

ORIGINAL RESEARCH



Descriptive Implications of Global Crises to Higher Education Institutions: A Philippine-Indonesian Perspective

Joel Rey U Acob¹

¹ Director, Quality Assurance; Member, Faculty of Nursing, Visayas State University, Philippines

Correspondence: Joel Rey U Acob (joel.acob@vsu.edu.ph)

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ABSTRACT

Background: The pandemic-like crises impacted significant changes not only to economy; even in higher education industries (HEI) worldwide. Institutions shifted its process from long-standing conventional teaching to innovative approaches in transitioning higher education and deliver the same value of quality of instruction. With the era and development of global technology which impacted the teaching-learning process including in nursing education.

Methods: Descriptive quantitative design, 42 school educators and administrators having five years of teaching experience, both from private and state-operated higher nursing education institutions in the Philippines and Indonesia responded to online survey from July 2022-February 2023.

Results: The study revealed that HEI innovated through technology-inspired education delivery. Traditional learning strategies though considered; however technical issues had challenged the educators during the initial stage of implementation. Hesitancy and resistance to change defied at the early phases considering that most teachers believed that traditional approach still the undisputed means to in still knowledge. Online learning platform offered new opportunities, while educators recognized that industry 4.0 education is a learner-centred curriculum. Transitions from classroom to faceless mode of delivery became possible through constant support system, while non-traumatic mentoring sessions became instrumental to gradual adaption of technology especially among digital migrants.

Conclusions: Hybrid learning is possible and efficient means to traverse education during crisis situation. Design of short-term courses to be delivered through virtual means, shared and holds true and ethical across Asian communities.

1 | Introduction

The pandemic as a major global health issue affected all the aspects of life not only to economic and health, more even to education sectors. This challenged the nursing world where adaptive, innovative and applicable skills and knowledge are needed. In countries like Philippines and Indonesia where archipelagic setup adds to the challenge of education delivery in pandemic-like times, nursing education sector must adapt due to limited facilities to support the learning environment. These countries in Asia are considered the major producers of health care professionals in the region, and

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the pandemic severely affected the mechanisms and mobility of these care workers. Aside from the connectivity issues, lecturers experienced obstacles and have to make appropriate coping related to the learning process maintain quality of education. The event made significant adjustment to education champions on navigating the strange path towards sustaining quality nursing education delivery. The global crises lead to major disruption in nursing curricula which triggered education sectors to reframe learning methodologies and assessment to measure performance in the new normal. Clinical placements and competency-based assessments revisited to ensure that the desired skills and program competencies are met at each time. Students have to adapt as well especially to new modalities and the afforded cost to sustain online learning and its physical and psychological effects. [1, 2]

The consequence of the health crises not only impose challenge among Asian countries, more so to nations which deeply rely on nurse workers from Asian region. Considerably from Philippines and Indonesia, major health institutions felt the overwhelming ratio between patients and nurses while the ability of nursing HEIs to produce competent skills-driven professionals are confronted on adopting to new standards of competency requirements, meeting rigorous necessities for the ASEAN growth. Economic communities although promote borderless opportunities for nurses in a skilled labor market through Mutual Recognition Arrangement (MRA) schemes, but the significant loss of almost 2-years of training for related learning experience (RLE) and immersions now pause a question of quality. [3]

For this reason, global health problems and economic challenges brought by climate action changes impacted the nursing education thus moreover requires flexibility and adaptability of the new learning process. The urgency of this study lies in ensuring that nursing graduates remain regionally competitive possessing the required standard demanded by the workplace and industry despite systemic educational disruptions. Thus, with all the experiences encountered, the study aimed to document the revolutions of nursing education and its implications to better the delivery of its program through development of responsive curriculum and learning environment where opportunities of learning continue. [4]

2 | Methods

2.1 | Design

Through quantitative descriptive approach, the study able to investigate the profile attributes of the respondents in authority to express their experiences during the initial phases of the pandemic.

2.2 | Samples and Setting

The 42 participants were purposively identified nurses, administrators, educators and managers with key positions and were directly involved in the decision making during the pandemic times. They are who possessed direct knowledge and relevant experience regarding the institution's response during the crisis. Those who refrained to consent and unable to respond to survey link within the time frame were removed from the list. The study respondents come from various higher education institutions of nursing in the Philippines and Indonesia with at least five years of teaching experience prior to the survey.

2.3 | Instruments

The online survey questionnaire consisted of two components. The first part includes demographic attributes of the respondents like highest educational attainment, years of experience in the academe as educator. The second component focused on examining the perspectives of participants in their experience during the pandemic period. Such management are pivotal to synthesize the entire involvement during the global health crises and its future implications. Moreover, the semi-structured, expert validated guide questions revolved on expert concepts expressive of the implications as brought by pandemic crisis to their management in nursing education.

2.4 | Data Collection and Timeline

The use of on-line survey was employed during data collection spanning a 7-months beginning July 2022 provided an asynchronous, geographically flexible tool to obtain the data across the two countries. Consent forms were provided to introduce the aim of the study and understand the characteristics of the participants as collected. Questionnaires were distributed purposively to invited participants while an e-flyer containing brief information about the project provided.

Explicit consent forms established ethical integrity by clarifying aims, guaranteeing voluntary participation and outlining institutional attributes were processed.

2.5 | Data Analysis

The sample and responses to study tools were quantitatively analysed through frequency count. On one end, implication responses were thematically presented on the dimensions of the expert expressions and professional quality of the participants.

2.6 | Ethical Consideration

This investigation is part of the internationalization approved project of the University with the code VSU-IP-2022-11. The online survey and data maintained high anonymity where researchers had accessed to the retrieved information. Brief introductory statements prior to answering were provided describing study purpose. Voluntary and non-coercive environment were observed at the entire course until participants accomplished the data collection period. Moreover, participants were informed that refraining from participation were possible at any period of the study.

3 | Results

3.1 | Profile

Majority of the respondents obtained their doctoral degree (69%) at the time of the survey while 13 (31%) are masters prepared. During pandemic, nursing students' population draw for approximately 500 counts all across levels (61%), while the remaining 39% tallied above 500 students who availed hybrid learning platform. Nursing education administrators occupied the post for more than 15 years (40%), while the rest able to manage as either dean and director of nursing from 3-7 years (60%) respectively in both private and state-owned university (80%), while 7 (20%) of the participants supervised in private college institutions.

3.2 | Descriptions of Nursing Education Management During the Pandemic

Nurse education managers comparatively expressed that education delivery was quite a challenge during the pandemic due to lesser preparation and anticipation of its long-term effect. All participants ventured on full online modality which contrastingly observed pre-pandemic era, while others resorted to hybrid means with maximum observance of the COVID-19 protocol. Learning management system (LMS) facilitated the realization of continuing teaching-learning programs through platforms like google and zoom sessions became the core vehicle for continuing education.

Interestingly, a slight decrease of enrolment was observed to about 30% among nursing schools due to poor connectivity (20%), adjustment to new learning modality (15%), mental health reasons (45%) and economic recessions (20%).

Teachers were forced to learn new teaching strategies to adopt to changes in order to effectuate teaching methods. Series of trainings and workshops were facilitated in every institution, mentoring sessions and buddy-system as an approach to develop learning guides and pocket workbooks became evident. As a result, media-inspired support learning and technology-driven activities were the observed systems and styles among faculty members for more than two years of pandemic education.

Resources and facilities became instrumental in the realization of the virtual education. Institutions through administrative support has equipped necessary paraphernalia and needed learning-aids both to teachers and learners. Virtual rooms and simulation facilities especially are utilized to address the actual clinical duty rotations which was impossible following border restrictions. Massive investments on e-learning portal, infrastructures and information technology support have added the education's stability which even continued post-pandemic years. On a notable side, nursing facilities have significantly improved indicative of increasing provision systems from the management.

Nursing institutions encountered various opportunities in the education implementation during pandemic. This includes teaching methodologies which constant adaption had taken place, digital challenges and the call to being creative and innovative to online learning to hold student's enthusiasm and interest to learn, and the strange negative feedback of students on the lack of substantial learning during the pandemic.

3.3 | Descriptions on the Innovations and Modifications of Nursing Education Curriculum During the Pandemic

The crisis stirred the implementation of nursing education at the global lens. Three key concepts are being shared by Philippines and Indonesian nursing educators and believed to be efficient even after the disaster or in emergency situations. The methods and teaching strategies can be improved through adult-learning approach, online education can be optimized through use of videos and graphics, learning modifications from conventional to hybrid mode. The conduct of nursing lectures as expressions of collaboration to share resources and expertise are some of the emerging learning delivery styles.

4 | Discussion

The profile suggests that the academic heads of the nursing programs possessed the bare requirement for the post and earned considerable years of teaching and managerial experience. Such exposure to administrative designations equipped them to warrant operational continuity while the change of modality and learning scheme shifted during the year. It is crucial to note that while the disruption imposed outright move from the usualness, educational managers simultaneously crafted the path towards uncertain change. Majority of the respondents constitute the doctoral-prepared population which further qualifies them for the post as head of academic units of higher education institutions. Although the requirement by law requires dean and directors to be holders of Master of Arts degree, participants (69%) met beyond the qualification standard. The earned degree better prepared the participants for bigger roles like spearheading in the craft of policies related to instruction and nursing education delivery. The decision-making capabilities and degree of sound judgment are appropriated in the role that are embedded as one escalated in his or her educational career. Professional advancement is essential to build better decisions impacting the overall performance of an academic organization [5] whereby student population are at the prime consideration. Novice-to-Expert nursing models as emphasized by Benner and Wrubel [6] are becoming basis in the identification of leaders in the certain community given academic qualification.

Nursing education is intrinsically practical and is heavily dependent on hands-on clinical skills execution, actual patient care training and interaction. The abrupt transition had forced higher educational institutions to remotely deliver the teaching, rather than planned distance education modality. While some institutions transitioned directly to online mode to deliver theoretical components of education due to systems in-placed, but the practical competency and clinical immersion created deficit and gaps. This implicates that the educational institution's lack of readiness to technical and technological aspects of education delivery poses total vulnerability to similar global disruptions in the future. [1]

These multi-factorial etiology causes crisis extended far beyond the technical leaps. Mental health for instance which represented almost near half of the attrition highlighted psychological toll of isolation, fear of the unknown and the overall academic stress due to strange modality and process installed during the health crisis. Poor connectivity and economic recessions are intertwining issues contributive to both since the disruption forcibly ceased the family members to work and earn a living. Educational institutions assumed fair access to technology and resources, but digital divides and household income strained majority of the student population to suspend their education. [7]

This suggests that institutions must move from reactive-to-proactive adaptation planning. Establishing and investing on permanent digital infrastructure for a-less interruptive classes during disasters, strengthening student support services framework for mental health, integrating mental health and coping mechanisms directly into the curriculum and developing simulation-based training modules and set-ups that can withstand disruptions in lieu of hospital placements. [2, 4]

The Philippine and Indonesian nursing educators determined three important core strategies for sustainability in education delivery especially during crisis situations. First, the adoption of adult learning (andragogy) framework where learners are taught to process information on their own due to level of maturity, motivations and experiences.

In nursing curriculum, andragogical framework transitions learners from passive to proactive decision-makers responsible for the knowledge they require. The educators serve as facilitators of learning utilizing case studies, simulations and interactive online modules to reflect and encourage critical thinking and clinical judgment. [1]

Second, optimization of online education platform through visual media. This innovation offers essential cognitive advantage over pure text-based or lecture-only modality in modern learning environments. Visual representations (which mostly adapted during COVID-19) consolidate complex data into digestible forms which allows learners to focus on higher-order skills and critical thinking. In disciplines like nursing, reading about the procedure cannot replicate seeing a physical demonstration. It must offer clarity from subjective to objective framing of data to understand concepts, cases and clinical procedures. Andragogic framework transitions the learners as receivers of knowledge to application of learning to their real-life contexts. [8]

Third is the joint lecture delivery which emerged as primary approach to cross-share instructional resources and expertise. The move towards hybridization of instructions in nursing and inter-institutional resource sharing suggests a major shift from survival-driven emergency instruction to long-term academic strength. Pool of nursing educators and experts in both countries complimented one's resource limitations. The shared framework demonstrated that crisis-induced adaptations yielded sustainable modifications to nursing curricula that extends even beyond the pandemic. [9]

The findings indicate workforce readiness and standardization of nursing education curricula in ASEAN region. The modernization of nursing curriculum through technology and shared experts in complimentary approach will further reinforce ASEAN Economic Community (AEC) mutual recognition arrangements and reciprocity. As major producer of healthcare professionals in Southeast Asia, Philippines and Indonesia significantly benefits once hybrid curriculum models are aligned and drafted. Harmonizing learning methodologies, program accreditation and credit transfer scheme would ensure nursing graduates remain comparable competency levels across borders. [3]

COVID-19 considered a form of global health disaster, and the on-going economic crises due to nation conflicts have threaten human survival now, can also be viewed as a forerunner of future eventualities. Aside from the issues of climate change, and new and emerging diseases outbreak loom ahead. Intensifying and cultivating disaster and public health emergency education and training for nurses is vital. Lessons learned from the pandemic strengthened the pragmatic mark that nurses and other health care workers were not well equipped to retort. [10]

During the pandemic, education managers expressed that the transition from conventional to pure online delivery greatly challenged their leadership skills. It was not their (academic nursing leaders) expectation that COVID-19 effects would prolong resulting to the overhauling even the academic styles, instruction structure and delivery of learning format. Modality evolved leading to the innovative ideas of the education managers just to survive instruction delivery. Nursing educators of both countries comprehended similarly that nursing education is quite unique that of other professional disciplines since the delivery can never be executed fully online. The aid of high-fidelity simulation laboratories when invested prior to pandemic can significantly assists in the near-to-actual skills preparation of the students. This observation speaks in consonance with, [9] emphasizing the importance of simulation facilities as advanced groundwork as the practice evolved overtime. This engendered spacious teaching-learning avenue which supported social distancing and enthusiasm for learners and teachers alike, as simulation laboratories become protuberant component of an uninterrupted academic endeavor. The issues on classroom dearth and student-faculty ratio were not at-all a concern considering that class sessions are delivered online. The sudden stop of on-site clinical rotation forcibly employed and blatantly mandated nursing school managers to innovate leaning towards simulation-based experiences and hypothetical case scenarios to supplement curricula, thereby permitting learners to complete their educational formation, thereby meeting the exponential need of nursing workforce while still meeting the regulatory requirement. [11]

This experience supported [8] that education is borderless and traverses across culture and territories. Although the pandemic hampered student's mobility and practice to actual care facility settings, it also paved to reflect on the importance and realization of industry 4.0 education where learning become more efficient as technology-inspired modalities are embedded in the curriculum. [12] Investing to human resource such as faculty development is also challenging the nursing school administrators to unceasingly provide resource and support both students and teachers. Beginning steps are notably taking into place indicative of the unending support of academic administration in upholding quality and standard.

On a significant note, administrators of both locales understood that rearing future nursing carers is not a play of competition nor issues of superiority, but more of shared responsibility through collaborative mechanisms. At the verge of crisis, education delivery reforms are greatly observed. Sharing of resources, exchange of faculty experts, [10] inputs and critique conjointly made by institutions are some of the innovations. These strengthened the belief that the goal of

education is to produce quality graduates, and not proving who excels among. With the reformation, education managers exercised collaboration through forging agreements to intently increase the scope and influence even across borders and culture. The administrators are beginning to consider incorporating language of internationalization as expressions of nursing [13] to toughen nursing education to be a resilient-based curriculum. With the increase of evolving demand not only due to pandemic, both countries shared common features especially on being commonly affected by natural calamities and disasters, [4] which resulted further to cancellation of classes and education delivery. The development of disaster-proof short-term courses reinforcing the basic knowledge on nursing education is a welcoming development for an interrupted delivery, hence a form of voice of change for nursing sector. Remote learning which can be attended by anyone with similar interests become possible after careful curriculum design. This endeavour not only benefits nursing education champions, more so to educators to share first-hand experiences in a crisis situation. Valuable inputs will impact health care industries thereby improving quality of care and maintaining standards thereof.

5 | Conclusion

The study further emphasized the role of innovations through modifications of its education implementation. Hybrid delivery justifies the possibility to continue learning and education during and even to post-pandemic situations. The study moreover, implicates the utilization of online capacities to strengthen nursing education as a shared responsibility of educators among Asian countries.

Declaration of Interest

The author stated and declared no potential conflict of interest in the development of this document.

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Data Availability

None

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