The Experience of Medical Students in UIN Malang When Studying CSL During The COVID 19 Pandemic

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ABSTRACT

Covid-19 is a pandemic that is occurring in various countries. Covid-19 severely impacts all sectors, especially education. The Indonesian government has imposed social distractions so that, for the time being, the learning process must be done online. UIN Malang Medical Education Study Program in Pandemic also applies the rules that all teaching and learning processes must be carried out at home, including lecture activities and CSL (Clinical Skills Laboratory). In CSL activities, students learn related clinical skills using various tools in the CSL laboratory, but when they have to study at home. The CSL learning process in medical education is critical and needs attention.This study aimed to find out students' experiences of the UIN Malang Medical Education Study Program when learning CSL during the COVID-19 pandemic. This research method is phenomenology qualitative research. This research was conducted at the Faculty of Medicine and Health Sciences UIN Malang in August 2021. Eight informants for this study represented each class of 2017, 2018, 2019, and 2020. The results of this study found seven themes, namely CSL learning videos help students to learn, delivery of material by instructors when guided, instructors practicing skills taught while trained, signal difficulties during CSL learning, students having difficulty finding alternative tools and making videos for response activities, providing feedback by instructors to students during the response, students skills are lacking in online learning. This study concludes that many students experience difficulties during the online CSL learning process, both in terms of signals and tools and in making responsive videos, and the skills students lack.

Key words: COVID-19, CSL, experience

INTRODUCTION

Corona Virus Disease 19 (COVID-19) is a type of virus that was discovered at the end of 2019. Initially, this virus was discovered in China, to be precise, in the city of Wuhan, one of the largest cities in China (Andini, Safitri, and Hendri, 2022). Coronaviruses are a large family of

viruses that cause disease in humans and animals. In humans, it usually causes respiratory tract infections, ranging from the common cold to severe conditions such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). A new type of coronavirus that was discovered in humans since an extraordinary incident appeared in Wuhan, China, in December 2019 was later named Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-COV2) and caused Coronavirus Disease-2019 (COVID-19) (Musliyadi, 2020; Siahaan, 2020). The World Health Organization (WHO) stated that the Covid-19 outbreak is a global health emergency known as a Pandemic (Patmawati *et al*., 2022). A *pandemic* is a disease outbreak that simultaneously attacks many victims in various countries. This disease has attacked many countries in the world, one of which is Indonesia. Indonesia is one of the hundreds of countries in the world affected by Covid-19 (Adhe *et al*., 2021).

Since the initial entry of Covid into Indonesia until now, its impact on each sector has begun to be felt seriously, especially in the education sector. COVID-19 has had a severe impact on students, educators, and educational associations around the world. In Indonesia, the government has limited community mobilization, namely the imposition of physical distance or what was initially called social distance to prevent the spread of disease, and continues to promote the agenda of working from home, studying from home, and worshiping at home. Schools and Universities in Indonesia have been temporarily closed since 14 March 2020 (Mailizar *et al.*, 2020; Widianti *et al*., 2021). The closure of all education sectors during this pandemic was intended to reduce social interaction (Bestiantono, Agustina, Cheng, 2020). The Covid 19 pandemic has had a massive impact on universities. With the existence of social or physical restrictions decided by the government, it demands that the education process be implemented online by educators and students who are carried out in their respective residences. Online learning is one of the strategies implemented by teaching staff to continue the learning process during the COVID-19 pandemic so that many tertiary institutions will immediately switch to online learning. Some lecturers record and upload their learning online for student access, and some are even more innovative (Astini, 2020; Widianti *et al*., 2021, Toquero, 2020).

Medical education is also faced with new challenges during this pandemic with the method of implementing medical education learning and practice which must be carried out online, including learning activities at the Clinical Skill Laboratory (CSL) (Lismandasari and Farhan, 2022; Towidjojo, Indang, Sagita, 2022). In medical education, clinical skills in the form of CSL is a simulation program where medical students are given material and various methods and

actions for various medical cases. In the skills lab, students are guided by an instructor (Judge, Saputra, Lisiswanti, 2017). Online CSL activities are very different from previous CSL activities carried out face-to-face, where an instructor and students can meet and interact directly with each other. In online CSL activities, an instructor can only explain the material presented without direct demonstrations. Students can also only listen to explanations without immediately putting them into practice because there are no tools and materials where students are (Towidjojo, Indang, Sagita, 2022). Students only partially receive online learning because some students find online learning more difficult than face-to-face learning. After all, the level of understanding of the material could be higher. In addition, online learning activities are heavily influenced and dependent on the quality of the internet network in each region and the availability of learning devices such as laptops. This condition dramatically impacts the quality of learning and student satisfaction during the learning process (Patmawati *et al*., 2022; Towidjojo, Indang, Sagita, 2022).

Medical Education Study Program, Faculty of Medicine and Health Sciences UIN Maulana Malik Ibrahim Malang also taught online during the COVID-19 pandemic in 2020. There are three activities for CSL Learning in the medical education study program UIN Malang: an introductory lecture with CSL video playback per the topics taught, guided, and response. The CSL learning process in medical education is very crucial. It must get the proper attention and solution so that Learning continues to run effectively and sustainably during the pandemic. From the background above, the purpose of this study is to find out the experience of medical education study program UIN Malang students during CSL Learning during the COVID-19 pandemic so that it can become input and evaluation material for institutions so that the following learning process can be better.

METHODS
This study uses a qualitative research method with a phenomenological approach. This research was conducted in August 2021 at the Medical Education Study Program, Faculty of Medicine and Health Sciences, UIN Maulana Malik Ibrahim Malang. The data collection technique used in this study was in-depth interviews with eight students of the medical education study program at UIN Maulana Malik Ibrahim Malang who were considered to represent each batch, namely 2017, 2018, 2019, and 2020. Each class was represented by two students—the technique taking the subject of this research using the purposive sampling technique. The criteria for informants in this study were those who were involved in all CSL learning activities,

represented male and female gender, were not in the same CSL group, were willing to be interviewed, and could tell their experiences fluently. Data analysis was done by reducing data, namely determining key sentences and keywords and then coding. After that, determine the category, formulate a theme, and describe it with narration. Before conducting the interviews, the researcher first explained the purpose of the research and asked the informants for approval by signing the informed consent file.

RESULT AND DISCUSSION

This study used eight informants, consisting of 3 men and five women, who were active students from the 2017-2020 class. Overall, this study found seven themes that describe students' experiences when learning CSL during a pandemic, including CSL learning videos help students to learn, delivery of materials by the instructor when guided, The instructors practices the taught skills, signal difficulties when learning CSL, students have difficulty in looking for alternative tools and making videos for response activities, giving of feedback by instructors to students in response, students' skills lack in online learning. An explanation of each theme will be explained below:

1. **CSL Learning Videos Helps Students to Learn**

In the introductory CSL lecture activities, the CSL Coordinator provides CSL learning videos as a substitute for lectures to students. All informants stated that the learning videos given during the introductory CSL lecture helped them in terms of understanding the material being taught; students could save this video and then play it repeatedly when they needed to study again and could equate the perceptions of all groups so that when they learned together, there is no difference. The videos are also good in terms of sound and pictures, so they are clear to watch. Besides that, this video is also very effective in supporting students' understanding of the skills that must be done. The following are excerpts from several informants regarding the CSL learning videos:

> ''The CSL video is beneficial, especially for me; it is beneficial. The videos can be saved to be seen later when we need to study''.

> "Learning videos help us understand the material because we can repeat many times and play it slowly while understanding and seeing clearly".

> "The CSL learning video before being guided is beneficial and very effective in supporting student understanding".

The existence of this CSL learning video was beneficial for students in understanding the material when learning online. The transformation from direct learning that switches to online

learning has a positive to negative impact. Lecturers are required to be able to plan and prepare for learning as well as possible and as creative as possible in providing material. The form of lecturer creativity in presenting enjoyable online learning can determine the amount of student attention to learning activities (Widianti et al., 2021). Making students understand the importance of learning and increasing student learning motivation is very important in this Pandemic period (Bestiantono, Agustina, Cheng, 2020).

Video learning is one of the solutions to make students understand the subject matter well because videos can make it easier for students to understand the material with video programs that can be played repeatedly. By utilizing learning videos, students will be more enthusiastic about learning and improve learning outcomes because learning is not monotonous and boring, and students will have new learning experiences (Susiyanti & Nugraheni, 2020). The use of videos can build students in exploring data, build theories, and evaluate theories. Apart from that, videos can also be a means of uniforming each instructor's steps for carrying out clinical skills (Aryanty, Puspasari, Purwakanthi, 2014).

Using instructional video media can stimulate students' motivation to learn because there is a student's curiosity about the video displayed so it can increase students' understanding of the material provided. In addition, this learning video has the advantage of increasing cognitive abilities, which can improve the ability to remember, understand, apply and analyze (Ridha, Firman, Desyandri, 2021; Warmadewi & Raka, 2020). Learning video media has a significant influence on student learning outcomes. With video media, students are assisted and guided when studying at home. There are many advantages to using learning video media during the Covid-19 pandemic, so many educators have applied this media to their learning activities (Ridha, Firman, Desyandri, 2021).

2. **Delivery of Materials by The Instructor when Guided**

When guided by CSL, the instructor will deliver material according to the topic taught at that time. According to the informants, the material conveyed by the instructors, who are general practitioners and specialists, is evident, competent, understand the procedures described, and comfortable even through zoom. Sometimes there are differences in perceptions among instructors; for example, specialists teach more about the core or points, while general practitioner instructors are more detailed and have to go in order. However, the gist of it all is the same. The following are quotes from several informants:

> *"The doctor explained very clearly and was very competent. The instructors are also very familiar with the procedures explained".*

"The difference is that specialist doctors tend to get to the point, but the general practitioner is more detailed. So from start to finish, it all tends to be explained like that".

"Just sometimes from perception. If a specialist doctor does not have to sort the checklist, the important thing is that the student understands and holds the principles. However, it differs from the other doctor who must follow the checklist. So it depends more on each instructor, but actually, it is the same".

The instructor is a facilitator needed by beneficiaries. The instructor is here to provide teaching and education. The instructor plays an educational role because he/she is here to touch and interact directly with the beneficiaries (Aswidiyanto, Soedjarwo, 2020). Skills lab instructors must have communication and interpersonal skills, such as being interactive while teaching. Instructors must have field expertise appropriate to the topic. Instructors must be deeply knowledgeable about the skills. Not only in-depth knowledge, but an instructor must also have insight into basic knowledge. Submission of material by the instructor in small groups is essential, so students understand more. A good instructor influences the student learning process (Fawzia, Probandari, Suyatmi, 2017). In addition, the difference between each instructor may be due to the infrequent TOI (Training of Instructors) conducted in the UIN Malang Medical Education Study Program during the pandemic. Instructors, before teaching, need to do a debriefing first. This debriefing activity will equalize perceptions regarding theory and technical practice in a skilled topic (Fawzia, Probandari, Suyatmi, 2017).

3. The Instructor Practices The Taught Skills

During the guided activity, all informants stated that the instructor practices the skills taught through zoom both from home and on campus. The instructors practice using the same tools as those in the learning video to make students more precise and understand the CSL topics taught. After practice, several instructors ordered students to read the checklist then the lecturer practiced again. In addition, in the end, there is also a discussion session; if students still do not understand, they may ask questions, and the instructor will answer and, if necessary, practice again. The discussion makes students understand more. Here are some quotes from the informant:

"All instructors gave an example first, and some practiced on campus, some at home".

"The instructor always happens to teach, so it is not just asking. So it is being repeated, so if, for example, some students do not understand, the instructor will tell them".

"The instructor always demonstrates back using the same tools as in the video, so we understand better and are not confused".

The instructor is a significant figure in CSL learning activities. Each instructor will demonstrate the steps of clinical skills based on existing checklists. The instructor is a provider of information, facilitator, designer, and developer of learning resources. The instructor must have skills and expertise in providing clinical skills training (Towidjojo, Indang, Sagita, 2022). The instructor's performance in teaching lab skills influences a student's competencies (Panggabean, Natasha, 2016).

Communicative and interactive learning processes can support students in learning. Students feel more creative and enthusiastic about asking questions when involved in a dialogue with the instructor (Fawzia, Probandari, Suyatmi, 2017). In conducting discussions, an instructor acts as a facilitator who provides guidance and advice to students (Panggabean & Natasha, 2016). In addition, collaborative learning accompanied by questions and answers will bring up interactive communication so that the lecture material will be conveyed properly. The level of interaction between lecturers and students is essential for determining learning effectiveness. Effective learning must involve questions. Questions from this student are then responded to by the lecturer in the form of a more detailed explanation (Budiani, 2021).

4. Signal Difficulty when Learning CSL

During this pandemic period, students must learn from home and can only rely on good signals during the guided learning process and response. Most informants complained that online learning is not good because if their signal is terrible, they often go in and out of the zoom room; sometimes, the sound from the lecturer is interrupted so that they do not hear it. They also have to look for good signals when learning in various ways, one of which is by going to the city to find a signal because, in their village, the signal is difficult. The following excerpts from several informants:

"When I was guided, I had to look for a signal to my relative's house in a city with a good signal."

"I often stutter when listening to zoom, whether guided or responsive, because the signal here is bad."

"It is better to study offline because it is difficult online like this; the signal is not good at home."

During online learning, a good signal is a crucial factor so that the teaching and learning process runs smoothly. The application of this online system has caused many problems for students and

teaching staff (lecturers). One of the complaints often encountered is limitations in understanding material and signal constraints which cause slow access to information (Andini, Safitri, Hendri, 2022). the inadequate signal causes students sometimes to be left behind with information (Siahaan, 2020).

Online learning has weaknesses when accessing the internet, or weak networks, so many assignments given by lecturers are not understood by students. Signal stability can also affect students' weaknesses in online learning because a weak signal can cause the teaching and learning process to be slightly hampered. Inadequate internet access is a significant obstacle to online learning (Gunawan & Amaludin, 2021). One of the building blocks of effective distance learning is adequate and stable internet speed. Without a stable connection, students cannot obtain complete learning material, and the process of understanding is limited and limited by the internet (Rudagi & Siska, 2021). In addition, an unstable internet network is one of the problems that can hinder the lecturer-student interaction process due to the uneven distribution of the internet network so that not all areas can get a smooth connection (Suhada *et al*., 2022). An unstable internet network has resulted in students not receiving optimal explanations of lecture material delivered by lecturers (Sadikin & Hamidah, 2020).

Internet quota also plays an essential role in the learning process today, especially during the Covid-19 pandemic. Without an internet connection, in this case, cellular and Wifi data quota, online learning will be hampered or not even run smoothly. Without a quota, all online learning processes will not run optimally .and hinder education in Indonesia (Gunawan & Amaludin, 2021).

5. Students Have Difficulty in Looking for Alternative Tools and Making Videos for Response Activities

During response activities, students have to make videos related to CSL topics taught using the makeshift tools they have because most students do not have real tools like in CSL. Many students have to rack their brains to replace the real tools like in CSL with the tools they have at home. For example, during the ECG, they used fried tongs as a replacement; to install the IUD, they used an Aqua bottle, thread, and a straw; for infusion skill, they used a doll instead of a mannequin. Some students buy tools such as flashlights. In addition, students also have difficulty and are somewhat complicated when making CSL response videos because they have to find good light so that the video is clear, find a quiet place, take videos repeatedly and have to edit the videos, so they are not too long. The following are quotes from several informants:

"When CSL went online, we did not have the original tools, for example, mannequins; we ended up using teddy bears."

"Feeling trouble when setting up the tools. Especially during topic circumcision, we also have to figure out what tools to use, but we do not have a circumcision set."

"Only the difficulties I experienced were in the tools section; maybe some of the stations or topics required complete tools, not many adequate tools; we also had to make our tools; the mannequins themselves were like that."

"Making a video is complicated because my house is on the side of the road, so it was crowded. When I tried to make a video, my voice sounded small and unclear because of the noise of vehicles."

"I had to take several videos because suddenly my sister appeared and disturbed me; there was also a time when the lights suddenly went out, so the light was dark."

Tools are essential to support CSL learning, considering that many topics taught in CSL require much equipment. A student must know how to use and function a tool used in CSL. When learning CSL during the COVID-19 pandemic, there were tool constraints such as missing or lacking availability and less optimal functionality resulting in reduced student understanding so that students could not freely practice the material that had been taught because they used makeshift equipment at home (Fawzia, Probandari, Suyatmi, 2017). The tools and materials needed for clinical skills are not sufficiently owned by students so that they can affect the fulfillment of clinical skills achieved (Sare *et al*., 2022).

Making CSL response video assignments is not easy. Students face several difficulties in making video assignments, including problems with audio, namely if, in the process of recording, the position of the mouth is not near the laptop, so the audio/voice sounds very small, it takes several times to record the video to produce the video as desired, it takes several times improvements were made because there were several wrong words when delivering the material (Deswita, 2021).

6. Giving of Feedback by Instructors to Students in Response

During this pandemic, students are required to make videos according to the skills they have been taught. The video results they have made must be sent to the instructor before the response activity so that the instructor can preview and provide input on the video during the response activity. All informants said that when response activity, they all got feedback from their instructors, so they knew mistakes or deficiencies in their skills so that they could be even better in the future. Giving this feedback also clarifies the skills they have worked on. The instructor

feedback method for each group was different; there were instructors who invited students to watch together and then corrected which ones were correct and which were wrong. Some instructors directly provide feedback to each student without seeing it together because the instructor already has notes on corrections for each video that students have made. The following is a quote from several informants:

> "All instructors give feedback, so videos from friends are usually displayed one by one, so they are displayed via share screen like that. Students can introspect themselves and be able to find out what things are lacking."

> "When instructors give feedback, it allows us to know more about what can be improved and ask for an explanation or evaluation like that."

> "So the doctor has seen the previous video and immediately gave feedback without playing it on the forum, then there were those who played everything and then gave feedback."

Feedback provides information related to learning outcomes, measurement, and assessment results. The lecturer has the responsibility to deliver the learning outcomes achieved by students to students who learn. By looking at the learning outcomes obtained, it can provide information about the extent to which students have mastered the CSL material presented by the instructor/lecturer (Syahdan, 2020). Feedback from lecturers, including notes and explanations of mistakes made by students in completing assigned assignments, as well as comments on exam sheets/assignments given to students, have contributed to the achievement of learning achievement (Syahdan, 2020; Wening, 2012). The lecturer's actions include comments, warnings, and notes as a warning against mistakes made by students, which can cause awareness of students not to make mistakes continuously (Syahdan, 2020). Feedback helps improve the learning process. Lecturers must often provide feedback to students, even in online classes, so that students can learn independently at home. With frequent lecturers providing feedback, students will feel cared for and valued by lecturers on purpose for their actions, especially in the learning process, appearance, and achievement (Humaira, Suharni, Putri, 2022)

7. Students' Skills Lack in Online Learning

When learning CSL during the Pandemic period, all done online, many of the informants felt their skills were lacking because they did not directly touch the real tools. If they entered again offline, they were still confused with the tools used for specific CSL topics and the use of the tools. The informants also revealed that online they only practice using improvised tools at home, so they feel the skills to take action or inspection are very lacking. The following excerpts from several informants:

"For the suturing skill, I felt very less because, at that time, I only used ordinary threads with the needle at home."
"Because I used makeshift tools, I felt the skills I was working on were lacking. Moreover, later when it goes offline, it will be somewhat confused about which tool continues to use it."

Skills or skills are emphasized to be mastered by medical students. However, in the online learning process during the Covid-19 pandemic, this could not be implemented so that, in the end, it would affect the learning outcomes that had been determined. From this online learning, students have indeed understood understanding from a theoretical point of view, but in terms of student skills, it is very lacking (Rondonuwu, Mewo, Wungouw, 2021).

CONCLUSION

From the results of the study, it can be concluded that there are seven themes related to the experiences of PSPD students when learning CSL during the COVID-19 pandemic, including: CSL learning videos help students to learn, delivery of materials by the instructor when guided, The instructors practices the taught skills, signal difficulties when learning CSL, students have difficulty in looking for alternative tools and making videos for response activities, giving of feedback by instructors to students in response, students' skills lack in online learning.

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