ABSTRACT

Objective: To analyze the experience of social distancing of nursing students from a public university in São Paulo during the COVID-19 pandemic. Method: This is a qualitative study, using the autobiographical method and the subject's narrative. The data were collected through an online form and the analysis was hermeneutic dialectic. Results: A total of 63 university students participated in the study and two thematic categories were elaborated: Thematic category 1 – Various feelings in relation to the experience of social distancing faced during the pandemic; and Thematic category 2 – Coping strategies regarding the experience of social distancing faced during the pandemic. Conclusion: The results enabled identification of the experience of nursing students at the beginning of the COVID-19 pandemic, in addition to recognition of the psychosocial impact caused by the variety of feelings, perceptions, and coping strategies used to deal with the situation.

Descriptors: Students, Nursing; Psychosocial Impact; Quarantine; Mental Health; Pandemics.

RESUMO

Objetivo: Analisar a experiência do distanciamento social durante a pandemia da COVID-19 dos estudantes de enfermagem de uma universidade pública paulista. Método: Estudo de abordagem qualitativa, utilizando o método autobiográfico e a narrativa do sujeito. Os dados foram coletados por meio de formulário on-line e a análise se deu pela hermenêutica-dialética. Resultados: Participaram 63 universitários e duas categorias temáticas foram elaboradas: Categoria temática 1 – Sentimentos diversos a respeito da experiência do distanciamento social diante da pandemia; Categoria temática 2 – Estratégias de enfrentamento a respeito da experiência do distanciamento social diante da pandemia. Conclusão: Os resultados permitiram identificar a experiência dos estudantes de enfermagem durante o início da pandemia de COVID-19, assim como reconhecer o impacto psicossocial causado pela variedade de sentimentos, percepções e estratégias de enfrentamento realizadas como forma de lidar com a situação.

Descritores: Estudantes de Enfermagem; Impacto Psicossocial; Quarentena; Saúde Mental; Pandemias.
INTRODUCTION

On January 30th, 2020, the World Health Organization (WHO) declared that the outbreak of the COVID-19 disease, caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-COV2), constituted a public health emergency. The WHO characterized COVID-19 as a pandemic on March 11th, 2020 (1). By March 19th, 2021, a total of 121,464,666 cases of COVID-19 and 2,684,093 deaths had been confirmed, with more than 11 million cases and over 287 thousand deaths in Brazil, by March 18th, 2021 (2,3).

Having been declared as a challenge to the world health system, the WHO announced various guidelines, including social distancing, which was characterized as one of the most important strategies against COVID-19. However, both distancing and fear of an unknown infirmity can have a direct impact on people’s mental health (4). The successful use of social distancing is an effective strategy for diminishing COVID-19 contagion but may give rise to negative repercussions for individuals’ mental health (5).

The restriction of people at places that are a potential source of contagion is a reality; the United Nations Educational, Scientific, and Cultural Organization (UNESCO) estimates that the closure of educational institutions due to the pandemic has affected half of the world’s students. The impact of the COVID-19 pandemic on higher education was immediate, as abrupt, large-scale preventative measures were taken to maintain students and professors healthy. Universities, faculties, and schools continue to deal with a series of other complex challenges in the short and medium term (6).

According to the monitoring of UNESCO, more than 160 countries implemented closures, which impacted more than 87% of the world’s student population. The temporary closure of schools as a consequence of health crises and other emergencies is not a new strategy; however, the scale and speed of the current interruption are incomparable to previous closures. If these closures are prolonged, they may cause damage in the social, psychological, and economic spheres, and above all, the interruption of individual and collective projects (6). Specialists warn that the lethal impact of COVID-19 may have repercussions in higher education for much longer, even after the possible control of transmissibility (6).

Formal education will continue facing challenges in the long term due to the advance of the pandemic. Years of budget cuts and the shortfall in meeting the basic needs of students make higher education vulnerable and potentially unprepared for dealing with the current crisis. The evidence shows that students with social and financial difficulties suffer to a greater extent. Around half of all academics and up to a third of university students on four-year programs have already faced insecurity, fear, the experience of projects breaking down, a sense of loss, and mood swings (5).

Considering that currently there is temporary closure of educational institutions in general, this study aimed to analyze the experience of social distancing of nursing students from a public university in São Paulo during the COVID-19 pandemic.

METHOD

This is a qualitative, descriptive, exploratory study, using the autobiographical method and/or the subject’s narrative (7).

Undergraduate students from the first to the fourth year of the nursing course at a state university in São Paulo participated in the study. The inclusion criteria were to be enrolled on the nursing course and over 18 years of age.

The project was approved by the Comitê de Ética em Pesquisa da Faculdade de Medicina de Botucatu da Universidade Estadual Paulista “Júlio de Mesquita Filho” (Research Ethics Committee of the Botucatu Medical School of the São Paulo State University Júlio de Mesquita Filho), as proscribed by Comissão Nacional de Ética em Pesquisa (National Committee for Ethics in Research — CONEP) resolution 466/12, decision no. 4.015.192.

Student narratives were used for data collection, being an appropriate tool for a qualitative study in which the aim was to investigate representations of the reality of the interviewee. Based on these representations, the context in which the interviewee is placed can be ascertained (7).

Over a period of five weeks, an invitation to participate in the study was sent via e-mail each week, explaining the objective of the study together with the informed consent form (TCLE), a link to access Google Forms, and the contact information of the research team. Upon agreeing to participate in the study, the students answered the questions on sociodemographic data and elaborated a narrative, constructed on the form itself, in response to the following trigger stimulus: Tell us how your life experience has been since the beginning of social distancing due to the COVID-19 pandemic. The data were collected between May and August 2020. From a group of 120 students, a total of 63 participated.

Information analysis was based on hermeneutic-dialectic thinking, a conception adopted for interpretative reflection, which is founded on praxis and the search for understanding and critical analysis of reality (8). Hermeneutic-dialectic thinking is developed in the search for differences and similarities between the context of the literature and what is investigated. In the facts, the language, the symbols, and the culture, contradictory nuclei are sought with the aim of carrying out critical interpretation, creating instruments and understanding that the analysis of meanings should be placed...
at the base of social practices, emphasizing the historical context/link of discourse, relationships, and actions\(^8,9\).

The three stages for information organization established by Minayo\(^9\) were followed. These were ordering, classification, and final data analysis, which include classification of the discourse of the interviewees, components of the empirical categories, horizontal and vertical synthesis, and confrontation between the pieces of information, grouping convergent, divergent, and complementary ideas. The analysis was guided by thematic analysis\(^10\). All the authors participated in this phase. The analysis was carried out manually without the use of software.

In order to ensure the privacy of the study participants, an alphanumeric code was created in which the letter “I” means interview, followed by a digit that represents the order in which the interviews were conducted (I1, I2).

Two thematic categories for the understanding of the students’ experience during social distancing emerged from the narratives: 1 – Various feelings in relation to the experience of social distancing faced during the pandemic; 2 – Coping strategies regarding the experience of social distancing faced during the pandemic. The categories were validated with the participants.

**RESULTS**

A total of 63 university students participated in the study, of which 56 (88.9%) were female, and 7 (11.1%) male. Regarding age, 48 participants (76.2%) were aged between 18 and 22, being the most prevalent age group, while 9 participants (14.3%) were aged between 23 and 27, 5 participants (4.8%) were aged between 28 and 32, and 1 participant (1.6%) was between 33 and 37. Regarding the year of study, most of the participants, 21 (33.3%), were in their third year, while 18 (28.6%) were in their first year, 11 (17.5%) in their second, and 13 (20.6%) in their fourth.

**Thematic category 1 – Various feelings in relation to the experience of social distancing faced during the pandemic**

The student’s narratives show a variety of feelings during the first months of the pandemic. Among them, “saudade”, or the yearning for someone or something that was missing, was present, not only in respect to friends and family, but also to routine. This feeling is exemplified in the following excerpts:

\[\text{The worst part of social isolation is being away from my family… the feeling of missing them grows with each day and not knowing when isolation will end is unsettling. (I16)}\]

\[\text{I miss university, the teachers, and my friends. (I24)}\]

The uncertainty about the future, the information load acquired from the news media, and receiving information related to the number of COVID-19 victims increased the feeling of anguish experienced by the study participants.

\[\text{The experience I have had is one of great distress at not knowing when things will go back to normal. I also see a lot of people dying on the news every day, which makes me even more distressed. (I10)}\]

\[\text{It is very harrowing, I have intervals of happiness and/or moments of tranquility, but the uncertainty about tomorrow has had a big impact… In the first weeks, I liked the sensation of slowing down and resting from the hard pace of university. (I22)}\]

For some academics, the predominant feeling was fear related to the disease, being contaminated, above all, and transmitting it to people with risk factors. This is shown in the following excerpts:

\[\text{I am a little concerned, afraid of getting COVID and ending up passing it on to people at risk… but, I still don’t know how to deal with the issue of the pandemic very well. (I2)}\]

\[\text{It is not very pleasant… I have already cried a lot… I am afraid of getting really bad during this time and losing friendships because of the stress. (I29)}\]

\[\text{Staying home with everything that is happening is very hard, as the mind never stops and is always thinking about demands, uncertainties, and fear. (I44)}\]

Many students specified more than one feeling from going through the experience, such as uncertainty, anxiety, and stress, related to excessive thinking, financial worries, and the continuity of their undergraduate program. The participants also reported impotence regarding the situation, in addition to not being able to stay close to some family members. Such feelings are expressed in the following excerpts:

\[\text{[…] I’ve had moments of fear, insecurity, anxiety, calm, anger, apathy, and so on… I worry more and more about graduation, the financial state of my family, the thousands dying in the country, the cruelty of the politicians… this scares me. (I13)}\]

\[\text{Dealing with distance learning at university, arguments in the class group, “being productive”, the lack of my own space, Brazilian politics, the overwhelming amount of information, and fear, among others; it’s been very difficult and stressful to deal with all this. (I18)}\]
At the beginning of isolation I had a lot of uncertainty about everything... I started getting very anxious... I started seeing all the plans I had for the year unraveling, and I didn't really know what to expect about classes, university etc.... now I am more relaxed. (I28)

In general, I feel relaxed, as I have more time to study for residency, for public selection exams, and for the course subjects... I am very afraid of what may come to happen in the future. (I33)

[...] the traumas start and develop as a result of anxiety, and "overthinking" ends up making everything worse. (I42)

[...] I started worrying and getting anxious for everything to normalize as quickly as possible... I am really afraid of going out and contaminating someone... the lack of routine and the mess in the curriculum timetable of the course affected me a lot as well, sometimes I have the sensation that it was a year that was completely lost in relation to academic life, I feel like I don't absorb the subjects given remotely so well... I feel totally impotent [...]. (I63)

Thematic category 2 – Coping strategies regarding the experience of social distancing faced during the pandemic.

The students narrated certain strategies that they used as coping measures, which were often tasks that were not previously part of their routine. The learning of new activities and the practice of physical exercise helped them to relax and occupy time, as per the excerpts below:

[...] I am looking to occupy my time with painting activities, besides having done courses and made progress on my end-of-course paper. (I12)

[...] I am already well used to it and more relaxed, also making the most of the time to get to know myself better, do activities that I like and are relaxing, and learn new things (musical instruments, online courses). (I19)

I do physical exercise during the days to unwind, and I try to practice meditation, some days I fail, but when I do it, I feel great. (I23)

Developing spirituality was presented as a strategy that helps the students cope with the new situation caused by social distancing. This practice was described as a booster of positive and motivational feelings in coping with adverse situations. Below are some excerpts that present these characteristics:

I got better with a lecture from my religion (Spiritist) on how we attract good things if we keep our thoughts positive. (I04)

[...] at the moment I am learning to cope better with the situation and with myself, and I am praying for everything to be well. (I28)

Even with distancing being considered a difficult, frustrating moment replete with anxiety, the students discussed being with family members as a mitigating situation, a time to carry out collective activities that were previously infrequent. The excerpts below portray the theme:

[...] staying isolated at home is very difficult and distressing, it is making me feel very anxious, having shared this with my parents has really helped relieve the tension. (I07)

[...] as I am with my family the weight has really decreased, so I can say that I am coping well. (I10)

[...] I am able to spend more time with my parents, we can appreciate the view that we have from the area of our house more often, cook different recipes as a family, do things at home that we generally wouldn't be able to. (I32)

The social support given by specialized professionals was also a strategy used by some university students. The use of anxiolytic or antidepressant medication to be able to get over this new situation was a reported measure. Such resources were described as per the following excerpts:

[...] I sought out my psychologist to help me at this time; even without being able to maintain all the sessions due to financial difficulties, one session a month helps me a lot. (I24)

I have adapted to the day-to-day through the medicines that I take for anxiety and depression, but it is the only way I can deal with everything better [...]. (I27)

DISCUSSION

The narrative of most participants in the present study showed the experience of various feelings, such as anxiety, insecurity, saudade or yearning, distress, confusion, sadness, fear of the disease, and the fear of passing it on to people at risk. The students’ responses referred to their concern with the progress of the academic year in regard to graduation, and, above all, apprehension regarding routines being destabilized by the events of the COVID-19 pandemic. Similar findings were found in a study carried out with undergraduates at a large public university in the United States(11). The impacts of social distancing on the population varied according to the phases of the pandemic, with students having their own manifestations before, during, and after isolation. Anxiety, tension, insecurity, and obsessive vigilance of disease
The experience of social distancing of nursing students during the COVID-19 pandemic

symptoms are frequent in the initial period of the pandemic. During the process, the most reiterated signs involve fear, feelings of loneliness, vulnerability, and adaptation to change in habitual life patterns, in addition to emotional crises and panic, as well as decompensation of pre-existing psychic disorders(12,13).

The sentiments narrated by the participants make it possible to identify that of the three phases of the pandemic, two were experienced by the students, these being the various feelings experienced at the beginning of the pandemic and, subsequently, a movement towards finding coping strategies. This situation is coherent with the moment at which data collection occurred, the initial phase and during the pandemic (May to August 2020), in which, initially, students in some of the years of the undergraduate course had access to remote learning, while others only had such access later.

Low confidence in activities that produce knowledge through remote strategies, household chores, social distancing, and changes to routine directly impact performance and how much the students get from their course. This is because, as nursing students, in the Brazilian context, they tend to be less socially privileged than other areas of healthcare(14). Israeli university students had the same challenges and used religiosity, close family ties, and social support to reduce the sensation of threat caused by the pandemic. They recommend maintaining proximity between the university and the students to minimize the negative impact(15).

A similar study carried out in the United States identified that the impact on the mental health of university students during the pandemic was an increased level of stress. This was related to feelings of fear and concern about getting sick or contaminating loved ones, difficulty concentrating, and changes in sleep patterns, in addition to increased concern regarding academic performance. The coping strategy for the situation was to seek support from others(16).

Lebanese students reported that the main impact caused by the social distancing period was related to financial factors and a lack of access to the internet to continue their studies. Practicing physical exercise and conversing with family members were the measures used in coping. However, there was overeating and increased smoking among the students(16).

In Brazil, a study carried out at a university in Ceará showed that students on healthcare courses were distressed and concerned about the situation of the state, and, above all, the world, in relation to the financial and emotional impacts of COVID-19 and in regard to graduation(17). At the Universidade Federal de Santa Maria (Federal University of Santa Maria), students experienced a drop in their academic productivity, alterations to appetite and mood, anxiety, and anguish(18).

Therefore, similarities are evident in the feelings experienced among university students from various parts of the world. Students had to deal with feelings that generated stress and they had to live with the uncertainty of being infected by the virus and the duration of social distancing(11,15-19).

This reality can be further aggravated by the excess amount of news, which is not always reliable, circulating on social networks about the advance of COVID-19. This can provoke psychic disorders due to information overload. A study carried out with 4,872 Chinese citizens revealed that the exposure to information published via social media was associated with a high prevalence of mental health problems(20).

The World Health Organization (WHO) recommends that people in a situation of social distancing, above all else, maintain themselves connected, be it by telephone, e-mail, social media, or video conferencing. They should make an effort to continue with a feasible routine, which includes healthy sleep habits, a healthy diet, and the practice of physical activity. In periods of extreme stress, they should involve themselves with pleasurable and relaxing activities, and only seek updates about the pandemic at a specific time of day from official sources(21).

The students reported diverse coping strategies. Self-reflection on the impacts of the disease on people’s lives combined with the practice of spirituality, the sharing of their yearnings in the company of family members, and the search for social support, be it with a psychologist or a psychiatrist, were present in the narratives.

The most common coping strategy among Italian university students was spending more time on social networks. Moreover, some reported the use of psychoactive substances to deal with the discomfort related to COVID-19(22). The present study is distinct when compared with the Italian study, given that there were no reports of psychoactive substance use, nor was an apparent increase in the use of social networks referred to as a coping strategy.

A proposal of activities that would favor the organization of routine and the redefining of students’ daily lives was the object of a study carried out by students on an Occupational Therapy course of a university in Rio de Janeiro. The proposed actions involved self-care and support, adaptation to remote learning, and the execution of complementary activities. The study concluded that the structuring of routine through definition of a timetable of tasks can minimize the stressful effects caused by the pandemic(23).

The lack of social and emotional support, still in the first phase of the pandemic, after the implementation of social distancing actions may generate the appearance of a large number of people with mental health problems(12,13).

The University of Vermont in the United States implemented a well-being program for university students during the pandemic and found an improvement in students’ mood. Moreover, confidence in the government’s
response in the face of the problem was identified as having assisted in mechanisms for coping with the pandemic. Universities should prepare to face the continuous impacts of the pandemic on the mental health of their academics. Both educational and governmental strategies are of extreme importance for success\(^{(20)}\).

Political strategies for coping with the pandemic, such as effective national coordination, control of the spread of the pandemic, strengthening the health system, social and economic support, and honest communication with society, exponentially assist in maintaining the mental health of the population\(^{(20)}\).

CONCLUSION

The results enabled identification of the experience of nursing students at the beginning of the COVID-19 pandemic, in addition to recognition of the psychosocial impact caused by the variety of feelings, perceptions, and coping strategies carried out to deal with the situation. While the academics identified various negative factors, through the manifestation of feelings, they recognized factors that were used as a way of managing the suffering caused by the pandemic.

The study shows the damage to mental health caused in most students upon experiencing the pandemic. University life at the time of the pandemic rapidly got out of control, which generated much suffering, distress, and confusion according to the discourse. However, it is necessary to highlight certain limitations of the study: on-line data collection can limit the response to students who have internet access, which may diminish the number of participants but not the possible generalization of the results, given that this study specifically covers a single undergraduate course in nursing. It is emphasized that there is a need for the Mental Health area to be part of Pandemic Crisis Coping Committees, with the aim of establishing specific guidelines aimed at reducing the damage caused to people.

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The experience of social distancing of nursing students during the COVID-19 pandemic


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