

# To Assess the Bio-Psycho-Social and Spiritual Impact of COVID-19 among the Students Studying in Selected Nursing Colleges

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**Abstract:** *The World Health Organization (WHO) declared COVID-19 as a pandemic. The WHO recommends that the additional mental health support is best provided along with the general health services, by harnessing the existing structures/resources in the community. Mainly the student's academic activities including clinical experiences were drastically affected. The present study aims to assess the bio-psycho-social and spiritual impact of covid19 among the nursing students in selected nursing college. A descriptive survey was conducted among 178 nursing students at bishop Benziger College of nursing, Kollan, Kerala. The data were analyzed using descriptive and inferential statistics. The present study findings shows that 93.8 % of the participants did not develop any physical illness during this lockdown period. 97.8 of the participants basic needs were met in time, 29.8 % had fear about the present situation, 22.5 % of the participants spiritual needs were not met and 78.1 % of the participants said the future plans were affected, 24.2 % of the participants lost interest in studies and assignments. Most of the participants 65.5 % said that counseling is needed during post pandemic period and majority of the 94.7 % participants said that life skill training to be included in the nursing students' curriculum to develop and overcome the stressful situation in future.*

**Keywords:** Bio-Psycho-Social and Spiritual, impact of COVID-19, Nursing students

## 1. Introduction

Infectious disease disasters, including epidemics, pandemics and outbreaks, may cause high morbidity and mortality and may account for a quarter to a third of global death rate. The World Health Organization has announced COVID-19 as the sixth public health emergency of international concern. The virus was first detected in December 2019 in Wuhan, China, and its main symptoms include fever, dry cough and shortness of breath. It is spread by human-to-human transmission via droplets or direct contact, and infection has been predicted to have mean incubation period of 6.4 days and a basic reproduction number of 2.24–3.58. More than 203 countries, areas or territories have been affected by the virus so far, with about 630, 000 infected and nearly 30, 000 deaths reported by March 29. Iran, after Italy, Spain and China, has had the highest number of deaths in the world (World Health Organization (WHO, 2020a).

Currently, there is no known information on the psychological impact and mental health of the general public during the peak of the COVID-19 epidemic. This is especially pertinent with the uncertainty surrounding an outbreak of such unparalleled magnitude. Based on our understanding, most of the research related to this outbreak focuses on identifying the epidemiology and clinical characteristics of infected patients, the genomic characterization of the virus and challenges for global health governance. However, there are no research articles examining the psychological impact on COVID-19 on the general population in our country. Evidence also suggests that individuals may experience symptoms of psychosis, anxiety, trauma, suicidal ideation, and panic during outbreaks of communicable diseases. Anxiety is a feeling of tension, worries and physical changes such as increased blood pressure, sweating, trembling, dizziness or a rapid

heartbeat (Major et al., 2000), WHO, 2020b; (Taylor et al., 2008; Tucci et al., 2017). World Health Organization (WHO, 2020b)

The epidemic has brought not only the risk of death from infection but also unbearable psychological pressure. Most governments around the world have temporarily closed educational institutions in an attempt to contain the spread of the COVID-19 pandemic. These nationwide closures are impacting over 90% of the world's student population. Several other countries have implemented localized closures impacting millions of additional learners. COVID-19 is an emerging issue that has significant consequences on psycho-social well-being.

The pandemic may exacerbate existing mental health disorders that are highly prevalent and contribute to "new" stress-related mental health disruptions and disorders even in previously unaffected healthy populations.

Stress during an infectious disease outbreak can include, Fear and worry about your own health and the health of your loved ones, Changes in sleep or eating patterns, Difficulty sleeping or concentrating, Worsening of chronic health problems, Worsening of mental health conditions, Increased use of alcohol, tobacco, or other drugs.

Movement restrictions and campus closures as a result of the Covid-19 pandemic have dispersed students and faculty to multiple locations, breaking the usual channels of communication. By considering all these factors the researcher develops the intuition to assess the impact of covid19 on bio-psycho-social response of adolescent with view to prepare them for the future unpredicted pandemic situations.

Volume 9 Issue 6, June 2020

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## 2. Materials and Methods

A descriptive survey was carried out among 178 students studying in nursing college at Bishop Benziger College of Nursing, Kollam, Kerala. A Non probability convenience sampling method was adopted. Information was sought through online Google form. The information collected were socio-demographic profile, questionnaire to assess the bio-psycho-social and spiritual impact of covid19. **Tool/instrument used were**, Demographic variables, Self administered questionnaire on Bio-psycho-social and spiritual impact of COVID -19.

### Ethical consideration

The basic principles of research such as beneficence, justice, honesty, confidentiality were maintained through the study.

### Method of Data Collection

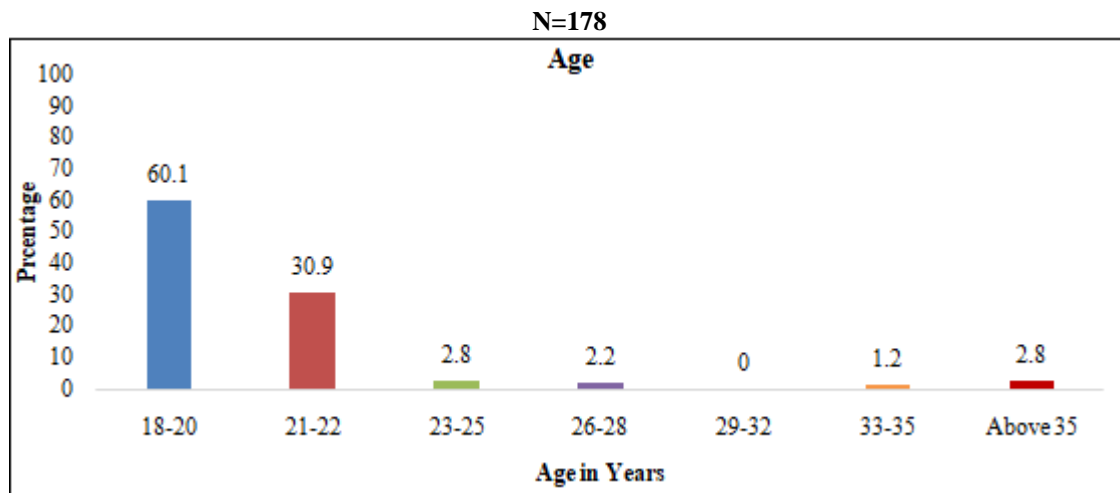
The researcher obtained the institution ethical clearance from Bishop Benziger college of Nursing, Kollam, and written permission was received from the head of the institution. The detailed participant information sheet and consent form was sent to the participants through online along with the self administered questionnaire. Each participant took 10 minutes to complete the questionnaire. The response sent to the researcher through online. The data gathered were kept confidential. The data were compiled for analysis.

## 3. Result

The table 1 shows the distribution of data regarding socio-demographic variables

N=178

Demographic variables	Frequency	Percentage %
Age in years		
18-20	107	60.1
21-22	55	30.9
23-25	5	2.8
26-28	4	2.2
29-32	0	0
33	2	1.2
Above 35	5	2.8
Gender		
Male	8	4.5
Female	170	95.5
Course		
B.Sc Nursing	164	92.1
M.sc Nursing	14	7.9
Level of course		
First year	57	32
Second year	50	28.1
Third year	45	25.3
Fourth year	26	14.6
Area of living		
urban	89	50
rural	89	50
Educational level of parents		
Primary	4	2.2
High school	75	42.1
Diploma	51	28.7
Graduate	40	22.5
Post graduate	8	4.5
Occupation of the parents		
Daily wages	50	28.1
Agriculture	31	17.4
Govt employee	34	19.1
Private employee	63	35.4
Size of the family		
Less than 3 members	7	3.9
4-5 members	149	83.7
More than 5	22	12.4
Type of family		
Nuclear	162	91
Joint	14	7.9
Extended	2	1.1
Income of the family		
Less than 5000	26	14.6
6000-10000	60	33.7
11000-15000	29	16.3
Above 15000	63	35.4

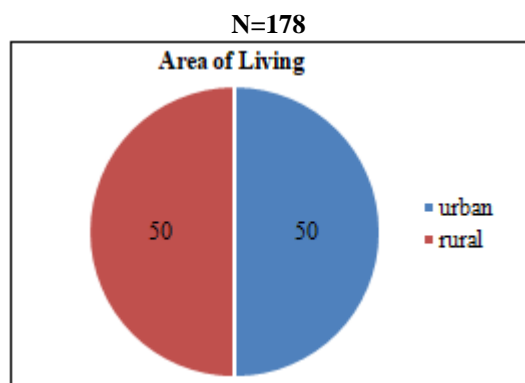


In this figure 1 shows that 60.1% of samples belongs to the age group of 18-20 years, and 30.9% belongs to the age group of 21-22. There were no participants in the age group of 29-30 years.

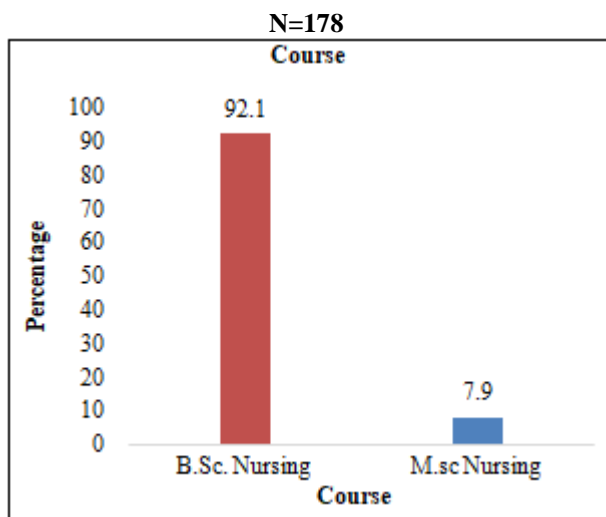
The pie diagram shows that (32%) of the samples were from 1<sup>st</sup> year B.sc nursing, (28.1%) belongs to second year, (25.3%) were belongs to 3<sup>rd</sup> year and only (14.6%) from final year students.

N=178

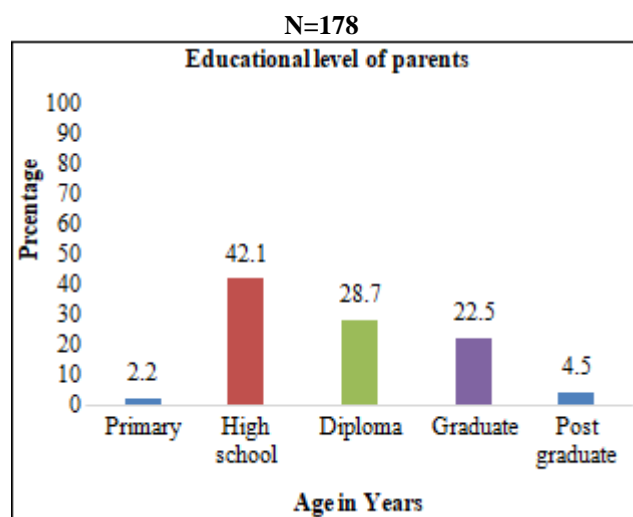
The figure 2 shows that maximum number of samples were (95.5%) females, whereas only 4.5% were males.



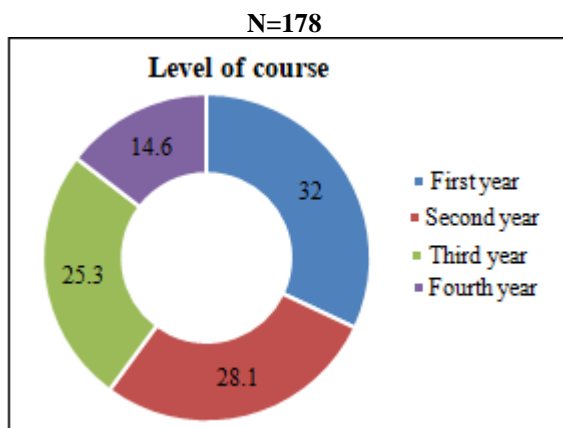
The pie diagram shows that the samples were equally from urban and rural area.



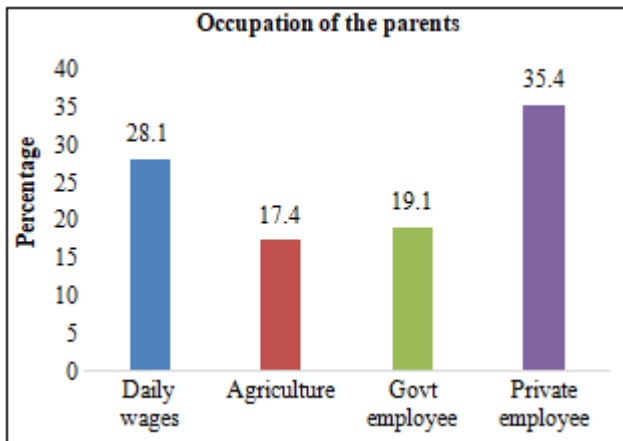
The percentage of samples belongs to B.sc Nursing (92.1%) and only (7.9%) were post graduate students.



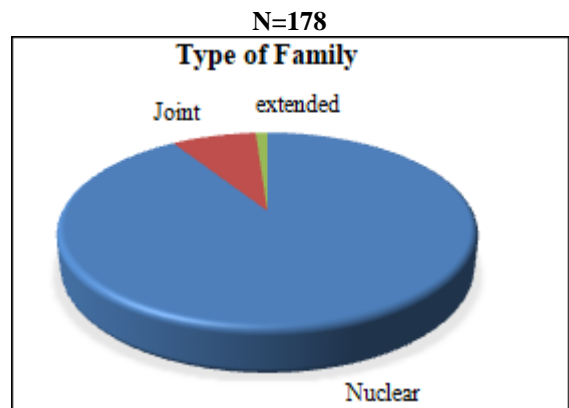
Based on the parents education (42.1%) had completed high schooling, whereas only (4.5%) were post graduates.



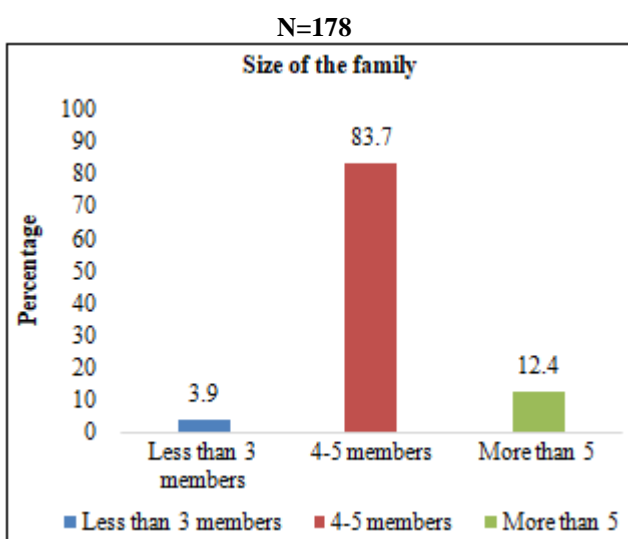
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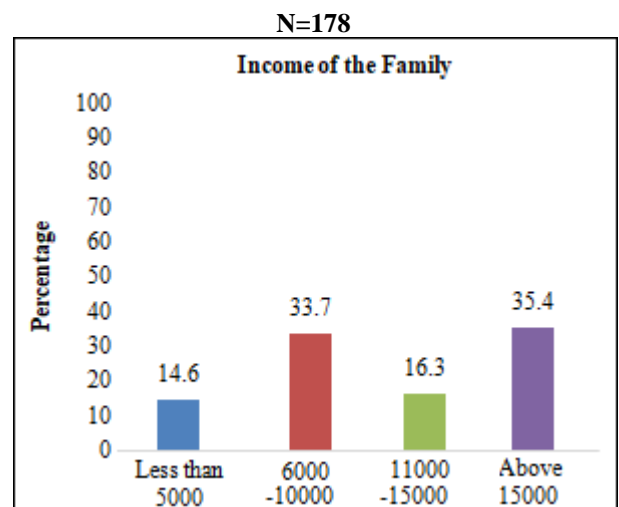
The bar diagram shows that (35.4 %) of the samples were private employees.(28.1%) were daily wagers and only (19.1) were government employees.



Based on the type of family (90%) of the samples were in nuclear family and only (7.9 %) of the samples belong to joint family.



On the basis of size of the family majority of the samples (83.7%) of family consist of 4-5 members, (12.4%) has more than five persons and only (3.9) has less than three members.



The bar diagram shows that (35.4%)samples are earning more than 15000 per month and (14.6%) very few earns less than 5000 per month.

The table 2 shows the Frequency and percentage wise distribution on impact of COVID19 on Bio-Psycho-Social and Spiritual factors.

N=178

Bio-psycho-social and spiritual impact factors	Yes		No	
	Frequency	Percentage	Frequency	Percentage
Illness during this period	11	6.2	167	93.8
Basic needs met	174	97.8	4	2.2
Loss of appetite/insomnia	18	10.1	160	89.9
Fear about present situation	53	29.8	125	70.2
Needs are met	160	89.9	18	10.1
Stable in income source	129	72.5	49	27.5
Able to adapt to situation	165	92.7	13	7.3
Able to communicate with friends, teachers and relatives	178	100	-	-
Safety needs are met	176	98.9	2	1.1
Spiritual needs are met	138	77.5	40	22.5
Spent time for worshipping	168	94.4	10	5.6
Feeling guilt for not going to worship place	95	53.4	83	46.6
Recreational needs are met	133	74.7	45	25.3
Accessible to social support	167	93.8	11	6.2

Develops psychological disturbances	20	11.2	158	88.8
Spent time effectively	160	89.9	18	10.1
Developed bonding with parents/friends	174	97.8	4	2.2
Prepared well to face this situation	169	94.9	9	5.1
Academic schedules are affected	114	64	64	36
Influence on future planning	139	78.1	39	29.9
Received social and psychological support from parents/teachers	174	97.8	4	2.2
Lost interest in studies and assignments	43	24.2	135	75.8
Aware of protective measures of COVID19	178	100	-	-
Have created awareness among parents/friends about COVID19	176	98.9	2	1.1
Unable to play useful part in life	67	37.6	111	62.4
Bored with routine activities in this period	112	62.9	66	37.1
Developed extra skill during this period	143	80.3	35	19.7
Counseling is essential in post pandemic period	116	65.2	62	34.8
Needs life skill training program to overcome the crisis situation	169	94.9	9	5.1
Willing to serve the society in crisis situation	174	97.8	4	2.2

The data in the table 2 shows that frequency percentage distribution of samples based on bio-psycho-social and spiritual impact of COVID- 19 among nursing students.

According to data collected majority 93.8 %of the samples did not develop any illness during the lockdown period .97.8 of the samples answered that the basic needs are meet in time and 89.9%of the samples did not develop loss of appetite and insomnia, but 29.8%had fear about present situation .majority of the samples 72.5% had stable income source in family .most of the samples 92.7 were able to cope with the situation during the lock down period. All the samples 100% answered they had good communication with parents, friends and teachers during this period. Only 22.5%participants said that their spiritual needs were not met and majority of samples 94.4 spent time for worshipping at home and 53.4% said they felt guilty for not going to worshipping place. Most of the participants 74.7% said the recreational activities are met and majority 92.8% had good accessible to social support.11.2% said they had psychological disturbances

during this time and 89.9%had spent time effectively. Majority of the samples 97.8% had developed good bonding with family and friends.94.9% were prepared well to face this crisis. Majority of the samples 64% their said their academic activities are affected due to the lockdown.78.1% had said that covid19 had influenced the future plan. Majority of samples97.8% had received good social and psychological support from parents and teachers .few samples 24.2% said they lost interest in studies and assignments. All the samples 100% were aware about protective measures of COVID- 19 and 98.9% had created awareness about COVID-19 among parents and friends.62.9 % of the samples said they are bored with routine activities during this period. Most of the samples 80.3% had developed extra skills during this period and 65.5% of the samples said counseling is necessary after the lockdown period. Majority 94.9% said life skill training program is necessary to meet this crisis situation. Most of the samples 97.8% said they are willing to serve the society in crisis situation.

Association between Bio-Psycho-Social and Spiritual factors and demographic variables

Socio demographic Variables	level of impact				X <sup>2</sup>	DF	P
	Mild 24-30	Moderate 21-23	Severe 18-20	Very severe 15-17			
<b>Age in years</b>							
18-20	24	56	24	03	11.3	18	0.884
21-22	14	30	10	01			
23-25	02	02	01	0			
26-28	0	03	01	0			
29-32	02	02	01	0			
33	0	01	02	0			
Above 35	0	0	01	01			
<b>Gender</b>							
Male	03	03	01	02	14.4	3	0.49
Female	37	90	39	03			
<b>Course</b>							
B.sc Nursing	01	08	04	0	2.42	3	0.49
M.sc Nursing	39	85	36	05			
<b>Level of course</b>							
M.sc Nursing					17.3	15	0.301
M.sc 1 year	01	03	03	0			
M.sc 2 year	0	05	01	0			
B.Sc. Nursing 1 <sup>st</sup> Year	08	26	16	01			
2 <sup>nd</sup> Year	11	22	08	03			
3 <sup>rd</sup> Year	16	22	06	01			

4 <sup>th</sup> Year	04	15	06	0			
<b>Area of living</b>							
Urban	22	50	24	03	0.677	3	0.879
Rural	18	43	26	02			
<b>Educational level of parents</b>							
Primary	06	24	09	01	5.66	12	0.932
High school	01	05	0	10			
Diploma	20	36	18	03			
Graduate	13	25	11	01			
Post graduate	0	03	0	10			
<b>Occupation of the parents</b>							
Daily wages	08	17	08	01	2.16	9	0.989
Agriculture	09	15	07	01			
Govt Employee	09	25	12	02			
Private Employee	14	36	13	01			
<b>Size of the family</b>							
Less than 3 members	05	12	05	0	1.40	6	0.966
4-5 members	01	04	01	0			
More than 5	34	77	34	05			
<b>Type of family</b>							
Joined	02	07	04	0	3.63	6	0.726
Extended	01	0	0	10			
Nuclear	37	86	35	05			
<b>Income of the family</b>							
Less than 5000	17	28	15	01	10.8	9	0.291
6000-10000	09	12	09	02			
11000-15000	12	35	11	01			
Above 15000	02	18	05	01			

The data in the table 3 shows the association between Bio-Psycho-Social and Spiritual factors and demographic variables. The calculated chi-square value is less than the table value for all the parameters thus there was no significant association between impact of covid19 on bio-psycho-social and spiritual parameters with the selected demographic variables such as age, gender, course level, educational level of parents, occupation of parents, size of family, type of family and income of the family.

#### 4. Discussion

This descriptive survey was conducted to assess the bio-psycho-social and spiritual impact of covid19 among the students studying in selected nursing college, Kollam. The findings of the study were, the students were well prepared to meet the crisis. They had reported mild disturbances in academics aspects. Many of them had developed some skills during this period and most of them need counseling after this pandemic period. All most all students need some life skill training program as part of curriculum to face this unpredicted crisis.

The present study is supported by the study conducted among a large group of adolescents in Italy COVID-19 significantly affects the emotional and lifestyle of Italian adolescents. The survey investigated four items: concerns and fears, information on the pandemic, provisions of public authorities (e.g., lockdown), and impact on everyday life. The research highlighted the remarkable, healthy, and certainly unexpected, emotional balance of the new generations in the face of a sudden, unpredictable phenomenon capable of jeopardizing life itself. While understanding the gravity of the phenomenon and

willingly adapting to all the necessary precautions, the adolescents still seemed to express an excellent ability to manage situations of insecurity and to deal with unfavorable and adverse conditions by adapting to the new routine and finding alternative and innovative means of meeting their social and psychological needs. Most of the students have developed some skill during this lockdown period such as using advanced technologies, drawing, making short videos, cooking and gardening. Moreover, the students are in need of life skill training education in their curriculum.

#### 5. Conclusion

Thus the present study shows that COVID-19 is an emerging issue that has significant consequences on psycho-social well-being of students studying in nursing colleges. The students need to be well trained to meet the unexpected pandemics by including life skill education in their curriculum.

#### 6. Limitations and Recommendations

The present was carried out during lockdown period, so there was no accessibility to do data collection .so data were collected through online with available resource and with accessible population. The study is limited o small sample size and confined to single setting. The study can be carried out on large samples and at different settings.

**Financial support and sponsorship:** self

**Conflict of interest:** There are no conflicts of interest.

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