

Nursing Students' Struggle with COVID-19 Positivity / Hemşirelik Öğrencilerinin COVID-19 Pozitifliği ile Savaşı

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Abstract

Aim: We aim to determine experiences of nursing students in COVID-19 positivity with this article. **Method:** The population of this phenomenological study consisted of nursing students (n=307). The sample consisted of students with COVID-19 positivity (n=35) who volunteered to participate in the research. The data were collected with the question form and interview form on social media. With the descriptive analysis technique, the themes were determined from the sentences of the participants and the framework of the research was determined. Data in the research is given under four thematic headings; I-Theme: Symptoms of COVID-19, II-Theme: Living COVID-19 Positivity, III-Theme: COVID-19 Quarantine of Nursing Students, IV-Theme: Limitations of Nursing Students in Daily Life Due to COVID-19. **Results:** In the research it was determined that nursing students experience severe symptoms of COVID-19 such as shortness of breath, headache, nausea and vomiting. Also, in COVID-19 positivity, it was determined that nursing students were spiritually worn out, spent most of their time on social media during the quarantine process, could not perform many daily life activities due to COVID-19.

Keywords: *Nursing Students, COVID-19 Positivity, Experiences*

Öz

Amaç: Bu makale ile hemşirelik öğrencilerinin COVID-19 pozitifliğindeki deneyimlerini belirlemeyi amaçladık. **Yöntem:** Bu fenomenolojik araştırmanın evreninin hemşirelik öğrencileri(n=307) oluşturdu. Örneklemi araştırmaya katılmaya gönüllü COVID-19 pozitifliği olan öğrenciler(n=35) oluşturdu. Veriler soru formu ve mülakat formu ile sosyal medyada toplandı. Tanımlayıcı analiz tekniği ile katılımcıların cümlelerinden temalar belirlendi ve araştırmanın şeması belirlendi. **Bulgular:** Araştırmadaki veriler dört başlık altında verildi; I-Tema: COVID-19'un Semptomları, II-Tema: COVID-19 Pozitifliğini Yaşamak, II- Tema: Hemşirelik Öğrencilerinin COVID-19 Karantinası, IV-Tema: COVID-19 Nedeniyle Hemşirelik Öğrencilerinin Günlük Yaşamındaki Sınırlılıklar. **Sonuç:** Araştırmada hemşirelik öğrencilerinin COVID-19'un nefes darlığı, baş ağrısı, bulantı ve kusma gibi şiddetli semptomlarını yaşadıkları belirlendi. Ayrıca COVID-19 pozitifliğinde hemşirelik öğrencilerinin ruhsal olarak yıprandığı, karantina sürecinde en çok sosyal medyada vakit geçirdiği, COVID-19 nedeniyle günlük yaşam aktivitelerinden pek çoğunu gerçekleştiremediği belirlendi.

Anahtar kelimeler: *Hemşirelik Öğrencileri, COVID-19 Pozitifliği, Deneyimler*



1. Introduction

Outbreaks that remind people of the reality of death can affect people's psychological health quite negatively. Factors such as the necessity of staying at home continuously to protect against the pandemic, a decrease in social relations, when the pandemic process will end or what the conditions that affect this process may not be known. In all these situations, it can cause anxiety and fear in people (Torales, O'Higgins, Castaldelli-Maia, Ventriglio, 2020).

Unfortunately, all the measures taken after this serious pandemic have been desperate and the death rates continue to increase. The data available to scientists about this virus is limited. In addition, a COVID-19 patient is thought to infect an average of 2.6 people. (Wu et al., 2020) It is stated that young people play a more role in the spread of COVID-19, which is effective not only in the elderly population but also in all age groups. Although it is thought that young people overcome this disease slightly, new data do not confirm this situation. In fact, the views of some experts are that in the future, young people will be more severely affected by COVID-19 (Qui et al., 2020; Tian et al., 2020, Yavaş Çelik, 2020). In addition, the opinion that young people experience COVID-19 without symptoms or overcome it mildly, unfortunately, caused this age group to be underestimated and no evaluated. However, nowadays, COVID-19 positivity has started to be seen frequently in young people, and it has been reported by the cases interviewed that they experience severe symptoms. Also, severe clinical outcomes have been reported in CYP due to COVID-19 and to PIMS-TS or multi-system inflammatory syndrome in children (MIS-C), including a small number of deaths(Feldstein, 2020; McCormick et al., 2021; Bhopal et al., 2021). In a study conducted in 25 different regions in the USA, young people under the age of 21 who were hospitalized with COVID-19 positivity were investigated. The average age of the youth was determined as 17. In addition, the data in the same study were as follows; Most deaths were male (71, 63%), 31 (28%) were Black (non-Hispanic), and 52 (46%) were Hispanic. Ninety-six decedents (86%) had at least 1 underlying disease; obesity (42%), asthma (29%), and developmental disorders (22%) were most commonly documented. Among the 69 hospitalized deceased, common complications included mechanical ventilation (75%) and acute respiratory failure (82%). Sixteen (14%) decedents who met criteria for multisystem inflammatory syndrome (MIS-C) in children were similar to those without MIS-C in terms of age, sex, and race and/or ethnicity; 11 out of 16 (69%) had at least 1 underlying disease(McCormick et al., 2021). According to these results, it can be said that the health of young people and children is seriously endangered in COVID-19 positivity. For this reason, it is important to investigate the signs and symptoms of COVID-19 on young people and to express the problems they may experience spiritually.

As a result of these observations, I believe that this issue should be investigated, and it will be useful to emphasize that revealing the COVID-19 experiences in young people should be more important in the evaluation of young people. Therefore, in this research, we aim to determine the experiences of nursing students in COVID-19 positivity with this article.

Questions of research

1-How are the symptoms of COVID-19 seen in nursing students?

2-What are the experiences of nursing students with COVID-19 positivity?



2. Design and Method

2.1. Population and Sample of Research

The population of the research consists of nursing department students (n=307) of a university. No sample selection was made and all students (n=38) who were positive for COVID-19 were included in the study. The research was completed with a total of 35 students, 3 students who did not volunteer to participate in the research.

Inclusion criteria

1. Experiencing COVID-19 positivity
2. To be able to use social media and to have a device that can use social media
3. Not having any health problems that may prevent them from communicating

Exclusion criteria from the study

1. Having a serious health problem (being in the intensive care unit, having severe breathing difficulties, etc.) that would affect the participant's ability to communicate at the time of the research
2. Recent death of a relative or friend (mother, sibling, father, lover, spouse, etc.)
3. Not willing to participate in the research

2.2. Data Collection Tools

Question form: In the question form, there are questions such as symptoms of COVID-19, age, employment status, compliance with mask use, compliance with social distance, COVID-19 positivity in family members other than her/him, person/object infected with COVID-19, Chronic disease status, Hospitalization with COVID-19.

Semi-structured question form:

1. What kind of symptoms did you experience?
2. How did you feel when you found out you were positive for COVID-19?
3. How was your COVID-19 quarantine process?
4. How has COVID-19 positivity affected your activities of daily life?

2.3. Application of Research

Students with COVID-19 were reached by using social media with student groups, and students in these groups were informed about the research, and then the group link was shared so that volunteers who wanted to participate in the research could join the research group. Participants invited to the research with this link were included in the research group. The study was completed with 35 participants, 3 students did not accept the research invitation. Comprehensive information was given to the students included in the research group (questions included in the research, the purpose of the research, participation in the



research is on a voluntary basis..). Appointments were arranged according to the availability of the students and the interviews were held as images on social media. Thus, the students answered the interview questions when they felt comfortable and appropriate. During the interviews, the researcher also took some notes to be used in the research and observed the situations of the participants. When it was seen that some participants had difficulties in speaking during the interview, the interview was postponed to a later date. The interviews were completed when the participant felt well. On average, approximately two interviews were conducted with the participants. In the first interview, the demographic information of the participant was taken, the health status was discussed and observations were made, and the date on which the interview questions would be discussed was determined. In the second interviews, the interview questions were answered by chatting and the status of the participants was observed.

2.4. Analysis of the Research

Semi-structured interview technique was used to obtain qualitative data, and "content analysis" method was used for data analysis. But, as much as possible, the statements of the participants were adhered to. In the analysis process, first of all, the interview records and written forms were deciphered by the researcher and analyzed by writing them separately. Then, the data were analyzed in four stages: 1. Coding the data, 2. Identifying the themes of the coded data, 3. Arranging the codes and themes, 4. Defining and interpreting the findings. The researcher determined the themes independently from each other, and then had these themes examined by three experts in the field of qualitative study. The themes determined by the three experts and the sentences to be used in the research were evaluated by the researcher in terms of consistency. Then, the researcher determined the common themes that the experts agreed on and used these titles in the research. In addition, participant consent and peer inquiry technique were used for reliability and credibility, and the sentences used in the research were presented to the participants for their approval.

2.5. Ethical Procedure of Research

Ethics committee approval of Research was obtained from the ethics committee of Kilis 7 Aralık University(Date: 13.01.2021. Ethic number: 2021/02). All participants in the research were informed about the research and were included in the research according to their own wishes. In addition, the research was carried out in accordance with the Helsinki Declaration principles.

3. Results

3.1. Socio-Demographic Data

It was determined that the most of the nursing students (62.8%) were between the ages of 21-24, (77.2%) did not work, stated that they adapted to the use of masks (94.3%) and to social distance (54.3%). It was determined that the rate of COVID-19 positivity in family members of nursing students was 65.7%, COVID-19 transmission to nursing students was mostly (47.1%) from families, the most of nursing students did not have a chronic additional disease (100%) and had the COVID-19 process at home (85.7%)(Table 1).



Table 1. Nursing Students' demographic and COVID-19 information(n=35)

Age	n	%
18-20 age	13	37.2
21-24 age	22	62.8
Working status		
Only Student	27	77.2
I started working when schools were on holiday in the pandemic	8	22.8
Compliance with mask use		
I use it regularly	33	94.3
Sometimes I don't mind	2	5.7
Compliance with social distance		
I use it regularly	19	54.3
I don't fit at all	16	45.7
COVID-19 positivity in family members other than you		
Yes	23	65.7
No	12	34.3
COVID-19 transmission person/object		
Family (mother, father, sibling)	16	47.1
Others (relative, neighbor, friend, deliveryman, tourist, at funeral)	19	52.9
Chronic illness status		
No	35	100
Yes	0	0
Hospitalization due to COVID-19		
Yes	5	14.3
No	30	85.7

3.2. Themes

Data in the research is given under five thematic headings; I-Theme: Symptoms of COVID-19, II-Theme: Living COVID-19 Positivity, III-Theme: COVID-19 Quarantine of Nursing Students, IV-Theme: Limitations of Nursing Students in Daily Life Due to COVID-19.

I-Theme: COVID-19 symptoms on nursing students

You can look at table 2 for detailed symptoms of nursing students (Table 2). The comments of nursing students about their symptoms are as follows;

“Neck pain, cough, loss of smell and taste, severe headache, diarrhea, nausea, vomiting” (Participant 6).

“Headache, dry cough, weakness, fatigue, sore throat, wheezing, feeling of drowning at night, breathing difficulties and shortness of breath” (Participant 7).

*“Headache, nausea, tiredness, weakness, postnasal drip, nausea, weakness, muscle pain, redness and burning in the eyes, a constant low back pain” (Participant 11).
“Headache, loss of smell and taste, sore throat, joint pain, coldness in hands and feet, pain in eyes, severe pain with eye movements, dizziness, nausea, nasal congestion” (Participant 24)*

“Headache, nausea, vomiting, dizziness, high fever, dry cough, weakness, pain in muscles and joints, pain in my eyelids, muscles, loss of taste and smell, diarrhea” (Participant 29).



Table 2. COVID-19 symptoms of nursing students people(n=35)

* Symptoms	n	%
Fever	8	22.8
Nausea-Vomiting	9	25.7
Shortness of breath - trouble breathing	6	17.1
Joint and muscle pain	16	45.7
2Redness-pain in the eyes	3	8.5
Headache	22	62.8
Loss of smell and taste	23	65.7
Dizziness	1	2.8
Cough	11	31.4
Throat ache	7	20.0
Neck pain	2	5.7
Backache	3	8.5
Diarrhea	6	17.1
Wheezing	2	5.7
Weakness-fatigue	23	65.7
Postnasal drip	2	5.7
Excessive sweating	1	2.8
Cold hands and feet	1	2.8

* Multiple answers given.

II-Theme: Living the COVID-19 Positivity

The statements of the nursing students about the emotions they experience are below;

"A silly smile appeared on my face, I was surprised at what to do, first I smiled, then I cried, scared, worried, I experienced very mixed feelings "(Participant 4).

"First of all, my family came to my mind, I was worried that they were infected with COVID-19, then I was afraid, worried, sad, desperate, in case I had a severe disease and died" (Participant 6).

"When I saw my test result, I was very surprised, I never expected it. Because I followed all the rules, I did not go out very much, I was wearing a mask when I went out. "(Participant 8)

"When the members of my family were positive for COVID-19, it was inevitable for me to be too. Actually, I couldn't pay attention to social distance, everyone in the house was COVID-19 and I was looking after them. We were in contact with him while he was giving food and washing his clothes. Finally I got it "(Participant 14).

"My grandmother came to visit us, my grandmother had some symptoms like the flu at first, so we didn't care much, but then her symptoms got worse and my grandmother got worse, I became COVID-19 while I was caring for her, my uncles and all my relatives who came to see my grandmother with me became COVID-19. My grandmother died, I had COVID-19 very heavily, I could not breathe, I was suffocating, I could not sleep at night"(Participant 16).

"When I saw that my test result was positive, I felt very bad, I thought I would die, I never felt so helpless" (Participant 22).



"When I saw the test result, I couldn't speak as if I had a knot in my throat, and I couldn't make a sound. COVID-19, which I thought was far away from me, was inside me now. Then I started thinking about my mother. Because my mother was diabetic. I was very scared if I had infected her too, and I was very worried that she will be COVID-19 positive "(Participant 24).

"When I saw my test result, I was not afraid at first, I did not think that COVID-19 would affect me much because I was young. However, when I was hospitalized and my symptoms gradually increased, I began to think that I would die and never be able to reunite with my home and family "(Participant 31).

III-Theme: COVID-19 quarantine of nursing students

Sub-Thema 1: Spending time in COVID-19 quarantine

The statements of the nursing students are below;

"I spent the quarantine process using social media, reading books, studying and sleeping. I was sleeping mostly, I could not do anything other than weakness "(Participant 5).

*"I had a very bad time since I was in the hospital, I had severe pain and was suffocating from shortness of breath, even when talking to my family on the phone, I had a cough, could not breathe from coughing, and could not talk" (Participant 9).
"During this period, my use of social media increased a lot, I could not drop my phone, I was constantly playing games or meeting with friends. When I was feeling good, I was searching for foods that strengthen immunity and eating vegetables and fruits I found. I was cooking from time to time, linger in the kitchen relaxed me"(Participant 15).*

"I prayed a lot during this period. I read the Quran al-karim. Fortunately, I wished to regain my health "(Participant 16).

"I had exams, I prepared for them, I tried to study. Headache and weakness negatively affected my study. I watched movies, slept... .. "(Participant 20).

"We had phone calls with my beloved, she never left me alone, she listened patiently every day" (Participant 29).

Sub-Theme 2: Loneliness in quarantine and what it feels

The statements of the nursing students are as follows;

"Helplessness, fear of being separated from my family, anxiety of not being healthy as before, pessimism, sadness" (Participant 3).

"I kept thinking about not being able to do what I normally do, loss of self-esteem, fear of dying alone, death. I could not sleep at night because of the fear of death (Participant 5).



"You feel a very heavy pressure. Facing the fear of death, I think, was the hardest to deal with. I fought a lot with the questions of when will the moment come in my mind, when will I die. It was really difficult to keep my psychology healthy "(Participant 8). "I was going to be crazy, everyone was running away from me, they were afraid, they were not even approaching. It was as if they were throwing away the meal at meal time. It was very difficult to think about who died every day and when will I die. During this time, I thought about all the mistakes I made in life, I regretted it, I thought about the loved ones I hurt "(Participant 16)

"It was terrifying to feel how close I was to unhappiness, death and being alone. I never thought I'd need anyone this much. At that moment, one wants to feel the support of someone so much "(Participant 22)".

"I felt like a helpless, lonely, outcast and guilty person. It felt like I was a criminal when the cops came to check on us every day like criminals. I wish I was a little more careful and not COVID-19. I do not know what damage it will cause me in the future. I thought about this in quarantine, this uncertain situation really scares (Participant 24)"

I was living alone anyway, so it was okay, but it was a challenge for my psychology, the fear of not being able to recover was the worst thought "(Participant 35).

IV-Theme: Limitations of nursing students in daily life due to COVID-19

The striking results of the youth are as follows;

"I was so short of breath that I didn't even want to move. I was sweating a lot as I moved. I also had a very severe headache. That's why I took a break from my education, I could not attend my classes, I couldn't do my homework "(Participant 5)
"Shortness of breath was limiting my daily activities, and I was also extremely tired, had difficulty focusing, could not attend my classes, could not do my homework"(Participant 6).

"My movements were very restricted, I was constantly tired, friends were looking for relatives, I couldn't speak. I always wanted to sleep, I was very tired "(Participant 9). "I could not enjoy the food I ate because I could not smell or taste. At that time, believe me, whatever you gave, I could eat all of them that were bad, stinky Because I could not detect any smell or taste. That's why there was a lack of appetite "(Participant 15).

4. Discussions

Data in the research is given under five thematic headings; I-Theme: Symptoms of COVID-19, II-Theme: Living COVID-19 Positivity, III-Theme: COVID-19 Quarantine of Nursing Students, IV-Theme: Limitations of Nursing Students in Daily Life Due to COVID-19

I-Theme: COVID symptoms on nursing students

It has been stated that during the pandemic process, young people had mild COVID-19 and did not even show symptoms (Snape & Viner, 2020; Felsenstein & Hedrich., 2020). In studies conducted, symptoms caused by COVID-19 positivity were detected as low-



moderate fever or fever, while rhinitis, cough, fatigue, headache, diarrhea and severe shortness of breath, cyanosis and anorexia (Chen et al., 2020; Castagnoli et al., 2020; Felsenstein & Hedrich., 2020) However, COVID-19 symptoms in young people are not as insignificant as one might think. This study also showed that these young people who did not have an additional chronic disease showed quite severe symptoms.

II-Theme: Living the COVID-19 positivity

It is not desired to increase psychological health problems during this pandemic process, but this is a possible situation. Although intensive studies have been carried out to investigate the pathophysiology, clinical results and treatment of COVID-19, the lack of a clear solution yet, the fact that it is a deadly virus, causing health anxiety, causes individuals to worry and fear (Ho et al., 2020). Studies have shown that during the pandemic period, students experience intense anxiety and health anxiety during the pandemic process, individuals have stress symptoms at a rate of 7%, and individuals are psychologically affected by this process (Birimoglu & Karasu, 2020; Liu et al., 2020; Yavaş Çelik, 2020) . In addition, in studies conducted with the COVID-19 outbreak, young people have been shown among individuals who may be exposed to more negative consequences. At the same time, it was reported in these studies that young people should be examined more in the COVID-19 pandemic and the importance of observing negative symptoms on young people in the future (Qui et al., 2020; Tian et al., 2020, Yavaş Çelik, 2020). When it comes to a life-threatening disease, it is quite common for individuals to experience feelings of anxiety, fear and sadness. In this study, too, when nursing students experienced COVID-19 positivity, they experienced quite complex, intense worries, sadness, and fears.

III-Theme: COVID-19 quarantine of nursing students

Sub-Theme 1: Spending time in COVID-19 quarantine

Young People spent quarantine activities that did not require movement, as they were often tired and sluggish. T.V monitoring, phone calls, computer games... .etc. However, this may have supported the social media addiction of young people. It is also known that there is an increase in the use of social media by young people during the pandemic period (Onat, 2020). Studies have also determined that during the pandemic period, the use of social media among young people increased and the time spent on screen increased (Eyimaya & Irmak; 2021; King et al.,2020; Göker & Turan, 2020). The statements of the participants in this study also support these situations.

Sub-Theme 2: Loneliness in quarantine and what it feels

During the pandemic period, many psychological negative symptoms occurred in individuals. Illness and death anxiety trigger these symptoms. Paranoid personality disorder and obsessive-compulsive disorders have emerged in individuals. In addition, anxiety, stress, and disorders have also appeared in healthy individuals. (Etxebarria et al., 2020; Shigemura et al., 2020; Ho et al., 2020; Xiong et al., 2020). It has been reported that mental health is negatively affected in pandemics (Xiang et al., 2020). In addition, a study found that anxiety and fear in individuals are at high levels in the COVID-19 pandemic (Doğan & Düzal, 2020). Loneliness in quarantine has caused nursing students to fear death and not



being able to recover again. Most of the youth stated that they experienced psychological problems.

IV-Theme: Limitations of nursing students in daily life due to COVID-19

Youngs people mostly stated that they could not even perform their daily activities and study. COVID-19 has restricted the use of many applications of young people in their daily lives. Unfortunately, the symptoms of COVID-19, which are very severe in adult individuals, now affect young people. In the study, nursing students talk about extreme headache, nausea and vomiting, and shortness of breath (Table 2). These symptoms are known to cause situations that hinder people's daily life activities (Spector & Fleishman, 1998; Martinez et al., 2020). In addition, the education and training activities of nursing students were also highly affected during this period.

5. Conclusion

In the research it was determined that young people experience severe symptoms of COVID-19 such as shortness of breath, headache, nausea and vomiting, In COVID-19 positivity, nursing students were spiritually worn out, spent most of their time on social media during the quarantine process, It was also determined that they could not perform many daily life activities due to COVID-19. In this study, it has been shown that young people can experience COVID-19 positivity and symptoms at least as severe as elderly(Table 2). In addition, this study revealed many negative effects of young people's COVID-19 positivity on the mood of them. The results of this study are also informative in terms of the psychological risks that young people will experience in COVID-19 positivity and afterwards. Unfortunately, in the pandemic; Young people are faced with many psychological threats such as depression, social isolation, internet addiction, alexithymia, inadequate self-awareness, and loss of self-efficacy.

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