

Original article

Potentials and limits of remote emergency mental health teaching in the context of COVID-19

Potencialidades e limites do ensino remoto emergencial de saúde mental no contexto da COVID-19

Potencialidades y límites de la enseñanza a distancia de la salud mental de emergencia en el contexto de COVID-19

Luciane Prado Kantorski^I, Carla Gabriela Wünsch^{II}, Thylia Teixeira Souza^{III},
Taís Alves Farias^I, Michele Mandagará de Oliveira^I

^I Universidade Federal de Pelotas (UFPEL), Pelotas/RS, Brasil

^{II} Universidade Federal do Mato Grosso (UFMT), Cuiabá/MT, Brasil

^{III} Universidade do Vale do Rio dos Sinos (UNISINOS), Porto Alegre/RS, Brasil

Abstract

Objective: to analyze the potentialities and limits of emergency remote teaching of a mental health discipline in the context of the COVID-19 pandemic. **Method:** qualitative research that analyzed Google Forms data from an online questionnaire answered by students with open- and closed-ended questions. Data collection was conducted in September 2020 in a self-applied form and the learning environment dialogues in February 2021. Of the 223 concluding students, 128 responded to the online questionnaire. The thematic analysis sought the subjective manifestations of these students, and the sociodemographic information was transferred to a program and calculated according to the numerical average. **Results:** of the strengths and limitations, we highlight the collaboration of the discipline for the personal confrontation of the pandemic and the students' difficulties with internet access. **Conclusion:** it is necessary to reflect on the future of university education, pedagogical and work processes, and the infrastructure of the institutions.

Descriptors: COVID-19; Education, Higher; Education, Distance; Nursing; Mental Health

Resumo

Objetivo: analisar as potencialidades e os limites do ensino remoto emergencial de uma disciplina de saúde mental no contexto da pandemia da COVID-19. **Método:** pesquisa qualitativa que analisou os dados do *Google Forms* de questionário *online* respondido por estudantes com questões abertas e fechadas. A coleta de dados foi realizada em setembro de 2020, de forma autoaplicável, e os diálogos do ambiente de aprendizagem, em fevereiro de 2021. Dos 223

estudantes concluintes, 128 responderam ao questionário *online*. A análise temática buscou as manifestações subjetivas desses estudantes e as informações sociodemográficas foram transferidas para programa e calculadas conforme a média numérica. **Resultados:** das potencialidades e limitações, destacam-se a colaboração da disciplina para o enfrentamento pessoal da pandemia e as dificuldades dos alunos com o acesso à *internet*. **Conclusão:** é necessário refletir a respeito do futuro da formação universitária, dos processos pedagógicos e de trabalho, além da infraestrutura das instituições.

Descritores: COVID-19; Educação Superior; Educação a Distância; Enfermagem; Saúde Mental

Resumen

Objetivo: analizar las potencialidades y los límites de la enseñanza a distancia de una disciplina de salud mental en el contexto de la pandemia de COVID-19. **Método:** investigación cualitativa que analizó los datos de *Google Forms* de un cuestionario online respondido por los estudiantes con preguntas abiertas y cerradas. La recogida de datos se llevó a cabo en septiembre de 2020, de forma auto aplicada, y los diálogos sobre el entorno de aprendizaje en febrero de 2021. De los 223 estudiantes que concluyeron, 128 respondieron al cuestionario en línea. El análisis temático buscó las manifestaciones subjetivas de estos alumnos y la información sociodemográfica se trasladó al programa y se calculó según la media numérica. **Resultados:** de las potencialidades y limitaciones, se destaca la colaboración de la disciplina para el enfrentamiento personal de la pandemia y las dificultades de los estudiantes con el acceso a Internet. **Conclusión:** es necesario reflejar el futuro de la formación universitaria, de los procesos pedagógicos y de trabajo, además de la infraestructura de las instituciones.

Descriptores: COVID-19; Educación Superior; Educación a Distancia; Enfermería; Salud Mental

Introduction

Since the beginning of the New Coronavirus (COVID-19) pandemic, several social distancing measures have been adopted in the world to decrease the contagion of the disease and mitigate the saturation of the health system's capacity. Among them, the suspension of face-to-face classes, which has been carried out throughout the Brazilian territory, by means of municipal, state, and federal decrees, since March 2020.¹ It is known that the dimension caused by COVID-19 provoked a crisis in education at the international level, which generated recommendations for the implementation of emergency remote learning and the use of online platforms.¹⁻³

Online learning was not only implemented in response to the pandemic, since the development of the Internet and network technology allowed students to learn regardless of their location, this modality was extended to some higher-level courses as a partial or full replacement for face-to-face learning. Existing online courses, however, are conducted in a way that follows the planning for this format. Remote learning, on

the other hand, is an alternative format, exceptional and temporary in nature, differing from typical distance education.^{1,4-5}

The implications of emergent learning for students, teachers, and educational institutions are extensive, complex, and still emerging. Countries such as Portugal have reported new challenges faced, mainly regarding inequalities in access to electronic media and the socioeconomic and family conditions of students, which weaken teaching.² In Spain, a survey of nursing students found limitations for students, since their presence in health services is indispensable for practical classes.³

In nursing education, discussions about remote teaching arose long before the pandemic context, whose class organs such as the Federal Council of Nursing (COFEN), the respective regional councils, and social control, such as the National Health Council (CNS), are not in favor of this type of teaching modality, since it does not guarantee students the possibility of experiencing integral practices in human care. Moreover, the way this modality is practiced in the capitalist system reflects a large supply of low-cost courses that do not prioritize quality in their pedagogical structure.⁶

However, at this time of physical distance, technological tools and resources can be used to support and mediate learning in online courses, maintaining a link between the student and the university. And, despite the challenges of transposing teaching to the remote modality, professors also point out how challenging and enriching the moment is for their practice.⁷

Thus, the Nursing School of the Federal University of Pelotas (UFPel) developed, after the approval of the remote Alternative Academic Calendar, the optional discipline 'Mental Health and Psychosocial Care in Humanitarian Emergencies'. This was conceived to prepare university students for the experience of the pandemic, through scientific information, besides being a dynamic space for dialogue with students.

Therefore, in order to provide meaningful data that may lead to further development of emergency remote teaching, this paper aimed to analyze the potentials and limits of emergency remote teaching of a mental health discipline in the context of the COVID-19 pandemic.

Method

This is a qualitative research study based on an optional discipline entitled 'Mental Health and Psychosocial Care in Humanitarian Emergencies'. This was offered remotely and counted on the collaboration of eight PhD professors from the College of Nursing, one PhD from the College of Medicine and five students from the Postgraduate Program in Nursing at the Federal University of Pelotas (UFPel), Master's and PhD levels.

This was offered, with a total workload of 34 hours, to the entire UFPel academic community, with no pre-requisites, aiming to cover the student body of all UFPel undergraduate courses, i.e., the student could enroll even if he was a freshman in the first semester of his course.

The course was developed in the Virtual Learning Environment (VLE) with access through the university's e-learning platform. The methodological strategies used were asynchronous activities, with video classes, complementary readings, movie suggestions and discussion forums, and synchronous activities, such as lives through the social media YouTube and Facebook. Among the themes worked in the course are: (a) impacts of the pandemic of COVID-19 on the mental health of the population and health workers; (b) general principles of mental health care to people in humanitarian contexts of community emergencies; (c) coping strategies for signs and symptoms of acute stress, anxiety, depression, grief and suicide risk situations; (d) use of technologies in e-Mental Health and (e) online care in mental health.

The course started on June 26, 2020 and was organized into eight classes. In this study, data were collected from three classes (T51, T52 and T53), which, together, totaled 223 students who attended the course until the end, 72 in T51, 79 in T52 and 72 in T53. The choice of these classes is justified by the fact that three of the authors of this study develop their post-graduation teaching internship (master's and doctorate), in a mentoring format, with these students.

During the course, the students were in direct contact with the tutors through a space for sending messages. In this important space, tutors were able to answer students' questions, discuss requested activities, remind them about pending activities, help them use the virtual learning space, and welcome their difficulties and acknowledgments.

At the end of the course, the students were asked, via VLE, to fill out an online assessment questionnaire, through a link. Before the students had access to the questions, they were presented on the same platform, the Informed Consent Form, which requested their acceptance or not to participate in the research. All students who accessed the link agreed to participate in the study and completed the questionnaire to the end. No pilot test was conducted, and there were no duplicate fills.

The students' sociodemographic questionnaire asked about the course, gender, age, race/color, marital status, cohabitation, and location. The open-ended question asked if the student would recommend the course to someone else, requesting a justification, and, in addition, there was a space for the student to leave suggestions.

The data comes from Google Forms and was collected in the last weeks of the course, from September 15 to 30, 2020, in a self-applied form. In addition, the dialogues of the described learning environment were collected in February 2021, which made it possible to analyze the teaching-learning strategies, participation, and the potentials and limits of remote teaching.

The data analysis was performed after transferring the data from the Google Forms to a spreadsheet in Excel 2010, calculating them according to the numerical average in the program itself and presenting them descriptively. For the data obtained in the message space of the virtual learning platform and in the open question, qualitative data analysis was used.

From the qualitative information, it was sought to extract, through exhaustive reading, the subjective manifestations of these students regarding the experience of remote teaching in order to achieve the objective of this study. The contents composed the material for data analysis, which was based on thematic analysis,⁸ divided into three stages: the first refers to pre-analysis, which consists of the choice of materials to be analyzed and the resumption of the initial hypotheses and objectives of the research; the second is the exploration of the material, which starts from a classification operation aiming at the understanding of the analyzed content, and the third and last stage culminates in the treatment of the results obtained and interpretation, which must be performed according to the initial theoretical content.

The excerpts were numbered by the letter E for student and, sequentially, by numbers, according to the order of completion in Google forms, thus respecting the anonymity of the students. In addition, any names or mentions of places that could be identified and/or recognized were modified.

The research respected the ethical precepts according to Resolutions No. 466/2012, No. 510/2016 and No. 580/2018 of the Ministry of Health. It is part of the research project developed by the Faculty of Nursing at UFPel entitled 'Mental Health in times of the COVID-19 pandemic' and was approved under Opinion number 4,186,982, on August 1, 2020, by the Ethics Committee of the Faculty of Medicine of the Federal University of Pelotas.

Results

Of the three classes, which together totaled 223 students, 128 completed the evaluation form after the course ended. It is observed that the female gender represents 71.88% (n=92) and the male, 28.13% (36); regarding the age range, most participants were between 18 and 24 years old, 70.74% (n=100), followed by students between 25 and 39 years old, 23.25% (n=24), and 6.01% (n=4) were 40 years old or older. About 78.91% (n=101) were white, 12.50% (n=16) self-declared brown, followed by black (6.25%; n=8) and yellow (2.34%; n=3); 88.8% (n=113) checked single, 11.72% (n=15) are married or living with a partner or boyfriend.

Most of the students were from the state of Rio Grande do Sul in 92.97% of the cases (n=119); from São Paulo in 3.91% (n=5); from Minas Gerais in 2.34% (n=3) and 0.78% (n=1) of the students were from Pará. In addition, 110 forms (77.34%) were from health area students, with emphasis on: Medicine, with 51 (39.84%); Nursing, with 28 (21.88%); Psychology, with 11 (8.59%); Dentistry, with eight participants (6.25%); Nutrition, with three (2.34%); Physiotherapy, with two (1.56%) and Pharmacy, with one student (0.78%). Eighteen students (14.07%) were from the other courses.

Two categories were reached. The first, Potentiality of emergency remote teaching in mental health, was subdivided into three subcategories: Collaboration for personal confrontation of the pandemic; Knowledge for professional growth and Strategies for content organization. The second category, Limitations of emergency remote teaching in

mental health, was subdivided into three subcategories: The scarcity of interaction in remote teaching; Students' difficulties regarding technological aspects and Life events and difficulties in student participation.

Potentials of remote emergency mental health education

Collaboration for personal coping with the pandemic

The following excerpts show how the subject of mental health, remotely, could contribute for the students to acquire tools to face the changes that occurred due to COVID-19, whether they were due to the social distance and/or the emotional issues experienced. It is noteworthy the fact that the students reported an increase in knowledge regarding the theme, which allowed them to put into practice, with themselves, the orientations learned in the course.

It was a subject that added a lot to the professional training, since the theme of mental health will always be present in the profession, regardless of the area. It also helped me during the period of social isolation, I used several resources to deal with my anxiety. (A67)

I would recommend it, not only for the importance of the theme, but also for maintaining the student/teacher/university bond. It is very hard for me to assimilate that I lost an entire year of college. (A72)

In this very difficult period, this course taught me to better deal with everything around me and to better understand who me is around (A55)

Now we are going through, for me, this course was a relief during all this chaos, because I was able to learn and, thus, put into practice subjects that were covered in the course; this experience was really very good, now I am lighter in front of the situation, and can, in many moments, advise my family members about this moment. (A121)

At this time of pandemic, it is very important to study the issues that affect us psychologically, in addition to knowing how to deal with them, and to know how to guide other people who find themselves with emotional difficulties. (A106)

In addition, it is observed that they highlight the importance of the theme and recognize mental health as a theme present in several professions. This knowledge contributed to their relief and psychological tranquility.

Personal knowledge and professional growth

Many students responded that they would recommend the course to other colleagues and justified the recommendation because of the personal and professional growth they had gained during this difficult time.

I think it was very useful for my education. (A5)

Great knowledge acquired for life. (A11)

I would recommend it highly, because the subjects approached in the course are extremely edifying for any health professional. (A26)

The course provided great knowledge regarding life, feelings, emotions, understanding processes [...]. Enriching for any person and training. (A27)

Important for the current context and future similar situations, paying attention to mental health. (A87)

The reported knowledge was also highlighted as lessons for life either in the present or for future situations, which enabled them to better understand their feelings and emotions experienced during the pandemic.

Content Organization Strategies

Regarding the potentialities of the methodology used, the students emphasized that, with asynchronous activities, it was possible to perform the tasks at times that were more convenient for them. Another point discussed is the diversity of the means of presentation of the content, such as videotaped classes, forum, readings and lives.

Because it is a very quiet chair [subject], with plenty of asynchronous activities, allowing you to perform at your best time, with texts, video classes, lives and all the super important support materials for a better understanding of the subject of each module. (A3)

Facing the difficult moment in which we are going through, the course has added a lot in knowledge and exchange of experience with colleagues in the forum. The course encouraged me in each class to do research and learn more about each subject. The organization of the professors and tutors helped a lot! Everything was well explained and easy to access and understand. I would like to thank you for the commitment in each phase of this course. It was a very rich experience! (A103)

I am grateful for the opportunity to take the course and for all the knowledge I gained through it with the classes, the lives, the readings, the triggers and the forums and the wonderful professionals involved! The interaction that was made possible, even in an adapted way, was very important. (A125)

By the organization of the course, form of evaluation and the attention of the tutors with the students (A8)

Very organized discipline, well laid out assignments, always offered clear instructions of each week and relevant topics covered. I had a great experience with the optional subject, even better than my expectations! Many more than competent professionals teaching the subject. (A15)

I believe that the course was very organized and made all the students very comfortable and calm to do the activities. In addition, the contents are well contextualized with our reality and are relevant to our environment. It was an excellent experience. (A24)

Because it is a subject that works with a multidisciplinary approach, and I think this is very important and rich. (A71)

The topics covered were very interesting, from subjects such as anxiety and depression, to novelties in the health field such as e-health. (A110)

The organization of the course was a point commented by them several times, besides the form of assessment, attention given by tutors, multi-professional discussions and the relevance of the contents covered. The students highlighted important points in relation to didactics, highlighting the clear instructions and content contextualized with the regional and national reality.

Limitations of emergency remote teaching in mental health

The scarcity of interaction in remote teaching

In the same way that some students emphasized the methodology as a positive point, others, in turn, reported the limitations and the points that could be modified. The main points were related to the lack of dynamism of the recorded classes, the discussion forum, which sometimes had little interaction among students, with generic and unreflective posts, and the lack of synchronous spaces for discussions with the objective of clarifying doubts.

They also emphasized the lack of some distance learning alternatives such as web conference or synchronous classes.

Yes, but halfway through the course, the video lessons became very tiring, [...]. I did not feel like posting anything in the general forum. I felt a lack of reflection during the classes, of questioning that knowledge exposed in the mandatory textbooks. (A32)

[...] with the forum open, one read only generic statements about the theme of the week, sometimes interspersed with personal accounts, which motivated him to do basically the same, rarely escaping from a certain script, contributing to monotony. I emphasize that, due to some themes,

the subject revived the student's interest, but the logic of the participations was the same, which again cooled such mood. (A88)

In my opinion, to have a great overall use, the only thing missing was the interaction between teachers and students, especially to clear up doubts about the week's content. (A102)

The problem that occurred (in my opinion) is the EAD methodology, the contact student - teacher - colleagues is very complicated and the forum ends up not being a form of interaction. (A82)

The idea of the forum is very interesting; however, I believe that it should not be mandatory, but an environment to ask questions and make relevant comments. (A111)

For some of them, the main problem is the remote teaching itself due to the lack of face-to-face student interaction with professors and classmates. Spaces for answering questions and making free comments were pointed out as necessary. However, these should not be mandatory.

Difficulties of students in relation to technological aspects

The limitations for emergency remote teaching were reported highlighting the difficulties with internet access, the lack of familiarity with the VLE, and the lack of equipment to develop the tasks.

I just wanted to warn you that I am behind in some of the content of the subject because my laptop broke down two weeks ago, it took a while to get the part to fix it and I could only get it today. [...] I apologize for the delay; I hope this doesn't hurt my final grade. (A88)

My notebook is very old and ended up giving trouble just when I most needed it. Anyway, I hope you understand, hugs! (A40)

[...] I believe I did it the right way, but I am still in doubt, [...] (A66)

I am working in a city in the interior and had a hard time learning about the subject because of internet problems. But now I've managed to do the activities and am reading the required bibliography (A128)

I had some problems with access, but now I am getting it back to normal. I work in the public security area, and we are in great demand due to the pandemic, but I intend to organize myself in my studies yes, I think the course is very important. (A57)

[...] I am having difficulties to access the platform and post the messages in the general forum, because I don't understand how it works yet. (A75)

The only difficulty I had was in relation to the layout of the site and arrangement of the content, sometimes I did not know in which forum to comment or in which topic it was mandatory to give an opinion. (A97)

I found it very complicated [the platform for sending the task], I couldn't send it. Can I send it by e-mail? [...] (A124)

[...] In this quarantine, I am isolated on the farm with my parents. The rural internet is bad, and I have been accessing the internet very little. (A63)

The difficulties reported impacted, according to the students, on meeting deadlines for accessing and reading content, developing and submitting assignments.

Life events and difficulties in student participation

Personal issues, mainly related to the students' mental health, affected participation in the course. In addition, health problems of family members also appeared as a limiting factor. Other aspects discussed were difficulties with the daily routine, which needs to be divided between study and work.

[...] Tive diversos problemas durante essa semana relacionados à minha saúde mental, não tive a possibilidade de tocar em nenhum dos meus afazeres desde o início da semana passada [...]. (A101)

[...] I had several problems during this week related to my mental health, I haven't had the possibility to touch any of my tasks since the beginning of last week [...]. (A101)

I was absent from the course because, unfortunately, my grandmother had to be hospitalized and my mother tested positive for COVID, it was a very difficult two weeks! But I hope to get back to my study routine as soon as possible! (A50)

[...] I am already a health professional and from the frontline in the general ICU and ICU COVID of [...], I was away without being able to participate in the forums, but this week I attended all classes that were available, I, as from the frontline, contracted the COVID-19 virus and have been having terrible days (A67)

I work in a supermarket, and it's been stressful for me these days of the pandemic. (A36)

I had difficulties in keeping attendance and ended up missing activities, but I was notified and communicated by the course instructors, I thought it was great. Not only because of their interest as advisors, but, above all, as human beings who cared about my absence. (A128)

The excerpts demonstrate the students' uncertainties during the pandemic. However, they show concern in justifying the absence in the development of the activities and emphasize the continuity of the tasks. In addition, the tutors' follow-up seems to have a positive influence on the students' participation in the course.

Discussion

The sociodemographic data of this study revealed that the students of the subject were mostly women, between 18 and 24 years old, white and single. They were from the state of Rio Grande do Sul, in the health area, and studying medicine.

Although this is a sample from UFPel, these data are like those found in the national survey that identified the socioeconomic profile of undergraduate students in Higher Education Federal Institutions (IFES), differing in the race, in which 51.2% of the surveyed population is black.⁹

Although the students of the subject are mostly white, the democratization of access to Higher Education, with a greater expansion in the number of IFES, courses and vacancies, with the possibility of territorial mobility through the National High School Exam (ENEM) and the Unified Selection System (SISU) and the reservation of vacancies for students from public schools, has changed the profile of the generation of students in undergraduate courses at federal universities.⁹

The subject teachers proposed the establishment of a closer and more trusting relationship with the students. Thus, the tutors were present, even remotely, through the university's online platform, building dialogues and learning through horizontal exchanges that facilitated the students' search for knowledge, as well as the possibility of dialoguing about their difficulties, fears, and perceptions of the learning process.

The negative effects of social isolation on mental health are widely proven in the scientific literature and this is no different in the university population.¹⁰⁻¹¹ A study of 217 medical students found the prevalence of depression in 35.5% of respondents and anxiety in 22.1% during the COVID-19 pandemic. Most students who were in a state of depression or anxiety had mild or moderate symptoms.¹²

To this end, in addition to mental suffering, the pandemic has contributed to students' academic lag and idleness, leaving them sometimes more anxious or depressed, which can impact the teaching-learning process. There are also issues related to uncertainty about the future and the possibility of them finding a job. Thus, for being a theme that, at some point, could alert them about their mental health status

during the social distance caused by COVID-19, as well as the mental health of friends, family members, and people close to them, for some students, the course contributed with tools for coping with their emotions and feelings.

Moreover, the course was also important for the continuation of the feeling of belonging to some place or group, maintaining the link with the university. The university space, as a 'used' territory, becomes, for the youth, a space of belonging due to the daily coexistence, a space that integrates the different knowledge, knowledges, and affections of those involved. This important environment was lost, even if temporarily, in the pandemic and, in this process, some students, for moments, needed to give new meaning to the events of that instant, trying to return, little by little, to the resumption of their academic activities.

To do so, new attitudes towards remote learning were necessary, such as constant interaction with the virtual environment, learning to be autonomous in the learning process and exploring new digital and communication resources, strategies that the student needed to develop. Moreover, even though the students are not physically at the university, "they consider institutional adaptation as an important aspect for the process of adaptation of the student to distance higher education".^{13:9}

Thus, the learning environment must offer the student several instruments for this socialization to occur. This can come in a diversified manner by means of video classes, chat, doubt forums, spaces for notices from the institution, in an organized and easily accessible manner, so that the student remains motivated to learn.¹³

The important adjustment to be made, from face-to-face to remote, is to take advantage of digital tools and the various possibilities of asynchronous activities in which participants do not need to communicate simultaneously. Asynchronous work gives teachers flexibility in preparing learning materials and allows students to cope with the demands of home and study more flexibly and autonomously. In addition, teachers can check on student participation periodically and schedule online conversations for specific needs or questions.¹⁴

However, learning autonomously and developing skills to use technologies and extra motivation to study, for some of them, may become limiting factors. On the other hand, teachers also had to transpose content, adapting it to online platforms. This rapid

change, without prior preparation or with superficial preparation, exposed the teacher's pedagogical weaknesses, such as the lack of familiarity with the virtual environment, also mentioned by the students, limiting and/or hindering their learning.⁷

In a study, which aimed to identify the resources and recurring practices in virtual learning environments during training in an online context, it concluded that VLE is the technology most used in training practices in an online context, with Moodle being the most adopted in Higher Education Institutions. Regarding the resources of these platforms, some of them, such as web conferencing and integration with videoconferencing, are underused. On the other hand, the forum and the chat are aggregated in a recurrent way, but not always in a coherent way as to the purposes of these resources.¹⁵

Regarding the forum, it is observed that research has shown that its use has made little progress in what would be the realization of collaborative and interactive work, aimed at multidimensional, multidirectional learning. However, even though there is some movement on the part of teachers, some pedagogical practices are still based on unidirectional concepts of teaching and on the understanding that the resource, by itself, can promote interaction. Such practices, for not having underlying concepts and theories appropriate to the context of digital culture, do not count on the necessary mediations and interventions, resulting in little student participation, loss of focus in the debates, deviation of function of certain forums, and little collaboration among members.¹⁵

Regarding the use of chat, the actors also discuss that the use is modest and does not contemplate the constant participation of all, being partially used by the teachers.¹⁵ In the case of this study, the course in question used this resource as a form of feedback from tutors to students.

However, it is noteworthy that even though the strategies are carried out in an interactive environment, through various resources, the pandemic revealed another limiting factor of remote teaching: the lack of infrastructure and technological resources in everyday university life for digital inclusion. And "if before the difficulty was in reaching the schools, now many students will face the fact that they do not have enough resources to follow the online classes and perform the requested activities".^{16:58}

The Continuous National Household Sample Survey (PNAD) investigated, in 2018, access to the internet and television and the ownership of a cell phone for personal use. It was evidenced that one in four people do not have access to the internet in Brazil. In addition, there was a slow decline in the number of households where there was a microcomputer and that in 99.2% of households where there was internet use, the mobile cell phone was used for this purpose.¹⁷

While part of the predominantly white population accesses available network resources from home, with audio and video equipment, enabling participation in emergency remote education, another part of the population, mostly black, only has access to these technologies from school or public centers, institutions that are temporarily closed due to social distance, which consequently impedes the monitoring of educational activities. Thus, we see a concentration of poverty and a deconcentrating of opportunities, aggravating the educational and social inequalities already existing in the country.¹⁸

Access to technologies constitutes a basic and indispensable technical condition for the effectiveness of digital inclusion. However, the lack of access to the internet and the low quality of equipment, such as cell phones and computers, are a reality of the Brazilian population. This can result in poor communication with the teacher and/or tutor, the impossibility of collaborating effectively with colleagues, and the teacher's lack of feedback to the student.

It is worth pointing out that the idea of free access and digital inclusion has a superficial meaning if structural issues such as social inequality do not change. In addition, there is a potential deterioration of the didactic and pedagogical relationship in which many teachers become reproducers of technologies, because they end up implementing ready-made educational packages without the development of a critical and reflective educational process.⁶

Other relevant factors that emerged after the analysis of the excerpts were difficulties with the routine and personal issues related to the health of the students themselves and their families. It is noteworthy that, for a while, students used to go to the university environment by their own means or by public transportation and, after completing their activities, they would return home. In doing so, they had time to

process the change in roles from student to father, mother, child, among others, and to re-enter their personal lives. But now, between learning at home during COVID-19 and doing the various tasks in the home environment, that transition time, as well as the physical separation, is practically nonexistent.

Educational institutions and systems must make special efforts to support students who have no support network and whose home environments are not conducive to study. In addition, it should be noted that when people are confined to their homes, those responsible for their financial upkeep may be deeply concerned about their own economic future, and therefore studying at home can become a difficult task, especially for those with little motivation.¹³

Therefore, even if the institutions make the necessary changes to teach in different ways and the students have an environment and adequate technological access, the country's health situation can influence learning, whether through the students' concern with their own health or that of their families, or because they work in places with frequent contact with COVID-19. Working during a difficult time such as a pandemic, in which some sectors have a greater workload, can cause the student to withdraw from the virtual classroom.

This fact may also be related to the fear of infecting family members, the experience of fears and uncertainties about the mortality and morbidity of the disease and facing the death of known people. Regarding health care workers, extensive literature from countries such as Germany, Japan, Singapore, China, and Switzerland have shown an increase in mental health risks, especially high levels of stress, exhaustion, depressed mood, and anxiety during the pandemic.¹⁹⁻²⁰

It is expected that employers adopt actions and strategies for the training of workers in relation to the means of virus transmission, measures to reduce the spread of the disease, signs and symptoms, and diagnosis. At this point, the course offered enabled the discussion of these issues, helping with the information and orientation about COVID-19 for the students. It is noteworthy that workers who remain in work activity during the pandemic (without the possibility of adopting social distancing) should be a priority target of attention to control the spread of the disease and protect life.²¹

In this way, the pandemic has disrupted what is set in the university and generated, in a certain way, even if *a priori*, a resistance for both teachers and students. However, this resistance is not only something negative, but also allows the existing potentialities in universities to emerge.

The research had limitations in terms of comprehensiveness, since only students from an emergent discipline were included. Since it is a qualitative approach, the results are not generalizable. In addition, the data collection took place before the peak of the pandemic in the region, which gives specificity to the results. Also, data collection by a self-administered online instrument may present a bias. Therefore, future studies should cover the perspective of professors and administrative technicians from universities and other disciplines and/or courses, with varied methodologies.

It collaborated with the dissemination of information from reliable sources about the pandemic and provided support to students, via group forum and in private, to face the changes in teaching resulting from the pandemic. It also contributes to the discussions about emergency teaching in disciplines at universities from the students' perspective, expanding the possibilities of development and improvement of teaching methodologies in this modality.

The study contributes to reflections about the future of university education, pedagogical and work processes, besides the infrastructure of the institutions and the socioeconomic conditions of the students. Moreover, this research will stimulate teachers to reflect about remote teaching, especially in the health area, since it requires practical activities, so that they can adopt or not the strategy for certain subjects and/or disciplines.

Conclusion

The main potentialities observed were related to the collaboration of the course in the personal confrontation with the pandemic, the professional growth acquired, and the methodological resources used. The latter, in turn, also proved to be a limiting factor, mainly due to difficulties with internet access and the lack of equipment for the development of tasks. Other limitations were the students' mental health, the health

problems of family members, and the daily routine, which had to be divided between study and work.

References

1. BRASIL. Ministério da Educação. Portaria nº544/2020, de 16 de junho de 2020. Dispõe sobre a substituição das aulas presenciais por aulas em meios digitais, enquanto durar a situação de pandemia do novo coronavírus - Covid-19, e revoga as Portarias MEC nº 343, de 17 de março de 2020, nº 345, de 19 de março de 2020, e nº 473, de 12 de maio de 2020. Brasília, DF: Ministério da Educação, 2020. Disponível em: <https://www.in.gov.br/en/web/dou/-/portaria-n-544-de-16-de-junho-de-2020-261924872#:~:text=Disp%C3%B5e%20sobre%20a%20substitui%C3%A7%C3%A3o%20das,12%20de%20maio%20de%202020>. Acesso em: 14 maio 2021.
2. Flores MA, Gago M. Teacher education in times of COVID-19 pandemic in Portugal: national, institutional and pedagogical responses. *J Educ Teach.* 2020;46(4):507-16. doi: 10.1080/02607476.2020.1799709
3. Ramos-Morcillo AJ, Leal-Costa C, Moral-García JE, Ruzafa-Martínez M. Experiences of nursing students during the abrupt change from face-to-face to e-learning education during the first month of confinement due to COVID-19 in Spain. *Int J Environ Res Public Health.* 2020;17(15):e5519. doi: 10.3390/ijerph17155519
4. BRASIL. Lei nº 9.394, de 20 de dezembro de 1996. Estabelece as diretrizes e bases da educação nacional. Brasília, DF: Ministério da Educação, 1996. Disponível em: http://www.planalto.gov.br/ccivil_03/leis/l9394.htm. Acesso em: 14 maio 2021.
5. BRASIL. Decreto nº 9.235, de 15 de dezembro de 2017. Dispõe sobre o exercício das funções de regulação, supervisão e avaliação das instituições de educação superior e dos cursos superiores de graduação e de pós-graduação no sistema federal de ensino. Brasília, DF: Presidência da República, 2017. Disponível em: http://www.planalto.gov.br/ccivil_03/_ato2015-2018/2017/decreto/D9235.htm#:~:text=DECRETO%20N%C2%BA%209.235%2C%20DE%2015,no%20sistema%20federal%20de%20ensino. Acesso em: 14 maio 2020.
6. Sanes MS, Neves FB, Pereira LEM, Ramos FRS, Brehmer LCF, Vargas MAO, et al. No to distance education! Production of meaning of discourses of nursing representative entities. *Rev Bras Enferm.* 2020;73(5):e20190465. doi: 10.1590/0034-7167-2019-0465
7. Rondini CA, Pedro KM, Duarte CS. Pandemia da Covid-19 e o ensino remoto emergencial: mudanças na prática pedagógica. *Interfaces Cient Educ.* 2020;10(1):41-57. doi: 10.17564/2316-3828.2020v10n1p41-57
8. Minayo MCS. O desafio do conhecimento: pesquisa qualitativa em saúde. 12ª ed. São Paulo: Hucitec; 2010. 269 p.
9. Associação Nacional dos Dirigentes das Instituições Federais de Ensino Superior (ANDIFES). V Pesquisa Nacional de Perfil Socioeconômico e Cultural dos (as) Graduandos (as) das IFES – 2018 [Internet]. São Paulo: ANDIFES; 2018 [acesso em 2021 maio 14]. 316 p. Disponível em: <https://www.andifes.org.br/wp-content/uploads/2019/05/V-Pesquisa-Nacional-de-Perfil-Socioeconomico-e-Cultural-dos-as-Graduandos-as-das-IFES-2018.pdf>
10. Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, et al. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *Lancet.* 2020;395(10227):912-20. doi: 10.1016/S0140-6736(20)30460-8

11. Liu S, Yang L, Zhang C, Xiang YT, Liu Z, Hu S, et al. Online mental health services in China during the COVID-19 outbreak. *Lancet Psychiatry*. 2020;7(4):e17-8. doi: 10.1016/S2215-0366(20)30077-8
12. Liu J, Zhu Q, Fan W, Makamure J, Zheng C, Wang J. Online mental health survey in a medical college in China during the COVID-19 outbreak. *Front Psychiatry*. 2020;11:459. doi: 10.3389/fpsy.2020.00459
13. Bacan AR, Martins GH, Santos AAA. Adaptação ao ensino superior, estratégias de aprendizagem e motivação de alunos EaD. *Psicol Cienc Prof*. 2020;40:e211509. doi: 10.1590/1982-3703003211509
14. Daniel J. Education and the COVID-19 pandemic. *Prospects*. 2020;49:91-6. doi: 10.1007/s11125-020-09464-3
15. Maia MDSA, Silva DG. Práticas pedagógicas em ambientes virtuais de aprendizagem: usos e abusos. *EmRede Rev Educ Distância*. 2020;7(1):81-95. doi: 10.53628/emrede.v7.1.555
16. Avelino WF, Mendes JG. A realidade da educação brasileira a partir da COVID-19. *Bol Conjunt (Univ Fed Roraima)*. 2020;2(5):56-62. doi: 10.5281/zenodo.3759679
17. Instituto Brasileiro de Geografia e Estatística (IBGE). Pesquisa Nacional por Amostra de Domicílios Contínua: PNAD Contínua. Rio de Janeiro: IBGE; 2018 [acesso em 2021 maio 14]. 146 p. Disponível em: <https://www.ibge.gov.br/estatisticas/sociais/trabalho/9171-pesquisa-nacional-por-amostra-de-domicilios-continua-mensal.html?=&t=destaques>
18. Shim TE, Lee SY. College students' experience of emergency remote teaching due to COVID19. *Child Youth Serv Rev*. 2020;119:105578. doi: 10.1016/j.chilyouth.2020.105578
19. Zerbini G, Ebigbo A, Reicherts P, Kunz M, Messman H. Psychosocial burden of healthcare professionals in times of COVID-19 - a survey conducted at the University Hospital Augsburg. *Ger Med Sci*. 2020;22:18:Doc05. doi: 10.3205/000281
20. Weibelzahl S, Reiter J, Duden G. Pandemic-induced depression and anxiety in healthcare professionals. *PsyArXiv*. 2020;3:1-11. doi: 10.31234/osf.io/5rehd
21. Santos KOB, Fernandes RCP, Almeida MMC, Miranda SS, Mise YF, Lima MAG. Trabalho, saúde e vulnerabilidade na pandemia de COVID-19. *Cad Saúde Pública*. 2020;36(12):e00178320. doi: 10.1590/0102-311x00178320

Funding / Acknowledgment: to the National Council for Science and Technology (CNPq; research productivity fellowship level 1C); to the Coordination for the Improvement of Higher Education Personnel (CAPES; master's fellowships).

Authorship Contributions

1 - Luciane Prado Kantorski

Corresponding Author

Nurse, PhD - E-mail: kantorskiluciane@gmail.com

Conception and/or development of the research and/or writing of the manuscript, review and approval of the final version.

2 - Carla Gabriela Wünsch

Nurse, Master's Degree - E-mail: carlagabi20@hotmail.com

Conception and/or development of the research and/or writing of the manuscript, review and approval of the final version.

3 - Thylia Teixeira Souza

Nurse, Master's Degree - E-mail: thyliatsouza@gmail.com

Conception and/or development of the research and/or writing of the manuscript, review and approval of the final version.

4 - Taís Alves Farias

Nurse, Master's Degree - E-mail: tais_alves15@hotmail.com

Conception and/or development of the research and/or writing of the manuscript, review and approval of the final version.

5 - Michele Mandagará de Oliveira

Nurse, PhD - E-mail: mandagara@hotmail.com

Review and approval of the final version.

Chief Scientific Editor: Cristiane Cardoso de Paula

Associate Editor: Daiana Foggiato de Siqueira

How to cite this article

Kantorski LP, Wünsch CG, Souza TT, Farias TA, Oliveira MM. Emergency mental health teaching in the context of COVID-19. Rev. Enferm. UFSM. 2022 [Accessed on: Year Month Day]; vol.12 e25: 1-20. DOI: <https://doi.org/10.5902/2179769268178>