



Nurse academicians' experiences in the pandemic and their perspectives on future pandemics – a qualitative study

Sevecen Çelik İnce ¹, Yeliz Dinçer ²

¹ Psychiatric Nursing Department, Faculty of Health Science, Zonguldak Bülent Ecevit University, Zonguldak, Turkey

² Womens Health and Disease Nursing Department, Faculty of Health Science, Zonguldak Bülent Ecevit University, Zonguldak, Turkey

ABSTRACT

Introduction and aim. The COVID-19 pandemic, which affects the whole world, has also significantly affected nurses, nursing students and nursing academicians. This study aims to determine the experiences of nurse academicians and their perspectives on possible future pandemics.

Material and methods. The study is a descriptive qualitative type. It was conducted in September-December 2022 in the Department of Nursing, Faculty of Health Sciences, of a university located in the west of Turkey. The sample of the study consisted of 11 nurse academicians. Personal Information Form, Interview Form on COVID-19 Pandemic Experiences and voice recorder were used to collect data. Data analysis was done with content analysis.

Results. As a result of the analysis of the data obtained from the interviews, four main themes emerged: (1) nurse academicians and nursing education in the pandemic, (2) the impact of the pandemic on life, (3) the gains in the pandemic, and (4) suggestions for future pandemics.

Conclusion. As a result of this study, it was determined that nurse academicians' families, social, and academic lives, and health were deeply affected during the pandemic, but they also found opportunities during the pandemic. It is thought that guidelines and action plans are needed to ensure the safety of nursing education for future pandemic-like situations and to minimize the problems experienced by academic nurses. For this, it is recommended to reconsider the technical possibilities and methods of education.

Keywords. distance education, nurse academicians, nursing education, pandemic

Introduction

The COVID-19 (Coronavirus 2019) pandemic, which emerged in China in the last months of 2019 and shook the whole world at the beginning of 2020, has affected the world population in many ways, spiritually, physically, socially, economically, and politically.¹⁻⁴ As the geographic area where the virus spreads, cases have increased rapidly and there has been a rapid increase in the number of virus-related deaths.⁴ In this whole process, the health system and the education system are at the forefront of the systems most af-

ected by the virüs.² In addition to nurses who have an important place in the health system, nurse academicians, and student nurses have been affected in many ways.⁵ During the pandemic process, many measures have been taken to prevent the spread of the epidemic around the world, such as quarantine, social distance, social isolation, curfew and interruption of education.^{6,7} While these measures implemented in Turkey interrupted collective activities, many routine activities in daily life, they also affected education and training activities.^{8,9}

Corresponding author: Sevecen Çelik İnce, e-mail: sevecencelik@hotmail.com, sevecencelik@beun.edu.tr

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In the COVID-19 pandemic, the distance education process has been started in higher education institutions in Turkey as of March 23, 2020.¹⁰ The transition to the distance education system within the scope of complying with the quarantine and social distance rules has affected the educational activities and working conditions of the academicians working in higher education institutions. In addition, this unexpected situation required academic nurses to adapt quickly.^{10,11} Nurse academicians who carried out the face-to-face education system in classroom settings and clinical practices found themselves under new conditions. These rapid changes in education have forced academic nurses to make important changes such as planning theory lessons, making new plans for applied lessons, measurement and evaluation in a very short time.^{5,10,12} Along with these rapid changes, it has been observed that the pandemic process has been difficult for academics who have to continue to carry out academic studies and projects.^{10,12,13}

In the literature, it is seen that there are studies on how nursing education, nursing students and clinician nurses are affected mostly. Although it is seen that academicians as well as nurses and nursing students were affected significantly during the pandemic process, the inadequacy of studies on this subject draws attention.¹²

Aim

The aim of this study is to learn the experiences of nurse academicians about what they have experienced in their nursing education and life in the COVID-19 pandemic and to determine their perspectives as nurse academicians regarding future pandemics. In the literature, studies that deal with what nurse academicians experience during the pandemic process are quite inadequate. It is thought that the results of this study will guide the plans to be made to realize and reduce the negative effects of the COVID-19 pandemic, whose footprints have not been erased from our lives yet, and pandemic-like situations that may occur in the future, which may cause problems in the lives of nurse academicians and nursing education. In the light of all these findings, it is aimed to create a road map regarding the measures that can be taken against extraordinary situations that may arise in the future and the aspects that need to be developed.

Material and methods

Ethics approval

Ethical approval was obtained from the Human Research Ethics Committee of Zonguldak Bülent Ecevit University (Date 01.07.2022 and number 185771) to conduct the research. Written permission of the institution was obtained on 20.07.2022 from the faculty where the research was conducted. Verbal and written consents were obtained from the academic nurses participating in the study.

Study design

The report of this study was written using the COREQ (Consolidated Criteria for Reporting Qualitative Research Guidelines), a guide to writing qualitative research.¹⁴

This study was conducted in a descriptive qualitative type. Descriptive qualitative design is frequently used in studies in the field of health. Descriptive qualitative studies are seen as the most appropriate method to describe the different experiences of the participants and the subjective nature of the problem in accordance with the research question.¹⁵

Setting

The research was conducted between September 2022 and December 2022 in the Department of Nursing, Faculty of Health Sciences, of a university located in the west of Turkey.

Participants

The population of the study consisted of nurse academicians in the Nursing Department of the Faculty of Health Sciences of a university located in the west of Turkey. There are 23 nurse academicians in total in the Nursing Department. Purposive sampling method was used in this study. Since this study was in a qualitative design, the sample size was determined when it reached the saturation point. In qualitative research, a sampling approach is used, which requires continuing to collect data until the stage (saturation point) when the concepts and processes that may be the answer to the research question begin to repeat.¹⁶ When the emerging concepts and processes start to repeat each other, it is decided that a sufficient number of data sources have been reached.¹⁶ 11 nurse academicians formed the sample of this study.

Inclusion criteria for this study; to work as a nurse academician in the faculty where this study was conducted, to be a nurse academician during the pandemic period, and to volunteer to participate in this study. Exclusion criteria from this study: not volunteering to participate in the study, starting to work as an academic nurse after the pandemic.

Data collections

“Personal Information Form” and “Interview Form Regarding COVID-19 Pandemic Experiences” were used to collect the data of the study. A voice recorder was used to record the interview data.

Personal Information Form

It was prepared by the researchers by scanning the literature, and questions of academic nurses' age, gender, marital status, education level, income status, title, family type, presence of chronic disease, academic year of study are included.¹²

Interview Form Regarding COVID-19 Pandemic Experiences

This form was created by researchers to better understand the experiences of academic nurses during the pandemic process by scanning the literature. Semi-structured interview technique was used in the interview. In this technique, an interview form containing the questions planned to be asked beforehand was prepared. On the other hand, depending on the flow of the interview, sub-questions were asked during the interview (Table 1). The questions used in the interview were prepared by the authors according to the aim of the study by scanning the literature. Before starting the study, it was used in the study sample after taking the opinions of two academicians from different faculties regarding the interview questions.

Table 1. Semi-structured Interview Questions

Questions
– Could you tell us a little bit about what it was like to be an academic nurse during the COVID-19 pandemic?
– Do you think your life has been affected by the COVID-19 pandemic? How?
– Has your health been affected by the COVID-19 pandemic? How?
– What kind of problems did you experience in nursing education during the COVID-19 pandemic?
– What are the gains of the COVID-19 pandemic for you?
– As an academic, what are your suggestions for investments to be made in academics in the upcoming pandemics?

An announcement was made to the nurse academicians working in the faculty where the study was conducted, from the partner department network. After the announcement, an interview appointment was planned with the nurse academicians who volunteered to participate in the study and interviews were started. The interviews were conducted by the first researcher. The data were collected by in-depth individual interview method with nurse academicians who met the criteria for inclusion in the sampling. At the beginning of the interview, the nurses were informed about the purpose of the research and how to do it. After informing about the use of a voice recorder, verbal and written consents were obtained. With the permission of the nurse academicians, the notes of the data were kept.

Data analysis

In the analysis of the data obtained with the interview form, a three-stage method suggested by Creswell was followed.¹⁷ In the first stage, the audio recordings of the interviews were first transcribed, field notes were added, and the transcripts were read several times to gain a deep understanding. In the second stage, the transcripts were divided into meaningful codes according to the purpose of the research in order to describe and interpret the data. The codes obtained in the third stage were

evaluated and conceptually similar codes were classified. After the classification, the themes were determined. The analysis was carried out individually and independently by two researchers.¹⁷ After the individual analyzes, the researchers came together and discussed the themes and sub-themes by critically evaluating the data in accordance with the research purpose. They agreed on the themes that best described the findings. During the analysis, the researchers did not allow their own values and beliefs to influence the analysis.

Rigor and reflectivity

The principles of credibility, transferability, consistency and confirmability were used to strengthen Rigour.¹⁸ Long-term interaction is important in ensuring internal validity. Interviews with nurse academicians in the study lasted an average of 31 minutes. The researchers clearly presented the sufficiency of the data they obtained to answer the research question to the reader in the findings section. The interviews were concluded in accordance with the aim of the study and at the saturation point (depth-focused data collection). In order to ensure external validity, the researchers arranged the data according to the emerging themes and transferred them without adding comments (thick description). Nurse academicians included in the study were determined by purposive sampling method in accordance with the aim of the study. In ensuring internal reliability, the researchers were consistent in all interviews by using the same voice recorder and interview form. In order to ensure external reliability, all data collection tools, audio recordings, raw data, codes and themes created during the analysis were examined by the expert and stored for use when necessary. All of the researchers are women and the first researcher (PhD) is an academician in the field of mental health and psychiatric nursing, and the second (PhD) is an academician in the field of obstetrics and gynecology nursing. Researchers are experienced in qualitative method. The nurse academicians participating in the study work in the same faculty as the researchers, and the participants were informed about the aim of the study before starting the study. Also as the researchers themselves were academic nurses, they were therefore interested in the research topic.

Results

The average age of the academician nurses participating in the research is 39.72±7.19 years. All of the academic nurses are women, 6 of them are married, 7 of them are doctoral and 9 of them live in a nuclear family. The average working year of academic nurses varies between 6 months and 25 years (Table 2).

As a result of the analysis of the data obtained from the interviews, four main themes emerged as (1) nurse academicians and nursing education in the pandemic,

Table 2. Sociodemographic and academic characteristics of nurse academicians

Nurse academicians no	Age	Gender	Marital status	Family Type	Educational status	Academic title	Department	Years of working as an academic	Having a chronic illness
N1	44	Female	Married	Nuclear Family	PhD	Associate professor	Psychiatric nursing	18	No
N2	48	Female	Single	Nuclear Family	PhD	Assistant professor	Child Health and Diseases Nursing	22	Diabetes mellitus Hypertension
N3	37	Female	Married	Nuclear Family	PhD	Assistant professor	Nursing Fundamentals	9	Psoriasis
N4	55	Female	Married	Nuclear Family	Master	Lecturer	Public Health Nursing	25	Rhythm disorder
N5	42	Female	Single	Nuclear Family	PhD	Lecturer	Public Health Nursing	18	No
N6	40	Female	Single	Nuclear Family	PhD	Lecturer	Child Health and Diseases Nursing	1	Crohn's disease, Ankylosing spondylitis
N7	30	Female	Married	Nuclear Family	Master	Lecturer	Public Health Nursing	<1	No
N8	38	Female	Single	Alone	Master	Lecturer	Internal Medicine Nursing	7	No
N9	34	Female	Married	Nuclear Family	PhD	Research Assistant	Surgical Diseases Nursing	5	No
N10	34	Female	Married	Nuclear Family	PhD	Research Assistant	Nursing Fundamentals	9	No
N11	35	Female	Single	Alone	Master	Research Assistant	Child Health and Diseases Nursing	1.5	No

(2) the impact of the pandemic on life, (3) the gains in the pandemic, and (4) suggestions for future pandemics.

Theme 1

Nurse academicians and nursing education in the pandemic

Two sub-themes were discussed under this theme. Nurse academicians defined being an academic nurse during the pandemic period and evaluated nursing education in the pandemic process from the perspective of academicians.

Sub-theme 1. Being an academic nurse in the pandemic

Nurse academicians expressed their perceptions about being an academic nurse during the pandemic period. Four of them expressed being an academic nurse during the pandemic as a difficult, challenging and worrying process.

“Being a nurse academician during the pandemic period was a difficult and worrying process that made us very difficult. Because we carry out most of our training in clinical practice, we ate the biggest ax from here.....” (N8)

“It was difficult, there were technological difficulties. The student’s adaptation was difficult, our adaptation was difficult. There were concerns, of course. Do students attend classes? Can I transfer the knowledge and skill I want to convey to the student?” (N10)

Two of them stated that they were confused when they thought of their colleagues in the field during the pandemic period, and there were questions about how to prepare nursing students for the profession in this situation.

“Being an academic nurse.... So it was like, what are we going to do now? I wonder if we go to the clinic and get support? When I saw how hard they (the nurses in the field) were struggling, that faltering really happened to me...”(N3)

A few of them stated that they perceived being an academician nurse during the pandemic as a dream, as

if it was a dream. Another stated that he felt lucky to be at home during this period.

“I felt lucky, it was a chance for me to be a nurse academic. I joined more organizations both academically and was at home. We were away from most risks” (N9)

Nurse academicians expressed various metaphors about being a academic nurse during the pandemic. They explained being a academic nurse in the pandemic with the concepts of empowerment, self-sacrifice, warrior, dedication, chaos, iceberg, luck, and being strong.

“Iceberg, I think it was an iceberg... The iceberg has a background. Maybe we spent 3-4 times the effort we spent in normal education during the pandemic. We had many sleepless nights. From the outside, even though it is said, “oh how comfortable you are, you are at home, you have worked from a desk”, there are parts of the iceberg that are not visible.” (N8)

“Devotion. Like this; Online education was a process that we were not used to at all. We had to learn it. At the same time, we made an effort to convey everything we know to the student.” (N11)

Sub-theme 2. Nursing education in the pandemic

Nurse academicians evaluated nursing education during the pandemic period. All of them mentioned the negative impact of the pandemic on nursing education, nursing educators and nursing students.

All of them expressed the negative aspects of nursing education, especially the practice part of it, during the pandemic process, and the majority of them described the practice part of education as a loss. They stated that they experienced internet connection problems and lack of technological infrastructure while teaching in distance education. Five of them stated that they had difficulty in joining the students to the online courses, three of them stated that they had no face-to-face interaction with the students in the lessons, and they had anxiety

about the effectiveness of the online course. One nurse academician stated that as an academician, he could not get any satisfaction in this process.

“As an academic, I love face-to-face contact, face-to-face communication. But in online classes, it’s like you’re really lecturing on the wall. No reaction, no interactivity...” (N6)

It was stated that the other problem experienced by nurse academicians in distance education is about the evaluation of students. Two of them stated that online assessment of students threatens the safety of the exam, and three of them stated that the success results cannot be obtained by measuring enough.

“There were connection problems. There were systemic infrastructure problems. There was an atmosphere of chaos. Exams were a little challenging. It was not an environment for measuring knowledge... The number of students is high. Classic or test? It was very difficult to distinguish and evaluate this.” (N7)

Nurse academicians expressed the difficulties they experienced in providing distance education at home. One of them stated that there was no suitable environment to teach the lesson at home and that he could not concentrate on conducting the lesson. Nurse academicians also expressed the negative impact of distance education on nursing students. In this direction, one participant stated that nurses with communication weakness were trained during the pandemic process, one participant stated that students could not attend their classes due to housework at home, and two participants stated that students had problems in accessing the internet and connecting to the lesson.

“Nursing is a profession that includes human relations... When this process progresses through the technological infrastructure, our students have deficiencies in this sense.” (N7)

Theme 2. Impact of the pandemic on life

Three sub-themes were discussed under this theme. Academic nurses talked about the impact of the pandemic period on family and social life, on their own health and academic life.

Sub-theme 1. The effect of the pandemic on family and social life

Nurse academicians, who had to carry out quarantine processes and education activities from home during the pandemic period, stated that their family and social lives were adversely affected at that time. Three of them stated that they experienced loneliness, longing and loss of motivation because they could not meet with their family members and close friends for a long time due to the prohibition of intercity transportation, while one of them stated that he could not meet with them face to face due to the anxiety of infecting his family.

“Even if you are not COVID, you have to think about the other person. You have to limit your relationships. Emotionally, it really pushes you into the void...” (N6)

“We were providing video interviews with the technological infrastructure, but we found the end of the process very pessimistic both for my family and for me... Since I couldn’t see them, I couldn’t be motivated..” (N7)

Some of the nurse academicians stated that they lost their relatives due to the pandemic and could not attend the funerals of their relatives.

“I lost three of my relatives due to COVID. Funeral procedures and burial were very troublesome. You can’t go to the hospital with them, as if you are a foreigner or I don’t know, it’s very serious like that you will never be approached.” (N5)

Some of the nurse academicians stated that their workload at home increased due to being at home during the pandemic and that they had difficulties due to the lack of spousal support during this period. They stated that they had difficulties due to the combination of responsibilities such as housework, following the lessons of the children, and conducting their own education and training activities during the pandemic.

“Then you feel very stuck, involuntarily. The burden of both the children and the house. You never go out. Of course, all the food, cleaning, etc., child and patient of the house are on you. It was actually a very tiring period for me.” (N9)

Sub-theme 2. Impact of the pandemic on health

Nurse academicians mentioned that their physical and mental health were adversely affected during the pandemic process. They stated that they experienced vision and sleep problems due to long hours in front of the computer, they gained weight, the course of their chronic diseases worsened and they were tired.

“In terms of education, I was at the computer for eight hours from morning to evening. In the meantime, I really felt my eyes and pupils tremble... Being in front of the screen all the time made me tired.” (N1)

“I slept late at night, there were times when I had to get up very early in the morning. The thing that impressed me the most was the recurrence of my chronic diseases a little more. Because I have gained weight. This triggered my diabetes a lot. I had to switch to insulin during this process.” (N2)

During the pandemic period, the nurse academicians especially stated that their mental health deteriorated. It was determined that they experienced especially anxiety, fear, lack of motivation, loneliness, psychological fatigue, feeling of being stuck and felt depressed during the pandemic. An academician stated that he started using antidepressants due to the mental problems he experienced during this period.

“Psychological fatigue, I didn’t want to do anything. We worked 24 hours at home, we never stopped. There are

lessons during the day, after the end of the lessons we have meetings with the school. So it was very tiring.” (N3)

Sub-theme 3. The effect of the pandemic on academic life
Nurse academicians talked about the impact of the pandemic on their graduate education, scientific studies, thesis and research processes.

The majority of nurse academicians stated that they could not get permission from the institutions where they would conduct scientific research due to the pandemic, they could not collect data, they had to collect data online, they had to change the methods of ongoing research, the academics whose thesis continued had to change their thesis from the beginning and the research processes were disrupted. Some stated that they had to take a break from the postgraduate education process.

“I was in the data collection process of my doctoral thesis, I was nearing the end, and when there were sudden closures, my academic process in the doctorate was interrupted and prolonged.” (N3)

Nurse academicians with children, on the other hand, stated that they could not spare time for academic studies, focus and lack academic motivation due to caring for the child and housework in quarantine at home.

“Some academics may have completed their unfinished work in this pandemic, there was less workload at home, but for me, for all academics with small children, I think it was difficult to work at home.” (N9)

Theme 3. Gains in the pandemic

Nurse academicians also talked about the positive impact of the pandemic period on their lives. A few stated that they had opportunities for their academic and personal development while in quarantine, and one considered this period as an opportunity to improve the methods used in nursing education.

“I got life coaching and EFT (Emotional Freedom-Technique) certificate to keep myself busy during the pandemic process, which supported my academic studies” (N2)

“We had an opportunity to update ourselves and keep up with the times in terms of teaching methods.” (N1)

Some stated that during the pandemic period, a new field of research related to the pandemic emerged, there was time to produce projects, they increased their international connections through online communication, and they had the opportunity to participate in online international congresses.

“Right now, I can easily get an education online where I can spend thousands of liras and spend my days and stay there. I think this is a very good achievement. Because the time of us academics is very valuable.” (N2)

“Thanks to online trainings, webinars, congresses, and online training environments have postponed the difficulties of physical conditions. Especially now, I am looking at

the face-to-face congress fees are really high. Access to information has become easier.” (N7)

Theme 4. Suggestions for future pandemics

Nurse academicians evaluated our state of readiness for a possible pandemic and similar crisis in the future in terms of nursing education and academics. All of them stated that the difficulties brought by the pandemic were forgotten due to the decrease in the visible effect of the pandemic and that the preparations for possible pandemics were insufficient. In this direction, most of the academic nurses have discussed three situations and made suggestions for future pandemics and similar crisis situations. These three situations: should nursing students be in the clinic during the pandemic, are we ready for a new possible pandemic? What should the new pandemic preparations include as an academic nurse in nursing education?

The majority of nurse academicians stated that they should continue their education in the clinic when they are sure that the student is ready after the necessary precautions are taken for the students in pandemic situations.

“Most of our students who graduated and were appointed during the pandemic period suddenly found themselves caring for a pandemic patient... Actually, stopping our (clinical) education made no sense in this regard.” (N9)

All of the academic nurses stated that we are not ready enough for a new pandemic in terms of nursing education and overcoming the difficulties experienced by academic nurses.

“We are not ready for the (new) pandemic, we are not ready technically, in terms of our cooperation in hospitals, the consumables that students will use here, their extra special conditions, the entrance and exit of teachers and our permission processes in clinical practices” (N1)

Nurse academicians have made some suggestions in order not to experience the problems experienced in education again in case of a new pandemic. Some of these suggestions are the creation of clean areas for clinical applications, the preparation of emergency action plans and guides, the preparation of students for clinical applications, the development of telemedicine, telenursing and simulation applications.

“Right now we are pretending that the pandemic is over, everything is over, but the pandemic is not and will not end. It’s not something that can be accomplished with individual efforts. Socially, so it’s organizational. We can have associations. I think we should sit down and talk about what we are going to do about education in the pandemic by establishing a cooperation, a consensus. Or, for this, emergency action plans and our pandemic guides need to be formed.” (N1)

“Even if there is no pandemic, the number of students is high, the number of teachers is low, and the clinical

practice areas are limited. In other words, the number of simulation laboratories should increase, we need to work on more scenarios and adapt the student to the clinic at school first”(N2)

Discussion

In this study, it is aimed to determine the experiences of nurse academicians and their perspectives on possible future pandemics in the COVID-19 pandemic. As a result of the data obtained in the study, four main themes emerged.

The first finding under the first theme obtained from this qualitative study is that being an academic nurse during the pandemic period is a difficult, challenging and worrying process and requires being a warrior and self-sacrifice. In the literature, studies that determine the meaning of being an academic nurse in the pandemic are quite limited. As a result of a similar study conducted with 14 academic nurse educators in the USA, it is seen that the experience of being an academic in the pandemic is defined as “chaotic”, “a rollercoaster consisting of tasks and emotions”.¹² Conducting studies that determine the experiences of academicians about being an academic nurse during the pandemic can guide the planning to prevent similar difficult experiences in future pandemics. The other finding under the first theme obtained from this qualitative study is the negative effect of the pandemic on nursing education from the perspective of academicians. It has been determined that academic nurses have problems connecting to the internet while conducting distance education courses, they have a lack of technological infrastructure, they have difficulty in adding students to the courses, and they are worried about the teaching of online courses. Another finding is that conducting the applied courses of the students remotely in nursing education is seen as a lost time in learning the profession. It is seen that there are similar problems in the limited study in this dimension in the literature.^{19–21} As a result of a similar qualitative study conducted with 12 nurse educators and 7 nursing students in Iran, nurse educators mentioned many difficulties such as infrastructure problems in the virtual education system, time-consuming preparation of the educational content and low teacher-student interaction.¹⁹ In the literature discussing the impact of the pandemic on nursing education, the concerns of nurse academicians about the quality of education regarding accelerated curriculum and reduced clinical practice hours draw attention.²² As a result of a similar study conducted in the USA, it was determined that academic nurses sought to find out how to teach students online during the pandemic.¹² Clinical practice in nursing education is a learning opportunity for nursing students and is very important in developing their professional identity and focusing on the nursing role.²² It is stated that the

professional development of students has been affected significantly due to the closure of universities in nursing education in the pandemic, the suspension of clinical practices and the replacement of face-to-face courses by distance education.²² As a result of the similar study conducted by Tolyat et al. with nursing students and academician students during the pandemic, it was determined that nursing students had insufficient self-esteem in gaining professional clinical competence in the pandemic.¹⁹ Although the impact of the COVID-19 pandemic on the clinical competence of students has not been objectively investigated, it can be deduced that students did not acquire the necessary clinical competences during the pandemic period when viewed from the perspective of academic nurses.^{19,22} For this reason, studies should be carried out on innovative methods that can efficiently provide student competence, especially for clinical applications, in nursing education for possible pandemics in the future.

In this study, under the second theme, the effects of the pandemic on the family, social and academic life and health of academicians were revealed. Due to the quarantine practices taken during the pandemic, it was determined that nurse academicians experienced loneliness, longing and anxiety in their family and social life, lost their family relatives from COVID, and increased workload and responsibilities at home. Studies that determine how the family and social life of academic nurses are affected during the pandemic are quite limited.¹⁰ As a result of a similar study conducted with 102 academic nurses in Turkey, it was determined that the majority of nurse academicians had the opportunity to spend more time with their families during the pandemic period, although they missed spending time with friends and relatives. In the same study, it was determined that academic nurses were worried that something would happen to the people around them, and they spared time for housework rather than academic studies.¹⁰ In a similar study conducted with academicians, it was determined that their social lives were negatively affected during the pandemic.²³ As a result, it can be said that due to the pandemic, the workload of academicians at home has increased more and this situation affects their academic activities.

In this study, it was determined that academic nurses experienced vision and sleep problems, physical health problems such as weight gain, worsening of the course of chronic diseases, and mental health problems such as anxiety, fear, loneliness, psychological fatigue, and depression. The studies on the effect of the pandemic on the health of academic nurses could not be reached. In the literature, it is seen that there are studies investigating the effect of the pandemic on the health of academicians.^{23,24} In a qualitative study examining the effects on mental health, it was determined that ac-

ademicians experienced anxiety, fear, stress, depression towards themselves and their family members, resulting in sleep and weight gain problems, and an increase in existing health problems.²³ As a result, it is seen that the pandemic experience greatly affects the health of academicians. Another result of this study is that nurse academicians have problems in obtaining institutional permission for scientific research, collecting data, and maintaining ongoing research during the pandemic. In addition, it was determined that they could not allocate time for academic studies, focus and lack academic motivation due to the increased burden of children and household chores at home. It is seen that similar results were obtained in a limited study in the literature. As a result of a similar study, it was determined that the majority of academic nurses experienced the anxiety of not being able to continue their projects due to the pandemic and not being able to collect research data, which negatively affected their academic performance.¹⁰ It was determined that the inability to collect data and the inability to continue academic studies due to circumstances negatively affected nurse academics as well as other academics.²⁵ In a similar study conducted in Turkey with midwifery academicians, it was determined that the majority of them had problems during the research process, especially during the data collection phase, due to the pandemic.²⁶ As a result, finding solutions to these problems experienced for a possible pandemic is necessary for academicians to continue their research processes.

Under the third theme of this qualitative study, the achievements of nurse academicians during the pandemic period were discussed. Some of the nurse academicians stated that they had opportunities for their academic and personal development in the pandemic despite the negativities and chaos brought by the pandemic. Similar results are found in the limited studies conducted with academic nurses in the literature.^{10,12} In similar studies, the majority of academic nurses saw the pandemic period as an opportunity to finish the postponed works, to plan new research, to write book chapters and articles. And they stated that they can participate in free education programs.^{10,21} It is also clear that the COVID-19 pandemic process has brought many opportunities for universities and scientific communities. It is seen that with online trainings, academicians nurses gain experience and prepare to enter the educational age in which new methods are used.²⁷

Under the fourth theme obtained from this study, academic nurses made evaluations and made suggestions on nursing education related to possible pandemic-like crisis situations. It has been determined that there are suggestions for nursing students to continue their clinical education after taking the necessary precautions in pandemics, to continue their nursing ed-

ucation efficiently, to prepare for a new pandemic, to develop telemedicine, telenursing and simulation applications in order to overcome the difficulties experienced by academic nurses. Looking at the ICN 2022 theme reveals the importance of investing in nursing for global health.²⁸ Therefore, the basis of investment in nursing starts with a good nursing education. The COVID-19 pandemic, which has seriously threatened global health for the last three years, has had a significant negative impact on nurses, students, nursing academics, and therefore nursing education, and has shown the importance of investing in nursing.⁵ The quality of undergraduate, graduate and postgraduate education programs in nursing is very important for global health. For this reason, it is clear that it is necessary to be prepared for possible pandemic-like crises in the future.

Study limitations

The present study has several limitations. First, due to the nature of qualitative research, the sample size of this research is limited. In addition, all of them are female academic nurses. The experiences of male academic nurses should be investigated.

Conclusion

In this present study, the difficulties experienced by nurse academicians in nursing education, family and social life, academic life, and mental and physical health during the pandemic draw attention. Despite these difficulties, it is seen that nurse academicians are trying to provide nursing education in the most efficient way by using innovative technological education methods during the pandemic period, and they can catch opportunities to improve themselves academically and individually. All of the academic nurses participating in the study stated that due to the decrease in the visible effect of the pandemic, the difficulties brought by the pandemic were forgotten and the preparations for new pandemics were insufficient.

Nursing academics especially drew attention to the necessity of preparing for new possible pandemic-like crises. For this reason, it is seen that there is a need for clear guidelines and action plans that can be used in situations similar to the new pandemic, taking into account the needs of current and future nursing students in order to ensure the safety of academic nurses and nursing education, which will significantly affect global health. It is recommended that nurse academicians consider the technical possibilities and methods necessary for education, which lays the foundation for the feeling of inadequacy in education that arises with many problems experienced in the distance education process, especially in the distance education process, without waiting for a new pandemic-like situation to occur.

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Author contributions

Conceptualization, S.Ç.İ.; Methodology, S.Ç.İ. and Y.D.; Software, S.Ç.İ.; Validation, S.Ç.İ. and Y.D.; Formal Analysis, S.Ç.İ. and Y.D.; Investigation, S.Ç.İ. and Y.D.; Resources, S.Ç.İ. and Y.D.; Writing – Original Draft Preparation, S.Ç.İ.; Visualization, S.Ç.İ. and Y.D.; Supervision, S.Ç.İ. and Y.D.; Project Administration, S.Ç.İ.; Funding Acquisition, S.Ç.İ. and Y.D.

Conflicts of interest

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Data availability

Data available on request from the authors.

Ethics approval

Ethical approval was obtained from the Human Research Ethics Committee of Zonguldak Bülent Ecevit University (Decision date 01.07.2022 and decision number 185771) to conduct the research. Written permission of the institution was obtained on 20.07.2022 from the faculty where the research was conducted. Verbal and written consents were obtained from the academic nurses participating in the study.

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