

The Impact of COVID-19 Pandemic on the Academic Performance of Veterinary Medical Students

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Abstract

The current cross-sectional study was carried out to analyze the impact of COVID-19 lockdown on the academic performance of veterinary medical students and researchers. An online google form questionnaire was used to invite veterinary students and researchers to answer the questionnaire. A total of 807 participants were from 86 different countries answered the questionnaire with an overall response rate of 94.1%. The participants were 50.1% males, and 49.9% females. The age of participants ranged from 17 to 51 years, and the majority of them (85.0%) were undergraduate students while postgraduate students comprised 15.0%. The data showed that COVID-19 pandemic lockdown affected the academic performance of most participants (96.5%) with varying degrees. The mean evaluation scores for the online education in general was 4.9 ± 2.4 while that for the practical parts was 3.7 ± 2.6 . About 60.7% of participants evaluated the online learning in general with 1-5 of 10 points, while 77.9% of participants evaluated the online learning in practical lessons with 1-5 of 10 points. Although online education provides an opportunity for self-study. The main challenge online education faces in veterinary medical science is how to give practical lessons. Since most of the subjects are practical; therefore, it is not easy to learn it online. Students think that it is difficult to fulfill the veterinary competencies only with online education system. Online education can be improved by making it more interactive, showing medical procedures in real situations, giving concise information, and providing 3D virtual tools to mimic the real situation.

Keywords: Academic performance, COVID-19, veterinary, online learning

Introduction:

Coronavirus disease 2019 (COVID-19) is firstly identified in Wuhan city, Hubei Province, China in December 2019 as a pneumonia of unknown origin [1]. Later, the causative agent of COVID-19 is identified as a novel coronavirus, severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2). COVID-19 outbreak spreads rapidly not only in China, but also worldwide, therefore, the World Health

Organization (WHO) has announced it as pandemic on March 12, 2020. The total number of confirmed cases and mortalities are 6,515,796 and 387,298, respectively in 216 countries as of June 05, 2020 [2].

Several governmental measures have been taken to counteract the risk of disease spreading. These measures include travel restrictions, mandatory quarantines for travelers, social distancing, bans on public gatherings, schools and universities closure, business closures, self-isolation, asking people to work at home, curfews and lockdown [3, 4]. Authorities in several countries worldwide have declared either lockdown or curfew as a measure to break the fast spread of virus infection [5]. These measures have a negative worldwide effect on the business, education, health, and tourism [6].

COVID-19 pandemic has affected all levels of the education system [7]. Educational institutions around the world (in 192 countries) have either temporarily closed or implemented localized closures affecting about 1.7 billion of student population worldwide [8]. Many universities around the world either postponed or canceled all campus activities to minimize gatherings and hence decrease the transmission of virus. However, these measures lead to higher economical, medical, and social implications on both undergraduate and postgraduate communities [7, 9].

Due to the suspension of classroom teaching in many colleges and universities, a switch to the online teaching for undergraduate and graduate students becomes effective (reviewed in [10, 11]). This form of learning provides an alternative way to minimize either the contact between students themselves or between the students and lecturers [6]. However, many students have no access to the online teaching due to lack of either the means or the instruments due to economical and digital divide [12].

Few studies highlighted COVID-19 in relation to educational studies. COVID-19 has a profound impact on medical students, dental medical students, and radiology trainee [13-18]. Recently, the American Veterinary Medical Association (AVMA) showed that COVID-19 adversely impacted veterinary practices based on a large survey including about 2000 responses [19]. However, there is no studies investigated the effect of COVID-19 on students in veterinary medical field. Therefore, the current study was conducted to analyze the impact of COVID-19 pandemic on the academic performance of veterinary medical students and researchers during the lockdown.

Materials and Methods:

Questionnaire design:

An online anonymous questionnaire was designed and an initial test was done on 50 participants to ensure the draft questionnaire was understandable. The aim and uses of data of the questionnaire were briefly explained at the beginning of the questionnaire. An online google form questionnaire was designed and the questionnaire link was shared with different veterinary groups in various social media platforms. Veterinary students and researchers were asked to answer the questionnaire for a research purpose. Participants were also asked to share the questionnaire link among their veterinary colleagues; therefore, the questionnaire could reach many participants. The final questionnaire for this study consisted of 14 questions; 10 closed questions and 4 questions with free text answers divided into three sections as follow: The first section included the demographic characteristics of participants (age, gender, country, university, program level and the year of the undergraduate degree). The second section investigated the effect of COVID-19 pandemic on the study or research. The third section evaluated the online learning during the lockdown (virtual learning tools used, time spent per day in online learning, evaluation of online learning both in the theoretical or practical parts, common problems encountered in the online learning, and suggestions to improve the online learning).

Data collection:

Sample size was calculated to be 384 participants as a minimum number of participants [20]. Data collection was done using a spreadsheet linked to the online google form questionnaire. Data collection was done during the period from April 13th to May 31st 2020. A total of 858 responses were retrieved of which 51 responses were excluded. All procedures were done in accordance with the standards of the institutional ethics committee of the South Valley University, Egypt.

Statistical analysis:

Data were exported and analyzed using SPSS version 21.0 (IBM Corporation). Descriptive statistics were presented as counts and percentages to summarize the collected data.

Results:**Demographic characteristics of participants:**

A total of 858 responses were retrieved of which 51 responses were excluded. The remaining 807 responses were from 86 different countries with an overall response rate of 94.1% (Table. 1). Of the 807 participants, 404 (50.1%) were males, and 403 (49.9%) were females (Fig. 1A). The age of participants ranged from 17 to 51 years (mean \pm SD = 23.9 \pm 5.8 years). About 55.3% of the participants were aged 17-22 years, 34.3% were aged 23-30 years, 7.3% were aged 31-40 years, and 3.1% were aged 41-51 years. The majority of the participants (85.0%, n=686) were undergraduate students while postgraduate students comprised 15.0% (n=121) (Fig. 1B, 1C).

The effect of COVID-19 pandemic lockdown on academic performance:

To measure the effect of COVID-19 pandemic lockdown on academic performance of veterinary medical students, a 4-Point Likert Scale was used. The current data showed that most of participants 96.5% (n=779) believed that COVID-19 pandemic lockdown affected their academic performance with varying degrees. More than half of the participants (61.4%, n=496) were greatly affected whereas 28.4% (n=229) were moderately affected, and 6.7% (n=54) were slightly affected. Whereas only 3.5% (n=28) of participants reported that lockdown had no effect on their academic performance (Fig. 2A, 2B).

Evaluation of online education during COVID-19 pandemic lockdown:

Data showed that participants used several electronic device to study online. The most used device was the smart phone followed by laptop, while the least used device was the personal computer (Fig. 3A). The studying hours spent for online learning ranged from less than 1 h/day to 11 hrs/day. Regarding the frequency of online studying hours, about 47.4% of participants spent up to 2 hrs/day in online learning, while 8.4% of participants spent more than 5 hrs/day (Fig. 3B). To evaluate the online education during the pandemic lockdown, a 10-Point Likert Scale was used. Participants were asked to evaluate the online education in general, and the online education in practical lessons during the lockdown (1 was the lowest evaluation and 10 was the highest evaluation). The mean evaluation scores for the online education in general was 4.9 \pm 2.4 while that for the practical parts was 3.7 \pm 2.6 (Fig. 3C). About 60.7% of participants evaluated the online learning in general with 1-5 of 10 points, while 77.9% of participants evaluated the online learning in practical lessons with 1-5 of 10 points.

Participants showed that the online study materials were available mostly through online classes and pdf lectures followed by books, university platforms, YouTube videos, educational websites and educational applications (Fig. 4A). Different online tools had been used to access the online classes. The distribution of these online tools was as follow; Zoom had the highest preference followed by WhatsApp,

and Google classroom. Microsoft Teams, Edmodo, Skype, and Google Meet were moderately used. While Canvas, Edpuzzle, and Edverum were not popular tools (Fig. 4B).

The common problems with online learning of veterinary science:

The participants' responses regarding to the common problems with online learning could be summarized as follow:

- The availability of internet to students live in provincial and rural areas.
- Speed and cost of internet hinder proper delivery of study materials by both students and lecturers.
- The availability of learning devices, such as laptops, tablets and smartphones devices to access the internet and view the online materials.
- The shortness of the available time to solve the online test, which causes panic.
- Lack of application in the clinical setting for the things we learned from book.
- Lack of online information about certain subjects, such as veterinary anatomy.
- It is hard to teach the practical lessons of clinical subjects in online basis.
- Spending long time in online learning makes the students loss their motivated to participate, also they feel tired with sleeping issues.
- The availability of online resources, some lectures are provided in PowerPoint or pdf format, or lecturers just read from a PowerPoint.
- Less interactive due to no contact between students, professors and animals, which makes it very boring and easily lose concentration.

Recommendations to improve online learning in veterinary science:

The students' recommendations regarding improvement of the online learning were summarized as follows:

- The universities should provide platforms for online learning with easy access to the study materials.
- Providing students with electronic devices, such as computers, smart phones to access the internet.
- Improvement of internet speed and providing cheaper or even free internet package during the pandemic.
- Providing training for lecturers on e-learning tools and computer skills.
- Providing virtual resources to mimic the laboratory work or live streaming directly from the laboratory.
- Enhance the interaction between students and teachers (for example with mentimeter application).
- Practical learning throughout interactive tools, such as videos and 3D animation is significantly more effective than text materials such as power point and pdf, voice recordings should be provided with the lecture's text.
- Providing accessible online resources such as e-books and instructional videos for practical lessons.
- Decrease the amount of classwork could help reducing students' stress.
- Providing online quizzes and assignments after every lesson to measure the degree of students' understanding.
- Increase the available time to solve the online tests.
- Improve the way of teaching to encourage students to learn. Attract to students in order to study online.

Discussion:

The novel COVID-19 disease identified in Wuhan city, China in December 2019 spreads rapidly not only in China, but also worldwide. Therefore, governments around the world have either temporarily closed or implemented localized closures of educational institutions affecting over 60% of student population worldwide [8]. About 155 countries worldwide have introduced various tools and learning platforms as a solutions to continue the education process during the pandemic [21].

Many universities around the world minimized gatherings through suspending or canceling all campus activities including suspension of classroom teaching to decrease the rapid spread of virus. Consequently, several colleges and universities worldwide switch to the online teaching for undergraduate and graduate students [10] to minimize either the contact either between the students and lecturers or between students themselves [6].

Our data showed that 807 participants from 86 countries answered the questionnaire, which represented an overall response rate of 94.1%. Participants were 50.1% and 49.9% males and females, respectively. The majority of the participants (85.0%) were undergraduate students while postgraduate students comprised 15.0%. The current data showed that COVID-19 pandemic lockdown affected the academic performance of most participants 96.5% with varying degrees. This is in agreement with previous studies, which reported that COVID-19 has a profound impact on medical students, dental medical students, and radiology trainee [13-18]. Taking online courses has a negative effect on students; reduction of students' progress and success has been reported to be associated with taking online college courses, instead of traditional in-person courses [22].

The current study showed that the most popular device that students used to access the online materials was the smart phone followed by laptop, while the least used tool was the personal computer. This results are in accordance with the results reporting that students uses smart phones and laptops at higher rates followed by iPads/tablets then PC to access online mathematics lessons [23] and social media [24]. It is worth to mention that many students have no access to the online teaching due to lack of either the means or the instruments because of economical and digital divide [12]. Unequal access to computers and internet alters the effectiveness of online learning [25].

The studying hours spent for online learning ranged from less than 1 h/day to 11 hrs/day. Other than live streaming, students can access the online materials at any hour of the day when convenient to them. This flexibility helps some students to better invest their time and efforts while it is considered as a challenge to other students who cannot manage their own time [22].

The most common problems associated with online education in general included the availability of internet in provincial and rural areas, the speed and cost of internet, the availability of electronic devices to access the internet, and the lack of interaction between students and lecturers. While specific problems associated with online education of subjects of veterinary science included lack of application of the clinical setting, lack of online information about certain subjects, such as veterinary anatomy, challenging of teaching the practical lessons online, and lack of contact with animals.

To improve online education in general it is recommended to provide platforms for online learning, provide students with electronic devices to access the internet, improve the internet speed, provide cheaper or even free internet package during the pandemic, provide professional training for lecturers, and enhance the interaction between students and teachers. Additionally, to improve online education in veterinary science it is recommended to provid virtual resources to mimic the laboratory work, teach practical lessons by interactive tools, such as videos and 3D animation, and provide accessible e-books and instructional videos for practical lessons.

Concluding remarks:

Online education helps to keep the students up and running with an opportunity for self-study. However, the main challenge online education faces in veterinary medical science is how to give practical lessons. Since most of the subjects are practical; therefore, it is not easy to learn it online. Students think that it is difficult to fulfill the veterinary competencies only with online education system. Online education can be improved by making it more interactive, showing medical procedures in real situations, giving concise information, and providing 3D virtual tools to mimic the real situation.

Figure legends:

Fig. 1: The demographic data of the participants showing distribution of participants according to their (A) gender, (B) enrolled course, (C) age, and (D) educational level

Fig. 2: A diagram showing the impact of online learning on academic performance of veterinary medical students.

Fig. 3: A diagram showing (A) the device used by participants to access online materials, (B) average studying hours per day, and (C) evaluation of online learning in general and in practical lessons.

Fig. 4: A diagram showing (A) the available online materials and (B) online tools used by participants to access the study materials online.

Fig. 1

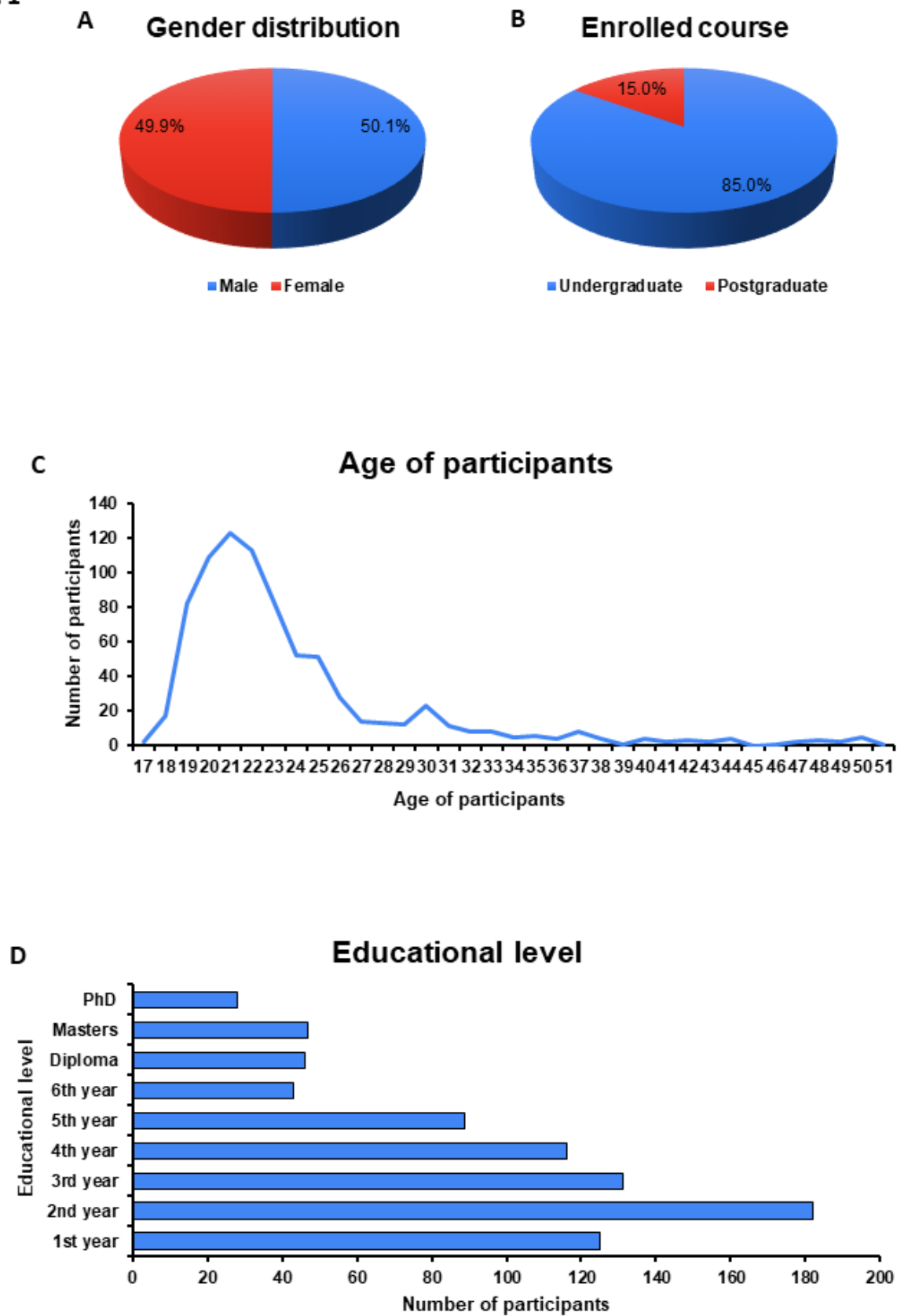


Fig. 2

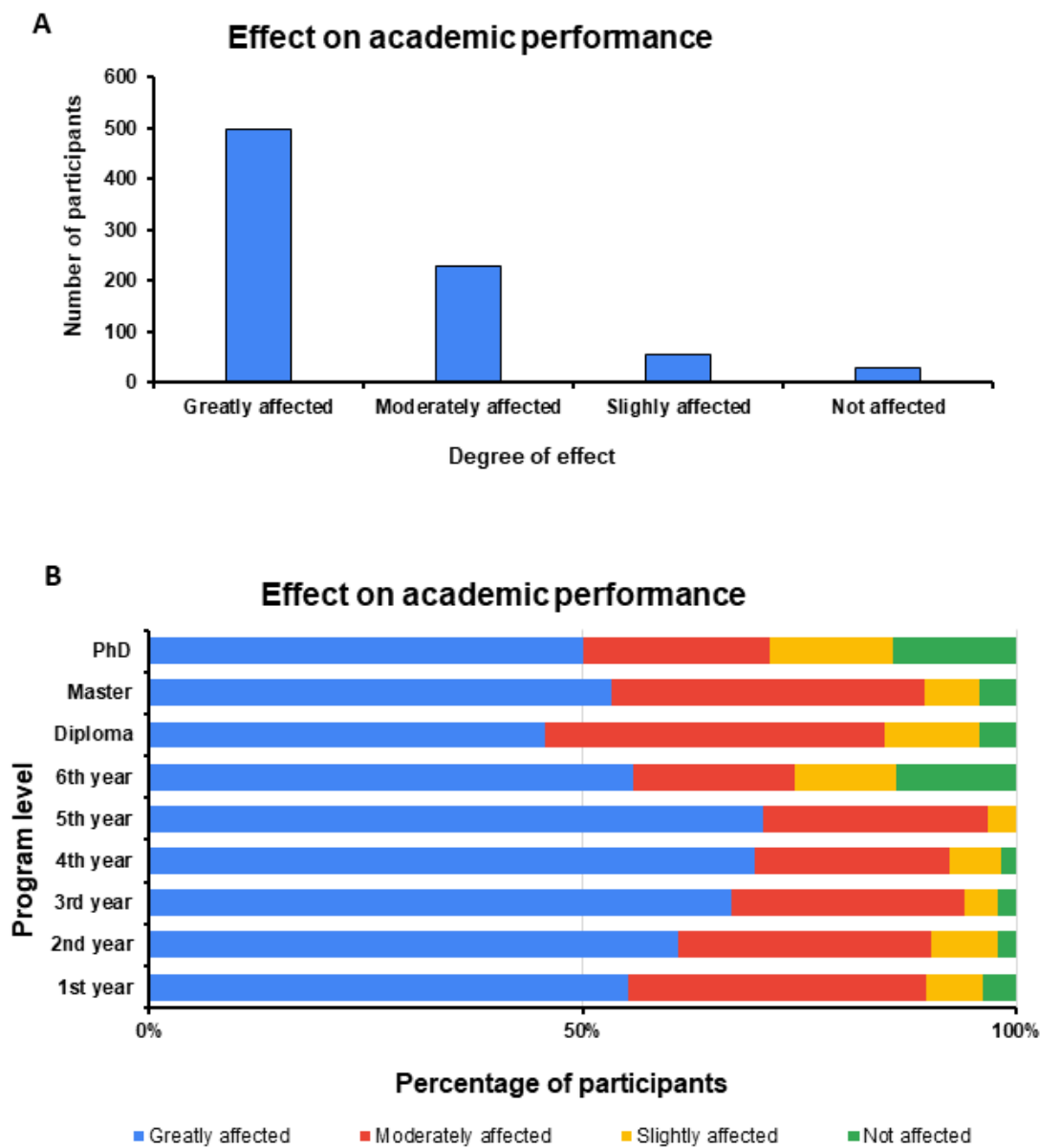


Fig. 3

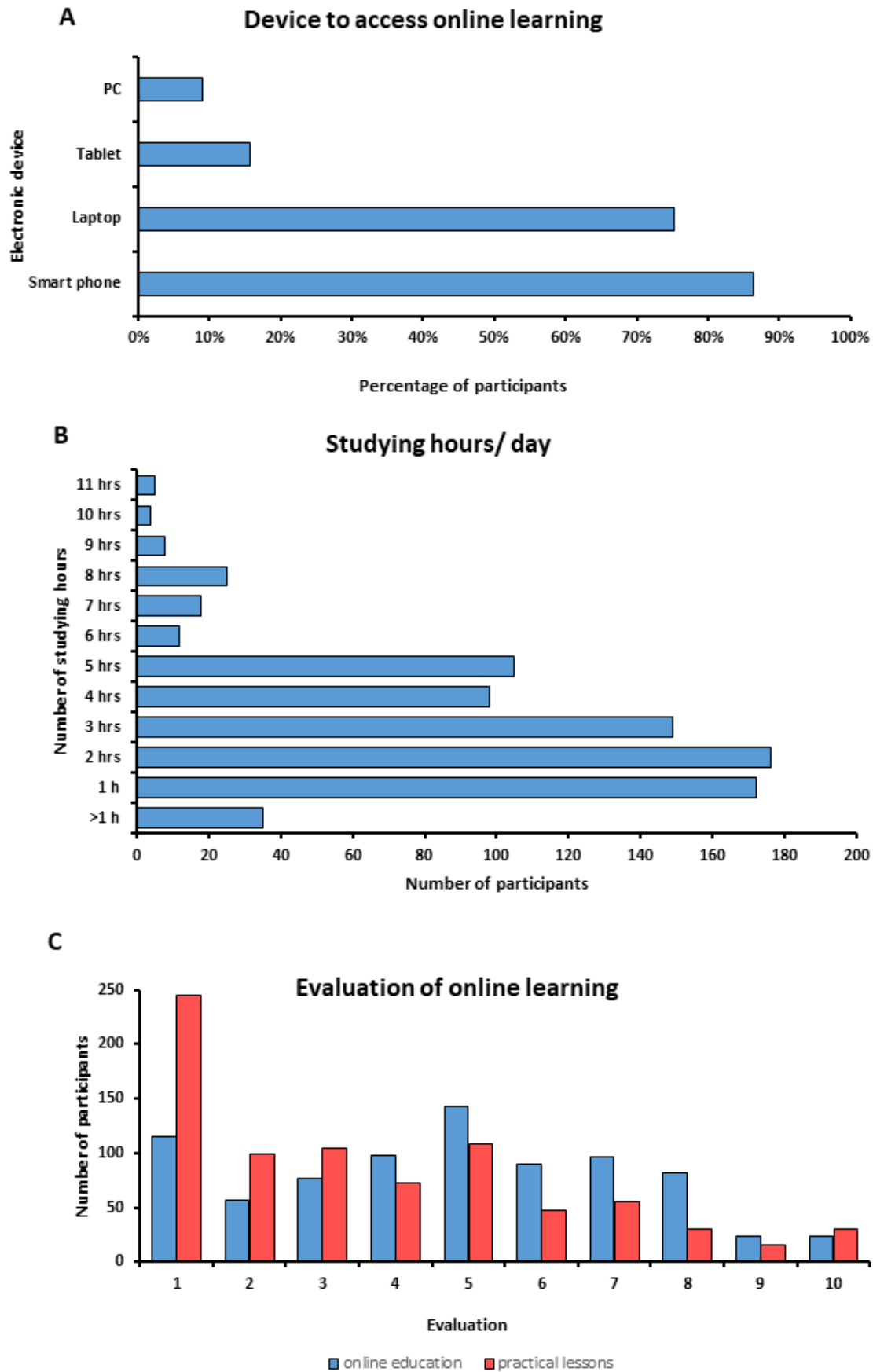


Fig. 4

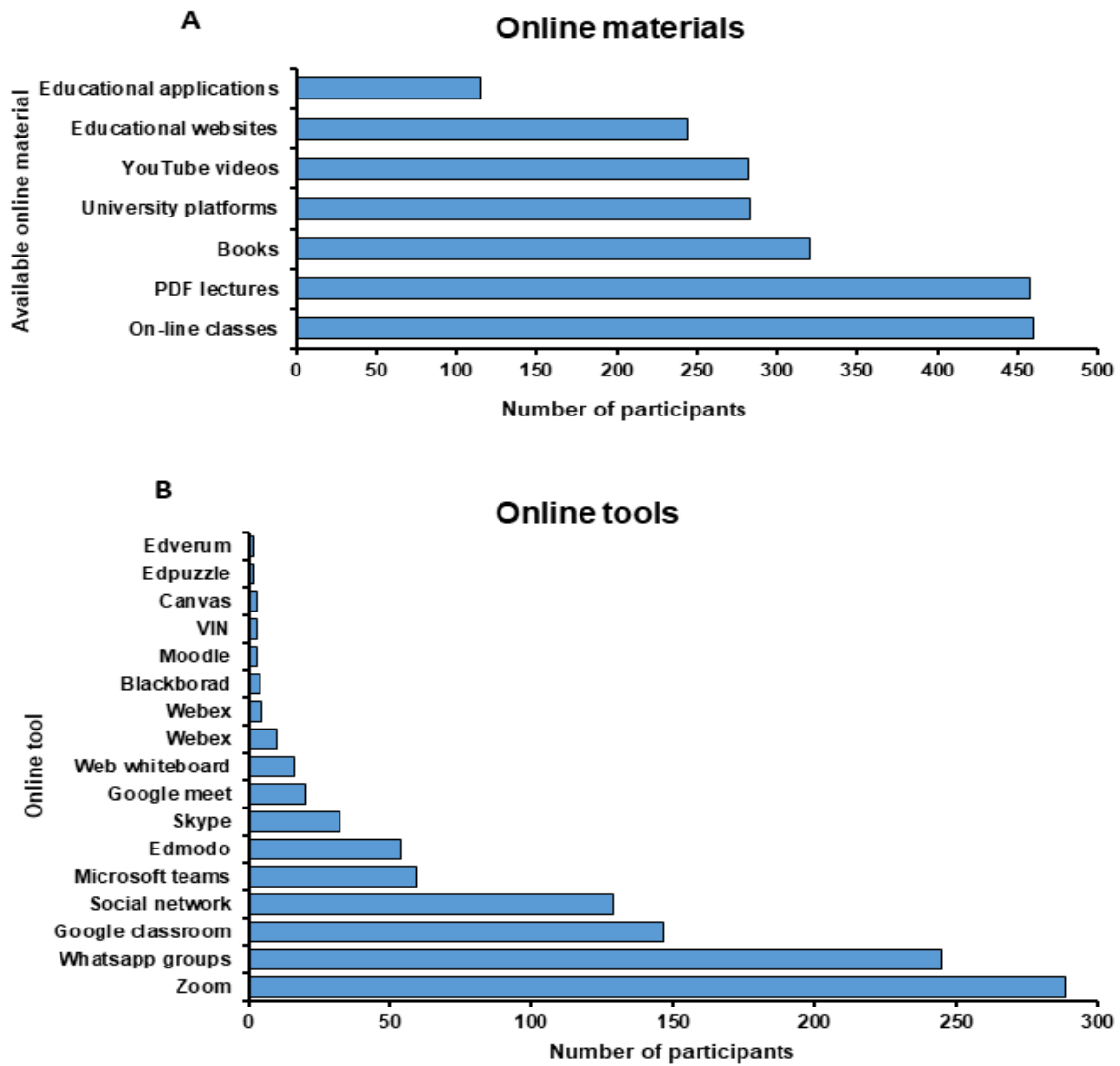


Table. 1: Country list and the percentage of participants

Country	%	Country	%	Country	%	Country	%
Egypt	15.45	Uganda	0.74	Lebanon	0.37	Serbia	0.12
India	11.87	Brazil	0.74	Iraq	0.25	South Sudan	0.12
Philippines	8.78	Bangladesh	0.74	Sudan	0.25	Yemen	0.12
Pakistan	5.81	Italy	0.62	Colombia	0.25	Guatemala	0.12
Indonesia	4.57	Czech republic	0.62	Estonia	0.25	Botswana	0.12
Nigeria	4.57	Ukraine	0.62	Peru	0.25	North Lincolnshire	0.12
Somalia	3.46	Sri lanka	0.49	Spain	0.25	Libya	0.12
USA	3.46	Zambia	0.49	Argentina	0.25	Morocco	0.12
Australia	3.09	Afghanistan	0.49	Canada	0.25	Denmark	0.12
Ghana	2.97	Ireland	0.49	Kosovo	0.25	Switzerland	0.12
Thailand	2.35	Myanmar	0.49	Taiwan	0.25	Syria	0.12
Romania	2.35	France	0.49	Laos	0.25	Norway	0.12
Mexico	1.85	Malaysia	0.49	Vietnam	0.25	Puerto Rico	0.12
Uk	1.85	Germany	0.37	Russia	0.25	Palestine	0.12
Kenya	1.61	Japan	0.37	Lithuania	0.25	Hungary	0.12
South Africa	1.48	Greece	0.37	The Netherlands	0.25	Croatia	0.12
Bulgaria	1.24	Sweden	0.37	Turkey	0.12	Mongolia	0.12
Poland	1.24	Belgium	0.37	Albania	0.12	Sarajevo	0.12
		Bosnia and					
Ethiopia	1.11	Herzegovina	0.37	Austria	0.12	Moldova	0.12
Jordan	0.99	Algeria	0.37	Kazakhstan	0.12	Cambodia	0.12
Nepal	0.87	Slovakia	0.37	Portugal	0.12		
Tanzania	0.87	Cameroon	0.37	Rwanda	0.12		

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