Assessment of the fears of the students of Bab AL-Zubair Complex colleges from the covid 19

A project submitted to the college of nursing in partial fulfillment to the degree of B.Sc in nursing

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بسم الله الرحمن الرحيم

(اقْرَأْ بِاسْمِ رَبِّكَ الَّذِي خَلَقَ خَلَقَ الإِنسَانَ مِنْ عَلَقٍ اقْرَأْ وَرَبُّكَ الأَكْرَمُ الَّذِي عَلَّمَ بِالْقَلَمِ عَلَّمَ الإِنسَانَ مَا لَمْ يَعْلَمْ)

صدق الله العلي
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اهداء :

(قال رسول الله محمد) ((صلى الله عليه وسلم)) (من لا يشكر الناس لا يشكر الله)

اشكر هذا الأستاذه الدكتوره زينب علك لنصائحهاالثمينه وتوجيهاتها القيمه

اهدي هذاالجهد:

الى من بلغ الرساله وادى الامانه ونصح الامه الى نبي الرحمه ونور العالمين
(سيدنا محمد صلى الله عليه واله وسلم)

الى منفذ البشريه(الامام المهدي المنتظر عجل الله. فرجه الشريف)

الى اعز الناس واقربهم الى قلبي الى والدتي العزيزه ووالدي العزيز اللذان كانا عوناً وسند لي . وكان دعائهما المبارك اعظم الأثر في تسيرسفينه البحث حتى ترسو على هذه الصوره

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والى الاخوه الذي لم تلدهم امي والى من معهم سعدت وبرفقتهم في حياتي أصدقائي.

<u>Supervisor Support</u>

I certify that this project of research

Assessment of the fears of the students of Bab Al-Zubair Complex colleges from the Corona virus

Was prepared under my supervision at the College of Nursing, University of Basra as partial fulfillment of the requirements for the degree of baccalaureate in nursing science .

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Abstract

Background: Corona virus is invading world and causing a high level of mortality and morbidity so creating some sort of fear at different levels .

Aims of study : our aim is to assess the fear of coronavirus in the college students so we use the Bab zubair university as a field of our sample .

The present study carried out in Bab zubair university Basra , Iraq .

Methodology: A convenient sample of)**64)** students, male**(34)** and females (30) in Bab zubair university . were selected for the purpose of the study .

A Closed-end questions questionnaire was used for the purpose of data collection . The questionnaire consist of two part, the first part related to Socio-demographic characteristics of the students and include: the age . sex. the college . stage. Living The second part of the questionnaire consists of)15) questions that are concerned with students fear from COVID-19. Standardized 3- points Likert scale including : YES , NO ,and SOMEWAHT. the already performed questionnaire forma was distributed to (65) students were they read the forma and answer them , the forma then collected by the researchers , each forma was scored according to the right typical answer.

Analysis was made by using SPSS (Statistical package for Social Sciences) version 23, data was expressed in (frequency and percentage). correlations was used to examine the association between different variables

Result: We included 64 students of the complex of Bab Al-Zubair colleges.
, the majority of participants with age less than 25 years and the percentage of them is (73.6%).while the female was (46.9%) and male was (53.1%) also the percentage of nursing school students was (14.1%)while the percent of students of law was (7.8%) ,literature college (25%), arts college (15.6
), college of administration and economics (21.9) and college of education for girls (15.6) and the end of this table the place of resident included center of the city its percentage was (88%) and countryside was (12%). First stage represented (4.7%), second stage (34.4), third stage (23.4%) and fourth stage (37.5%). the place of resident included center of the city its percentage was (60.9%) and rural was (39.1%).

Recommendation: Enhance of the trust of students by the health institutes and their role in controlling the covid-19 Pandemic . encourage vaccination to increase the level of mass immunity to get rid of the pandemic . Don't listen to false news in the social media . Don't fear from covid-19 it is not a highly killing disease you have to prevent corona virus from coming to you through the use of mask and frequent hands washing .

Conclusion

1-Assessing students' fears of Covid 19 is knowing how to overcome the disease and how to control it
2-Students' fear of their education level due to the pandemic, and reliance on e-learning threatens their future
3-The students' fears were about the components of the vaccine and its negative effects. p person
4-Many students need information about how disease is transmitted, dealt with, and avoided

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Chapter 1

1-1 Introduction

1-2 Definition ofterms

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<u>Chapter One</u>

1-1INTRODUCTION

The World Health Organisation
(WHO) has declared the coronavirus disease 2019 (COVID-19) a
pandemic[1]. A global coordinated effort is needed to stop the
further spread of the virus. A pandemic is defined as "occurring over
a wide geographic area and affecting an exceptionally high
proportion of the population."[2] The
last pandemic reported in the world was the H1N1 flu pandemic in
2009. On 31 December 2019, a cluster of cases of pneumonia of
unknown cause, in the city of Wuhan, Hubei province in China, was
reported to the World Health Organisation. In January 2020, a
previously unknown new virus was identified[3][4], subsequently
named the 2019 novel coronavirus, and samples obtained from cases
and analysis of the virus' genetics indicated that this was the cause
of the outbreak. This novel coronavirus was named Coronavirus
Disease 2019 (COVID-19) by WHO in February 2020.[5] The virus
is referred to as SARS-CoV-2 and the associated disease is COVID-
19[6]. Coronaviruses are a family of viruses that cause illness such
as respiratory diseases or gastrointestinal diseases. Respiratory
diseases can range from the common cold to more severe diseases
e,g.

• Middle East Respiratory Syndrome(MERS-CoV)

• Severe Acute Respiratory Syndrome(SARS-CoV)[7].

A novel coronavirus (nCoV)
is a new strain that has not been identified in humans previously.
Once scientists determine exactly what coronavirus it is, they give it
a name (as in the case of COVID- 19, the virus causing it is SARS-
CoV-2). Coronaviruses got their name from the way that they look
under a microscope. The virus consists of a core of genetic material
surrounded by an envelope with protein spikes. This gives it the
appearance of a crown.The

word Corona means "crown" in Latin. Coronaviruses arezoonotic[8], meaning that the viruses are transmitted
between animals and humans. It has been determined that MERS-CoV was transmitted from dromedary camels to humans and SARS-CoV from civet cats to humans[7]. The source of the SARS-CoV-2 (COVID-19) is yet to be determined, but investigations are ongoing to identify the zoonotic source to the outbreak[9]. Coronaviruses are important human and animal pathogens. At the end of 2019, a novel coronavirus was identified as the cause of a cluster of pneumonia cases in Wuhan, a city
in the Hubei Province of China. It rapidly spread, resulting in an epidemic throughout
China, followed by a global pandemic. In February 2020, the World Health Organization designated the disease COVID-19, which stands for coronavirus disease 2019 .The virus that causes COVID-19 is designated severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2); previously, it was referred to as 2019-nCoV. [10].

between animals and humans. It has been determined that MERS-CoV was transmitted from dromedary camels to humans and SARS-CoV from civet cats to humans[7]. The source of the SARS-CoV-2 (COVID-19) is yet to be determined, but investigations are ongoing to identify the zoonotic source to the outbreak[9]. Coronaviruses are important human and animal pathogens. At the end of 2019, a novel coronavirus was identified as the cause of a cluster of pneumonia cases in Wuhan, a city in the Hubei Province of China.

1_2 Definition of terms

1-3Assessment

Assessment
is an ongoing process aimed at u nderstanding and improving student learning. It involves making our expectations explicit and public; setting appropriate criteria and high standardsfor learning quality; systematically gathering, analyzing, and interpreting evidence to determine how well performancematches

those expectations and standards; and using the resulting information to document, explain, and improve performance." (Angelo, 1995) [11]

1-4 Definition of Fears

Fear
 is defined as a feeling or emotional reaction that affects a person when he is exposed to something or a situation that makes him feel dangerous, and fear may be a healthy thing that keeps him safe, because it is real, and that is because of fear, so the person becomes more cautious because of it [12]

1-5 Definition of COVID_19

COVID-19
is a respiratory illness Caused by a type of virus called a 'coronavirus' This novel (new) coronavirus was first discovered in China On January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the United States [13]

Chapter Two
Methodology

Chapter 2

2-1Design of the study

2-2 Setting of the study

2-3The study sample

2-4 study ś instrument

2-5 Statistical analysis

Methodology

This chapter presents the research design used in the study,settingof the study, sample of the study, data collection procedures,data .analysis and statisticalmethods

2-1 Design of thestudy

A descriptive cross-sectional study design was carried out in In the complex of Bab Al-Zubair colleges complex, it started from March 10, 2022 to April 4, 2022 in order to assess the concerns of students, the complex of Bab Al-Zubair colleges, from Covid 19

2-2 Setting of thestudy

The present study carried In the Bab Al Zubair colleges complex . Basra Iraq

2-3 The studysample

suitable sample consisting of (64) male and female students (34) and female students(30   ) in the Bab Al Zubair colleges complex. They were selected for the purpose of thestudy.

2-4 study ś instrument

The literature was reviewed to find a reliable questionnaire. The questionnaire was used in the form of Likert- three scales for the purpose of data collection. It consists of two parts. The first part is related to the social and demographic characteristics of students, including: age, gender, college and stage, and the second part of the questionnaire consists of 15 questions, after completing the questionnaire was distributed and presented to a panel of experts who made some comments. The concerns include the students of the complex of Bab Al-Zubair colleges, which are answered with yes, no, or somewhat. The questionnaire was actually implemented to 64students, where they read the form and answered it, then the researchers collected it.

2-5 Statisticalanalysis

Analysis was made by using SPSS (Statistical package for Social Sciences) version (17). Data was expressed in (frequency and percentage). Qi square was used to examine the relation between different variables at probability level of (0.05).

Chapter Three
Review of Literatures

Chapter Three

3-1 Definition of COVID-19
3-2 Risk factors
3-3 Causes Of death
3-4 Diagnosis test
3-5 Nursing Intervention
3-6 The role of the nurse
3-7 Complications
3-8 Covid 19transition
3-9 Vaccination
3-10 Mentalstate
3-11 Communication messages used bythe World HealthOrganization

3-1 Definition ofCOVID-19

This is a highly infectious disease caused by the new Coronavirus (COVID-19) and can spread from person-to person through sneezing and coughing droplets. This virus has signs and symptoms similar to the common cold but is dangerous and if not reported early and managed by health workers it can cause severe illness in humans and can lead to death(.WHO-2019)[12]

3-2 Risk factors

Include : diabetes, chronic kidney dis- ease (CKD), chronic liver disease, chronic lung disease, chronic cardiovascular disease, carcinoma, dyslipidemia, and hypertension, according to the National Health Insurance System of South Korea diagnosis codes and based on the results of previous studies on the risk fac- tors for COVID-19 and classification system announced by the KCDC. Chronic lung disease was defined as chronic obstructive pulmonary disease (COPD), asthma, interstitial lung disease (ILD), idiopathic pulmonary fi- brosis (IPF), or bronchiectasis.(BMC-2020)[13]

3-3 Symptoms

* shortness of breath or difficultybreathing
* Cough
* Fever orchills
* Muscle or bodyaches
* Vomiting ordiarrhea
* New loss of taste orsmell
* (CDC-2019)[14]

3-4 Causes Ofdeath
When reporting cause of death on a death certificate, such as medical history, medical records, laboratory tests, an autopsy report, or other sources of relevant information. Similar to many other diagnoses, a cause-of-death statement is an informed medical opinion that on sound medical judgment drawn from clinical training and experience, as well as knowledge of current disease states and localtrends.(Hyattsville-2020)[15]

3-5 Diagnosis test

Diagnosis of COVID-19 involves detecting an active infection of SARS-CoV-2. Active infection can
be assessed through detecting viral genetic material (RNA) or viral proteins (antigens). Diagnostics
include molecular tests, such as nucleic acid amplification tests, and rapid antigen tests.(Johns Hopkins - 2021)[16]

3-6 NursingIntervention

Because nursing activity may fall into more than one nursing intervention category, and because some nursing interventions are in fact other nursing activities, a set of decision rules was established a priori to ensure consistency and rigor in data collection and interpretation. An important principle of coding was to categorize the activity according to the most specific intervention category possible.(John Wiley,sons)[17]

3-7 the role of thenurse

 The role of the nurse is based on providing comprehensive quality care to the healthy or sick person and accompanying him/her in the healing and rehabilitation process, and if necessary, at the time of death. Objective: To examine the role of nursing in the Covid-19 pandemic through a systematic review. Methodology: A systematic investigation was carried out in the scientific databases PubMed, SciElo, Google Scholar, Nursing Journal combining the Boolean operators AND and OR, in Spanish, English and Portuguese. Results: The literary search reported 1243 documents after the application of the selection criteria and evaluative reading, 32 articles were included for analysis due to their belonging and contribution to the fulfillment of the objective. Conclusions: It is possible to affirm that the pandemic caused by Covid-19 placed the health systems in different challenges, where the nurse played a transcendental and recognized role, standing out for being the heart and fundamental pillar in the different levels of care, demonstrating their safety and leadership by being in a frontline scenario.(Daniela-2021)[18]

3-8 Complications

Age and sex have been shown to affect the severity of complications of COVID-19. The rates of hospitalization and death are less than 0.1% in children but increase to 10% or more in older patients. Men are more likely to develop severe complications compared to women as a consequence of SARS-CoV-2 infection [29]. Patients with cancer and solid organ transplant recipients are at increased risk of severe COVID-19 complications because of their [19] immunosuppressed status.(Azer-2020)

3-9 Covid 19 transition

In April 2020, ECDC published an updated strategy for COVID-19 surveillance at national and EU/EEA level [1], which was complemented by a document on COVID-19 testing strategies and objectives [2] and a guidance for representative and targeted genomic SARS-CoV-2 monitoring [3]. Although the main objectives of COVID-19 surveillance have not changed (i.e. to monitor disease incidence and severity, and to monitor viral changes), both the COVID-19 epidemic and surveillance approaches in the EU/EEA have changed for several reasons: First, surveillance systems have improved substantially, and most EU/EEA countries have reached high testing capacity. However, the impact of new testing policies (e.g. systematic screening of asymptomatic individuals outside of the healthcare system) was not fully anticipated, leading to a possible distortion of epidemiological indicators such as the test rate, the test positivity rate and eventually the case notification rate [4]. In addition, the high testing intensity (approximately 4 000 weekly tests per 100 000 population in the EU/EEA since April 2020) may not be sustainable in the long run, as testing is offered free of charge in mostcountries.

Second, in the context of a largely dominating variant of concern (VOC) such as SARS-CoV-2 Delta variant, more emphasis should be given to a targeted sampling approach to detect early signals of emergence or introductions of new variants that need to be rapidly assessed, aiming to make the best of limited sequencing resources, while maintaining representative community sampling. Information on the indication and setting where cases have been sampled for sequencing would be necessary to monitor representativeness of sampling and implement corrective actions if this is not achieved. Last, the success of the vaccine rollout in many EU/EEA countries changed the overall epidemiology of COVID-19 with a higher

incidence in younger age groups and fewer severe cases alongside a reduction of non- pharmaceutical interventions (NPI). Yet, since vaccines aim at preventing severe disease while infection among vaccinated individuals can occur, virus circulation in the population is likely to continue requiring a more consistent surveillance approach to correctly monitor trends and identify areas of increased transmission and change in infection-severity, and impact. Therefore, it is important to ensure that indications for testing do not differ between vaccinated and unvaccinated individuals.

This document proposes an updated COVID-19 surveillance guidance to help countries adapt their surveillance systems to the changing epidemics of COVID-19(.Stockholm, 2021)[20]

3-10 Vaccination

Four coronavirus (COVID-19) vaccines have now been approved for use in the UK. Rigorous clinical trials have been undertaken to understand the immune response, safety profile and efficacy of these vaccines as part of the regulatory process. Ongoing monitoring of the vaccines as they are rolled out in the population is important to continually ensure that clinical and public health guidance on the vaccination programme is built upon the best available evidence.

UK Health Security Agency, UKHSA, formerly Public Health England (PHE), works closely with the Medicines and Healthcare Regulatory Agency (MHRA), NHS England, and other government, devolved administration and academic partners to monitor the COVID-19 vaccination programme. Details of the vaccine surveillance strategy are set on the page COVID-19: vaccine surveillance strategy (1). As with all vaccines, the safety of COVID-19 vaccines is continuously being monitored by the MHRA. They conclude that overall, the benefits of COVID-19 vaccines outweigh any potential risks (2). (GOV-2021)[21]

3-11 Mentalstate

In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease, COVID-19, to be a Public Health Emergency of International Concern. WHO stated that there is a high risk of COVID-19 spreading to other countries around the world. In March

2020, WHO made the assessment that COVID-19 can be characterized as a pandemic.

WHO and public health authorities around the world are acting to contain the COVID-19 outbreak. However, this time of crisis is generating stress throughout the population. The considerations presented in this document have been developed by the WHO Department of Mental Health and Substance Use as a series of messages that can be used in communications to support mental and psychosocial well-being in different target groups during the outbreak. (WHO - 2020)[22]

3-12 Communication messages used by the World Health Organization

1_Understand people : Collect and use evidence for targeted, tailored and effective policies, interventions and communication**.**

2_ Allow people to live their lives, but reduce risk : Wide-ranging restrictions may not be feasible for everyone in the long run.

3_ Engage people as part of the solution : Find ways to meaningfully involve individuals and communities at every level .

4_ Acknowledge and address the hardship people experience : and the profound impact the pandemic has had on their lives.

5_ Be transparent : by sharing reasons behind restrictions and any changes made to them, and by acknowledging the limits of science and government

6_ Strive for the highest possible level of fairness : in recommendations and restrictions.

7_ Be as consistent as possible : in messages and actions, and avoid conflicting measures.

8_ Coordinate to avoid mixed messages : across experts and spokespeople .
9_ Strive for predictability in unpredictable circumstances : for example, by using objective criteria for restrictions and any changes made to them.

10_ Think local : Reach out to civil society groups and ask them to find creative ways of motivating their members and peers.

11_ In every workplace, school, university, youth club and more, talk to users : Ask them how they would like to implement recommended behaviours. Ask them what support they need from you.

12_ Develop guidance on living life while reducing risk : Find creative ways of communicating such guidance, and avoid constant changes.

13_ Prepare safe solutions for upcoming national celebrations : where people gather across geographies and generations. Engage individuals, workplaces, public transportation systems, the retail sector, retirement homes and more in discussions about ways to reduce risk. Provide clear recommendations.

14_ Understand which measures may be unbearable in the long term : Amend or balance such restrictions with other measures (economic, social, psychological), taking into account the epidemiological risk.

15_ Make recommended behaviours easy and inexpensive : This can involve the provision of fast and cheap internet connections, free masks and hand sanitizers, accessible hand-washing areas, spaces for social interaction, opportunities for teleworking, and more.

16_ Appeal to people rather than blame, scare or threaten them : Recognize that everyone is contributing.

17_ Be clear, precise and predictable : Use simple and digestible info- graphics as an effective way of communicating restrictions and risks – and how they are related.

18_ Conduct regular qualitative and quantitative population studies : Take the findings seriously. Use them to inform action.
19 _ Tailor communication to specific groups : that experience demotivation. Test messages and visuals with sample populations before launching them. (WHO – 2020)

Chapter Four

Result of project and discussion

(4-1) Results

We included 64 students of the complex of Bab Al-Zubair colleges. Table (4-1) presents sociodemographic characteristics of the participants Table (4-1) : Demographic characteristics of the participants (n=64)

Demographic characteristics		Frequency	Percent
age	less than 25 years	47	73.4
	>=25 years	17	26.6
gender	male	34	53.1
	female	30	46.9
college	college of law	5	7.8
	college of literature	16	25.0
	college of arts	10	15.6
	college of administration and economics	14	21.9
	college of education for girls	10	15.6
	nursing college	9	14.1
stage	first stage	3	4.7
	second stage	22	34.4
	third stage	15	23.4
	fourth stage	24	37.5
residance	urban	39	60.9
	rural	25	39.1

According to this table, the majority of participants with age less than 25 years and the percentage of them is (73.6%).while the female was (46.9%) and male was (53.1%) also the percentage of nursing school students was (14.1%)while the percent of students of law was (7.8%)
,literature college (25%), arts college (15.6
), college of administration and economics (21.9) and college of education for girls (15.6) and the end of this table the place of resident

included center of the city its percentage was (88%) and countryside was (12%). First stage represented (4.7%), second stage (34.4), third stage (23.4%) and fourth stage (37.5%). the place of resident included center of the city its percentage was (60.9%) and rural was(39.1%).

Table (4-2): frequency and percent of participant's fears of Covid 19

participant's fears	Frequency	Percent
no fears	43	67.2
present of fears	21	32.8
Total	64	100.0

According to table (2) about 67% of participants showed no fears of Covid 19, while only 32.8% of them showed a fear of the disease.

Table(4-3): Relationship between participant's fears and demographic characteristics

Table (4-3) showed no significant relations between present of fears and demographic characteristics of the participants in probability level of 0.05

demographic characteristics		no fears	present of fears	Sig.
Age	less than 25 years	32	15	1.00
	>=25 years	11	6	
Gender	male	22	12	0.65
	female	21	9	
College	college of law	4	1	0.60
	college of letirature	11	5	
	college of arts	6	4	
	college of administration and economics	10	4	
	college of	8	2	

	education for girls			
	nursing college	4	5	
Stage `	first stage	3	0	0.32
	second stage	13	9	
	third stage	12	3	
	fourth stage	15	9	
residence	urban	25	14	0.51
	rural	18	7	

Table (4-4) : relationship between participant's fears and present of effective medicines andvaccines

	Participants responses	no fears	present offears	Sig.
Effective medicines	yes	30	14	0.29
	somewhat	10	3	
	no	3	4	
Vaccines	yes	29	8	0.50
	somewhat	9	6	
	no	5	7	

The majority of participants did not feel with fear because of present of effective medicines and vaccines (30% and 29% respectively) with non- significant differences as shown in table (4)

Table (4-5) : Participants responses regarding the role of university in disseminating accurate scientific information about Covid 19

Participants responses	no fears	presentof fears	total	Sig.
Yes	11	10	21	0.14
Somewhat	17	4	21	
No	15	7	22	

Twenty one of the Participants thought that there is a role of university in disseminating accurate scientific information about Covid 19, also 21 of them thought a role for somewhat, while 22 of them thought no role of university in disseminating accurate scientific information about Covid 19 (table 4-5)

Chapter Five

Discussion

Discussion

Our study is a descriptive cross-sectional study to assess
students' fears of
COVID-19 at the Technical University. In general, researchers
agree on this
Most of the students had some degree of fear of the corona virus
which was
Similar to Gordon's study revealing an average level of fear of
COVID-19 (20).
Also, the results of our study are similar to a study conducted in Spain
(21) for which it was
conducted Undergraduate
students.
An American study showed that the COVID-19 pandemic
affected university students
Coursework, stress levels, and perceived health. Various
estimates indicate a drop in percentages of fear
And percentages of university students appeared from decreasing
amounts of fear according to Table (2), about 67% of the
participants showed no fears of Covid 19, while only 32.8% of
them showed fear of the disease. Where our study constitutes a
small percentage of fear, and to this that the availability of
treatments and high recovery cases, the availability of vaccines,
and the weakness of new strains of the virus led to people
accepting the disease and how to deal with it and prevent it, and
thus their fears decreased
Students are unsure of the government's response to this
pandemic there
It was also a disturbance in the personal routine of many students,
there are a
The students had very little fear when watching the news of the
Corona virus.

Chapter Six

6.1 Conclusion
6.2 Recommendation

6.1 Conclusion

1-Assessing students' fears of Covid 19 is knowing how to overcome the disease and how to controlit

2-Students' fear of their education level due to the pandemic, and reliance on e-learning threatens theirfuture
3-The students' fears were about the components of the vaccine and its negative effects. pperson

4-Many students need information about how disease is transmitted, dealt with, andavoided

6.2 Recommendations

1- Enhance of the trust of students by the health institutes and their role in controlling the covid-19 Pandemic.

2- Encorrage vaccination to increase the level of mass immunity to get rid of the pandemic.

3- Don't listen to false news in the social media.

4- Don't fear from covid-19 it is not a highly killing disease you have to prevent corona virus from coming to you through the use of mask and frequent hands washing.

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Appendices

Appendixes a

القسم الاول عنوان البحث:تقييم مخاوف طلبة كليات مجمع باب الزبير من فايروس كوفيد19

نوعا ما	لا	نعم	السؤال	ت
			هل انتابك الخوف والقلق بسبب انتشار فايروس كورونا ؟	1
			هل تذهب الى الاماكن العامة باتخاذك الاجرائات الوقائيه؟	2
			هل تعتقد بأن المجتمع له دور كبير في التزامة بتنفيذ خطط الدولة في مواجهة فايروس كورونا ؟	3
			هل اصبت سابقاً بفايروس كورونا ؟	4
			اذا كنت قد اصبت سابقاً فهل تخشى من الاصابة مرة اخرى ؟	5
			هل كان الحجر الصحي يشعرك بلوحدة والقلق ؟	6
			هل ساهمت مواقع التواصل الاجتماعي في نشر الذعر والخوف عند انتشار فايروس كورونا ؟	7
			هل للجامعة والكلية دور كبير في تقديم معلومات دقيقة وحقائق علمية عن فايروس كورونا ؟	8
			هل قلت مخاوفك من فايروس كورونا هذا العام عن العام الماضي ؟	9
			هل يشعرك بلاطمئنان وجود العقاقير المفيدة لعلاج الاصابة بفايروس كورونا ؟	10
			هل تمثل اللقاحات المتوفرة للتمنيع ضد فايروس كورونا مصدراً للاطمئنان ؟	11
			هل اخذت اللقاح بناءأ ع رغبتك في التحصين ضد فايروس كورونا ؟	12
			هل يقلقك ظهور سلالات جديدة من الفايروس ؟	13
			هل انت مطمئن الى فاعلية اللقاحات ضد السلالات الجديدة من فايروس كورونا ؟	14
			هل تعتقد ان نهاية الوباء باتت قريبة ؟	15

Appendices

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القسم الثاني الخصائص الديموغرافية

*العمر

الجنس

الكلية

*المرحلة

السكن

</div>

Appendices

Research Title: Assessment of the fears of the students of Bab Al-Zubair Complex colleges from the virus
covid 19

n	Question	yas	no	somewhat
1	Have you had fear and anxiety due to the spread of the Corona virus?			
2	Do you go to public places by taking preventive measures?			
3	Do you think that society has a big role in its obligation to implement the state's plans in the face of Corona virus?			
4	Have you previously had the Corona virus?			
5	If you have been infected before, are you afraid of getting infected again?			
6	Was quarantine making you feel lonely and anxious?			
7	Did social networking sites contribute to spreading panic and fear when the spread of Corona virus?			
8	Do the university and college have a big role in providing accurate information and scientific facts about Corona virus?			
9	Have you said your fears about the Corona virus this year more than last year?			
10	Do you feel reassured about the presence of useful drugs to treat infection with the Corona virus?			
11	Are the available vaccines for immunization against the Corona virus a source of reassurance?			
12	Did you get the vaccine based on your desire to be immunized against the Corona virus?			
13	Do you worry about the emergence of a new strain of the virus?			
14	Are you assured of the effectiveness of vaccines against the new strains of the Corona virus?			
15	Do you think the end of the epidemic is near?			

Appendices

The second section is demographic characteristics

Age:

Sex:

Stage:

Address:

Appendixes b
قائمه الخبراء

	اسم الخبير	الشهادة	التخصص	مكان العمل
		قائمة الخبراء		
1	ا.د. سجاد سالم عيسى	الدكتوراه	طب الأسرة	كلية التمريض
2	م.د.هشام حسين عبد الرؤوف	الدكتوراه	اشعة وسونار	كلية التمريض
3	م .م دعاء باجي	ماجستير	صحه نفسيه وعقلية	كلية التمريض
4	ا.د.سميرة محمد	دكتوراة	طب مجتمع	كلية التمريض

الخلاصة

فيروس كورونا يجتاح العالم ويسبب ارتفاع معدلات الوفيات والمراضة مما يخلق نوعاالخوف على مستويات مختلفة الهدفهدفنا تقييم الخوف من فيروس كورونا لدى طلاب مجمع كليات باب الزبير نستخدم مجمع كليات باب الزبير كمجال لعيناتنا أجريت الدراسة الحالية في مجمع كليات باب الزبير بالبصرة ، العراق عينة ملائمة قوامها (64) من الطلاب والطالبات حيث كان الطلاب المشاركون (30) والطالبات (34) في مجمع كليات باب الزبير . تم اختيارهم لغرض الدراسة تم استخدام استبيان أسئلة مغلقة لغرض جمع البيانات . يتكون الاستبيان من جزئين ، الجزء الأول يتعلق بالخصائص الاجتماعية والديموغرافية للطلاب وتشمل : العمر ، والجنس ، الكليه ، المرحله السكن ، و يتكون الجزء الثاني من الاستبيان من 15 من COVID سؤا الا تتعلق بخوف الطلاب مقياسليكرتالقياسيذو3نقاطبمافيذلك:نعم،لا، نوعاما.تمتوزيعنموذج19 الاستبيان الذي تم إجراؤه بالفعل على 64 طالب حيث قرأوا الصيغة وأجابوا عليها ، ثم جمعها الباحثون ، الحزمة ، SPSS وتم تسجيل كل نموذج وفقا للإجابة النموذجية الصحيحة .. تم إجراء التحليل باستخدام الإحصائية للعلوم الاجتماعية) الإصدار (23)، وتم التعبير عن البيانات (التكرار والنسبة المئوية) . تم استخدام الارتباطات لفحص الارتباط بين المتغيرات المختلفة . النتائج : كان معظم الطلاب في الفترة العمرية من 18 إلى ٢٤ سنة وكانت مشاركة الإناث في دراستنا أكثر من الذكور ، وكان معظم المشاركين من الدراسة الصباحية ، ومعظم عينة الطلاب لم يكن لديهم عمل . بخلاف كونه طالب . معظم الطلاب يجيبون على الاستبيان بطريقة مكتوبة ، وكانت النتائج الإجمالية . التسجيل : يجيب معظم الطلاب على الاستبيان بطريقة مكتوبة . كان هناك ارتباط كبير بين التسجيل ومرحلة الطلاب ، و كما توجد علاقة ارتباطية معنوية بين التسجيل وعملالطلاب .

جامعة البصرة

كليةالتمريض

تم تقديم مشروع بحثي

بعنوان

تقييم مخاوف طلبة كليات مجمع باب الزبير من فايروس كوفيد19

جامعة البصرة كتنفيذ جزئي لـ

متطلبات الحصول على درجة البكالوريوس في

علوم التمريض

من قبل

محمد حسين رعد

حسن طالب خلف   مريم يوسف أبراهيم

أشراف

أ.م.د زينب علك

2022-2021