

Social distancing and emotional state of university students in the COVID-19 pandemic: a descriptive-exploratory study

Distanciamento social na pandemia da COVID-19 e estado emocional de estudantes universitários: estudo descritivo-exploratório

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ABSTRACT

Objective: To understand the experience of social distancing in the initial period of the COVID-19 pandemic and the emotional state of university students. **Method**: A qualitative, exploratory-descriptive study was carried out with 237 students from a public higher education institution located in the Midwest region of Brazil. Data was collected virtually by electronic questionnaires, released in a spreadsheet, and subjected to descriptive analysis and thematic content analysis. **Results**: Two categories emerged: "Between emotional changes and difficulties in adapting to remote teaching" and "Social distancing and approximation with the self". The narratives suggest the experience of worries, anxiety, shock, and emotional instability due to social distancing and remote teaching during the pandemic and denote more time for self-care and family coexistence. **Conclusion**: It is necessary to develop intersectoral strategies for health promotion and prevention of mental disorders, in partnership with the educational institutions, adjusted to the current context. **Descriptors**: Mental Health; Students; Pandemics.

RESUMO

Objetivo: Conhecer a vivência com o distanciamento social, no período inicial da pandemia da COVID-19, e o estado emocional de estudantes universitários. **Método:** Estudo qualitativo, exploratório-descritivo, realizado com 237 estudantes de instituição de ensino superior pública, situada no centro-oeste brasileiro. Dados coletados virtualmente, por questionário eletrônico, lançados em planilha e submetidos à análise descritiva e de conteúdo temática. **Resultados:** Emergiram as categorias Entre mudanças emocionais e dificuldades de adaptação ao ensino remoto e Distanciamento social e aproximação com o próprio ser. As narrativas sugerem a vivência de preocupações, ansiedade, abalo e instabilidade emocional com o distanciamento social e o ensino remoto de emergência no período pandêmico, e denotam maior tempo para o autocuidado e a convivência em família. **Conclusão:** Faz-se necessário o desenvolvimento de estratégias intersetoriais de promoção da saúde e prevenção de transtornos mentais, em parceria com a instituição de ensino, ajustadas ao contexto.

Descritores: Saúde Mental; Estudantes; Pandemias.

INTRODUCTION

The disease popularly known as COVID-19 is a respiratory infection caused by Coronavirus 2. On March 11, 2020, the World Health Organization (WHO) declared the spread of the disease a pandemic, justified by the high virus transmission rate and the intercontinental spread⁽¹⁾. Given this scenario, the COVID-19 pandemic generated new stressors that aroused fears and concerns, affecting the population's mental health⁽²⁾.

The virus's rapid spread has changed people's lives and various aspects of the global economy, both at the public and private levels⁽¹⁾. This epidemiological scenario led to the adoption of economic, political, social, and health measures at the federal, state, and municipal levels to ensure physical distancing, reduce the virus's spread and prevent the health system's collapse⁽³⁾. Measures include isolating confirmed or suspected cases, encouraging hand hygiene, wearing masks, and progressive social distancing measures, with a ban on

events and gatherings, restriction of travel and public transport, and emergency remote teaching adopted by several educational institutions⁽⁴⁾.

With the closure of educational institutions, emergency remote teaching was identified as an alternative to face-to-face teaching, with the need for a rapid transition of learning to the digital environment by institutions, teachers, and students⁽⁵⁻⁶⁾. The high incidence of emotional disorders in university students was expected and has caused impacts on the health of this population⁽⁷⁾. In Brazil, a study that addressed the psychological repercussions of social distancing due to the COVID-19 pandemic and undergraduate students' coping strategies showed that social distancing, gender, income, studying at a public university, not professing any religion, and not working were associated with symptoms of depression⁽⁸⁾.

University students face technological, individual, domestic, institutional, and community barriers as they try to adapt to online teaching. Adding to this, the economic consequences of the pandemic have increased disparities in education, favoring those with greater access to resources such as the internet and computers. For some individuals, these barriers are transitory and must be overcome with the end of the global health crisis; for others, they may persist or have long-term repercussions⁽⁹⁾.

Due to the expected impact of the pandemic on students, it is essential to develop studies focusing on their experiences during the current period of crisis to support the development of strategies for health promotion and prevention of mental disorders properly adjusted to this situation. Given this scenario, this study aimed to understand the experience of social distancing in the initial period of the COVID-19 pandemic and the emotional state of university students.

METHOD

A qualitative descriptive-exploratory study was carried out and reported using the recommendations of the Standards for Reporting Qualitative Research (SRQR) guidelines⁽¹⁰⁾. The study was conducted with students from a federal public higher education institution located in the Midwest region of Brazilian, headquartered in the capital, and distributed over nine units in different municipalities in the countryside, in all administrative macro-regions of the State. The institution is a reference higher education institution for the population of the State and students from other regions of the country.

Data were collected between March and April 2020, a period marked by the COVID-19 pandemic, health, social and economic repercussions, social distancing, and emergency remote teaching practices in the investigated institution. Therefore, the data collection was done through virtual means, using an electronic questionnaire sent to the participants through an e-mail or instant messaging application link. The link was also published on the university's official web pages (the institution's website, academic management system, and social networks). When accessing the link, the participants indicated their agreement to participate and registered it in the Informed Consent Form before proceeding with the questionnaire filling.

The electronic questionnaire was elaborated using Google Forms and consisted of closed and open-ended questions distributed in three blocks: sociodemographic characteristics, which comprised variables such as gender, race/color, religion, marital status, whom the participant used to live with, if the participant went through financial difficulties during the pandemic, occupation, if the person had a scholarship or student aid, if the person is part of the risk group for COVID -19, and if the participant is an undergraduate or a graduate student; behaviors and perceptions during the period of social distancing; and self-assessment of mental health status. In the block referring to behaviors and perceptions during the period of social distancing, the following question was inserted: "With social distancing, do you feel that your emotional state has become:", with the following response options: "worse", "equal", and "better", and a blank space reserved for the student to report his/her emotional state during the social distancing due to the pandemic.

The following inclusion criteria were considered for recruiting the participants: being a student at the institution, being aged 18 years or older, and having answered the question about the emotional state during the pandemic, thus comprising a sample of 237 participants.

The collected data were automatically entered into a Microsoft Excel spreadsheet. The 237 testimonies from the question above were gathered to constitute the present study's analysis corpus. Information that could identify the participants, such as the e-mail address, was hidden in the database to guarantee secrecy and confidentiality. Descriptive statistics (absolute and relative frequencies) were used to characterize the students' emotional state changes. MaxQDA, a qualitative analysis software, was used to analyze the testimonies collected in text format, organize the material, and operationalize the stages of content analysis (thematic modality).

In the pre-analysis stage, the use of MaxQDA made it possible to store the material in a single place, facilitating access and reading of the material to develop indicators supporting the interpretation and organization. The list of codes and categories created by the software was used to explore the material and edited according to the researchers' analysis, enabling the choice of analysis units and codes. The coded statements were submitted to treatment and interpretation. Then, the inferences and syntheses of the most significant results were elaborated⁽¹¹⁾.

The present study is part of the research project entitled "Mental health of the university community of federal public institutions in the Midwest during and after the social distancing regime resulting from the COVID-19 pandemic", approved by the National Research Ethics Committee under opinion No. 3,971,653.

RESULTS

There was a predominance of single female students, persons living with their spouses, and persons living with family members. Most students were full-time students (Table 1).

In Table 2, the frequencies of the coded narratives were highlighted to present how the two thematic categories were constituted: "Between emotional changes and difficulties in adapting to remote teaching" and "Social distancing and approximation with the self".

Between emotional changes and difficulties in adapting to remote teaching

The narratives suggest that, with the social distancing caused by the COVID-19 pandemic, students commonly experienced concerns about others, anguish, anxiety, irritability, discouragement, shock, and emotional instability. In this context, the decrease in the frequency of social relationships, the experience with emergency remote teaching, and the use of information and communication technologies emerged as important stressors among the students.

I feel a little discouraged, it seems like I'm doing nothing, but at the end of the day,

I have a lot to do, mostly on the internet, making use of virtual media. Sometimes I don't even realize it. I know it's just a feeling, because if I'm staying at home, and being at home, it feels like I have nothing to do, or that I'm not doing anything, because the routine is altered (Undergraduate student, 38 years old).

I'm worried about the activities, maybe anxious (Undergraduate student, 40 years old).

At the beginning of the quarantine, it was ok, but after a month without seeing my friends and teachers, I've started to get more anxious and irritated. I miss hugging and talking face to face with people. Feeling that life is "going on as normal" (Undergraduate student, 20 years old).

Going through some changes has made me anxious (Undergraduate student, 18 years old).

Most of the time, I'm ok with social isolation, but sometimes I get desperate, and I want the semester to end so I can have some emotional comfort (Undergraduate student, 22 years old).

I've never been so sad about my undergraduate experience. I know that distancing is necessary, but the quality of distance learning is killing me. This would be my last semester with face-to-face courses, but it turns out that I don't know if I'll succeed with such a bad will of one or two teachers. The recommendation to give short classes does not exist here, because classes that would be 2 hours in person last the whole morning with the teacher using Zoom [a videoconference application], they schedule tests out of the blue, we don't have time to prepare, and the tests have become more extensive than ever. If I didn't really need the student aid, I would have already taken a leave of absence, because I knew that my performance would be very low and that at the most important moment, which is the end of the program (Undergraduate student, 22 years old).

I miss seeing people outdoors (Undergraduate student, 31 years old).

The situation has become much worse. EAD

Table 1 – Characteristics of students from a federal public university (n=237). Coxim, MS, Brazil, 2020

Variables	n	%
Gender*		
Female	149	61.3
Male	87	36.9
Race/color		
White	118	49.8
Black/brown	108	45.6
Yellow/indigenous	11	4.6
Religion		
Affiliated	168	70.9
Unaffiliated	69	29.1
Marital status		
Married or in a stable relationship	51	21.5
Single	186	78.5
Whom do you live with		
Spouse and family	178	75.1
Alone	44	18.6
Friends, colleagues, and acquaintances	15	6.3
Did you experience financial difficulties during the pandemic?		
Yes	74	31.2
No	163	68.8
Occupation*		
Full-time student	147	62.3
Part-time student and part-time worker	89	37.7
Scholarship/student aid receiver*		
Yes	67	28.4
No	169	71.6
Are you in the risk group for COVID-19?		
Yes	72	30.4
No	12	5.1
Did not answer	153	64.6
Level of education		
Undergraduate	226	95.4
Graduate	11	4.6

*Missing = no response to the item (n=236) / one student did not respond to the questions about gender, occupation, and scholarship status.

Source: Elaborated by the authors, 2021.

Table 2 - Frequency distribution	, according to the categories constituted	(n=237). Coxim, MS, Brazil, 2020
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Code list	Ν	%	Thematic categories
Emotional instability	39	12.0	Between emotional changes and
Emotional shake	76	23.2	difficulties in adapting to remote teaching
Concern for others	2	0.6	
Reflections on remote teaching	30	9.2	Both categories
Lack of relationships/socialization	22	6.7	Social distancing and approximation with the self
Emotional control	145	44.3	
Adaptation to the new context	13	4.0	

Source: Elaborated by the authors, 2021.

was adopted abruptly, and no one was prepared, not even the students and the teachers. This increased anxiety (Undergraduate student, 23 years old).

It depends on the day and the number of household chores and academic activities (Undergraduate student, 55 years old).

It is noticed that, during the COVID-19 pandemic, there were marked changes in the students' routine. The restriction to the home environment, the need to reconcile household chores with studies, and the abrupt change to emergency remote teaching seemed to trigger unpleasant feelings and sensations among students, which demanded adaptive efforts in this new life routine. In this new and hostile context, allusions to the overload of academic activities were common in the narratives, as well as reflections and questions about the quality of teaching, the pedagogical practices implemented by teachers (classes and assessments), and academic performance.

Social distancing and approximation with the self

Through the narratives, it was possible to elucidate that social distancing allowed some participants to direct the focus to themselves, to have more time to practice self-care, be with family members, and value social relationships. Some narratives, repeated by different students, reflect that a level of socialization different from that practiced in the presence of distancing measures would not be necessary. This context seemed to favor the encounter with the self, emotional control, and the development of stress management and coping strategies. *The situation got better because I don't need to socialize (Graduate student, 22 years old).*

I've always been antisocial (Undergraduate student, 26 years old).

I'm very happy because I'm with my family (Undergraduate student, 20 years old).

It's great. I have more time for myself (Undergraduate student, 23 years old).

The situation got better because I had a chance to get to know myself better (Undergraduate student, 20 years old).

The situation got better, but not because I didn't need to socialize, but because I took this time to reflect more on myself and my interaction in the world (Undergraduate student, 25 years old).

I go for walks in the morning. It helps me not to go crazy and keeps my blood circulation going. It is also my moment of external contact (Undergraduate student, 25 years old).

Well, I feel better in my hometown than in the capital (Undergraduate student, 19 years old).

I feel something is missing, but this experience we are going through will be of great value for us to value people's company more (Undergraduate student, 20 years old).

My concentration has improved, I feel more relaxed and satisfied with life in general, I don't waste time in traffic, and I spend more time with my family. I realize that my work environment harms my mental health and that I was unhappy and didn't even realize it. I hope to complete my program and qualify for a public service exam this year (Undergraduate student, age not informed).

I gained more time to study, read, research, listen to music, watch documentaries, and classes in the subjects I am studying (Un-dergraduate student, 65 years old).

In summary, social distancing proved to be a period of duality. On the one hand, some narratives are marked by changes in various contexts of life, requiring adaptive efforts, while, on the other hand, improvements in the lives of some students occurred, as there was a return to the cities of origin and the strengthening of affective bonds with an emphasis on the strengthening of ties with family members, due to social isolation, and the possibility of practicing physical exercises.

DISCUSSION

Studies point to some consequences resulting from the COVID-19 pandemic. Among them, the reflexes on the emotional state of students have been addressed to identify the main stressors associated with the pandemic, as well as analyze the coping strategies used by this population^(2,8). Although there is no proven effective treatment against COVID-19, the process of physical distancing remains the most recommended measure to reduce the transmission of the virus⁽¹²⁻¹³⁾.

Among the variables related to emotional support, religiosity and family life stand out. Part of the investigated students (70.9%) stated that they are affiliated with a religion, which became a strategy to support the pandemic moment. In this perspective, a study that analyzed the manifestations of beliefs about the COVID-19 pandemic among Facebook users in the country pointed to the attachment to the religious figure as a way of dealing daily with the various news related to COVID-19⁽¹⁴⁾, which can imply a re--signification of the stressful scenario, through a religious understanding of the situation.

Most students live with a spouse or family members. Research carried out at a private university in Texas, United States, intending to identify the main stressors associated with the COVID-19 pandemic and understand the effects on the mental health of university students, found that most of these students (68%) reported living with family members, making the environment more distracting. In addition, living with family members reduced personal interactions with colleagues, and physical and other social activities, justified by fear and concern for oneself or loved ones⁽²⁾. In this sense, it is inferred that living with family members can contribute to coping with the pandemic and, consequently, favor the maintenance of the emotional state of university students.

Regarding the students' narratives, the distance led to sudden and radical changes in the academics' lifestyle, causing instability and emotional shock. In this context, the thematic category "Between emotional changes and difficulties in adapting to remote teaching" points to feelings related to anxiety, irritability, impotence, and lack of physical contact.

Nervousness, tension, worry, and difficulty thinking were also observed in an investigation aimed to study the mental suffering of students of vocational education, during remote teaching, due to the COVID-19 pandemic⁽¹⁵⁾, which suggests that the difficulties are not exclusive to higher education students and require reflection and re-planning at all levels of education.

Due to the depressive-anxious mood, students may have difficulty performing daily activities with satisfaction and lose interest in things⁽¹⁵⁾, which was observed in the students' excerpts. In a context of change to emergency remote teaching, in which students and teachers were not prepared, the overload of academic activities, associated with the influence of news of deaths and constant hospitalizations in the media, can reflect on the expression of feelings such as fear and anxiety, making it difficult to carry out remote activities. In a way, part of the population has been experiencing negative changes in mental health during the pandemic. In a literature review on depression and anxiety during the pandemic, it was pointed out that there are still no clear epidemiological data regarding the occurrence of psychological complications. However, it is assumed that more than half of the world population has already triggered or worsened some psychological dysfunction since the beginning of the COVID-19 pandemic until March 2021, the period in which the analyzed articles were published⁽¹⁶⁾.

Several stressors can arise from the circumstances of a pandemic. This is associated with numerous causes that can vary according to the population group. Factors that can be found in the academic environment include the wide spread of fake news from unreliable sources coming from the internet, especially on social networks; negative outcomes, such as high death rates; a load of exhausting academic activities, and the social isolation that can foster a negative college experience, permeated by anxieties, anguish and other unfavorable feelings, such as abandonment and helplessness⁽¹⁶⁾. Furthermore, among the stressors expressed by the population, the difficulty in going out on the street, the interpretation that the State is not assisting people, helplessness in situations that cannot be controlled, and fear of infection favor mental illness in society⁽¹⁷⁾. Therefore, the negative consequences on the population's mental health, as well as the emotional shock of the academic community, are variations of the different realities experienced by the world population. It is up to the State and the University to understand and assist the students in totality.

The higher education institution investigated opted for remote emergency teaching. A policy that deserves more attention in this context is student assistance, through actions such as conversation circles, even if virtually, psychological and pedagogical support, actions access to the internet and equipment such as a notebook, as well as maintenance of scholarships and financial aid programs. In a scenario of insecurity, shock, and emotional instability in the academic community, associated with new human and educational challenges, public policies have reinforced the relevance of facing the pandemic, in which the student is not left unattended by the University and does not face alone the responsibility to overcome the difficulties.

On the other hand, the thematic category "Social distancing and approximation with the self " presents narratives suggestive that physical distancing and remote teaching allowed the return to living with family members, more time devoted to oneself, and withdrawal from social coexistence, pointed out under the positive view by some students. Feelings of joy and other positive emotions (27.3%) were found in another survey carried out with high school adolescents, which aimed to identify their emotions during social distancing due to the COVID-19 pandemic and to discuss the strategies adopted to manage emotions⁽¹⁸⁾. While different educational levels present different challenges, some undergraduate and graduate students echo high school students' feelings and

recognize the pandemic and emergency remote learning as an opportune time to drive emotions and promote mental health.

The students pointed to the period of social distancing as an opportunity to practice physical exercises. The literature highlights⁽¹⁹⁾ recommendations for people to remain active during the pandemic, perform an aerobic exercise in the home environment, perform stationary gait, or go up and down stairs. Using home ergometers, such as bicycles, and treadmills, among others, is an option for activities that can be done at home during social isolation and favors maintenance and emotional control during this challenging period.

Family coexistence was evidenced as a positive or protective factor in times of a pandemic, as it provided students with proximity and conviviality with family members for longer periods. The literature highlights this statement in studies carried out during the pandemic⁽²⁰⁾.

It should be noted that discussions about changes in the emotional state of undergraduate and graduate students must be carried out due to the University's adherence to emergency remote teaching as a measure to reduce the virus spread. In an introductory production context, many analogies are supported by eventualities that need to be discussed in the interface with other studies in progress. As an exploratory effort, the data collected in this study may be relevant to reflect how undergraduate and graduate students from a public university are experiencing the pandemic period, characterized by negative changes in their emotional state.

The study deepens the knowledge about the experience of university students in times of the COVID-19 pandemic and the emotional changes, contributing to the production of scientific knowledge on this topic. It is necessary to consider that the participants in the present study experienced a context marked not only by social distancing in times of public health emergency but also by experiencing the practice of emergency remote teaching. This measure, taken so that academic activities were not completely interrupted, clashes with the posture of other Brazilian and international teaching institutions, making the context studied a peculiar scenario that demands specific attention from the teaching institution and health professionals regarding the mental health of students. In particular, nursing professionals working at different levels of healthcare may come across students inserted in this

scenario, which will demand from these professionals a welcoming and understanding attitude, as well as an articulation of actions to promote mental health and prevent a crisis.

As a limitation of the present investigation, the strategy used to collect data analyzed with a qualitative approach stands out. The fact that the participants wrote the data within an instrument formatted for data collection, mostly objective, may have limited the possibility of expression of some participants. However, when comparing the results with the literature and under an analytical look marked by the researchers' own experience, it is understood that the findings express, with sufficient capacity to assimilate reality, the self--perception of the student's emotional state in a peculiar scenario.

CONCLUSION

Among university students, the social distancing caused by the COVID-19 pandemic brought experiences marked by concerns, anxiety, anguish, emotional distress, and instability and, at the same time, aspects linked to the practice of self-care and strengthening of social bonds. The results of this study can help higher education

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institutions develop health promotion strategies and preventive interventions against suffering and mental illnesses, focusing on managing and coping with stressful situations, such as the decrease in the frequency of social relationships and the experience of remote teaching. It is important that the actions are integrated into the academic environment and that the pedagogical and curricular characteristics of the programs are considered, as they can make it difficult for students to search for adequate support in the current context. The need for psychological support is reiterated as a care strategy for undergraduate and graduate students.

CONFLICT OF INTEREST

The authors have declared that there is no conflict of interest.

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