping with anxiety (10), no qualitative study was found in the literature. Defining student nurses' personal experiences and perspectives and evaluating their coping strategies and their effectiveness can provide evidence to strengthen students in vocational training.

This study was planned to investigate the difficulties experienced by nursing students during the pandemic process thoroughly and to explain their coping styles. In this study, the following questions were sought:

- What are the difficulties experienced by nursing students during the pandemic process?
- What have nursing students done to cope with these difficulties?

2. METHODS

2.1. Research design and participants

This research was carried out using the phenomenological method, which is one of the qualitative research methods, to examine the views of nursing students on their pandemic experiences and their coping strategies. The main purpose of phenomenological research is, by departing from the experiences and feelings of individuals, to search for truth in narratives related to a particular phenomenon and to produce in-depth explanations for this phenomenon (11). The phenomena dealt with this method may appear in various forms such as events, experiences, perceptions, orientations, concepts and situations in the world we live in. Phenomenology provides a suitable research base for studies aiming to investigate the phenomena that are not completely unfamiliar to us, and which we do not fully understand (12).

At the state university where the research was conducted, the students of the faculty of health sciences nursing department take the "coping with stress" course, as an elective course (the student chooses the course if he/she wishes). While the first author of the article was conducting the coping with stress courses face-to-face for three weeks (two hours per week) before the pandemic, the author conducted this course online for eleven weeks (one hour per week) during the pandemic. For this reason, all students taking this course formed the population of the research (N=83). In the study, the sample size was not determined, the "Information Form and Questionnaire Form" prepared by the researchers was sent online to the group e-mail addresses of the students taking the course and the forms sent back constituted the sample of the research (N=61). Concepts of stress, stressor, coping and methods of coping with stress constituted the content of the course in question, after the pandemic started, a two-hour "Recommendations on protecting mental health in the pandemic" subject was added to the course content.

2.2. Data Collection Tools

In this study, the "document review method", one of the phenomenological techniques, was used. "Information Form" and "Questionnaire Form" were sent to the students online, and forms that were filled out completely and sent back were included in the content analysis. The data in the study were collected after the completion of students' final exams, and thus, it was aimed to prevent students from feeling obliged to participate in the study.

The information form consists of 10 multiple-choice items questioning the students' sociodemographic characteristics and daily life, such as age, gender, with whom and where

he/she lives, and where and with whom he/she is in the pandemic process.

The questionnaire form consists of 2 open-ended items that question the difficulties in the pandemic process and the ways to cope with them, and these questions are:

- What difficulties have you experienced during the pandemic process?

- How did you cope with the difficulties in this process?

2.3. Ethical Approval

Prior to the research, ethics committee approval was obtained from the Noninvasive Clinic Ethical Committee of the Faculty of Health Sciences at Marmara University (Decision no:47, dated:25.06.2020). After ethics committee approval, institution approval of the study was obtained from the Faculty of Health Sciences at Marmara University (Decision no:183271, dated: 06.07.2020).

2.4. Data Analysis

Data analysis in qualitative phenomenology research is aimed at revealing lives and senses. In the content analysis made for this purpose, there is an effort to conceptualize the data and reveal the themes that can define the phenomenon. The phenomenon is defined within the framework of concepts and themes, and is presented in a descriptive narrative by writing through direct quotations. Besides, the results obtained within the framework of emerging themes and patterns are explained and interpreted (13). In this study, the data analysis process was carried out with the six-step thematic analysis method proposed by Braun and Clarke: 1) Becoming familiar with the data; 2) Creating codes; 3) Find common themes; 4) Review of themes; 5) Defining and naming definitive themes; 6) Reporting (14).

In this study, the researcher applied the variation method in order to increase the validity and reliability (15), all forms from students were read over and over by both researchers independently, two researchers coded separately, and then researchers created themes by linking the codes together. In addition, to increase the validity of the results, the peer debriefing technique conveyed by Başkale was also used (16). Asking people with general knowledge of the research subject and specialized in qualitative research methods to examine the research in various dimensions is called peer debriefing.

Together with the student statements, the coding made in the research and the themes linked with these coding were sent to an experienced independent expert who previously conducted a qualitative research, and expert opinion was obtained. In addition, descriptive data obtained from the information forms were reported numerically.

3. RESULTS

Participants were at the age group of 19-24 and their mean age was 21.19±1.06. Of the participants, 77.00% were female, 34.4% stated that they live in a metropolis during the pandemia process, while 83.6% mentioned that they were with their family, 31.1% did not leave their homes unless it is necessary. 3.3% of the participants had received a diagnosis of Covid-19, while 41.9% stated that someone from their family or acquaintance was infected with Covid-19. 54.1% of the participants underlined that the "coping with stress" course they took for eleven weeks in this process was "very useful" (Table 1). The answers to the question of "What difficulties have you experienced during the pandemic process?" formed two main themes as "Difficulties/Stressors and Stress-Increasing Factors".

Table 1. Sociodemographic Characteristics of Students

Sociodemographic Characteristics		Min-max	Mean±SS
Age		19-24	21.19±1.06
		n	%
Gender	Male	14	23.0
	Female	47	77.0
Where you live during the pandemic process	Metropol	21	34.4
	Small city	24	39.3
	Town	11	18.0
	Village	5	8.2
People living together during the pandemic	Family	51	83.6
	Kin	5	8.2
	Friend	5	8.2
Frequency of leaving the house in a pandemic	Every day	2	3.3
	A few times a week	20	32.8
	Once a week	20	32.8
	Never	19	31.1
Her/his state of getting Kovid-19 infection	Yes	2	3.3
	No	59	96.7
The status of one of her/his family to be infected with Kovid-19 infection	Yes	25	41.9
	No	36	59.9
The usefulness of the stress coping lesson in dealing with negative emotions during the pandemic process	Not at all useful	—	-
	Partially useful	1	1.6
	Quite useful	27	44.3
	Very useful	33	54.1
Total		61	100

Sub-themes of "Difficulties/Stressors" main theme were as follows: Educational difficulties 49.18% (n=30), Emotional difficulties 45.90% (n=28), Fear of transmission/infection with Covid-19 49.18% (n=30), Uncertainty 39.44% (n=24), Being stuck at home/being in quarantine 26.22% (n=16), and Change in professional perception/anxiety 24.59% (n=15) (Table 2). Some statements about themes were presented below:

Table 2. *Theme and sub-themes*

Theme	Sub-themes	%
Difficulties/ Stressors	Educational difficulties	49.18
	Emotional difficulties	45.90
	Fear of transmission/infection with Covid-19	49.18
	Uncertainty	39.44
	Being stuck at home/being in quarantine	26.22
	Change in professional perception/anxiety	24.59
Stress/Anxiety Increasing Factors	Domestic Conflicts	27.86
	Social Media Posts	40.98
	Negative Interactions in a close relationship	32.18
Coping Strategies	*A-Positive Coping Strategies*	
	Physical strategies	45.90
	Hobbies	39.34
	Humor	32.78
	Stopping	24.59
	Organizing time	19.67
	Taking exact information	14.75
	Awareness exercises	14.75
	B-Negative Coping Strategies	13.11
	Overeating	18.03
	Increasing smoking/use of alcohol	

* Participants have multiple expressions of difficulties, factors that increase stress, and coping..

Educational Difficulties

"…When the course is given online and if there is an internet connection cut off or any other problem in the connection, then, I will not be able to get the efficiency I want from the exam; what if we fail the exams?" (K14)

"…I was thinking a lot about what will happen next. Since I could not bring my computer with me, I was unable to continue online lessons. On the other hand, I could not get a straight answer from my university for the next term…." (K11)

"Since I could not attend my internships, I will be unqualified in terms of practice. When I get assigned in the future to a department related to my internships that I was unable to attend, I will probably get in a quandary." (K44)

Emotional Difficulties

"…It's so hard to be apart from my beloved ones, to lose my independence, to feel like I'm losing control, to abide by enforced rules!" (K55)

"…The fear of losing! They say it's very hurtful, that is it is! I'm not talking about the fear of financial loss here. I am talking about the losses of family members…" (K26)

"…We have lost our close relatives. You feel sorry for them, you mourn, most importantly you want to be with them. But you're not able to do anything since you're tied hand and foot. You feel very helpless…" (K12)

Fear off Transmission/Infection with Covid-19

"…Everyone is likely to get this disease. The possibility of transmission is a challenge in itself. When that hour comes (the time when new cases are announced by the health minister), I feel intense fear while waiting for the new number of cases and deaths to be announced…" (K5)

"…The fear of "Will I be infected on the way?", or when I came home, "Have I been infected on the way?"; the fear of trying to stay away from mom and dad as possible…Fears seemed to dominate me…" (K8)

Uncertainty

"… 'When will we return to our old lives?' or 'Could we live a life like before?'; these questions run in my head. I give way to despair of the fact that 'We cannot get rid of this virus!'" (K3)

"…The virus that entered our lives suddenly and still uncertainty about how long we will live with this virus… nothing is known!" (K19)

Being Stuck at Home/Being in Quarantine

"…The house has become a stressor in itself after a while; staying at home continuously and compulsorily, not being able to leave the house easily whenever you want, these are very difficult situations to endure!" (K5)

"Being at home all the time, being unable to spend your energy, being unable to stay alone, the feeling of being in a place like a box all the time, these were both demoralizing me and constantly putting a damper on my desire to do something." (K25)

Change In Professional Perception/Anxiety

"Struggling with such a biological war in my student life has worried me about my future. I can't help thinking about my job. Do I want this job anymore?" (K32)

"…Finally, it was about my perspective on the nursing profession. Keep doing this job despite all the risks? If I hadn't learned the coping strategies we covered in class, I would probably think I was helpless and cry every day!" (K6)

"…Since I'm studying nursing, as if I knew the cure for all diseases, in even the smallest incident, people ask me why. This profession has already stressed me out…" (K16)

Another main theme formed by the statements of the nurse students participating in the study was "Stress/Anxiety Increasing Factors". Sub-themes under this main theme are as follows: Domestic Conflicts 27.86% (n=17); Social Media Posts 40.98% (n=25), and Negative Interactions in A Close Relationship 32.78% (n=20) (Table 2).

Domestic Conflicts

"When the whole family is all at home together, we are experiencing a lot of arguments at home. We were having trouble understanding my adolescent brother before, now we do not understand him at all, he has gotten ill-tempered." (K12)

"…We all have difficulties since we have to share the same environment for a long time. Even the presence of the coronavirus did not worry my mother as much as ours…" (K29)

Social Media Posts

"…Not only fake news, watching the minister of health talking every day, and following the table he presents, the increasing number of cases and deaths every day, especially at the beginning of the quarantine process…"(K19)

"The fact that the matter in question is always the same or the fact that everyone talks about this matter carelessly; seeing foolish behaviors of people on the internet, who could not understand the importance of the situation we are in, who endanger not only themselves but everyone…" (K28)

Negative Interactions in a Close Relationship;

"My father is the only employee in our house and the economic needs of everyone in our home are under my father's responsibility. My father also has many chronic illnesses but still has to go to work. My mother always cries when she finds out some things! It seems like we all make each other worse." (K39)

"The stressors of people with whom we are in the same environment inevitably affect us, too. It is quite difficult for me to resist this." (K61)

"…My boyfriend is a worrywart person. He has been experiencing fear and stress at the highest level since the first day of the pandemic. He hardly ever goes out on the street, he will drive us crazy too…" (K53)

The answers to the question of "How did you cope with the difficulties in this process?" were discussed under the main theme of "Coping Strategies", and these responses were grouped into positive and negative coping strategies. These sub-themes are as follows: Physical strategies (breathing exercises, regular diet and sleep, physical exercise, etc.) 45.90% (n=28), Hobbies 39.34% (n=24), Humor 32.78% (n=20), Stopping Negative Thinking 24.59% (n=15), Organizing time %19.67 (n=12), Taking exact information 14.75% (n=9) and Awareness exercises 14.75% (n=9).

In terms of breathing exercises among the physical strategies, three students (K5,17, 31) stated that "focusing on breathing causes anxiety as it reminds shortness of breath, which is one of the symptoms of Covid-19." The negative coping strategies, on the other hand, covers the following: Overeating 13.11% (n=8) and Increasing smoking/use of alcohol 18.03% (n=11) (Table 2).

Positive Coping Strategies

"…Actually, it is quite reasonable that the right breathing is effective in managing the intense stress we experience. When I used this method I was able to think calmly." (K21)

"Thanks to regular diet and sports, I began to return to my previous weight and this started to affect my mental health positively." (K11)

"I like to draw a caricature. I'm trying to get over this period, at least mentally, with little damage, by drawing funny cartoons and making jokes about many subjects." (K5)

"I always tried to be busy with something not to think about negative things. I was involved in acts such as painting, reading, singing, and cooking." (K60)

"It is our nation that ridicule the most coronavirus. So indeed it is, funny videos are everywhere. Watching these videos makes me happy. Those in my family also watch these videos and we all laugh together. Laughter really has a healing effect!" (K39)

"I already love humor, and good humor can make you forget everything these days."(K51)

"I pondered over awareness. We attended online education and this made me very comfortable in this regard." (K1)

"Stopping negative thinking was the most effective method. It made me think smarter and calmer." (K27)

"I chose the method of using the time well because the reason for my stress was my days to get monotonous and not knowing how to use my time. Therefore, I started my day by making a plan, abiding by my routine." (K16).

Negative Coping Strategies

"I always made dessert. It used to be like spending time, but gradually I started to feel that I relieve while eating dessert. I gained weight, quite a lot." (K60)

"Although I know it increases the risk of Covid-19, I light a cigarette after cigarette. Then I feel guilty, moreover, I am a nursing student." (K55)

4. DISCUSSION

The Covid-19 pandemic has deeply affected all humanity, both physically and spiritually, and it has shaken our perception of security. Each person felt restricted to different levels and has given his own behavior-specific reactions. In this study, the difficulties experienced by nursing students during the pandemic process and their coping strategies were discussed from their own perspectives, and the main themes of difficulties, stress/anxiety increasing factors, and coping were reached; meanwhile, one of the most striking results was the point of "Change in professional perception/ anxiety", which expresses the change in student nurses' professional perceptions.

It was thought that "change in professional perception/ anxiety", among the difficulties experienced by student nurses, may be related to the fact that healthcare professionals are occupational groups that are active in the pandemic and in a high-risk group. Healthcare professionals around the world have been exposed to physical and mental threats that vary to the extent of the prevalence of pandemic, moreover, there have been healthcare professionals who died due to the Covid-19 infection. In all of the outbreaks such as SARS, Ebola, MERS-CoV infections with fatal consequences that

were experienced recently and Covid-19 that we are still experiencing, it was the healthcare professionals who affected most and at risk of harm (3-5). Therefore, the concern stated by student nurses in this theme is quite understandable and this may indicate the necessity of studies in this field.

The theme of "educational difficulties" obtained from the statements of the participants is related to online education. Although online education has some advantages compared to face-to-face education, it has also led to a lifestyle change for university students. For the group who comes together in their classes during the day and who uses the social facilities of university campuses, going back to their families and missing out the activities they do with groups of friends may have increased the difficulty experienced. Similarly, Baloran (2020) reported that also Philippine students had difficulties with online education. States and universities should produce practical solutions in reducing students' educational difficulties (17).

Although epidemics cause a wide variety of emotional responses, the difficulties are not the same for everyone (9). In this study, students stated that they experienced "emotional difficulties" such as anxiety, fear, and sadness. In a study conducted with a sample of university students, 82.98% of the students stated that they were afraid of the pandemic (18). Similarly, Baloran (2020) reported that most of the students experienced anxiety (17). In a study addressing the psychological effects of a pandemic in the general population in China, it was reported that 16.5% of the participants had moderate and severe depression, 28.8% had moderate and severe anxiety, and 8.1% had moderate and severe stress symptoms, and that being a student was effective at higher levels of anxiety, depression, and stress (3). Another difficulty experienced by nursing students is the anxiety of transmission, the majority of the students stated that they did not leave the house either only once a week or at all. In a study conducted in Turkey with medical school students, students stated that they are afraid of being infected with the Covid-19 (19). Similar to these studies, Roy et al. (2020) and Wang et al. (2020) reported that individuals get anxious about themselves and their families during the ongoing pandemic (3,20).

"Uncertainty", another difficulty determined, can be explained by the rapid spread of the Covid-19 infection in a form not encountered before or by the fact that no vaccine or effective treatment has yet been found and by the lack of clear data on the course of the pandemic. As it is quoted from Tönbül (2020); the fact that the threat in the Covid-19 pandemic has been perceived uncertainly and continuously can cause the fear felt to become chronic; while the emotion felt by individuals at most was anxiety, the thought of what I would do if this disease is transmitted to me, my child or my parents was the most common thought (21). Emotions such as fear, unhappiness, despair, and helplessness that combined with uncertainty and disease anxiety cause intense difficulty (22). Considering these themes altogether, the necessity of

preventing mental influences as well as physical influences during the pandemic becomes prominent.

In the study, the theme of "being stuck at home/being in quarantine" was another difficulty. By his nature, the human is a social being, and youth is perhaps one of the periods when sociability becomes the most important. Socialization is one of the most important and integral parts of life for young people, therefore, the obligation to stay at home, which is compelling for everyone, can be even more challenging for teens. Polizzi et al. (2020) stated that "separation" is a necessity for all people to survive in the COVID-19 outbreak and that this is related not only to feeling lonely but also to being deprived of many activities for relaxation (going to parties, movies/theater, sports halls, etc.) (23). In the struggle with the difficulty stated in this theme, it is necessary to underline, via media, the fact that the distance experienced is "physical", not "social"; and that there is a need to promote the maintenance of social contact on online platforms as much as possible.

Another main theme formed by the statements of the nurse students participating in the study was the "stress/anxiety increasing factors", and sub-themes were: domestic conflicts, social media posts, and negative interactions in close relationships. The fact that university students had to stay at home with their families may have caused pushing the mental limits as well as the physical ones. Staying in the same house all the time may turn into a situation that pushes close relationships and triggers conflicts. On the other hand, emotions associated with stress and anxiety can be transmitted from individuals to each other in these relationships. In social media, unnecessarily following the pandemic-related posts with negative content may increase stress and anxiety. Bozkurt et al. (2020) reported that being exposed to the flow of unfounded information via social media posts and watching programs on the pandemic for long hours on the internet and televisions increase anxiety and panic (24).

The last main theme in this study is the "Coping Strategies", while its related two sub-themes were "positive" and "negative" coping strategies. The functional strategies used by nursing students were as follows: physical strategies (breathing exercises, regular diet and sleep, physical exercise, etc.), hobbies, humor, stopping negative thinking, organizing time, taking exact information, and awareness exercises. Another interesting result of the study was the fact that, in terms of breathing exercises among the physical strategies, three students mentioned that "focusing on breathing causes anxiety as it reminds shortness of breath, which is one of the symptoms of Covid-19." It may be thought that breathing exercises should be addressed in this pandemic and studies with large samples should be conducted on this subject.

Negative coping strategies used by students in this study were overeating and increasing smoking/use of alcohol. Almost all of the nursing students stated that coping with stress course they took was very useful in coping with negative emotions during the pandemic process. Zhi et al. (2020) found that

the information that student nurses received on epidemic prevention and treatment reduced their stress and this positively affected the perception of occupational identity (25). Li and Peng (2020) determined that cognitive coping, emotional coping, and social support were effective in coping with anxiety experienced by university students during the Covid-19 pandemic process and that social support is the strongest protective coping strategy and behavioral coping also predicts anxiety (7).

Perng et al. (2020) suggested that listening to music (75,2%) is the most popular among the various stress-reducing strategies, which was followed by talking to a friend (72,3%) and sleeping (%61,3) (26). Savitsky et al. (2020) stated that the use of humor was effective in reducing anxiety associated with the pandemic (10), while Huang et al. (2020) reported that for nursing students, only problem-focused coping strategies affect anxiety and fears and they suggested that nurses should receive better training in coping strategies (9).

Rajkumar et al. (2020) recommended psychological support programs and psychoeducation to cope with health-related anxiety during the pandemic period and they stated that these attempts can provide more accurate and realistic information by choosing positive strategies instead of negative ones (1). Polizzi et al. (2020) suggested using multiple-coping strategies (e.g. behavioral activation, acceptance-based coping, awareness practice, affectionate favor practices) to reduce stress and promote well-being, and they reported that these strategies would help individuals create meaning, develop tolerance, increase social support, develop an insight into deep human devotion, and carry out target-driven value-oriented actions in the midst of the COVID-19 pandemic (13). Considering that developing positive coping strategies is one of the protective factors in many mental disorders; it can be said that there is a need for studies on this subject in struggling with the pandemic.

4.1. Limitations

Our research was performed only in one nursing school. For this reason, it does not represent all nursing students. Due to the absence of students from different faculties in the sample of this study, especially from departments other than the health department, the study was limited to representing the experiences of young people who were not educated in health/disease/epidemic issues. Besides, since students in this study have taken the "coping with stress course", this may have an effect on their coping strategies.

5. CONCLUSION

Within the scope of this study, we can list the difficulties experienced by students as educational difficulties, emotional difficulties, fear of transmission/infection with Covid-19, uncertainty, being stuck at home/being in quarantine, change in professional perception/anxiety; while domestic conflicts, social media posts, and negative interactions in a close relationship, on the other hand, constitute stress/

anxiety increasing factors. Although the students mostly used more than one positive coping strategies, some of them stated that they also used negative coping strategies such as overeating and increasing smoking/use of alcohol. Departing from this information; when we consider that it will be the nursing students who will be front-line professionals in the fight against future social health problems, the development of positive coping strategies may be suggested. Besides, the young people's difficulties and coping strategies during the pandemic who were studying different departments other than health sciences and whether there is a change in the professional perceptions of students who receive education in health sciences during the pandemic process are recommended to be discussed in future studies.

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