

What the students of a University were missing and how to return to the everyday life after lifting COVID-19 lockdown?

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ABSTRACT: The pandemic caused by the new coronavirus SARS-CoV-2 affects both the physical and mental health of all population groups. Lockdowns, social distancing, and quarantining contribute to the deterioration of mental health. Studies show that these measures lead to negative psychological effects, including confusion, anger, and post-traumatic distress. The objective of our study was to investigate how lockdown affected students of the University of Patras in Greece during this pandemic. Beyond the effects on their psycho-emotional state, their lifestyle and their student daily life, we wanted to investigate what they lacked the most after the six-weeks-lockdown, so that the unprecedented experience of the pandemic becomes a cradle of new knowledge and the Universities can better care for the students in future situations. More than 2,000 students participated in the research, completing an online questionnaire. Particular emphasis was placed on the question “What is the FIRST thing you would like to do immediately after lifting the measures”, with answer options to go out for coffee/food/drink/fun with friends (58%) or with their family (5%), visit beauty and hair salons (16%), travel (6%), or go shopping (2%). The open last option “Other” answered by 246 (13%) students was qualitatively investigated. The thematic analysis revealed 13 categories, with first place “Restoring social life without restrictions”, followed by “Seeing their boyfriend/girlfriend”, but at the same time continue to be “Careful and take self-restraining measures”. In conclusion, the students want to return to a normal life or even to a new daily routine with protection measures that limit both exposure to the virus but also their spontaneity.

KEYWORDS: COVID-19 lockdown mental health students

I. Introduction

Ten years after the pandemic of influenza in 2009, caused by H1N1 virus, a new health crisis has been reported on the planet caused this time by the coronavirus SARS-CoV-2 (CDC, 2020). The new virus was detected initially in Wuhan, Hubei Province, China in December 2019 as rising cases of pneumonia of unknown origin, which later was described as COVID-19 disease. This new virus and disease were unknown before the outbreak began in Wuhan. The virus seems to have been transmitted from bats to humans through an unknown mechanism (Singhal, 2020). Many studies link COVID-19 with Wuhan open animal and fish markets (Fini, 2020).

The World Health Organization (WHO, 2020) on March 11, 2020 officially declared a pandemic due to the new coronavirus, an epidemic that is spreading rapidly on a global scale (ECDC, 2020). The pandemic has affected 216 countries until now (November 5, 2020), with a total of 48,551,731 reported cases all over the world, 1,232,833 deaths, but also 34,778,208 recovered patients. The United States of America, India and Brazil are among the first three countries with the highest number of cases, while Greece is on the 84th position with 46,892 total number of positive COVID-19 cases

Covid-19 disease is transmitted as other coronaviruses on human beings via inhalation or by contact with infected objects. The disease spreads primarily from person to person through small droplets from the nose or

mouth, which are expelled when a patient with COVID-19 coughs, sneezes, or speaks (MacIntyre and Chughtai, 2020). The incubation period of the virus is estimated to range from two to fourteen days (Singhal, 2020). The most common symptoms of COVID-19 are fever, dry cough, loss of taste or smell and tiredness (Zhu, Wei & Niu, 2020). Other symptoms that are less common and may affect some people include aches and pains, headache and sore throat. In almost 40%, patients may suffer from gastrointestinal symptoms such as anorexia, nausea, vomiting and diarrhea (Cevik, Bamford & Ho, 2020).

Many studies have shown that COVID-19 affects different people in different ways (Argyropoulos et al., 2021). Most patients recover from the disease without needing hospital treatment and suffer from symptoms similar to the common flu or are completely asymptomatic. Some others present mild while others more severe symptoms, with the elderly and those with underlying medical problems like high blood pressure, heart and lung problems, obesity, diabetes, or cancer to be at higher risk of developing serious illness (Singhal, 2020). In the most severe cases, hospitalization is required in intensive care units, whereas some may develop Acute Respiratory Distress Syndrome (ARDS) or even Multiple Organ Failure (Singhal, 2020; Tzouvelekis et al., 2020).

Due to the pandemic character of the first wave of new COVID-19 disease, isolation, physical distancing and lockdown was initiated by many countries around the world. The goal was to prevent spread of COVID-19, and to enhance the health system, mainly in vulnerable countries with limited preparedness capacity. Lockdown, first instituted by the Chinese government on January 23rd to stop the transmission and to prevent the spread of the disease in other countries (Du et al., 2020) did not achieve its goal, since on January 21st, the first confirmed case in the USA was reported (Du et al., 2020).

In the context of the COVID-19 pandemic it is understandable that people are experiencing anxiety, panic, depression and anger (Upadhyay et al., 2020). Several factors reinforce these feelings, such as the misinformation through the internet, the fear of getting infected with the virus (Burhamah et al., 2020) and changes to usually activities, i.e. working from home, temporary unemployment, lack of physical contact with other family members, friends and colleagues and social distancing for a long time (Duan et al., 2020).

Several studies provide important preliminary evidence for the effectiveness of physical or social distancing measures in controlling the COVID-19 pandemic (Duan et al., 2020). But as new measures and impacts are introduced, especially lockdown and its effect in people lifestyles, levels of loneliness, depression, harmful alcohol and drug use, and self-harm or suicidal behavior are also expected to rise (Cloud et al., 2020) not only in younger ages but also in older adults and chronically ill patients (Ammar et al., 2020).

Post-traumatic stress disorder (PTSD) and depressive disorders are the most prevalent long-term psychological consequences of lockdown measures (Huang and Zhao, 2020). In Austria, for example, depression rates in 2014 were 4%, while they increased to 20% during the COVID-19 pandemic (Pieh, Budimir & Probst, 2020). Another study conducted by Wang et al. (2021) in residents of 194 different cities in China, revealed depression and anxiety symptoms in 16.5% and 28.8%, respectively.

Undoubtedly, lockdown has dramatic impact on every person's life and on mental health of all population groups including children, adolescents and students. In order to mitigate stress levels and negative emotions in students the Center for Disease Control (CDC) has proposed some guidelines which may have positive impact on their mental health, such as healthy diet, physical exercise, adequate hours of sleep as well as keeping contact with family and friends via social media.

Purpose

Since lockdowns, social distancing, and quarantining contribute to the deterioration of mental health in all population groups, the main objective of our study was to investigate the impact of these restrictions on the mental health status of the students of the University of Patras during the COVID-19 pandemic. Besides the effects on their psycho-emotional state, their lifestyle and their student daily life, a further objective was to investigate what they missed most during the six-weeks-lockdown, so that the unprecedented experience of the pandemic becomes a cradle of new knowledge and the Medical Schools and other Departments can better prepare and care for the students in future situations.

Materials and Methods

The study was conducted in Patras, which is the capital of the Achaia Prefecture in West Greece, while University of Patras is serving as the scientific, cultural and communications center of western Greece.

More than 2,000 students from all Schools and Departments of the University of Patras participated in the research, completing an online questionnaire, via e-class of Patras University and several other social media platforms. The present study was conducted from 15 April to 7 May 2020.

An anonymous 51-items questionnaire was administered to collect basic demographic data including questions regarding socioeconomic and educational characteristics, such as age, gender, school and year of study, academic data, questions regarding changes in their life style as well as questions assessing their mental health.

For this study, particular emphasis was placed only on one question, namely “What is the First thing you would like to do immediately after lifting the measures”, with answer options to be a) Go out for coffee/food/drink/fun with friends b) Go out for coffee/food/drink/fun with family, c) Visit beauty and hair salons, d) Travel, e) Go shopping. An open last option “Other” was answered by 246 students, which was qualitatively investigated through thematic analysis.

In the Introduction page of the online questionnaire, we provided all the necessary information regarding the procedure, the scope and the duration to complete the survey. The participation was voluntarily and the anonymity of the respondents was retained. The names as well as the e-mails of the authors were provided to the participants. Data was collected and protected in an encrypted hard drive. A digital consent of participation was derived before initiating the survey from each participant. The study was conducted in accordance with the Declaration of Helsinki Ethical Principles and Good Clinical Practices.

II. Results

Focusing on the question "What is the FIRST thing you will do immediately after lifting the measures?", 58% of the students answered they will go out for coffee / food / drink / fun with friends, or with their family (5%), visit beauty and hair salons (16%), travel (6%), or go for shopping (2%). The open-ended last option “Other” of this question was answered by 246 (13%) students, placing in a strong emotional language greater emphasis on loved ones and habits they lacked, as well as on the importance of freedom. The results are shown in Figures 1 and 2.

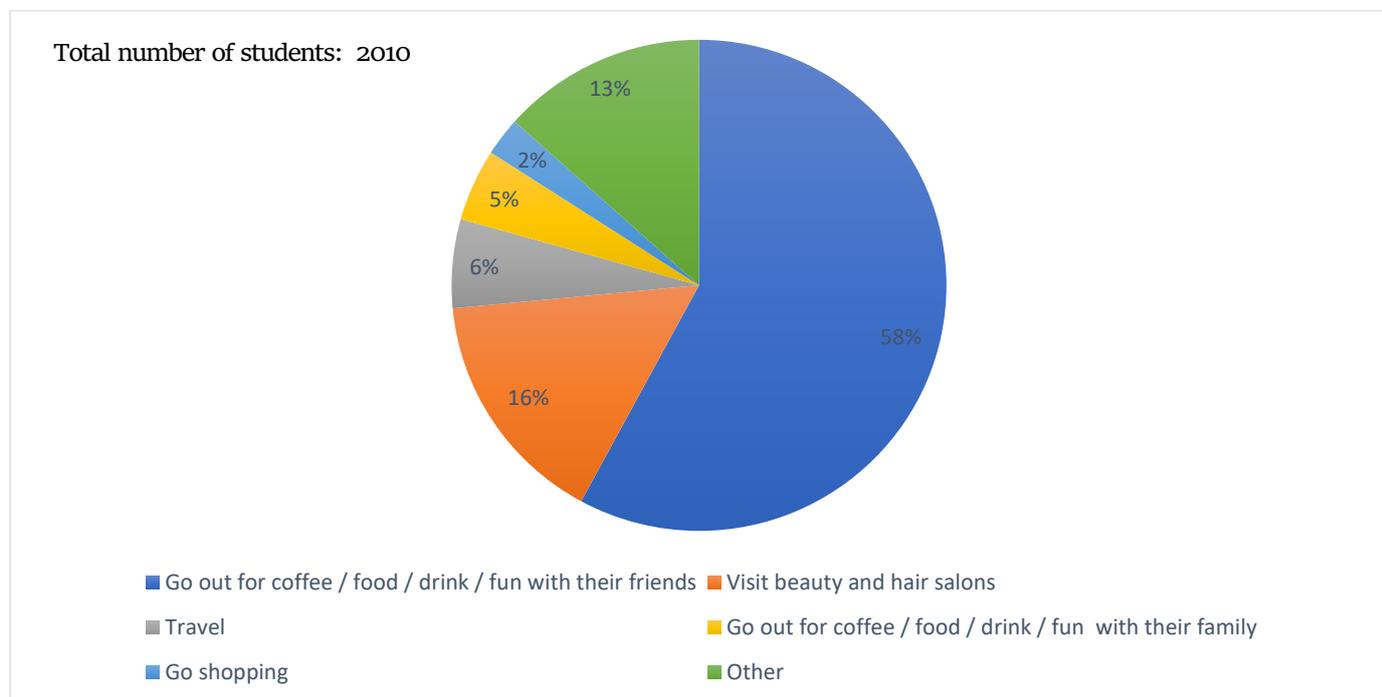


Figure 1 What is the FIRST THING you would like to do immediately after lifting the measures?

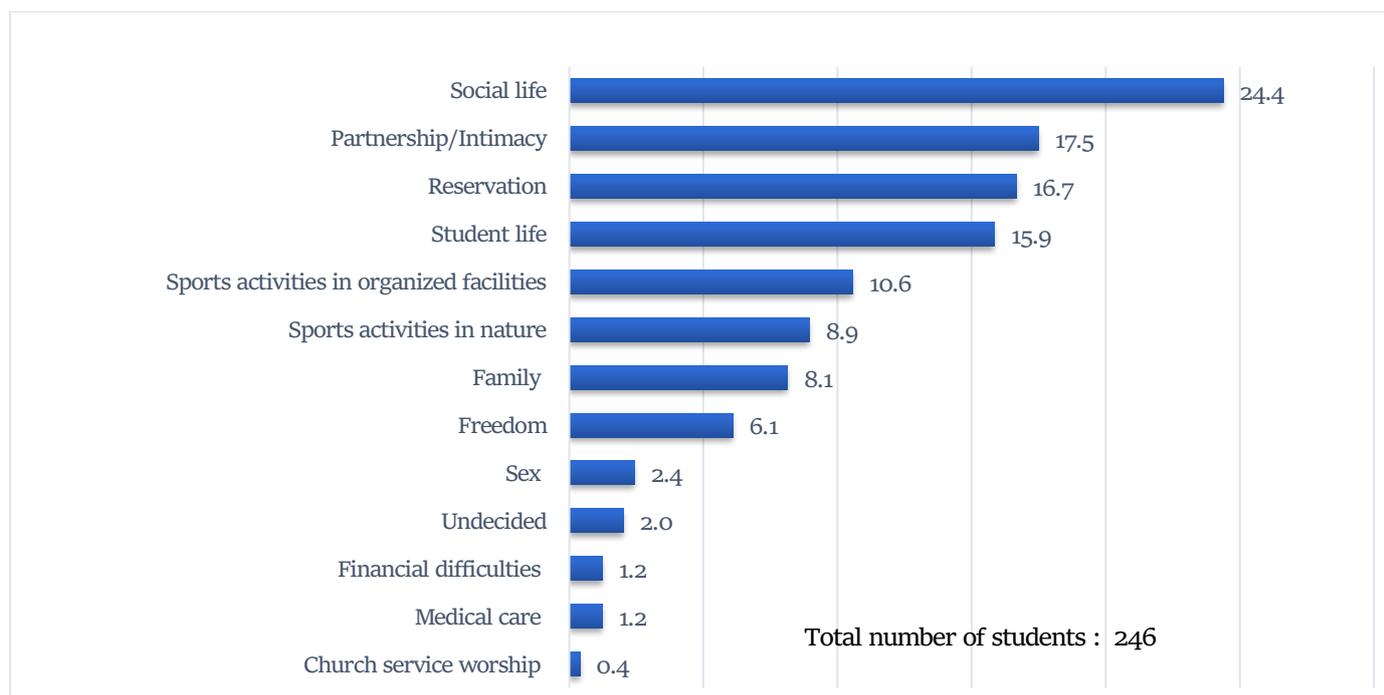


Figure 2 Thematic analysis of the option "OTHER"

What the students from the University of Patras missed most was the **restoration of their social life**, the lifting of restrictions and the recovery of freedom (*'I will go out without sending a text message ...'*). This is a broader category associated with extroversion (*'going for a walk in the car'*) and communication without the use of digital technologies, but personally and through true eye contact. This category is not limited to going to a cafeteria or a restaurant for coffee, drinks or food, but also just to meet up with friends (*'eat with my friends on my balcony ...'*). There was also the wish to gather people together in the mood to celebrate their personal victory and that the goal of the quarantine was achieved (*'I will organize a party with cooking and inviting loved ones ...'*) or to go to the concerts of their favorite artists who have always contributed to the mental upliftment, as culture contributes to it anyway. However, answers in this category, in some cases, reveal the prolonged fear and dilemma of not overdoing it with the regained freedoms (*'walking in the market, but not in a mall', 'meeting relatives who are not in a vulnerable group'*).

Partnership and the longing to see their boyfriends/girlfriends again rank second in students' nostalgia. Many of the students spent the days of quarantine separated from their loved ones, feeling deprived of their emotionality (*'I will go to see the man I love', 'I FINALLY WANT TO SEE MY GIRL AGAIN', '... to give a hug'*). They also lacked **sexuality/intimacy** with their boyfriends/girlfriends but without making this an end in itself or putting it in the foreground. Of course, there were also concerns about whether the partnership would still exist after the quarantine or whether it would break up (*'To be with my girlfriend, if I still have her after the end of the quarantine'*).

In the third place the **reservations** prevail. Many students said they would continue to stay in auto-isolation after the quarantine was over (*'I will be staying home for some time'*), while others said they will continue to be very careful and take all the precautions (*'to be honest, even if the lockdown is lifted, I will not go to a crowded place ...', '... does not mean that because the quarantine is over, the disease has disappeared'*). Their statements make it clear that they experience fear and persistent uneasiness, worry about their future, distrust the role of the media and even struggle with depression (*'I don't think life will be the same as before. I will be afraid to go out.', 'I will stay at home as everyone, really everyone, will go out for coffee, drink, walk, ...'*).

In fourth place we find issues relating to **student life**. The responses show that the students absolutely wanted to return to their dormitories (*'I will eagerly wait to return to my place of study'*), and thus also to return to their academic obligations so as not to deviate from their study planning (*'All I care about is to continue my school', '... to coordinate issues concerning my graduation ...'*). Furthermore, it was important to them to regain

their independence, but also to resume social contact with their friends, albeit with greater caution (*'I will return to Patras, I will be careful in my daily life', '... I will myself adapt to the new reality'*).

The fifth place goes to **sports activities in organized facilities**. The category includes students who want to continue their training in individual and group sports, dance lessons, exercises with friends in a gym, fitness center or swimming pool, not necessarily because of physical exercise but more likely to establish their social contacts and meet with friends. After all, gymnasium in ancient Greece was also a place for socializing and engaging in intellectual pursuits.

In sixth place is **sports activities in nature**. Some students want to do sports in nature (outdoors), want to walk by the sea either alone or with a few friends.

In seventh place we find the **family** environment with an emphasis on the grandparents, from whom they were carefully withheld. The important role they play in the Greek family, but also in the lives of young people, is once again confirmed. Furthermore, the students continue to be concerned about vulnerable groups and their relatives abroad.

In eighth place we find **freedom** as a value which must be redefined (*"To suck every drop of life without stop", "Freedom is not taken for granted"*). The restrictions of going out for a walk or to gather with friends or family was expressed by many participants of the study as a loss of freedom (*'To go out for a walk without sending message to 13033, to feel free'*). It became clear that nothing in life is given, even freedom. Several answers contained a strong tone of indignation (*'I will go down to the Syntagma (Constitution) square... and bring the revolution...'*).

Casual sex was reported in the ninth place. During quarantine published advice suggesting people avoid kissing, wear a face covering and choose positions that aren't face-to-face during sex and that the best sexual partner is someone within household. However, our findings support that it's unrealistic to ask everyone to abstain from sex indefinitely, whether in 'established' relationships or not. Probably the need of casual sex is a way for some of the participants to control anxiety regarding fear of loneliness.

The tenth place goes to the **undecided**. In this category students answered that they have not thoughts or may not want/need something specific or during quarantine did not miss a person or habit.

The eleventh place is shared equally by seeking **medical care**, i.e. visiting a specialist for health problems such as psychological disorders and managing or overcoming **financial difficulties**, (*'Looking for work'*), not only for everyday life coverage but also for travel around the world or for continuing their studies.

Last but not least, in the twelfth-place is the **church services worship / religion**. The students expressed their wish to attend a divine liturgy and other church services or visit churches for praying.

III. Discussion

One of the most effective measures to stop the spread of COVID-19 is to practice social distancing, i.e. to maintain at least 1.5 meter distance from other individuals when possible and to avoid gatherings or congregations. These measures help to reduce the risk of infection from the new coronavirus. The hardest measure to achieve the goal and to combat the COVID-19 pandemic was the lockdown, which was enforced in many countries, so in Greece. The lockdown led among other things also to short term and long term psychosocial and mental health disturbances in all age groups including the group of students of the University of Patras and other higher academic institutions. This study revealed what the students of all departments of the University of Patras missed most during the quarantine period in Greece.

According to a recent study (Khan et al., 2020), lockdown had a higher impact on mental health in college students in comparison to school students. In a study by Odriozola-Gonzalez et al. (2020), members of the University of Valladolid showed moderate to extremely severe anxiety, depression and stress symptoms (21.34%, 34.19% and 28.14%, respectively). Kaparounaki et al. (2020) conducted a study regarding the effect of lockdown on the mental health of students in Greece and emphasize that there was an increase in depressive symptoms (74.3%), in anxiety (42.5%) and 63.3% of the participants presented with suicidal thoughts. A similar to ours online cross-sectional survey in university students in Malaysia has shown that 20.4%, 6.6% and 2.8% of the 983 respondents experienced minimal to moderate, severe and extreme levels of anxiety respectively, during the lockdown (Sundarasan et al., 2020). The main stressors factors mentioned were financial problems, remote online education and uncertainty about the future. Similarly, the students of the University of Patras expressed the same concerns and intense hesitation about their return to their 'new' daily life by applying health protocols.

According to the results of the present study, the students of the University of Patras missed social life and partnership the most during the lockdown. Developing and maintaining a romantic relationship in a person's life has a precious beneficial effect on the mental condition and life balance. However, the quality of the emotional relationship plays an important role. During the quarantine period several students were removed from their

boyfriend/girlfriend due to social distance. Moreover, some of them had to return back to their home residence and were even further away from their loved one, putting thus their relationship to the test. Many students expressed their worry, if they continue to be in a relationship after the lockdown. In a recent survey (Robinson et al., 2020) 96 undergraduate students within romantic relationships were asked to write freely about their partnership in order to investigate the linguistic variables which were used by students to describe their other half. For example, words showing positive emotion predicted relationship satisfaction. Also the use of first-person plural predicted closeness. In our study, the partnership was the second most important thing in students' nostalgia, expressing with emotionally charged words the need of relationship, but at the same time also their concern if the relationship will outlast the distance.

The home confinement and restrictions had a negative aspect on physical exercise and an increase in daily sitting time by more than 28%, as showed in the study of Ammar et al. (2020). Dietary changes were observed as well as the consumption of snacks and fast unhealthy food (Ammar et al., 2020). These changes in daily life were also realized by our students and therefore referring to sports and physical activity as a fundamental need. They expressed they wish to continue their training in individual or team sports in organized facilities such as the gym or swimming pool just like in pre-COVID era. However, they pointed out that this desire stems from the lack of social contact during confinement and not implicitly from the necessity of physical exercise, reaffirming once again the importance of social life and face to face communication. Moreover, the students had plenty of time to exercise at home and take care of themselves during the quarantine. Similar impact of lockdown on physical health was found by Kannan et al. (2020), showing the majority of the study population taking good care of their physical health during the lockdown and knowing the importance of physical exercise in reducing the risk of infections in combination with the proper diet, social distancing and hygiene measures.

Regarding the restrictions of mobility during the lockdown, the students felt that they had lost their freedom to an extremely high degree. At the same time, they appreciated the value of freedom, emphasizing at the need to feel free again. Consumption episodes and the feeling of happiness associated with cheap goods in everyday life like a coffee or a colorful pen, even immaterial consumption activities with no cost, such as a walk in nature or physical activity can be experienced as freedom (Gaston-Breton, Sorensen & Thomsen, 2020).

Generally, the everyday life consists of experiences that can be classified into ordinary and extraordinary, filling those who experience them with energy and happiness. Bhattacharjee and Mogilner (2014) showed that the choice of the kind of experience that will lead to positive emotions is associated with the age. In younger ages, the source of happiness are the extraordinary experiences found in life milestones, travel, cultural endeavors etc. As the age increases, happiness is found in the commons such as a romantic love or social relationships. In contrast to these findings, our research revealed that under the imperative form of restriction of the social contacts during the lockdown, the students lacked social life and all its benefits in order to be happy and satisfied with their lives. They missed common things, such as a walk by the car, a meal with friends, a concert or being with their boyfriends/girlfriends. All these habits, which they used to have before the outbreak of COVID-19 pandemic, make them feel free and truly happy. Furthermore, results of several studies have shown, that the happiness is related to the variety of activities that a person will have during the day. More varied activities increases happiness by making people feel more creative and productive (Etkin and Mogilner, 2016).

Although the digital technologies offer various practices of corporate social responsibility in the conditions of social distancing during covid-19 pandemic, the students prefer to go shopping carefully at the market, not necessarily in a mall, with all the protection measures in order to regain some of their social habits. This confirms that the normal social life can't be replaced by mobile and computer screens. However, the virtual and alternate reality technologies allow consumers to select products that usually require social interactions and visits to shops (e.g. clothing or footwear) (Popkova, DeLo&Sergi, 2021).

The online platforms contributed to the training process in many schools and universities in order to help the students carry on their lessons and studies. However, the students of University of Patras expressed their desire to regain their student's life returning to their normal habits including academic lectures in amphitheaters. It was also observed that the new way of e-learning induces anxiety among the students (Sundarasan et al., 2020).

IV. Conclusion

COVID-19 has affected million people worldwide, but at present no specific treatment is available. Numerous preventive strategies and non-pharmaceutical interventions have been employed to mitigate the spread of disease including infection control, the isolation of patients, and social distancing. The hardest of all measures, the lockdown, has been shown in several studies to lead to psychosocial and mental health

implications for all age groups, including students. In our thematic analysis regarding the “FIRST thing” students would like to do immediately after lifting the measures, “Restoring social life without restrictions”, “Seeing their boyfriend/girlfriend”, and being “Careful and take self-restraining measures dominated their desires. In conclusion, the students want to return to a normal life or even to a new daily routine with protection measures that limit both exposure to the virus but also their spontaneity.

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