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Research Article

A Descriptive Study to Assess the Knowledge on Homesickness and Coping Strategies used by the Students to Cope with Homesickness among the Students in Selected College of Nursing, New Delhi

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A B S T R A C T

Home is a word that brings comfort to the soul. Home sickness is the distress or impairment caused by an actual or anticipated separation from home. A descriptive study to assess the knowledge on homesickness and coping strategies used by the students to cope with homesickness among the students in selected college of nursing, New Delhi. Objectives: To assess the knowledge regarding homesickness and the coping strategies used by students to cope with homesickness among students in Rufaida College of Nursing, New Delhi. To develop and disseminate the informational pamphlet on homesickness and effective coping strategies. A quantitative approach, exploratory survey design and purposive sampling technique was carried out on 100 students. Structured knowledge questionnaire and likert scale was used. Most of the sample subjects i.e., 45% had average knowledge, 37% had good knowledge and 18% had poor knowledge regarding homesickness. Positive coping strategies were passively used by 58% while actively used by 42% of nursing students and negative coping strategies were passively used by 49% while actively used by 51% of nursing students. Conclusion: There is a need to provide knowledge on homesickness and effective usage of positive coping strategies to avoid psychological and mental health issues in student nurses.

Keywords: Homesickness, Coping strategies, knowledge, Assess

Introduction

'Home' is the word that resonates deeply as for people. It is a word that brings comfort to the soul, that names a place we want to return to, that makes us feel safe, loved and nurtured. Homesickness is the reminder for you of what truly matters in your life. The issue of homesickness has long been a neglected area of investigation in nursing. This is despite acceptance in the literature that students go through the critical issue of adjustment, which triggers the feeling of separation and missing home, and has been a not easy-to-achieve situation.[1] Homesickness is the distress or impairment caused by an actual or anticipated separation

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from home. It is a cognitive hallmark that is preoccupying thoughts of home and attachment objects.[2]

College life always begins with drama, and it is normal to feel homesick in such situations so as to adjust to the new life of campus. It can be felt for anything you left behind, like people, pets, places, routines, food, hobbies, interests and so on. Some of the most common signs and symptoms of homesickness that students might experience are anxiety, difficulty in sleeping, changes in appetite, frequent crying, headaches, lack of concentration, nausea, worry, low mood, dizziness, lack of energy, etc.[3]

Coping is a term used to explain the reactions of an organism when faced with a stressful situation. Changes in the social support network can cause students to withdraw and isolate themselves because they do not find or recognise the necessary social support, inducing them to use coping strategies considered negative, such as defensiveness and social isolation.[4]

A coping strategy is described as the action taken by an individual in response to reduce the negative effects of the appraised stressor.[5] When the coping strategies used by the individual are effective, the stress may possibly be overcome, indicating that a way was found to adapt to the situation. If the strategy used does not solve the problem, a re-evaluation process and a change in coping strategies may occur until the problem is overcome or the individual reaches the point of exhaustion.[6]

In a longitudinal study of children at a two-week overnight summer camp, 95% felt homesick for at least one day of their stay, and those who felt intensely homesick at the start of camp were more likely to have increasing levels of homesickness.[7]

It was noted that nursing students are more exposed to stressful events than students from other courses because they are continually embroiled in situations of responsibility for the lives and health of patients[8]. Thus, stress is something inherent to nursing, for both professionals and students, due to the numerous demands and excessive workloads, the lack of adequate support for the pressures experienced daily in performing their activities, and the ever-changing nature of the work and having to deal with death, all of which contribute to high levels of stress in the nursing profession.[9-11]

Through previous studies we have understood that nursing students are more prone to homesickness, and they themselves use various coping strategies to face these stressful events. The low level of knowledge of homesickness among society and specifically among first-year nursing students leads them to face homesickness at some moments of their lives. The lack of knowledge leads to ineffective use of coping strategies, further leading to mental health issues. Also, lack of proper usage of coping strategies among first-year nursing students is considered one of the most impactful factors leading to homesickness.

This study is conducted to assess in detail the knowledge of homesickness and also to know the various coping strategies that the first-year nursing students are using to cope with homesickness. Apart from that, an informational pamphlet on homesickness and positive coping strategies that can be used while feeling homesick is disseminated in this research (figure 1&2).

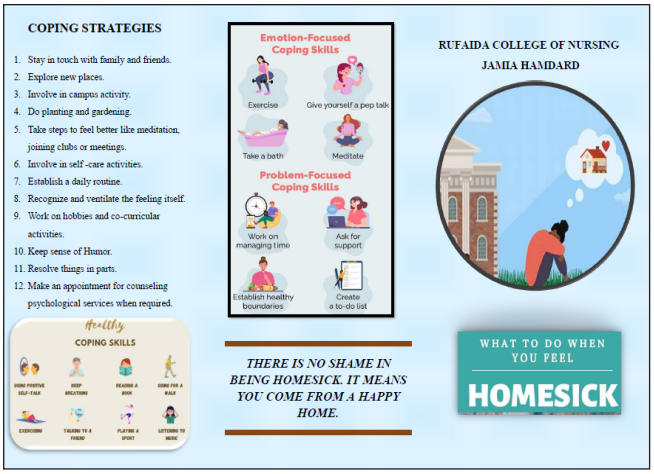


Figure 1.Coping with homesickness

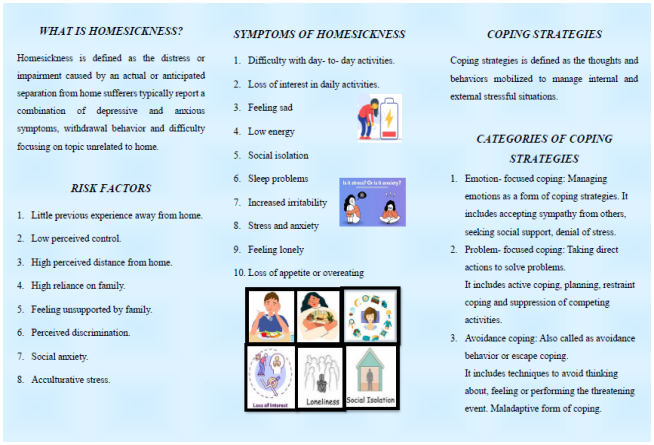


Figure 2.Homesickness explained: causes, symptoms, risk factors, and coping strategies at a glance

Problem statement

A descriptive study to assess the knowledge on homesickness and coping strategies used by student nurses to cope with the homesickness among the students in the selected college of nursing, New Delhi.

Objectives

- To assess the knowledge regarding homesickness among students in Rufaida College of Nursing, New Delhi.

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- To assess the coping strategies to cope with homesickness among students in Rufaida College of Nursing, New Delhi.
- To develop and disseminate the informational pamphlet on homesickness and effective coping strategies among students in Rufaida College of Nursing, New Delhi.

Methodology

A quantitative approach using descriptive research design was carried out on 100 students studying in Rufaida College of Nursing, Jamia Hamdard. A purposive sampling technique was used to collect data through a google form. The structured knowledge questionnaire and structured Likert scale were used to assess the knowledge on homesickness and coping strategies used to cope with homesickness by the students of Rufaida College of Nursing. Experts from Rufaida College of Nursing and other nursing colleges established the content validity of the tool and pamphlet. The sample subjects of the present study were students of DGNM 1st Year, B.Sc. (Hons) Nursing 1st Year, Post Basic B.Sc. Nursing 1st Year and M.Sc. Nursing 1st Year staying away from their families.

Ethical permission was taken from Rufaida College of Nursing, New Delhi, to conduct the study. For the collection of data, formal administrative approval was sought from the Rufaida College of Nursing, New Delhi, to conduct the study. Consent was taken from the study subjects. Content validity was done by 07 experts, in which most of the items were judged suitable for the research and a few items were modified.

A pilot study was conducted on a total of 6 students, and the findings revealed that it was feasible to conduct the study. A structured knowledge questionnaire and a structured Likert scale were administrated to first-year nursing students of Rufaida College of Nursing, New Delhi, who were orientated to participate in the study. Descriptive statistics were used to analyse the data. Descriptive statistics were used to analyse the data.

Results

Analysis and interpretation of demographic data of selected nursing college students in terms of age, gender, education, religion, residence and marital status.

The data in table 1 show that the maximum number of subjects, that is 49% were in the range of 18-20 years of age of the sample subjects, 72% were female. Majority of sample subjects, 72% were female. 46% of the samples were from B.Sc. (H) nursing 1st year, followed by 35% from DGNM 1st year, 16% of Post Basic B.Sc. 1st year and 3% from M.Sc. 1st year. The majority of subjects, 65%, were from Islam, followed by 21% Hindu, 6% Christian and 8% others. 6% were from Christians and 8% were from other religions. The majority of sample subjects, 60%, live on rent (not with relatives), followed by 26% of paying guests, and 14% stay in hostel. The majority of sample subjects, i.e. 60% live on rent (not with relatives) followed by 26% of paying guests and 14% who stay in hostels. The maximum number of samples, 92% were unmarried. Maximum number of samples i.e., 92% were unmarried.

Findings of structured knowledge questionnaire on homesickness

The data in table 2 shows that the knowledge score of samples ranges from 0 to10. The level of knowledge i.e., 18% of the students had poor knowledge, followed by 37% of the students who had good knowledge, and 45% of the students who had average knowledge (figure 3).

The mean knowledge score was 6.44 and the median was 7 in the structured knowledge questionnaire on homesickness.

Findings of structured Likert scale for coping strategies assessment

Part A: Scoring of positive coping strategies

The data in table 4 shows that 58% of nursing students were passive users for positive coping strategies, and only 42% of nursing students were active users of positive coping strategies.

Part B: Scoring of negative coping strategies

The data in table 6 shows that 49% of nursing students were passive users for negative coping strategies, and the majority of nursing students (51%) were active users of negative coping strategies.

The data in Figure 4 shows that students of Rufaida College of Nursing were using negative coping strategies more actively as compared to positive coping strategies in regard to homesickness and hence increasing the risk of psychological and mental health problems.

Table 1. Frequency and percentage distribution of sample subjects by their demographic profile (age, gender, education, religion, residence and marital status).

n-100

	Demographic Profile	Frequency (n)	Percentage (%)
	Age		
a)	<18 years	5	5%
b)	18-20 years	49	49%
c)	21-23 years	31	31%

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d)	>23 years	15	15%
Gender			
a)	Male	28	28%
b)	Female	72	72%
c)	Transgender	0	0
Education			
a)	DGNM Nursing 1st year.	36	36%
b)	B.Sc (H) Nursing 1st year.	45	45%
c)	PB.B.Sc Nursing 1st year	16	16%
d)	M.Sc Nursing 1st year.	3	3%
Religion			
a)	Islam	64	64%
b)	Hindu	23	23%
c)	Christian	5	5%
d)	Others	8	8%
Residence			
a)	Paying guest	26	26%
b)	Hostel	14	14%
c)	On rent (not with relatives)	60	60%
Marital Status			
a)	Married	7	7%
b)	Unmarried	91	91%
c)	Single parent	2	2%
d)	Divorced/separated	0	0

Table 2.Mean, median, frequency and percentage distribution of nursing students based on a structured knowledge questionnaire regarding homesickness in Rufaida College of Nursing, New Delhi

n-100

S.No	Level of knowledge	Range score	Possible range scores	Obtained range scores	Frequency	Percentage	Mean	Median
1.	Poor	1-4	1-10	1-10	18	18%	6.44	7
2.	Average	5-7			45	45%		
3.	Good	8-10			37	37%		

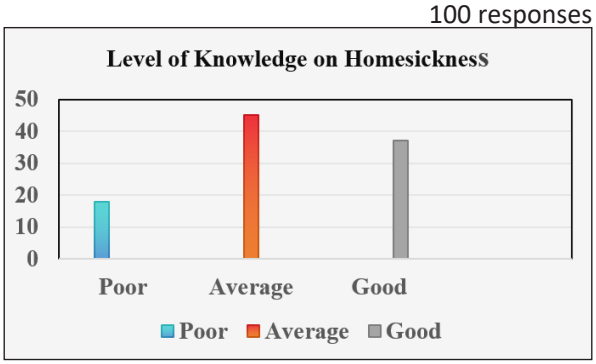


Figure 3.Bar diagram showing percentage distribution of knowledge assessment score on homesickness

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Table 3.Frequency and percentage distribution of nursing students based on the structured coping strategies assessment scale regarding positive coping strategies used by nursing students in selected colleges of nursing, New Delhi

n-100

	Items On Positive Coping Strategies	Frequency(n)	Percentage (%)
I call my family & friends to ventilate my feelings during homesickness.			
a)	Never	10	10%
b)	Sometimes	59	59%
c)	Always	31	31%
I do planting/ gardening/ follow my hobbies whenever I feel homesick.			
a)	Never	28	28%
b)	Sometimes	56	56%
c)	Always	16	16%
I plan by daily routine to avoid homesickness.			
a)	Never	19	19%
b)	Sometimes	58	58%
c)	Always	23	23%
I join various club (yoga club, sports club, etc.) and seek help from counselling services during homesickness.			
a)	Never	43	43%
b)	Sometimes	48	48%
c)	Always	9	9%
I get involve in self care, meditation and exercise to avoid homesickness			
a)	Never	16	16%
b)	Sometimes	58	58%
c)	Always	26	26%
I explore new places and communicate with people whenever I feel homesick.			
a)	Never	25	25%
b)	Sometimes	55	55%
c)	Always	20	20%
I used to write my feelings in diary/ personal anecdotes whenever I feel homesick			
a)	Never	41	41%
b)	Sometimes	40	40%
c)	Always	19	19%
I visit religious places like temples/ mosque/ church whenever I feel homesick			
a)	Never	20	20%
b)	Sometimes	57	57%
c)	Always	23	23%
I use music therapy to release stress and anxiety whenever I feel homesick			
a)	Never	9	9%
b)	Sometimes	55	55%
c)	Always	36	36%

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I participate in co- curricular activities and campus activities whenever I feel homesick			
a)	Never	25	25%
b)	Sometimes	58	58%
c)	Always	17	17%

Table 4.Mean, median, frequency and percentage distribution of nursing students based on the structured coping strategies assessment scale regarding positive coping strategies used by nursing students in selected colleges of nursing, New Delhi

n-100

S. No	Scoring	Possible range scores	Obtained range scores	Frequency	Percentage	Mean	Median
1.	Passive user of positive coping strategies (0-10)	0-20	0-16	58	58%	9.84	10
2.	Active user of positive coping strategies (11-20)			42	42%		
3.	Passive user of positive coping strategies (0-10)	0-10	0-16	58	58%	9.84	10
4.	Active user of positive coping strategies (11-20)	11-20		42	42%		

Table 5.Frequency and percentage distribution of nursing students based on the structured coping strategies assessment scale regarding negative coping strategies used by nursing students in selected colleges of nursing, New Delhi

n-100

	Items On Negative Coping Strategies	Frequency (n)	Percentage (%)
I get aggressive and frustrated on getting homesick.			
a)	Always	20	20%
b)	Sometimes	55	55%
c)	Never	25	25%
I avoid to communicate with peer, mentors and old batch-mates.			
a)	Always	24	24%
b)	Sometimes	60	60%
c)	Never	16	16%
I used to eat junk/ unhealthy food to avoid homesickness.			
a)	Always	20	20%
b)	Sometimes	50	50%
c)	Never	30	30%
I used to sleep for long hours in day and night to avoid overthinking and homesickness.			
a)	Always		
b)	Sometimes	24	24%
c)	Never	52	52%
I plan to return home permanently whenever I feel homesickness			
a)	Always	24	24%
b)	Sometimes	46	46%
c)	Never	30	30%
I feel isolated/ aloof from rest of world.			

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a)	Always	20	20%
b)	Sometimes	61	61%
c)	Never	19	19%
I do online shopping whenever I feel homesick.			
a)	Always	21	21%
b)	Sometimes	49	49%
c)	Never	30	30%
In used to to drug abuse (like smoking, alcohol abuse etc.) to avoid home-sickness.			
a)	Always	31	31%
b)	Sometimes	26	26%
c)	Never	43	43%

Table 6.Mean, median, frequency and percentage distribution of nursing students based on the structured coping strategies assessment scale regarding negative coping strategies used by nursing students in selected colleges of nursing, New Delhi

n-100

S. No	Scoring category	Possible range scores	Frequency	Percentage	Obtained range scores	Mean	Median
1.	Passive user of negative coping strategies (0-8)	0-16	49	49%	0-16	8.33	9
2.	Active user of negative coping strategies (9-16)		51	51%			

100 responses

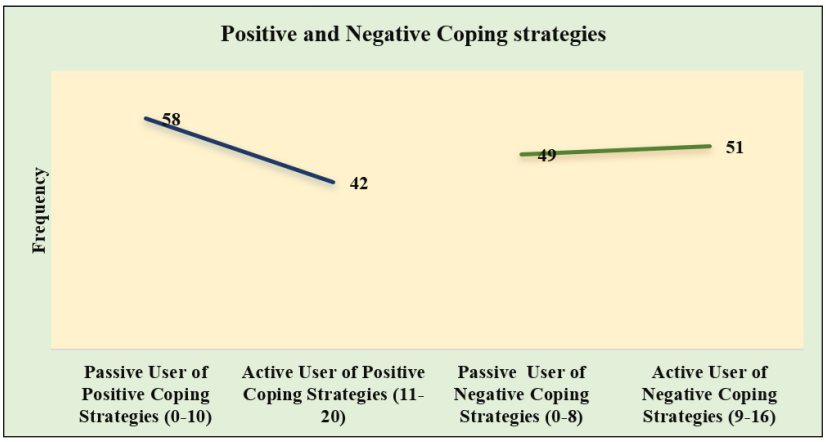


Figure 4.Comparative frequency of positive and negative coping strategy assessment scores regarding homesickness

Discussion

This study is similar to the study done by Scharp K.M., Paxman G.C., and Thomas J.L. (2015), who conducted a study in the United States on homesickness experiences and social support-seeking practices. A pilot study was conducted on 12 college students aged 18 years or older. A total of 34 semi-structured interviews were conducted. Thematic analysis was done. The study concluded that participants report at least one of the following content areas as something they miss: activities (100%), animals (47%), family (97%), feelings (100%), food (65%), friends (71%), normalcy (85%), speakers (62%), places (97%), romantic partners (53%), safety (62%), and traditions (56%). Overall, results suggest that these 12 areas comprehensively capture what individuals miss about their homes.[10]

In contrast with the present study, Tammy English, Jordan Davis, Melissa Wei, and James J. Gross conducted a longitudinal study on homesickness and adjustment across the first year of college. Participants were 174 undergraduates (59% female) with diverse ethnicity: 6%

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African-American, 29% Asian-American, 64% European-American, 13% Hispanic/Latino, and 3% Native American/Indian. Results showed that, on average, homesickness decreased slightly across the first semester of college, but there were individual differences in homesickness trajectories. Freshman who reported higher levels of homesickness showed worse overall adjustment to college, even when controlling for negative emotional experience and prior adjustment. Findings suggest that homesickness is a common experience for freshmen and, despite its relatively transient nature, homesickness has important implications for college adjustment.[11]

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