

Evaluation of the psychological problems experienced by university students during the COVID-19 outbreak and suggestions

To the Editor,

The coronavirus disease 2019 (COVID-19) outbreak that occurred in Wuhan, China, in the last months of 2019 was declared as a pandemic by the World Health Organization in March 2020.^{1,2} Many countries had to simultaneously take various measures, such as social distance, quarantine, and intercity travel ban, to reduce the spread of the virus, which can be rapidly transmitted from one individual to another through contact and saliva. Accordingly, all educational activities were stopped and the distance education process was started.³

During the COVID-19 outbreak, studies determining the problems and psychological distresses experienced by university students had been conducted. University students had more negative feelings, psychological symptoms, and economic/social concerns than the general population because of academic delays, economic effects of the pandemic, and its effects on their daily life.⁴⁻⁶ The students also experienced serious mental problems such as depression, anxiety, alexithymia, stress, and posttraumatic stress disorder.^{7,8} Due to all these problems experienced during the outbreak, Grubic et al.⁵ emphasized that academic institutions should especially plan interventions to develop coping skills for students by taking some precautions and identifying the deficiencies in educational progress to reduce negative academic and psychosocial outcomes.

During the COVID-19 outbreak, researchers suggested some programs to solve mental health problems. Mukhtar⁹ defined that the Psychological Crisis Intervention Program (PCIP) aimed to create areas that can be controlled to the person, as anxiety occurs as a result of the perception of uncontrollable events. To deal with stress, anxiety, and panic, PCIP includes maintaining hygiene, eating healthy, exercising, sleeping, introspection and meditation, painting, composing, dancing, learning instruments and language, knitting, gardening, cooking, reading books, listening to songs, watching movies or series, playing games, and writing their experiences and observations about the coronavirus process. Cheng et al.¹⁰ highlighted the Epidemic Peer Support Program (EPSP) to combat the crisis. The EPSP included self-care practices, eat and sleep hygiene, mindfulness-based techniques to relax and manage emotions, and communication skills such as active listening and empathy, music therapy, counseling, and problem-solving skills. Liu et al.¹¹ suggested the online psychological self-help intervention systems, including cognitive behavioral therapy for mental conditions, such as depression, anxiety, and insomnia during the COVID-19 outbreak.

Mukhtar⁹ emphasized that during and after the outbreak, professionally experienced and well-trained mental health practitioners, psychologists, psychotherapists, psychiatrists, and psychiatric nurses should provide psychological support because individuals are vulnerable and fragile. The same emphasis was made by the Chinese National Health Commission on January 27, 2020, underlining that mental health services should be provided by mental health professionals trained on intervention and related activities.⁷ "What can psychiatric nurses do to protect and improve the mental health of university students?" In line with this question, psychiatric nurses should devise plans considering that the issue should be addressed immediately. There is a need for a coordinated study that will cover all universities in cooperation with other associations by establishing a commission related to the target group within the Psychiatric Nurses Associations in Turkey, China, Spain, Italy, United Kingdom, Germany, and France. This study has the unique perspective of work being done in January 2020 as COVID-19 had not fully exploded into other countries.

Psychiatric nurses should apply primary, secondary, and tertiary protection measures aimed at reducing the incidence of cases related to psychological disorders, the impacts of psychological disorders, and the disability caused by psychological disorders after treatment during the COVID-19 outbreak.¹² The mindfulness program can be applied to decrease stress, depression, and anxiety, and to improve psychological well-being in university students.¹³ Yüksel and Bahadır-Yılmaz¹⁴ suggested the mindfulness-based cognitive therapy program including stress, cope with stress, stress-coping methods, mindfulness, mindfulness-based techniques, and dysfunctional beliefs such as cognitive distortions and automatic thoughts.

Psychiatric nurses can develop stress coping skills to increase psychological resilience, effective coping skills, and self-esteem and to decrease psychological symptoms among university students.¹⁵ They can also use the Resilience and Coping Intervention designed to help the students identify thoughts, feelings, and coping strategies related to issues following a traumatic event or a problematic experience or related to everyday stressors.¹⁶ Social and emotional learning interventions such as the skills, attitudes, and behaviors for emotional regulation, critical and creative thinking, positive relationship, and skills of self-awareness, self-management, social awareness, and responsible decision-making can be delivered by psychiatric nurses.¹⁷

Noviona et al.¹⁸ developed a conceptual model for understanding meaning in life after disaster and identified some sources

such as having a good relationship, engaging in productive, social and creative activities, being involved in activities with emotional intention, and performing spiritual and religious activities. These resources can make it easier to cope with physical and emotional symptoms after and during the COVID-19 outbreak. Kılıç and Şimşek¹⁹ defined that psychiatric nurses can determine physical and psychological effects of disasters on university students, protect the physical and emotional safety of the students, identify urgent and basic needs using a supportive and compassionate approach, and encourage the students to increase self-efficacy with the implementation of psychological first aid training.

We are still in the acute period of the COVID-19 outbreak. Therefore, some universities have started to take distance education decisions for the next academic year. University students with psychological or academic problems existing before and during the COVID-19 outbreak should have been supported by psychiatric nurses or other mental health professionals.

CONFLICT OF INTERESTS

The authors declare that there are no conflict of interests.

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