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## The Pandemic Context and Quality of Life for Youth in Constanța County

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**Abstract.** The COVID-19 pandemic had an unprecedented impact on Romanian people. For almost two years the changes in the everyday life of the inhabitants of our country happened with such speed and dramatic consequences, that it raised the question about the perception of Romanian people regarding their perceived quality of life. A sample of 1796 young people, all residents of Constanța County, aged between 18 and 25 years old, was assessed with a survey made by the authors, concerning their perception on the quality of their life in the fields of health, self-esteem, goals and values, financial, professional, leisure, learning, family and social environment, and emotional regulation. Of all the themes we studied, this research tries to identify the differences regarding the quality of life between rural and urban residents. We obtained statistical significant differences regarding goals and values, learning opportunities and emotional regulation. Results are discussed in the end of the paper in the context of the on-going changes still caused by the Covid-19 pandemic.

**Keywords.** Quality of life, goals and values, learning, emotional regulation, pandemic, youth.

### 1. Evolution of COVID-19 pandemic in Romania and consequences on the quality of life

On 26<sup>th</sup> of February 2020, TV Channels all around the country confirmed the first case of COVID-19 infection in Romania (cf. <https://www.digi24.ro/stiri/actualitate/primul-caz-de-coronavirus-in-romania-1266806>). Since then the evolution of every-day life of the Romanian people has known different twists and turns, with the Government taking a long series of preventive, restrictive or relaxation measures in the attempt to manage the crisis in these past two years. The following table is an adaptation of a timetable available on Wikipedia ([https://en.wikipedia.org/wiki/COVID-19\\_pandemic\\_in\\_Romania](https://en.wikipedia.org/wiki/COVID-19_pandemic_in_Romania)) and includes the highlights of the main events with profound impact on the quality of life of Romanian people:

**Table 1.** Timeline of the COVID-19 pandemic in Romania.

Period	Measures and impact
February –2020	After the first confirmed cases of infection with the COVID-19, the Government imposed a series of early preventive measures.
March 2020	Restrictive measures were implemented, such as: ban of public gatherings, school closures and border closures.
March – May 2020	Starting with the 16 <sup>th</sup> of March 2020, the President declared a state of emergency and the entire country had to face the national lockdown.

	Restaurants, shopping centers, hotels, cafes and clubs were closed and the limitation or prohibition of movement in certain areas was imposed. Circulation between 10 p.m. and 6 a.m. was forbidden. The only exceptions were food, veterinary or pharmaceutical services.
May –September 2020	The authorities declared a state of alert that came with some relaxation measures through which hairdressing salons, barbershops, dental clinics, small and medium malls and museums were reopened. Travel between cities became possible, but only with a signed personal statement declaring the reason of the movement. Private gatherings were allowed, but not for more than 50 people in enclosed spaces and 100 in an open space. Three different scenarios for the reopening of schools were available, based on the cumulative incidence rate and the total number of new cases of COVID-19 infection reported at 1000 inhabitants.
November 2020 – February 2021	The national campaign of vaccination started and was divided into three phases: health and social workers (1), high risk population (2), general population (3).
February – March 2021	The second reopening of schools took place, but the country had to face the spread of new variants of COVID-19, thus dealing with the third wave. Restrictions were imposed differently in all the country, based on the local incidence rate in every city or village.
October 2021 – present	The fourth wave of cases appeared and this has been the most severe of all infection waves, especially since Romania has the lowest percentage of fully vaccinated people in the European Union. In order to avoid another series of radical economic restrictions, the Romanian Government imposed the digital green certificate as a requirement for some activities.

For almost two years, the restrictive measures applied in countries all over the globe seem to be effective in containing the spread of the COVID-19 (Bedford, Enria, Giesecke, Heymann, Ihekweazu, Kobinger, Lane, Memish, Oh, Sall, Schuchat, Ungchusak & Wieler, 2020). But behind this apparent improvement, the disruption caused by the restrictions for such a long time already, have important implications on health and well-being (Samlani, Lemfadli, Errami, Oubaha & Krati, 2020). Such statements raise the next obvious question: to what extent did the COVID-19 pandemic influence human's quality of life. In order to try to respond, we first have to explain what this concept means.

Starting from the very definition of the concept, provided by the World Health Organization (2012), we can see that the quality of life is the individual's perceived position in life, in a large framework that includes culture, value systems, goals, expectations, standards and concerns. It becomes obvious that this perception is influenced by subjective evaluations of both positive and negative aspects of life (Schlesinger & Lipsky, 2019). The term of positive and negative aspects of life is also a broad one that may include a variety of concepts like health status, physical functioning, symptoms, psychosocial adjustment, well-being, life satisfaction or happiness (Estwing Ferrans, Johnson Zerwic, Wilbur & Larson, 2005). Thus, the most influential factors for the measurement of the quality of life are housing conditions, employment, time use, education, health, social relations, safety, governance, environment and overall life satisfaction (Hagerty, Cummins, Ferriss, Michalos, Peterson, Sharpe, Sirgy & Vogel, 2001).

In this context we can state that the assessment of the quality of life imposes an interdisciplinary approach that includes economic, social and psychological perspectives (Sandu, Enache, Miloş & Ştirbeţiu, 2021).

Out of all the fields comprised in the quality of life, our study is concerned with the impact of the urban and rural residence on goals and values, the learning opportunities and emotional regulation.

The impact of the COVID-19 pandemic is strongly related to the following aspects that scientists have highlighted over this time:

- the career and work challenges (Restubog, Ocampo & Wang, 2020),
- the disruption of basic life activities and the negative impact on economic growth (McKibbin & Fernando, 2020),
- the emotional management that has a particular impact on resilience, life satisfaction, work satisfaction, relationships, mindfulness, burnout or empathy (Thomas & Otis, 2010),
- the moral crises that some professionals experienced throughout this time in their field of duty (Borges, Barnes, Farnsworth, Bahraini, & Brenner, 2020),
- the financial vulnerability, which was actually one of the biggest problems during the Covid-19 pandemic (Mogaji, 2020),
- the installment of anxiety symptoms, greater job insecurity and depressive symptoms (Wilson, Lee, Fitzgerald, Oosterhoff, Sevi & Shook, 2020), some of them caused by the same restrictions that governments imposed for protective purposes,
- the constrained forms of individual leisure opportunities caused by the restrictions.

We witnessed economies shut down, online discussions and conferences about changes and demographic vulnerabilities and leisure organizations (recreation, tourism, arts and culture) that had webinars and online discussion forums on topics that made space for imagining and planning a vision for the future (de la Barre, Stone, McKeown & Schroeder, 2020).

In this context we established the following objective and hypotheses of our study.

## **2. Objectives and hypotheses**

The main objective of our study is the identification of the differences in the quality of life based on the rural and urban environment, during the restrictions imposed by the COVID-19 pandemic.

The hypotheses are:

- It is assumed that there is a significant difference in terms of goals and values affected by the pandemic, depending on the urban/rural environment.
- It is assumed that there is a significant difference in the learning opportunities affected by the pandemic, depending on the urban/rural environment.
- It is assumed that there is a significant difference in the level of emotional regulation depending on the urban/rural environment.
- 

## **3. Sample and instruments**

Our sample was comprised of 1796 young people, aged between 18 and 25 years old. The sample was divided based on two criteria, gender and urban/rural environment, thus resulting a homogeneous distribution consisting of 52.7% male and 47.3% female participants. All participants are residents of Constanta County, 63.7% residing in the urban areas and 36.3% in the rural areas of the county. We used a convenience sample and we collected the data in March-July 2021. All subjects have given their consent to participate in this research.

The instrument we used to collect the data was a survey, with multiple dimensions. The participants had to rate on a scale from 1 to 5 (1=lowest and 5=highest) how affected were they

by the COVID-19 pandemic. For this article we analyzed the dimensions of goals and values, learning opportunities and emotional regulation, in relationship with the variable urban/rural residence.

#### 4. Findings and results

To verify the proposed hypotheses, we calculated the normality of the data using the Shapiro-Wilk normality coefficient for samples larger than 200 people. The results are shown in the table below:

**Table 2.** Tests of normality.

	Provenience	Shapiro-Wilk		
		Statistic	df	Sig.
Goals and values	Urban	.977	1143	.000
	Rural	.985	652	.000
Learning	Urban	.767	1143	.000
	Rural	.809	652	.000
Emotional regulation	Urban	.975	1143	.000
	Rural	.992	652	.002

The analysis of the Shapiro-Wilk normality coefficient shows an abnormal distribution of the participants' answers to the research, which leads us to apply a non-parametric method of verifying the proposed hypotheses. The descriptive statistics are shown in the table below:

**Table 3.** Descriptive statistics.

	Provenience		Statistic	Std. Error
			Mean	
Goals and values	Urban	Mean	145.56	1.901
		Std. Deviation	64.267	
	Rural	Mean	155.67	2.173
		Std. Deviation	55.487	
Learning	Urban	Mean	29.35	.499
		Std. Deviation	16.887	

		Mean	30.32	.638
	Rural	Std. Deviation	16.289	
		Mean	73.50	.863
	Urban	Std. Deviation	29.172	
Emotional		Mean	80.75	.860
	Rural	Std. Deviation	21.964	

Based on Table 3 we can acknowledge the following:

- At the variable goals and values we obtained an average of 145.56 in urban areas compared to 155.67 in rural areas,
- For the variable learning and acquired knowledge we have an average of 29.35 in urban areas compared to 30.32 in rural areas,
- At the emotional level, the respondents obtained an average of 73.5 in urban areas compared to 80.75 in rural areas.

For each studied variable we can observe that there are differences between the average values and next, we will analyze if these differences are statistically significant as well.

**Hypothesis 1.** It is assumed that there is a significant difference in terms of goals and values affected by the pandemic, depending on the urban/rural environment. For this hypothesis we analyzed through the U-Mann-Whitney test if there are significant differences between the two groups of participants. The results are shown in the table below:

**Table 4.** Mann-Whitney U Test for goals and values variable.

Goals and values	
Mann Whitney U	345808.500
Asymp. Sig. (2-tailed)	.011

From the analysis of the results presented in Table 4 we notice that we have a statistically significant difference at a significance threshold  $p = 0.011$ . Thus, the values and goals for the participants in rural areas are much more affected than those of the participants from the urban areas.

**Hypothesis 2.** It is assumed that there is a significant difference in the learning opportunities affected by the pandemic, depending on the urban/rural environment. For this hypothesis we analyzed through the U-Mann-Whitney test if there are significant differences between the two groups of participants. The results are shown in the table below:

**Table 5.** Mann-Whitney U Test for learning.

<b>Learning</b>	
Mann Whitney U	348748.500
Asymp. Sig. (2-tailed)	.024

From the analysis of the results of Table 5 we obtained that the participants in the rural area were much more affected in the field of learning opportunities than those in urban environment, the difference being significant at a threshold  $p = 0.024$ .

**Hypothesis 3.** It is assumed that there is a significant difference in the level of emotional regulation depending on the urban/rural environment. For this hypothesis we analyzed through the U-Mann-Whitney test if there are significant differences between the two groups of participants. The results are shown in the table below:

**Table 6.** Mann-Whitney U Test for learning.

<b>Emotional regulation</b>	
Mann Whitney U	328116.500
Asymp. Sig. (2-tailed)	.000

The participants demonstrated that they had more problems in the emotional regulation than those in urban areas, at a significance threshold  $p = 0.000$ .

All three research hypotheses were confirmed.

## 5. Discussion

The analysis of the results obtained in the dimension of goals and values showed a significant difference between rural and urban environment. Although all the young people in our sample felt intensely that the restrictions imposed by the Government affected their freedom, tested their acceptance, altruism, overall happiness, health, wellbeing and optimism, and even challenged their ability of adjustment, balance, comfort, independence, autonomy, order or patience, some values and goals were less affected, like generosity, respect, hope, harmony, justice, motivation or wisdom. So, it becomes clear that the personal values that have the role of guiding people's lives (Schwartz, 1992), can be understood in more than one way. Taking into account the fact that values transcend specific situations and even have different structures culturally influenced, it is clear that they shaped people's responses to the COVID-19 pandemic (Wolf, Haddock, Manstead & Maio, 2020).

The COVID-19 pandemic raised the concern for the safety of others, and people with higher conservation values complied much easier with the restrictive measures. Other young people, attached to values like openness struggled with the guidelines that were imposed during these past two years, in the context in which these restrictions deprive them of some experiences.

Another possible explanation is the fact that, overall, Romania's population shrank in the last 20 years, thus emigration becomes a national problem, because most of our working age

people now live and work in other countries in the European Union. The rural areas are most affected, because for years, young people tend to migrate to cities, where there are much more opportunities for employment and for obtaining a desired social status and financial security.

Another explanation we came up with is an economic and administrative one. Although progress has been made in the last years in the sense of raising the quality of life in rural areas, there are still many problems to be addressed: defective school system and appropriate equipment, lack of medical support, unemployment, low leisure opportunities, poor infrastructure, etc., all these closely related to the emigration process described above.

The pandemic context in Romania challenged the whole administrative system because the rural environment always faced economic problems and in some locations people had to deal with poverty and lack of any kind of resources, or poor infrastructure. Thus, support was needed for all the vulnerable categories and during the state of emergency many difficulties and challenges had to be addressed, on the expenses of people's mental wellbeing. Many workers in the rural environment have been trapped in low-productivity farms and informal activities, with grave economic consequences.

Although Romania remains one of the least urbanized countries in the EU, the statistics of the World Bank (2021) show that 76% of Romanians live in urban area, that generate 97% of our country's economic output. Thus, cities are a key for our country's growth, with authorities playing an important role in future development. So, urban areas residents had to face this pandemic in a different manner.

Another difference we identified concerns the learning opportunities, where again, the rural residents have been more affected by the pandemic. In the context of the transition of the educational process from a traditional face-to-face approach to the online education, youth in rural areas had to face problems from the lack of Internet connection, to the lack of appropriate devices and the difficulties that teachers with low digital competencies brought to the entire educational process. Many efforts were made by the Government in assisting the progress of the educational process, and many challenges have been overcome. But still, young people in our sample declare they were strongly affected by the school/universities closures, from the lack of personal development activities. As such, motivation for learning decreased, the exams and evaluations were affected and the lack of digital competencies in using the online platforms had its toll.

Students in urban areas felt deeply troubled by the multiplication of tasks in the educational process. Much of the responsibility for their learning passed from teachers to students. Thus students had to adjust and to manage time and homework by their own. Even to date, although schools and universities reopened, there are still many activities in online platforms. The lack of physical contact and interaction is a difficulty that cannot be overcome soon.

Finally, we identified differences regarding emotional regulation. Youth in rural areas were much more affected than those in urban areas. Once more, adolescents and youth face massive changes in their daily life, from school closures, home confinement and social distancing rules, which have burdened them substantially. Furthermore, all these restrictions became part of our daily routine for a pretty long time, causing stress, anxiety, depression or burnout due to their prolonged maintenance.

In the context of the argued relationship between the global quality of life perceptions and emotional state (Heinonen, Aro, Aalto & Uutela, 2004), we find it important to acknowledge that the emotional state is a construct associated with a reduced risk of mental illness, physical illness, and mortality (Strine, Chapman, Balluz & Mokdad, 2008).

Studies show that positive emotions contributed to all aspects of subjective quality of life, while negative emotions were important for the determination of happiness and subjective well-being (Efklides, Kalaitzidou, & Chankin, 2003). Other studies conducted before the Covid-19 pandemic argued repeatedly that there is a strong relationship between the outbreak of an infectious disease and the negative psychological consequences, among which the most frequently reported were depression and distress (Bai, Lin, Lin, Chen, Chue & Chou, 2004; Bults, Beaujean, de Zwart, Kok, van Empelen, van Steenberg, Richardus & Voeten, 2011).

We assumed that whether people were affected by health anxiety or experienced increased work stress or loneliness during the restrictions, the effect of the pandemic would surely be visible in this area. Isolation, a loss of control, job insecurity or the unhealthy lockdown habits are important factors that shaped people's confidence, self-image or self-esteem. In all important cities in Romania, the Romanian College of Psychologists has implemented online therapy and counselling for people in need. In rural areas, the coverage is less possible.

Literature also shows that there is a significant positive correlation between self-esteem and the different dimensions of quality of life (Manhas, 2013), or that negative emotions are negatively associated with quality of life, while resilience is a mediating factor in the relationship between negative emotions and quality of life.

## 6. Conclusions

The main objective of our study was the identification of the differences in the quality of life based on the rural and urban environment, during the restrictions imposed by the COVID-19 pandemic. We accomplished our purpose and confirmed all 3 hypotheses obtaining results that prove that young people in rural areas have been more affected in their goals and values, learning opportunities and emotional regulation than those in urban areas.

The COVID-19 pandemic is still ongoing, and with the new Omicron version and the fifth wave coming, more challenges will have to be addressed. The most important thing right now we believe to be the social and psychological support that workers in social fields can provide.

The perception on the quality of life has changed during the evolution of the pandemic. People have been able to adjust to change and modify their goals according to the situations they faced. People in rural areas, with a somewhat easier pace of life have adapted differently from those in urban areas, in a much faster pace, with many more challenges that had frustration, helplessness or stress as a consequence.

In future, it will be interesting to study the perception of the quality of life over time, given the fact that the pandemic is still ongoing and new restrictions and uncertainties may yet arise.

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