

# Nursing Education amidst COVID-19 Pandemic: A Literature Review

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**Abstract:** *The COVID-19 pandemic posed a significant challenge to global education systems, forcing many countries to temporarily close educational institutions and deliver courses entirely online. Based on the author's research, this literature review explores the impacts of COVID-19 on nursing education as it is forced to rapidly change in the wake of the pandemic. This literature review focused on the adjustments made by nursing schools from face-to-face classes to online classes and how the nursing education surpassed the challenges encountered during the COVID-19 pandemic. As the researcher reviewed all the twenty-nine articles, classifications of concepts were made: to protect students from the pandemic, this study evolved in the five particular areas to uphold sense of urgency when it comes to nurse education such as: the shift from face-to-face pedagogy and clinical experiences to remote learning, broader responses to the pandemic in the Caribbean and other developing countries, assimilation in the field of clinical education prior engagement with distance learning, flexible scheduling and a wide range of nursing specializations are being exploited, and nursing education delivery bears the brunt of COVID-19.*

**Keywords:** Nursing Education, COVID-19, Flexible Education, Paradigm Shift, Assimilation in Nursing Education, Literature Review

## 1. Introduction

Nursing has never been a pioneer in online education over the last two decades, but it has been also becoming a standard. From a simple discussion board in 1997 to virtual classrooms and simulations today, online learning has grown in enrollment and acceptance. It has been especially appealing to nursing students who would otherwise be unable to pursue their education due to family and work obligations, or because they live too far from a school to attend classes. Nursing schools around the world, as well as in developing countries, has responded to the pandemic by following World Health Organization guidelines as well as country-specific pandemic guidelines. To protect students from the pandemic, this study evolved in the five particular areas to uphold sense of urgency when it comes to nurse education such as: the shift from face-to-face pedagogy and clinical experiences to remote learning, broader responses to the pandemic in the Caribbean and other developing countries, assimilation in the field of clinical education prior engagement with distance learning, flexible scheduling and a wide range of nursing specializations are being exploited, and nursing education delivery bears the brunt of COVID-19. Although the literature discusses these concepts in a variety of contexts, this paper will focus solely on how COVID-19 affects nursing education delivery.

## 2. Methodology

The researcher utilized a literature review to map the different concepts that are similar for easier coding and classification. A literature review is a comprehensive summary of previous research on a topic. The literature review surveys scholarly articles, books, and other sources relevant to a particular area of research. The review should enumerate, describe, summarize, objectively evaluate and clarify this previous research.

For this literature review, as a PhD student, we were tasked to review twenty-nine articles that was presented previously

in our *advanced educational planning and management class*. In order for the researcher to classify the different themes, studies were reviewed in three stages: (1) Preliminary scan of the title; (2) Abstract viewed; and (3) Full text viewed. The inclusion criteria incorporated: (a) Publication during the pandemic; (b) Published in peer-reviewed journal; and (c) Content related to the research topic.

## 3. Results and Discussion

### The shift from face-to-face pedagogy and clinical experiences to remote learning

Face-to-face teaching and learning were converted to virtual remote learning and clinical experiences were halted as there will be revisions in the nurse curricula regulations, while adhering to COVID-19 prevention protocols. This is consistent with the studies of Agu, et. al. (2021) and Cahapay (2020) that alternative teaching and learning alternatives must be accommodated and made more accessible in nursing courses in order to foster ample online sessions, skill-based training and simulation. Both of them agreed that nursing courses must be re-imagined and revised as it will enhance learners' preparedness skills in light of the new normal post COVID-19 age. Haslam (2021) further explains that it aids in the formation of online communities for students and teachers, allowing for a more engaging and dynamic learning experience than traditional classroom instruction. Therefore, it is essential to establish management actions and a flexible emergency response plan for delivering teaching, learning, and assessment activities. Seah, et. al. (2021) includes pedagogical capabilities, pedagogical capability enhancement, and instructional leadership infrastructure development to support a blended learning approach for nursing academics and nursing students.

**Broader responses to the pandemic in the Caribbean and other developing countries**

Researchers state in general that contextual factors shaped specific but larger responses to the pandemic corollary in nursing courses in the Caribbean and other developing countries, but they disagree on why. This notion appears to have widespread acceptance that nursing staff must be taught in decision-making, distraction elimination, and problem-solving skills. Ostensibly, strategies for responding to emerging infectious diseases in nursing education based on professional nursing's core values to substantiate valuable insights for the future development of nursing education and ensure the nursing profession's supply. Lewin (2020) suggests that global prescriptions must be accompanied by contextual interpretations of what works best. Education systems bear a unique responsibility for disseminating and interrogating evidence on COVID-19, ensuring that genuine facts are not obscured by superstition, self-interested bias, and electoral expediency. Karalis (2020) affirms that it should be tailored to the unique implementation circumstances each time, as is the case with all models of planning and evaluation in non-formal education, particularly those involving complex programs or interventions. While Tria (2020) argues that there are opportunities for responding to current and future COVID-19 pandemic-related issues, problems, and trends through the lens of the new educational norm; the challenge into the bargain is to provide and deliver quality education in the face of adversity, such as the COVID-19 pandemic, and to what extent we will be prepared for future crises. Axiomatically, advocating the sense of urgency such as staying in touch with students and helping them through this challenging moment (Savitsky, et. al.2020) and pooling educational resources from digital and practice-based learning to improve the quality of learning materials and eliminate duplication and redundancy within educational systems (Carolan, et. al.2020) must be seized and taken seriously supported by resources that help track accident investigation, simulate scenarios, identify problems, ensure patient safety, and select training. (Buheji & Buhaid, 2020). The challenge here is how to supply as well as provide high-quality education in the face of overwhelming odds, like as the COVID-19 pandemic and how prepared we will be for future crises.

**Assimilation in the field of clinical education prior engagement with distance learning**

According to a number of studies, nursing faculty have been absorbed in this new learning culture, navigating the online environment, adopting new technology and teaching methods, and adjusting the clinical education arena to work with distance faculty and on-site instructors known as preceptors. Despite the physical separation required of nursing faculty and students during this global crisis, caring pedagogy serves the holistic needs of the nursing education. (Christopher, et. al, 2020). Similar with the study of Duncan (2021), building resilience in primary and secondary care healthcare professionals should be a priority while increasing workforce and organizational resilience will enable nurse leaders to make sound judgments in crises. Several faculties noted several issues and problems with online education in the pandemic outbreak. However, a recent study reasoned by Moralista & Oducado (2020)

claims that faculty members see online education as a new norm or a non-traditional method of delivering instruction. Older faculty seems to favor online education amid a COVID-19 pandemic because they may be aware that the risk for severe COVID-19 illness increases with age. Despite the uncertainty about how long it will take for life to return to normal, there is no doubt that nursing and health-care delivery yearn for better preparedness to deal with future crises.

**Flexible scheduling and a wide range of nursing specializations are being exploited.**

Nurses all around the world have taken advantage of the online educational programs' flexible scheduling and vast range of nursing specializations. A case study in the Philippines analyzes the policies and guidelines put in place by the country's Commission on Higher Education to ensure educational continuity during a pandemic. According to Cuaton (2020), an Education Continuity Plan (ECP) development will assist in maintaining or immediately resuming school functions in an abrupt disruption in regular school operations due to a pandemic. It can be argued that the maintenance of a high standard of education while ensuring the health and safety of students, faculty, staff, and school administrators during pandemic is still essential. Toquero (2020) who contends that instead of upholding an institution's reputation and excellence, higher education institutions must seize the opportunity to strengthen their evidence-based practices, expand access to mental health services, and adapt their curricula to changing needs of the teachers and learners. Gleaned from the study of Dewart, et. al. (2020), it also emphasizes that academic programs must equip a workforce with additional skills and knowledge that will enable them to contribute directly and meaningfully—weighing the educational value against the personal and professional risk and strain on the learner. These assertions, with their focus on the needs of the faculty and students, demonstrate how institutional leaders may improve productivity and show organizational resiliency in the presence of such catastrophes.

**Nursing education delivery bears the brunt of COVID-19**

While the implementation of COVID-19 has required nurse faculty to be innovative, adaptable, nimble, and agile, there have been challenges. Internet connectivity, affordability, and reliability emerged to have a negative impact on nursing education delivery in the context of crisis. Fogg, et. al. (2020) states personal impact of COVID-19 including issues with internet access and web conferencing logistics, a lack of motivation to study, family difficulties, and faculty inexperience teaching in an online environment. Aristovnik, et. al. (2020) concentrate on different groups of students who may be vulnerable to the harmful effects of the COVID-19 measures globally—policies and strategies to help students during this crisis and future crises. Nursing students expressed a strong desire to be heard, prepared, and assisted. Similarly, with the study of Ulenaers, et. al. (2021) which underlines the important role of elements that influence students' experiences and outcomes in typical situations, fear and uncertainty can have a major impact.

These arguments are not dismissed in today's thinking that this unprecedented health crisis left nurses in hospitals, and nurse-students in the community and educational setting in a state of anxiety and mental discomfort.

#### 4. Conclusions and Recommendations

In conclusion, articles are all addressed how COVID-19 affects nursing education delivery. Aristovnik, et al. (2020) focused across many groups of students who are vulnerable to the COVID-19's detrimental consequences, as well as global policies and initiatives to prioritize students throughout current and future crises. Essentially, all of the research done has been beneficial in reducing the deleterious impact of the pandemic on nursing education and clinical experiences of students. A similar study may be conducted incorporating other variables not fully tackled and investigated in this study.

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