




Satisfacción con la vida y bienestar psicológico de los estudiantes universitarios durante la pandemia COVID-19

Life satisfaction and psychological well-being of university educated students during the COVID-19 pandemic

Gülşah Sekban^{1a}, Osman İmamoğlu²

Kocaeli University, Kocaeli, Turkey¹
Ondokuz Mayıs University, Samsun, Turkey²

 ORCID ID: 0000-0003-1403-5696¹

 ORCID ID: 0000-0001-6671-6042²

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Abstract

This study aimed to research the satisfaction with life and psychological well-being of university students during the Coronavirus epidemic. The survey of satisfaction with life and psychological well-being that was filled out by entirely 649 university students was evaluated. Independent t-test, one-way variance analysis, and LSD tests were utilized in statistical processes. Differences in satisfaction with life and psychological well-being scores based on gender are statistically significant ($p < 0.001$). Satisfaction with life and psychological well-being scores according to sleeping routine and immunity status that they perceived in themselves significantly varied ($p < 0.001$). Again, satisfaction with life and psychological well-being scores according to the duration of watching television and following coronavirus news on the internet during the epidemic ($p < 0.001$). It was also determined that satisfaction with life and psychological well-being scores varied based on the level of exposure to coronavirus news on social media ($p < 0.001$). Satisfaction with life and psychological well-being in university students vary based on gender, sleeping routine, and belief in their own immunity. It is suggested to the students that they should avoid attitudes that can disturb their sleeping pattern and make them lose their confidence in immunity.

Keywords: Satisfaction with Life, Psychological Well-Being, Coronavirus.

Resumen

Este estudio tuvo como objetivo investigar la satisfacción con la vida y el bienestar psicológico de los estudiantes universitarios durante la epidemia de coronavirus. Se evaluó la encuesta de satisfacción con la vida y bienestar psicológico que fue cumplimentada en su totalidad por 649 estudiantes universitarios. En los procesos estadísticos se utilizaron pruebas t independientes, análisis de varianza unidireccional y pruebas de LSD. Las diferencias en las puntuaciones de

^aCorrespondencia a los autores:

E-mail: gsekan@yahoo.com; osmani55@hotmail.com

satisfacción con la vida y bienestar psicológico basadas en el género son estadísticamente significativas ($p < 0,001$). Las puntuaciones de satisfacción con la vida y bienestar psicológico según la rutina de sueño y el estado de inmunidad que percibían en sí mismos variaron significativamente ($p < 0,001$). Nuevamente, la satisfacción con la vida y el bienestar psicológico puntúan según la duración de ver televisión y seguir las noticias sobre el coronavirus en Internet durante la epidemia ($p < 0,001$). También se determinó que las puntuaciones de satisfacción con la vida y bienestar psicológico variaron según el nivel de exposición a las noticias sobre el coronavirus en las redes sociales ($p < 0,001$). La satisfacción con la vida y el bienestar psicológico de los estudiantes universitarios varían según el género, la rutina de sueño y la creencia en su propia inmunidad. Se sugiere a los estudiantes que eviten actitudes que puedan perturbar su patrón de sueño y hacerles perder la confianza en la inmunidad.

Palabras clave: satisfacción con la vida, bienestar psicológico, coronavirus.

Introduction

The well-being concept is associated with many positive life outcomes such as high job performance and happiness in terms of both physical and mental health (Ayyash-Abdo & Alamuddin, 2007; İlkım et al., 2018). Well-being that is accepted as an indicator of life quality is an extremely important concept in terms of its contributions to mental, sensual, cognitive, and physical health; relations with the structures that center emotional processes associated with the prevention of pathologies such as depression, alexithymia, burnout, and stress (Lin et al., 2016; Meral, 2014; Shaheen & Shaheen, 2016). Psychological well-being is defined as the effort for self-realization; it also has six dimensions. Related dimensions are positive relationships, environmental mastery, self-acceptance, autonomy, personal development, and life purpose (Kjell et al., 2013, Özdemir et al., 2018). Psychological well-being covers things more than stress lessens or being independent of other mental health problems (Tuzgöl, 2005). Well-being is thought of as two dimensions as subjective well-being and psychological well-being. Subjective well-being consists of satisfaction with life including positive and negative affection together (Pavot, 2008). Personal well-being can be used instead of subjective well-being. Personal well-being is the most comprehensive concept that is used to express how the individual perceives his satisfaction with life and life quality; this concept also provides a minimal measurement of the general well-being of the individual (Sarriera et al., 2012). It is argued that there are eight critical areas toward determining the individual's well-being. Related areas are the life standard, personal health, success in life, personal relationships, personal security, societal belonging, sureness about future, and spirituality/religion (Meral, 2014; Bekiroğlu & Tatar, 2019). The key determinant of positive psychology that develops a

perspective towards looking at negative situations and difficulties from positive aspects is the “well-being” (Çankır & Yener, 2017). An epidemic creates negative impacts on people. There are safety perception, threat and contagion risk, lack of knowledge against the unknown, quarantine and repression, and stamping in stress (sign of embarrassment associated with a particular situation, quality, or person (Hamouche, 2020; Shigemura et al., 2020). Psychological well-being increases or decreases based on the amount and sincerity of characteristics such as optimism, responsibility, being hopeful, and sacrifice. Moreover, well-being is nature and it appears as an associated product of the behaviors that make life more meaningful (Bahadir, 2011).

Satisfaction with life indicates a cognitive/judgmental process and is defined as the general evaluation of life quality based on criteria chosen by individuals. Satisfaction with life includes a cognitive component of the subjective well-being and also the cognitive judgments on the life of the person. Again, satisfaction with life generates the cognitive/judgmental dimension of the structure of subjective well-being. Judgmental status of satisfaction is based upon the comparison of the conditions of the individual with the appropriate standards. It is emphasized that the judgments regarding how satisfied people are depending on a comparison of the current state of affairs and the standards set by the individual for himself (not imposed from outside) (Diener et al., 1985). For assumptions, the more harmony between the desires and achievements of the individual, the more satisfaction with life. Different studies have revealed that there occurs a high satisfaction with life if the expectations and requirements are met; otherwise, there is seen a low satisfaction with life if the things above do not become the reality.

Satisfaction with life is the degree to which a person positively evaluates the overall quality of his life as a whole (Diener et al., 1985). Various impediments, compulsions, conflicts, and sudden negative change may cause the level of satisfaction with life to decrease (Demirel et al., 2001). The main result of quarantine is the decrease in physical activity levels (Mattioli & Ballerini, 2020). Spending a long time at home causes chronic diseases, and motionlessness increases and also the losses in muscle force and muscle mass with the decrease in energy expenditure. In addition to all these, there occurs immunity loss and viral potential risk increases at the same time (Barazoni et al. 2020). Negative impacts of the novel coronavirus on mental health are expressed since the beginning of the pandemic. There are security perception, threat and contagion risk, lack of knowledge against the unknown, quarantine and repression, stamping (sign of embarrassment associated with a particular situation, quality, or person),

social exclusion, financial loss, and job insecurity among the issues creating stress (Hamouche,2020).

Quarantine has been applied to decrease or remove the contagion risk of Covid 19 in many countries in different styles. It is emphasized that you should stay at home unless and not go out on the streets unless it is mandatory, as can be seen in Tural (2020). Face-to-face training has been suspended, and distance education is put into use. Quarantine causes mood changes and also leading an immobile life. Increasing the time spent at home, constantly listened to and watched the news on the epidemic, increased anxiety, increased desire to consume food due to mood, and decreased physical activity may bring along weight gain. Yıldırım et al. (2019) mentioned that healthy persons who stay at home during the Covid-19 epidemic have shown a low level of physical activity; this situation affects the quality of life, physical function, pain, and overall health perception. According to physical activity at medium and high levels positively affects life quality (Tural, 2020).

It is believed that psychological well-being will positively affect life satisfaction. Trust in people's immunity and having good sleep patterns can have a positive effect on their psychological well-being. In addition, exposure to Corona virus news on social media and following social media can also affect people's psychological well-being. It is thought that during the corona virus epidemic, psychological well-being may worsen and this will negatively affect life satisfaction.

Methodology

Procedure

Before collecting the data, permission was obtained from the Ondokuz Mayıs University Research Ethics Committee and the Ministry of Health. The research questionnaire consists of two parts. The first section contains personal information. In the second part, there are questions of the scales. An information form developed by the researchers was created to collect the data. In addition, the Turkish versions of the scales developed by different researchers were presented to the participants on the internet. Completely filled scales were evaluated. Questionnaires with incomplete and incorrect data were discarded.

Participants

The questionnaires completed by 649 university students were evaluated. The questionnaires were also voluntarily filled in via social media. This study was carried out in March, April and

May 2020, when the coronavirus epidemic began. In these months, curfews or other restrictions were introduced in Turkey.

Data collection tools

Satisfaction with life scale

This scale was developed by Diener et al.,(1985) to determine the level of satisfaction with life. We used a Turkish adapted version of this scale that was developed by Dağlı and Baysal (2016). Again, this is a five-point Likert scale that consists of five questions showing perceptions about the quality-of-life conditions and life satisfaction. Scoring as follows: Strongly disagree (1), barely agree (2), moderately agree (3), strongly agree (4), and totally agree (5). Total score varies between 5 and 25 (Altay and Aydın-Avcı, 2009). The lowest point is 5, the highest point is 25. A high score means satisfaction with life is good (Dağlı and Baysal, 2016).

Psychological well-being scale

This was developed as a subsidiary of the subjective well-being concept by Diener et al., (2009 and 2010). Telef (2013) performed the adaptation procedure of the scale to Turkish. This scale consists of 8 items and it also is a 7 points Likert scale. Scoring as follows: 1: Strongly disagree, 7: Totally agree. Scale items include the sentences such as ‘‘my social relationships are supportive and satisfying’’ ‘‘I’m optimistic about my future’’. Positive relationships is a measurement tool that evaluates the important elements of human function such as a sense of competence and also having a meaningful and purposeful life. High scores show the abundance of psychological resources and strength that an individual has. The lowest point is 8, the highest point is 56 (Telef, 2003). Cronbach alpha reliability was found as 0, 89.

Statistical analysis

The statistical analysis of the data was conducted by using SPSS 24.0 statistic program (SPSS Inc., Chicago, Illinois, ABD). Before statistical analysis, Shapiro-Wilk test was conducted to check normal distribution. Skewness and Kurtosis values were checked for data sets which did not show normal distribution. Independent T-test, one-way variance analysis, and LSD tests were utilized in statistical processes. Statistical results were assessed at a significance level of $p < 0.05$.

Results

The findings of the study are presented in six tables. The first Table contains Anthropometric properties. Other Tables relate to life satisfaction and psychological well-being.

Table 1

Comparison of age, standing height and body weights by gender

| Variable | Gender | N | Mean | S.D. | t | p |
|------------------|--------|-----|--------|-------|--------|--------------|
| Age (Year) | Female | 331 | 21.96 | 2.87 | -1.62 | 0.395 |
| | Male | 318 | 22.33 | 2.87 | | |
| Height (cm) | Female | 331 | 166.57 | 6.81 | -21.12 | 0.000 |
| | Male | 318 | 177.49 | 6.35 | | |
| Body Weight (kg) | Female | 331 | 62.13 | 10.66 | -15.23 | 0.000 |
| | Male | 318 | 77.20 | 13.75 | | |

The age average in this study was 22.33 years for men; 21.96 years for women (Table 1). The ages of participants were similar ($p>0.05$) while their standing height and body weights were different from each other ($p<0.001$).

Table 2

Comparison of life satisfaction with life and psychological well-being by gender

| Variable | Gender | N | Mean | S.D. | t | p |
|--------------------------|--------|-----|-------|-------|-------|--------------|
| Psychological well-being | Female | 331 | 24.66 | 11.49 | -3.87 | 0.001 |
| | Male | 318 | 28.09 | 11.04 | | |
| Satisfaction with life | Female | 331 | 12.09 | 4.99 | 3.76 | 0.001 |
| | Male | 318 | 13.48 | 4.39 | | |

The difference in psychological well-being status by gender is statistically important for this paper ($p<0.05$) (Table 2)

Table 3*Satisfaction with life and psychological well-being by sleep patterns during the pandemic*

| Variable | N | Mean | S.D. | F/P | LSD | |
|--------------------------|----------------------------------|------|-------|-------|-----------------------|--------------|
| Psychological well-being | There was no change in sleep (1) | 202 | 34.13 | 12.26 | 98.27 0.000 | 1>2,3 2<3 |
| | I sleep more (2) | 237 | 20.92 | 6.96 | | |
| | I sleep less (3) | 210 | 24.97 | 10.45 | | |
| | Total | 649 | 26.34 | 11.39 | | |
| Satisfaction with life | There was no change in sleep (1) | 202 | 16.02 | 3.88 | 89.13 0.001 | 1>2,3 |
| | I sleep more (2) | 237 | 11.67 | 4.56 | | |
| | I sleep less (3) | 210 | 10.90 | 4.10 | | |
| | Total | 649 | 12.78 | 4.75 | | |

Scores of satisfaction with life varied by the sleep pattern in this study as well ($p < 0,001$). Well-being scores based on the sleep pattern significantly varied in this study ($p < 0,05$) (Table 3)

Table 4*Satisfaction with life and psychological well-being by the immune status during the pandemic*

| Variable | N | Mean | S.D. | F/P | LSD | |
|--------------------------|-----------------------------------|------|-------|-------|--------------|-------|
| Psychological well-being | Immunity is strong (1) | 239 | 29.13 | 13.32 | 15.68 | 1>2,3 |
| | Immunity is moderately strong (2) | 248 | 25.96 | 10.96 | 0.001 | 2>3 |
| | Immunity is weak (3) | 162 | 22.83 | 7.20 | | |
| | Total | 649 | 26.34 | 11.39 | | |
| Satisfaction with life | Immunity is strong (1) | 239 | 13.61 | 4.99 | 18.04 | 3<1,2 |
| | Immunity is moderately strong (2) | 248 | 13.19 | 4.60 | 0.000 | |
| | Immunity is weak (3) | 162 | 10.91 | 4.10 | | |
| | Total | 649 | 12.78 | 4.75 | | |

According to this study's findings, scores of satisfaction with life varied based on perceiving the immunity ($p < 0.001$). Scores of psychological well-being are statistically significant based on the perceived immunity status ($p < 0,001$) (Table 4)

Table 5

Status of watching TV and following coronavirus news on the internet during the pandemic

| Variable | N | Mean | S.D. | F/P | LSD | |
|--------------------------|----------------------|------|-------|-------|--------------|-------|
| Psychological well-being | 0-2 hours (1) | 347 | 27.59 | 11.40 | 8.78 | 2<1,3 |
| | 3-4 hours (2) | 113 | 22.48 | 9.82 | 0.001 | |
| | 5 hours and over (3) | 189 | 26.37 | 11.78 | | |
| | Total | 649 | 26.34 | 11.39 | | |
| Satisfaction with life | 0-2 hours (1) | 347 | 12.32 | 4.55 | 10.48 | 3>1,2 |
| | 3-4 hours (2) | 113 | 11.99 | 4.50 | 0.001 | |
| | 5 hours and over (3) | 189 | 14.07 | 5.02 | | |
| | Total | 649 | 12.78 | 4.75 | | |

For the findings of this paper, scores of satisfaction with life and well-being vary by the time of watching TV and watching coronavirus news on the internet ($p < 0.001$).

Table 6

Indicators when being exposed to news on coronavirus on social media during the pandemic

| Variable | N | Mean | S.D. | F/P | LSD | |
|--------------------------|--------------------------|-------|-------|-------|--------------|---------|
| Psychological well-being | Never + Occasionally (1) | 213 | 24.82 | 10.37 | 2.78 | 1<3,4 |
| | Sometimes (2) | 186 | 25.91 | 11.31 | 0.004 | |
| | Often (3) | 141 | 27.96 | 10.14 | | |
| | Too often (4) | 109 | 27.98 | 14.92 | | |
| Satisfaction with life | Never + Occasionally (1) | 213 | 11.88 | 4.54 | 7.67 | 1,2<3,4 |
| | Sometimes (2) | 186 | 11.90 | 4.34 | 0.001 | |
| | Often (3) | 141 | 13.93 | 3.52 | | |
| | Too often (4) | 109 | 14.54 | 6.75 | | |
| Total | 649 | 12.78 | 4.75 | | | |

For the findings of this paper, scores of satisfaction with life and well-being varied according to the level of exposure to news on the coronavirus on social media ($p < 0,001$).

Discussion

The age average in this study was 22.33 years for men; 21.96 years for women. The ages of participants were similar ($p > 0.05$) while their standing height and body weights were different from each other ($p < 0.001$), as can be seen in Cenkseven and Akbaş (2007). Again, in this study, satisfaction with life was found as 13.48 for males; 12.09 for females. Psychological well-being score was 28.09 for males; 24.66 for females. Cao et al., (2020) stated that the psychological effect of the coronavirus epidemic does not vary by gender. According to Inglehart (2002), well-being level varies by gender. By its part, Bekiroğlu and Tatar (2016) mentioned in their study that well-being does not vary by gender. For Şener and İmamoğlu (2020b), psychological well-being status before and during pandemic varies by gender; they also found that well-being scores in females are higher than the same scores in males. The difference in psychological well-being status by gender is statistically important for this paper ($p < 0.001$).

Studies like of Aydın (2011); Eryılmaz (2012); Kaya et al. (2015); Tuzgöl-Dost (2007) revealed that satisfaction with life significantly varies by gender. Regarding another studies, satisfaction with life does not vary by the gender (Avşaroğlu et al., 2005; Cömert et al., 2016; Demir, 2019; Gündoğar et al., 2007; Hanbay et al., 2017; Özkara et al., 2015; Özgür et al., 2010). It was found in many studies that women have a higher level of satisfaction with life compared to men (Çam & Artar, 2014; Dost, 2007; Şener and İmamoğlu (2020a) conducted a survey and founded those scores of satisfaction with life before and during the coronavirus epidemic are similar. Concerning the findings in this paper, scores of satisfaction with life statistically vary by gender ($p < 0,001$). Scores of males are higher than the scores of females. Again, scores of good satisfaction with life and well-being are higher for males than the females. This may be due to the fact that women are more affected by the coronavirus process than men.

With reference to Şener and İmamoğlu's (2020a) findings, scores of satisfaction with life vary by sleep pattern and perceiving the immunity. Scores of satisfaction with life varied by the sleep pattern in this study as well ($p < 0,001$). Again, scores of the persons whose sleep duration has not changed are higher compared to the persons who now sleep more and less. Sarı and Çakır (2016) found a negative and lowly significant relationship between fear of happiness and psychological well-being. For Şener and İmamoğlu (2020b), well-being scores of students during the pandemic significantly change while psychological well-being scores based on

perceived immunity are similar. Well-being scores based on the sleep pattern significantly varied in this study ($p < 0.05$). Scores of psychological well-being are higher in persons whose sleep routine has not changed. So, it can be understood from here that there is a need for a good sleep pattern for a higher level of psychological well-being.

According to this study's findings, scores of satisfaction with life varied based on perceiving the immunity ($p < 0.001$). The score of satisfaction with life is higher in persons whose immunity is strong compared to the persons whose immunity is partially strong and weak, and this result is according to Receptoğlu (2013). As people's confidence in their immunity decreases, their life satisfaction levels decrease. It should be worked towards strong immunity in order to increase the level of satisfaction with life. Psychological well-being scores are higher in those with strong immunity. As the people's confidence in their immunity decreases, psychological well-being worsens.

In a study by Yazıcı and İmamoğlu (2021), it was revealed that the news and statements on social media about the corona virus epidemic prevented the deterioration of people's quality of life, but did not provide a change in anxiety situations. Şener and İmamoğlu (2020a, b) mentioned in their survey that scores of satisfaction with life and well-being do not vary according to the level of exposure to coronavirus news on social media by watching television and following coronavirus news on the internet during the pandemic. For the findings of this paper, scores of satisfaction with life and well-being vary by the time of watching TV and watching coronavirus news on the internet ($p < 0.001$). Scores of persons who follow the news for 5 hours and over are higher. On the other hand, persons who follow the news for 0-2 hours and 5 hours and over have higher scores compared to the persons who follow the news for 3-4 hours. Şener and İmamoğlu (2020a, b) highlighted that difference between scores of satisfaction with life is insignificant according to exposure to Coronavirus news on social media during the epidemic process while the difference between scores of well-being is significant. For the findings of this paper, scores of satisfaction with life and well-being varied according to the level of exposure to news on the coronavirus on social media ($p < 0.001$). As the frequency of exposure to news on the coronavirus on social media increases, the scores of satisfaction with life and well-being have increased.

Finally, the limitations of the study should be taken into account when evaluating the current research findings. First, the data were collected through online questionnaires. Secondly, the surveys include data collected University students in Turkey. Third, the findings other than the competency result only reflect the students' perceptions. Competency score measurement also includes the perceptions of university students due to the design of the

relevant measurement tools. The limitations of this study are that it was filled through social media. Those with chronic diseases were determined according to the statements of the University student's and were excluded from the study.

Conclusion

The well-being and life satisfaction levels of university students varied by gender. During the epidemic, university students' well-being and life satisfaction levels changed according to their sleep patterns. During the epidemic, university students' well-being and life satisfaction levels changed according to their belief in their own immunity.

Also, exposure of university students to information about the corona virus on social media during the epidemic process and spending too much time also positively affected their life satisfaction and psychological well-being. It is recommended that students avoid behaviors that will disrupt their sleep patterns and reduce confidence in their immunity. In addition to all these, it should also be paid attention to follow information regarding a virus on social media.

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