



DESCRIPTION OF NURSING INTERNSHIP STUDENT'S ANXIETY DURING THE PANDEMIC ERA

Amellia Mardhika¹, Selvyana Dewi Anggraeni², Anestasia Pangestu Mei Tyas^{1*}, Lailatul Fadliyah¹, Emuliana Sulpat¹

¹Faculty of Vocational Studies, Universitas Airlangga, Surabaya, Indonesia

²Universitas Airlangga Hospital Surabaya, Surabaya, Indonesia

Research Report

ABSTRACT

Introduction: COVID-19 changed students' educational activities, especially during internships taking into account the condition of the number exposed to COVID-19. A preliminary study conducted on 11 students showed that they all felt anxious about undertaking an internship during the pandemic. This can negatively impact quality of life, learning, academic performance, and clinical practice performance. The aim of this study is to find out the description of students' anxiety during internships. **Methods:** This research is a quantitative observational study with a descriptive research design—a sample of 148 students with a purposive sampling method. The variable in this study was detained students who were undergoing internships during the start of the COVID-19 pandemic. The instrument used in this study was the Hamilton Anxiety Rating for Scale (HAM-A), which had been tested for validity and reliability to see the level of student anxiety during the internship. The results of the questionnaire were then analyzed through descriptive/univariate analysis. **Results:** Almost all respondents had a mild anxiety level, 120 respondents (81.08%). **Conclusions:** A suitable coping mechanism for students during internships, is a strategy to deal with anxiety. Clarifying information, consistently implementing health protocols correctly, maintaining health by exercising regularly, eating healthy food, and communicating well with family and friends must still be carried out by students so that the support system remains stable.

ARTICLE INFO

Received August 24, 2023

Accepted Oktober 20, 2023

Online Oktober 31, 2023

*Correspondence:

Anestasia Pangestu Mei Tyas

*Email:

anestasia.pangestu@vokasi.unair.ac.id

Keywords:

Covid-19, Anxiety, Nursing Student, Internship

INTRODUCTION

The Covid-19 pandemic is one of the biggest public health problems in the world. Uncertainty, worry about health and disruption of daily activities increase general anxiety during the COVID-19 pandemic (Santomauro et al., 2021). The rapid transmission of the virus has caused anxiety in the community, including among nursing students undergoing internships. In addition, the pressure on the health service system as the frontline in handling COVID-19 creates a separate burden for students experiencing training (Andruszkiewicz et al., 2023).

From 2010 to 2019, the number of people living with anxiety disorders increased by 11.2%, adding around 30 million new cases worldwide (Yang et al., 2021). In the first year of the COVID-19 pandemic, there was an increase in the prevalence of anxiety and depression by 25% worldwide (World Health Organization, 2022). The level of anxiety in Indonesia was relatively high,

namely as much as 55%, during the beginning of the COVID-19 pandemic (end of May 2020) (Aliefia et al, 2022).

A preliminary study through an interview process was conducted by researchers on 11 nursing students who had undergone internships during the pandemic and found that all students felt anxiety. The anxiety experienced by nursing students varies; some are worried about being exposed to and infected with COVID-19, and others are worried because they are not confident in their competence or knowledge due to the online lecture process due to policies during the pandemic. Recent research has shown that fear of infection, quarantine, restrictions and lockdowns, social isolation, and stigmatization can lead to stress, depression and anxiety (Ayubi et al., 2023).

Anxiety that occurs in general due to changes during a pandemic is experienced by nursing students undergoing internships. The anxiety of nursing students undergoing training



will be higher when compared to the anxiety experienced by other students. Apart from standard risk factors such as isolation, nursing students who are undergoing internships have many fears such as fear of educational obstacles being undertaken, switching to using social media and streaming platforms as learning media or when supervising with lecturers, heavy academic workload, working in a clinical environment, and exposure to Covid-19 patients, and changes in the learning process to online classes during clinical rotations (Ayubi et al., 2023). Another worry is caused by social isolation and inadequate protective equipment (Fortuna et al., 2023). Anxiety that arises when students undergo clinical nursing practice will impact student performance, which is not optimal when the practice is carried out. The anxiety experienced by nursing students during internships can have a negative impact on quality of life, learning, academic performance, and clinical practice performance (Masha'al et al., 2022). The anxiety experienced by students causes feelings of fatigue, lack of enthusiasm and reluctance to take part in internship activities so that the learning obtained cannot run optimally. Negative coping mechanisms cause students to focus more on their feelings of anxiety compared to their duties as students. Student anxiety is an important factor in their learning mechanisms. Anxiety related to COVID-19 can lead to many negative mental consequences, including substance abuse, hopelessness, and suicidal ideation (Kim & Park, 2021). Anxiety also impacts psychological well-being, the ability to provide patient care, and future career advancement (El-Desoky et al., 2023). Therefore, it is necessary to research the description of nursing students' anxiety during their internship.

MATERIALS AND METHODS

This research is a quantitative observational study with a descriptive research design. The population in this study were D-III Nursing students at the Faculty of Vocational Studies Universitas Airlangga who underwent internships carrying out nursing clinical practice in the even semester of 2021/2022. This research was conducted from January to March 2022. The sample size of this study was calculated using the proportion study formula (one group) so that 148 students were obtained as respondents. The sampling of this study used a purposive sampling technique. The inclusion criteria for this research were D-III Nursing students from Universitas Airlangga in semester four and semester six who had carried out nursing clinical practice during the

COVID-19 pandemic. Willing to become a respondent by signing informed consent. The exclusion criteria for this research were students who withdrew during the study and took leave during the investigation. Respondents' participation in this research was not coerced but was voluntary. Therefore, respondents have the right to decide to stop participating at any time without causing detrimental consequences to the respondent. The instrument used in this study was the Hamilton Anxiety Rating for Scale (HAM-A), which had been tested for validity and reliability. Validity tests were carried out on 30 D-III Nursing students at Universitas Airlangga who had experienced Nursing Clinical Practice during the COVID-19 pandemic and were not included in the research respondents. Researchers tested the HAM-A instrument with 14 question items. The r product moment value for a sample of 30 people with a significance level of 5% = 0.361. The validity test results show that the calculated r-value > r table (calculated $r = 0.420 - 0.825$) is declared valid. The reliability test shows a Cronbach's Alpha value of 0.858, which means that all items on the HAM-A Questionnaire are reliable or consistent and can be used as a research instrument. The questionnaire consisted of 14 statements, which included symptoms of anxiety, tension, fear, sleep disturbances, intellectual or intellectual disorders, depressive signs, somatic (muscle) symptoms, somatic (sensory) symptoms, cardiovascular, respiratory, gastrointestinal, genitourinary, autonomic physical symptoms, behavior during the interview. The variable in this study is a nursing student who underwent an internship during the start of the COVID-19 pandemic. Data collection through questionnaires was distributed via Google Forms to potential respondents. On the initial Google Form display page, an explanation regarding the aims and objectives of the research will be attached, and a request for informed consent will be attached. Each question is given a required mark (*) so that the respondent fills in all the data without leaving any blanks. Respondents will be directed to fill out the questionnaire after understanding and agreeing to the aims and objectives. The results of the questionnaire were then analyzed through descriptive/univariate analysis. This research was declared to have passed an ethical review and received an Ethical Approval certificate with No. 057/ UN25.1.14/ KEPK/ 2022 issued by the Health Research Ethics Committee of the Faculty of Nursing, University of Jember. Before collecting respondent data, the researcher obtained informed consent. The researcher thoroughly explained the respondents' objectives, procedures and rights.

RESULTS

Table 1. Characteristics of respondents n=148)

No	Characteristics	Frequency	Percentage (%)	Median	Minimum	Maximum
1.	Gender					
	1. Man	23	15,54	-	-	-
	2. Woman	125	84,46	-	-	-
2.	Semester					
	1. 4	31	20,94	-	-	-
	2. 6	117	79,06	-	-	-
3.	Residence					
	1. Separated from parents/boarding house	89	60,13	-	-	-
	2. Lives with parents	59	39,87	-	-	-
4.	Age	-	-	20	18	22
	Total	148	100			

Table 1 shows that almost all respondents were female, 125 respondents (84.46%), with a minimum age range of 18 years and a maximum of 22 years. The data shows that most respondents are in semester 6, namely 117 respondents (79.06%). Most of the respondents live separately from their parents/boarders while doing clinical nursing practice, namely 89 respondents (60.13%).

Table 2. Sources of Anxiety in Nursing Students Undergoing Internships during the Covid-19 Pandemic in 2022.

No.	Source of Anxiety	Frequency	Percentage (%)
1.	Fear of Infecting COVID-19	53	35,81
2.	Not confident with the nursing skills they have	78	52,71
3.	Incomplete PPE	10	6,76
4.	Far from parents	3	2,03
5.	Huge expenses	2	1,35
6.	Friendly environment	1	0,67
7.	Lots of tasks	1	0,67
	Total	148	100

Table 2 shows the sources of respondents' anxiety when carrying out nursing clinical practice. Most were due to a lack of confidence in their nursing skills, namely, 78 respondents (52.71%), and a small number felt anxious because of the many tasks of 1 respondent (0.67%).

Table 3. Distribution of Wilcoxon Test Results in Piper Betle Decoction and Curcuma Longa Decoction Before and After Intervention

Category	Young Women with Piper Betle Stew		Teenage girl with Curcuma Longa Stew	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Light	15	75%	16	80%
Currently	5	25%	4	20%
Total	20	100%	20	100%
Wilcoxon Test Results	$\rho < 0.001$		$\rho = 0.001$	
Mann Whitney Test	$\rho = 0.26$			

Table 3 shows that almost all respondents were at a mild level of anxiety, as many as 120 respondents (81.08%).

DISCUSSION

Anxiety is an emotional condition with a feeling of discomfort in a person. It is a vague experience accompanied by feelings of helplessness and uncertainty caused by something (Annisa & Ildil, 2016). Individual adaptation will play a role in preventing excess stress and anxiety, which determines how

individuals will face challenges or pressure (Fauziyyah, R., Awinda., 2022). D-III Nursing students who have to practice nursing clinical practice when the COVID-19 transmission rate is fluctuating can experience anxiety because of uncertain environmental conditions, and students must adapt to this condition. They are still determining whether tomorrow there will be an

increase in the transmission rate of Covid-19 or vice versa. Students are trying to comply with existing health protocols to prevent each other from transmitting Covid-19.

Mild anxiety that occurs in students is in line with research (Fathia et al., 2021). Regarding anxiety levels and coping mechanisms in nursing students during the Covid-19 pandemic in Banda Aceh and research (Hasanah et al., 2020). in Lampung which shows that almost half of the students are in the mild anxiety category. Mild anxiety experienced by students can be due to entering the fourth year of the pandemic. The level of anxiety experienced by a person will differ depending on the influencing factors and the individual's response, namely internal factors (age, gender, education, stressors and environment) and external factors (threats to the integrity of physical or physiological disabilities as well as self-system threats which include threats to self-identity, self-esteem, changes in role status, group pressure and socio-culture) (Stuart, 2013).

Gender students are almost entirely female, with an age range of 18-20 years. Previous studies show that depression and anxiety are twice as common in young women than men (aged 14-25), but this ratio decreases with age (Albert, 2015). Women report more significant symptoms of panic and exhibit a tremendous potential for shock in anticipation of predictable and unpredictable threats (Burani & Nelson, 2020). Previous research explained that female neuroimaging, compared to men, showed greater activation in the amygdala, cingulate cortex, and orbitofrontal cortex during negative emotional states (Stevens & Hamann, 2012).

The students in the study consisted of students in semesters 4 and 6, with most students in semester 6. Previous research revealed that the anxiety level of third-year students was higher than that of first and second years. At this level, the respondent is considered to have a high level of knowledge. The higher a person's education level, the easier it is to capture new information and reason (Yunere & Yaslina, 2020). Even though students have sufficient knowledge about COVID-19, they are also psychologically depressed due to previous knowledge and experience, so anxiety can still be felt (Saravanan et al., 2020).

The number of respondents who live in boarding houses or are separated from their parents is more than those who live with their parents. Respondents who live separately from their parents or in boarding houses have higher psychological pressure. This psychological pressure is caused by the loneliness and difficulties felt by respondents during the pandemic; the fears

of being away from their parents are often felt during a pandemic. Loneliness occurs during a pandemic due to lockdowns, social isolation, physical distancing, and other policies that reduce interactions outside the residence. Anxiety and loneliness show that anxiety symptoms relate to loneliness in the depressive symptom domain (Keller et al., 2023). Apart from living separately from parents, obstacles in social life and friendships are also causes of anxiety expressed by respondents. This lack or absence of social support is often accompanied by uncertainty and anxiety. Research shows that the probability of anxiety symptoms of students with low social support is 1.4 times higher than students with high social support (Liu et al., 2022).

Anxiety arises from not being confident with nursing skills, especially regarding COVID-19 and many lecture assignments during the pandemic; the previous lecture process was online for a long time. Alternative learning that should be carried out on patients is changed to simulation by asking friends or family members to act as patients with the aim of reducing contact with outside parties, reducing practical skills or abilities. Because dealing directly with patients will be very different from simulations. The anxiety is caused by the perceptions of nursing students who consider the lack of effectiveness of online learning to the capabilities of a nurse's expertise so that this can reduce the increase in their competence as prospective nurses. Fear of educational barriers being faced, switching to using social media and streaming platforms as learning media, heavy academic workload, working in a clinical environment and exposure to COVID-19 patients, and changing the learning process to online classes during clinical rotations (Ayubi et al., 2023).

The fear of contracting Covid-19 is also a cause of anxiety that is widely expressed. The Covid-19 pandemic has raised new concerns for many people, especially those who work in the health service sector, including students who are undergoing internships. The rapid spread and severity of this disease causes fear. In addition, the unavailability of PPE, which causes students to be prepared to bring their own PPE, is a concern for students if they need to remember to bring spare PPE. Previous research explained that the challenge of joining the frontline in handling COVID-19, the fear of a lack of medical resources, the risk of being infected with COVID-19, and untrained medical skills cause feelings of anxiety among medical students (Liu et al., 2022).

Student anxiety can also arise from friendships, family economic conditions, or parents' jobs. The COVID-19 pandemic has also

affected the economic sector; many families are experiencing an economic downturn while the cost of their daily needs continues to increase (Christianto et al., 2020). This pandemic has caused economic uncertainty, and many people are having difficulty meeting basic needs. In this condition, some students whose families are affected economically will have more thoughts. Not a few of them end up feeling afraid that tuition fees will be too much of a burden on their parents; some of them may even reduce their academic or organizational activities in order to save on tuition fees. The existence of the Covid-19 pandemic for quite a long time has caused physical distance between friends, which is feared to affect friendships. Kebutuhan keterkaitan mencakup rasa memiliki dan hubungan antarpribadi untuk rasa aman. Shifting to online learning and social distancing, student internship feel disconnected from their classmates and need social support. A significant increase in feelings of loneliness among young adults has been observed since the start of the COVID-19 pandemic, resulting in increased mental stress leading to increased depression and anxiety (El-Desoky et al., 2023). Increased loneliness, isolation, post-traumatic stress and depression, as well as prolonged lockdown duration are caused by high levels of psychological distress resulting from Restrictions related to the COVID-19 pandemic, particularly mandatory lockdowns (Delz et al., 2023).

Individuals with suitable coping mechanisms will influence the decision-making process, take appropriate actions in critical and urgent situations, and easily control stressors (Sumoked et al., 2019). According to (Stuart, 2023), when students do not experience anxiety, individuals use various coping mechanisms to deal with anxiety, individual abilities, social support, material assets, and individual positive beliefs. A person's good and positive coping mechanism will be able to control his anxiety to reduce the level of anxiety or even not show symptoms of anxiety. Optimism is often associated with positive outcomes, including hope for the future, general health, better mental health, increased success at work and coping strategies when dealing with stressful situations (Parashar, 2012). A person's adaptation process will play a role in preventing stress and anxiety, which will describe how a person will face challenges or pressure. The lower the anxiety, the higher the ability to adapt to problems in facing life's challenges during college (Fathia et al., 2021).

CONCLUSIONS

Anxiety in students about a specific situation requires a good and positive anxiety

coping mechanism and the ability to adapt to the environment, especially during internships, which require high effort. Anxiety in students during internships can be overcome by not readily believing in news circulating in the community (not from the government or official authorities); students must always look for information, whether the information is based on data or hoaxes. Students keep thinking positively by consistently implementing health protocols properly. Students maintain their health by exercising regularly and consuming healthy foods. Students continue to communicate well with family and friends so that the support system remains stable.

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