

THE EFFECTS OF SOCIAL ISOLATION ON ROMANIAN YOUNG PEOPLE IN THE CORONAVIRUS PANDEMIC CONTEXT

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Abstract

The quarantine imposed by the COVID-19 virus pandemic has an impact on young people's mental health. This was shown after 1,207 young people across Romania responded to an online survey undertaken by Copăceanu. The subjects were 72.4% female and 27.6% male and their average age is 21.93 years. The results show increased consumption of tobacco, alcohol and food during this period, more worried and anxious young people. Female participants experienced significantly more ($p < 0.001$) anxiety than males. Experiencing anxiety does not differ depending on the number of people living in the same house with the subjects. We found that family income and the size of family did not influence participants' stress or anxiety. Regarding food, 50.9% said they ate more than usual and 17% gained at least 5 kg, while 13.8% lost weight. Furthermore, young people who used the Internet in excess reported a higher percentage (43.9%) of sleep disorders, compared to people who do not use the Internet excessively (21.2%). However, the participants also showed considerable optimism which indicates an important psychological resource. Data suggest the need for psychological interventions tailored on young people's needs.

Cuvinte-cheie: tineri, coronavirus, izolare socială, anxietate, alcool, tutun.

Keywords: young people, coronavirus, social isolation, anxiety, alcohol, tobacco.

1. INTRODUCTION

In the spring of 2020, Romania, like other countries around the world, underwent changes due to the coronavirus pandemic. All areas of life were affected, medical, educational, business, social and political. The increase of infected cases, the increase of deaths determined that the President of Romania to issue a presidential decree decreeing the state of emergency on March 16, 2020. Almost weekly, after analyzing the epidemiological situation in Romania, the Ministry of Internal Affairs issued military ordinances establishing new restrictions for the population. With some impact on young people was the Military Ordinance no. 3 of 24.03.2020 on measures to prevent the spread of COVID-19 issued by the

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Ministry of Internal Affairs which provided for the prohibition of the movement of all persons outside the home/ household, with a few exceptions. So, the citizens were not allowed to leave their homes for two months, except in the case of necessary situations well-defined by law such as the purchase of food or critical medical care. Young people were forced to stay at home, school classes were suspended, and only some of the pupils and students had access to a form of online education. The coronavirus disease 2019 (COVID-19) pandemic it will cause an extraordinary stressor to patients and health care systems across the globe

Children are likely to be experiencing worry, anxiety and fear (Kontoangelos, Economou and Papageorgiou, 2020). This study is aimed at identifying and analysing the impact of quarantine on young people in terms of emotional status, family and social aspects. The results of the study are relevant to both researchers and local authorities, youth organizations, families, and young people themselves. In Romania this is the first study that analyses the effects of the pandemic on young people.

2. LITERATURE REVIEW

Social isolation has an impact on mental health consisting of the risk for isolated people to experience symptoms of depression, anxiety, feelings of insecurity (Copeland *et al.*, 2018; Lin *et al.*, 2018). Some studies show that different forms of isolation are associated with unhealthy behaviours such as smoking, alcohol and marijuana use among young people (Copeland *et al.*, 2017; Copeland *et al.*, 2018).

Some studies reported that social isolation may lead to increase fat accumulation (Nogueira-de-Almeida *et al.*, 2020). Social isolation in the context of the coronavirus epidemic has a psychological impact on people depending on their age and social support (Brooks, 2020). Young people are a category characterized by a high degree of socialization and thus experience more acute feelings of loneliness than the general population and may suffer consequences such as confusion, lack of confidence, increased anxiety during this period. Consequences can extend to neglect and abuse from parents (Green, 2020). Sleeping is another problem among young people, recent and emerging data indicate a key role for sleep in supporting cognitive function and mental well-being in adolescence. The chronic insufficient and poorly timed sleep that is endemic amongst adolescents is of concern (Tarokh *et al.*, 2016). Children's anxiety is linked to parental anxiety. According to Dalton *et al.* exposure to unexplained and unpredictable behaviour is perceived by children as a threat, resulting in a state of anxiety (Dalton *et al.*, 2020). In some countries, during the coronavirus pandemic, alcohol consumption registered significant increase. For instance, in the United Kingdom, alcohol sales

at the supermarket increased by 22% in March 2020 (Ellson, 2020). In Poland alcohol consumption increased by 14% (Chodkiewicz *et al.*, 2020). Regarding emotional state some studies have already investigated emotional impairment due to isolation in the general population not specific among young people. In a recent study conducted in China, 53.8% of respondents rated the psychological impact of the outbreak as moderate or severe; 16.5% reported moderate to severe depressive symptoms; 28.8% reported moderate to severe anxiety symptoms; and 8.1% reported moderate to severe stress levels. Most respondents spent 20–24 h per day at home (84.7%); were worried about their family member contracting COVID-19 (75.2%); and were satisfied with the amount of health information available (75.1%) (Wang *et al.*, 2020).

In February 2021, YoungMinds, the UK's leading charity fighting for children and young people's mental health published the result of a study on the impact of the pandemic on the mental health of young people. According to their results 67% of the participants believed that the pandemic will have a long-term negative effect on their mental health and 58% experienced loneliness or isolation.¹

Other studies have shown high rates of depression: 27.1% of respondents and 7.7% about 10.1% of respondents suffered from phobia (Liu X, 2020). The prevalence of depressive symptoms, anxiety symptoms, and a combination of depressive and anxiety symptoms was 43.7%, 37.4%, and 31.3%, respectively, among Chinese high school students during the COVID-19 outbreak (Zhou *et al.*, 2020). In Romania, young people consume tobacco and alcohol at a high level that can be risky for their health. An observational study in a sample of Craiova high-school students on the use of substances such as cigarettes, alcohol and drugs, found that 37.4% of students declare to smoking, starting when they were between 12 and 15 (41.3%) and in particular 42.5% are female. Regarding alcohol consumption, 67% make use of it and started drinking when they were 14 or 15 years old (Petrelli *et al.*, 2018). The education of young people suffered during the coronavirus pandemic. In a study with a sample of 2029 Romanian students, more than half (62%) reported a lower level of concentration in online courses, as well as a lower level of understanding of materials. Also, half of the respondents rated the possibility of collaborating with colleagues as lower and stated that they participate less in discussions in online courses (Lup and Mitrea, 2020). Other studies found that children and youth also may be engaging in more on-line behaviour in general or due to emotional distress (e.g., loneliness due to social isolation) and be increasing the chance for solicitation from others who prey on their emotional vulnerabilities (Peterman *et al.*, 2020).

¹ Coronavirus: Impact on young people with mental health needs Survey 4: February 2021, p4 (2021, March 25) retrieved from <https://youngminds.org.uk/media/4350/coronavirus-report-winter.pdf>

3. METHODOLOGY

During the isolation period due to the COVID-19 pandemic, young people would be more likely to experience more feelings of loneliness, a more strained relationship with their family, more anxiety, not enough sleep at night, excessive Internet usage and consumption of more alcohol, tobacco and food. Studies on the direct impact of COVID-19 infection as well as other medical issues or about the impact of using technology in education (e.g., zoom fatigue) have been published, but this study did not aim to analyse these variables.

3.1. RESEARCH OBJECTIVES

The objective of this research is to assess and describe the influence of the pandemic on young people emotionally, socially and family.

3.2. THE RESEARCH QUESTIONS

What is the impact of the pandemic on young people emotionally? Did the young people feel more alone, did they have more tense relationships with the family, did they feel more worried? Did young people consume more internet, alcohol, tobacco, and food? Has sleep quality been affected?

3.3. THE RESEARCH TOOL

In April – May 2020, an online questionnaire was distributed containing 75 questions referring to the impact of the COVID-19 crisis on Romanian young people. The questionnaire, developed by Copăceanu, included the most relevant aspects of the lives of young people who may have been affected by the pandemic crisis. The questionnaire included the following categories. section 1: demographics (sex, education, age, number of family members, income), section 2: emotional issues (isolation, impaired sleep, worries, emotional relationships), section 3: sociability (number of friends) and family relationship (stress, conflicts), section 4: tobacco use, alcohol, food, internet, and section 5: school concern. Of course, the questionnaire has a limitation because it could have contained other variables: such as health damage, covid infection of young people or family members. The questionnaire was distributed on online platforms most used by young people, namely Instagram and Facebook. Participants were informed on the purpose of the study, the methods used, confidentiality and data retention and analysis. Personal data of the participants remained anonymous.

3.4. THE PARTICIPANTS

One thousand two hundred seven young people from across Romania participated in this study. In the end, the analysis of the statistical data was carried out on a sample of 1,201 subjects. The survey included 72.4% (869) girls and 27.6% (332) boys, with an average age of 21.93 years; the predominant age was 18. In terms of education, most of the respondents were upper secondary school

students (48.1%) and university students (40.3%), but there was also a small percentage of postgraduates (7.6%) and lower secondary school students (3.8%). Regarding the number of people living in the same house, 33.6% of the subjects lived with three other people, 29.2% with two other people, 8% with more than four other people, 11.8% lived with one other person and 2.7% lived alone. In terms of family income, 50.3% declared their family had average income, 37.4% above average income, and 4.8% below average income (7.5 participants did not answer this question).

3.5. STATISTICAL ANALYSIS

The statistical analysis was carried out using the SPSS 20 (Statistical Package for the Social Sciences) program. In addition to the descriptive analysis of the variables considering their type and the formulated objectives, were also used the cross-table and the χ^2 (chi-square) test.

3.5.1. Family relationship

During the crisis, 45.2% of respondents said that there was more stress in their lives, 35.6% said the crisis has not brought anything good in their family life, 22% acknowledged that there were more quarrels and misunderstandings than before, and 33.1% showed concern about financial stability and family income. The comparison of the respondents by age showed a higher percentage of secondary education young people who reported that this crisis did not bring anything good in their family life, while a high percentage of those with more years of education said that this statement was false.

Table no. 1
The level of education

		7) The crisis brought nothing good in my family's life	
		True	False
1) Your current level of education	Lower secondary education	24 52.2%	22 47.8%
	Upper secondary education	238 41.0%	342 59.0%
	bachelor's degree	145 30.0%	339 70.0%
	Postgraduates	22 24.7%	67 75.3%
	No education	0 0.0%	2 100.0%
Total		429 35.7%	772 64.3%

$\chi^2=25,35$; $df=4$; $p<0.001$; Cramer's $V=0.145$

Generally speaking, 51.4% said that their parents were more stressed than them, 19.2% believed that someone in their family would need some form of psychological intervention (see table no. 2). The number of parents who were stressed did not differ significantly depending on the family income level. Although 70.9% said that they communicate almost daily with their friends during the crisis, to a later question, 35.7% said that their social life was affected by the crisis.

Table no. 2
Family income and stress

		60) My parents are much more stressed than I am	
		Yes	No
3) Consider your family to be one with income:	Average	313 51,7%	293 48,3%
	above average	241 53,9%	206 46,1%
	below average	18 51,4%	17 48,6%
	$\chi^2=5.93$; $df=4$; $p=0.204$		

3.5.2. Feeling of isolation and relationships

Fifty-six percent of the total number of respondents experienced feelings of isolation, of which a higher percentage of secondary education students (58%) felt **isolated** compared to university students (33.7%) ($\chi^2=32.91$; $df=4$; $p<0.001$; Cramer's $V=0.166$). There was a difference in respondents depending on family income. Thus, a significantly higher percentage of young people whose families have low incomes considered that this crisis did not bring anything good in family life (52.2%) (see table no. 1). In comparison, little more than 25% of those with above-average or well-above-average income consider that this crisis did not bring anything good in the life of their family. Although the subjects stating they felt isolated was higher among those with low incomes compared to those with above-average or well-above-average incomes, the statistical analysis showed that the difference was not significant. ($\chi^2=6.73$; $df=4$; $p=0.150$). Being in a relationship does not lead to a stronger feeling of isolation, compared to not being involved in a relationship, as seen in the table below (see table no. 3).

Table no. 3

The relationship status

			41) I feel isolated	
			Yes	No
43) I'm involved in a relationship	Yes	Count	362	260
		%	58.2%	41.8%
	No	Count	309	270
		%	53.4%	46.6%
Total	Count		671	530
	%		55.9%	44.1%

$\chi^2=2.83$; $df=1$; $p=0.092$

3.5.3. The emotional state

Since the COVID crisis began, 46.9% of participants had felt unhappy, 41.3% felt more tired than usual, 35.1% got angry more easily, 33.2% had experienced anxiety, 29.2% had been worried more than usual, 28.2% had had fears about the future, 22.6% had cried more than usual and 6% had used medication to cope with these conditions. There were no statistically significant differences between secondary school students and university students in reporting anxiety during the crisis. Regardless of the level of family income, the percentage of those who said they began experiencing anxiety during the crisis is close in value, ranging between 31.1% and 40%. Comparing by gender, 22.9% of the girls in the study said they were very scared, even anxious, compared to 7.5% of the boys, the difference being statistically significant ($\chi^2=37.40$; $df=1$; $p<0.001$; Cramer's $V=0.176$). Experiencing anxiety does not differ depending on the number of people living in the same house with the subjects ($\chi^2=2.09$; $df=4$; $p=0.718$). There are no significant differences depending on the level of education and age in terms of anxiety (17.4% of young people in lower secondary school, 19% of young people in upper secondary school, 19% of young students and 14.6% of higher education graduates). The results show that 20.3% of the young people involved in a relationship consider themselves anxious, while 16.9% of those not involved in a relationship also consider themselves anxious. The two rates are not significantly different ($\chi^2=2.19$; $df=1$; $p=0.139$).

3.5.4. Sleep disorders

Of the total number of participants, almost 40% said they experienced sleep disorders. It seems that the share of girls who could not sleep at night is significantly higher (42.9%) compared to boys (30.1%). The association between gender and the presence of sleep disorders is one of low intensity (Cramer's $V = 0.117$). The presence of sleep disorders does not differ significantly depending on the level of family income.

Table no. 4

Sleep disorder and family income

		49) I can't sleep at night (I have sleep disorders)	
		Yes	No
3) You consider your family income to be	Average	239 39.4%	367 60.6%
	Above average	164 36.7%	283 63.3%
	Well above average, money is not an issue	40 44.4%	50 55.6%
	Below average	15 42.9%	20 57.1%
	Unfortunately, we are short on money	15 65.2%	8 34.8%
	Total	473 39.4%	728 60.6%

$\chi^2=8.93$; $df=4$; $p=0.063$

The presence of sleep disorders does not differ significantly depending on the sociability of the respondents (see table no. 5).

Table no. 5

Sleep disorder and sociability

			49) I can't sleep at night (I have sleep disorders)	
			Yes	No
9) I consider myself an outgoing person, I make friends easily	Yes	Count	348	566
		%	38.1%	61.9%
	No	Count	125	162
		%	43.6%	56.4%
Total		Count	473	728
		%	39.4%	60.6%

$\chi^2=2.74$; $df=1$; $p=0.097$

The analysis show that 61.1% of the young people who currently smoke more than they did before the onset of the COVID-19 crisis could not sleep at night as compared to the other categories: young people who do not smoke or smoke just as much. Thus, from the total number of respondents who had sleep disorders 36.1% are not smokers and 47% smokes just like before the crisis (see table no. 6).

Table no. 6
Sleep disorder and smoking

			49) I can't sleep at night (I have sleep disorders)	
			Yes	No
16) Do you smoke more than before the COVID-19 crisis?	Yes	Count	44	28
		%	61.1%	38.9%
	No	Count	162	262
		%	38.2%	61.8%
	I smoke the same	Count	54	61
		%	47.0%	53.0%
	N/A	Count	213	377
		%	36.1%	63.9%
Total	Count		473	728
	%		39.4%	60.6%

$\chi^2=19.90$; $df=3$; $p<0.001$; Cramer's $V=0.129$

The percentage of those who could not sleep at night differ significantly between people who did not consume alcohol (36.3%), those who consumed just as much as before the COVID-19 crisis (40.5%) and those who consumed more alcohol than before the COVID-19 crisis (49.1%) (see table no. 7).

Table no. 7
Sleep disorder and alcohol use

			49) I can't sleep at night (I have sleep disorders)	
			Yes	No
20) Since the COVID-19 began I have drunk more alcohol	Yes	Count	52	54
		%	49.1%	50.9%
	No	Count	225	330
		%	40.5%	59.5%
	N/A	Count	196	344
		%	36.3%	63.7%
	Count		473	728
	%		39.4%	60.6%

$\chi^2=6.62$; $df=2$; $p=0.036$; Cramer's $V=0.074$

A higher percentage of people who used the internet excessively during this period (43.9%) accused sleep disorders compared to people who had sleep disorders without using the internet excessively during this period (21.2%).

3.5.5. Internet use

Regarding the excessive use of the Internet, most of the respondents, regardless of education, said that they used it largely for socializing (54%), on a significantly distanced 2nd place being music (11.7%), followed by video games (8.4%) while an extremely low percentage of the subjects used the Internet for gambling (2.3%) (see table no. 8). Regarding the excessive use of the Internet for sexual purposes, 8.1% of the boys answered affirmatively as compared to the significantly low 1.4% of the girls who declared they used the Internet excessively in this purpose. Comparing results of secondary education students with those of university students, the former used the Internet excessively for other purposes such as music and video games, while the latter used the Internet rather for information and documentation. A very high percentage of both the girls (80.4%) and the boys (78.9%) declared that they used the Internet in excess during this period. There is no difference based on gender from this point of view ($\chi^2=0.348$; $df=1$; $p=0.555$). Regarding the time spent online, a higher percentage of boys (63.6%) considered that they spent more than 6–8 hours a day on the Internet, compared to a percentage of 55.8% of the girls. Although the difference is statistically significant, the association between gender and spending more than 6–8 hours a day on the Internet has an extremely low intensity. (Cramer's $V=0.07$).

A higher percentage of secondary school young people use the Internet in excess (86.2%), compared to people with postgraduate studies (52.8%) ($p<0.001$; Cramer's $V=0.220$). Regarding the number of hours/days, 27% of postgraduate respondents spent more than 6–8 hours a day on the Internet, compared to 54.3% of the lower secondary education respondents. What is worrying is the high percentage (35.2%) of the subjects who admitted being addicted to the Internet. It is noted that young people with postgraduate studies and those with lower secondary education are those who are considered in a high proportion as severely dependent on the Internet, compared to people with upper secondary education and university education. There is also no difference depending on the family's income, the number of people living in the house when it comes to how they experienced the isolation or the excessive usage of the Internet. For example, the following percentages of respondents overused the Internet: 56.2% of the young people living alone, 81.3% of the young people living with one other person and respectively 81% of the young people living with three or more other persons ($p=0.017$; Cramer's $V=0.100$). The percentages of people who spent more than 6–8 hours a day on the Internet is similar, with no statistically significant differences, regardless of the number of people living in the same house.

Table no. 8

The use of internet and the level of education

		33) I overuse the internet for				
		Socialisation	Music	Video games	Get information and document	Others
1) Your current level of education	lower secondary education	18	9	8	2	9
		39.1%	19.6%	17.4%	4.3%	19.6%
	upper secondary education	272	120	73	54	61
		46.9%	20.7%	12.6%	9.3%	10.5%
	undergraduate	215	68	39	79	83
		44.4%	14.0%	8.1%	16.3%	17.1%
	postgraduate	29	6	4	35	15
		32.6%	6.7%	4.5%	39.3%	16.9%
	no education	0	2	0	0	0
		0.0%	100.0%	0.0%	0.0%	0.0%
Total		534	205	124	170	168
		44.5%	17.1%	10.3%	14.2%	14.0%

$\chi^2=100.99$; $df=16$; $p<0.001$; Cramer's $V=0.145$

3.5.6. Smoking and alcohol consumption during the crisis

Of the total participants, 32% of respondents were smokers at the time, 12.2% said they smoked more than before the crisis, and 8.4% of them with at least five more cigarettes a day. Only 21% wanted to quit smoking. The percentage of young people smoking more than before the COVID-19 crisis does not differ significantly based on the respondents' gender (6.6% boys and 5.8% girls, $\chi^2=0.61$; $df=3$; $p=0.892$) nor in terms of the number of cigarettes smoked daily: 6.9% smoked at least five cigarettes more during the crisis 6.9% boys and 8.9% girls, and at least 10 cigarettes/day – 2.7% boys and 2.5% girls, respectively at least 15 cigarettes/day, 1.8% boys and 1% girls ($\chi^2=6.93$; $df=4$; $p=0.139$). Also, 6.9% of the boys and 10.9% of the girls said they had given up smoking since the crisis began (see table no. 9). A higher percentage (12.2%) of the subjects who lived with one other person in the household report they smoked more than before the COVID-19 crisis compared to those who lived alone or with more than one person in the same house.

Table no. 9
Smoking and the number of family members

			16) Do you smoke more than before the COVID-19 crisis?			
			yes	No	Same	n/a
2) How many people live in the house?	1 person	Count	17	52	21	49
		%	12.2%	37.4%	15.1%	35.3%
	2 persons	Count	21	127	34	169
		%	6.0%	36.2%	9.7%	48.1%
	3 persons	Count	17	140	28	219
		%	4.2%	34.7%	6.9%	54.2%
	4 or more persons	Count	15	95	27	138
		%	5.5%	34.5%	9.8%	50.2%
	alone	Count	2	10	5	15
		%	6.2%	31.2%	15.6%	46.9%
Total	Count	72	424	115	590	
	%	6.0%	35.3%	9.6%	49.1%	

$\chi^2=28.17$; $df=12$; $p=0.005$; Cramer's $V=0.088$

Regarding the number of cigarettes, they smoked extra, the same respondents who lived with only one more person in the house said in a higher percentage (12.9%) that they smoked at least five extra cigarettes compared to the other respondents living alone or with more than one person in the household (6.2%) (see table no. 10).

Table no. 10
Smoking and the number of family members

		17) I estimate I smoke more with:					
		min. 5 cigarettes / day	min 10 cigarettes / day	min 15 cigarettes / day	N/A	Since the crisis started, I've given up cigarettes	
2) How many people live in the house?	1 person		18 12.9%	4 2.9%	6 4.3%	105 75.5%	6 4.3%
	2 persons		28 8.0%	9 2.6%	5 1.4%	274 78.1%	35 10.0%
	3 persons		30 7.4%	8 2.0%	1 0.2%	326 80.7%	39 9.7%
	4 or more persons		22 8.0%	9 3.3%	2 0.7%	206 74.9%	36 13.1%
	Alone		2 6.2%	1 3.1%	1 3.1%	26 81.2%	2 6.2%
	Total	100 8.3%	31 2.6%	15 1.2%	937 78.0%	118 9.8%	

$\chi^2=29.25$; $df=16$; $p=0.022$; Cramer's $V=0.078$

3.5.7. Alcohol and food

Since the crisis began, only 44.8% said they were abstainers. 4.3% of the young people reported daily alcohol consumption and 18 participants considered that they consumed excessively. **Concerning alcohol consumption, there are statistically significant differences between male and female participants (make this correction throughout the article). Thus, 15.1% of boys had consumed more alcohol since the COVID-19 crisis began, while among girls, only 6.4% say they started consuming more alcohol.** ($\chi^2=30.27$; $df=2$; $p<0.001$; Cramer's $V=0.159$) Study participants living alone, living with another person or living with four or more people stated in slightly higher percentages, between 10.1% and 12.5%, that, since the beginning of the COVID-19 crisis, they had been consuming more alcohol. Respondents living with two or three people in the house stated in slightly lower percentages (8.3% and 6.7%, respectively) that they had consumed more alcohol since the COVID-19 crisis began.

Of the total respondents, 50.9% said they ate more than usual and 17% gained at least 5 kg, while 13.8% lost weight. The percentage of girls who ate more than usual during this period (52.6%) is higher than that of boys (45.5%).

3.5.8. Family income

The analysis was centred on possible differences depending on the income of families. Young people coming from low-income families discovered during this period new, interesting, fascinating and pleasant thing in a significantly lower percentage (43.5%) than young people in other income categories. One can observe the percentage of young people who discovered new, interesting and pleasant things is higher as the income level increases (see table no. 11).

Table no. 11

Family income and pleasant things

			62) During the crisis period, I discovered new, interesting, fascinating and pleasant things	
			Yes	No
3) You consider your family income to be:	Average	Count	372	234
		%	61.4%	38.6%
	Above average	Count	305	142
		%	68.2%	31.8%
	Well above the average, money is not an issue	Count	64	26
		%	71.1%	28.9%
	Below average	Count	21	14
		%	60.0%	40.0%
	Unfortunately, we are short on money	Count	10	13
		%	43.5%	56.5%
Total		Count	772	429
		%	64.3%	35.7%

$\chi^2=11.69$; $df=4$; $p=0.020$; Cramer's $V=0.099$

3.5.9. School

The questionnaire included questions about the school. Only 46.7% said that their school adapted very well to online education, 32.6% acknowledged that education suffered during this period and 25.6% said that “school is a disaster when it comes to managing online education.” Girls are also much more concerned about the future of education (53%) than boys (39.8%) ($p < 0.001$). High concern about the future of education does not differ significantly depending on the level of family income. Thus, 50% of young people who said that their family had an average income and 47% of young people who said that they had above average income been worried about their educational future.

3.5.10. Optimism and sociability

Regarding the aftermaths of the COVID-19 crisis, 87.7% of the boys are more optimistic about their future, while 80.3% of the girls showed optimism about their future ($p = 0.003$; Cramer's $V = 0.086$). A high percentage of people (66.1%) who considered themselves sociable discovered new, interesting, fascinating and pleasant things, compared to people who did not consider themselves sociable and who discovered new, pleasant things in a percentage of 58.5%. Optimism about one's own future differs significantly depending on how sociable the person is. Thus, 86.1% of people who consider themselves sociable are optimistic about their own future, while 70.4% of the people who do not consider themselves sociable are optimistic about their own future ($p < 0.001$). Optimism about their own future differs significantly depending on family income, which increases as family income is higher (78.9% of those with average incomes are optimistic about their future, 85.9% of those with above average incomes are optimistic and 92.2% of those with far above average incomes are optimistic). Results show that sociability does not influence how one cares about school in the future. Accordingly, 47.8% of sociable people worry about the future while 54.4% of those who do not consider themselves sociable also have worries when it comes to school in the future ($\chi^2 = 3.75$; $df = 2$; $p = 0.153$).

4. CONCLUSIONS AND DISCUSSION

As the study suggests, young people appear to have suffered during the pandemic in a few ways: their emotional state, concerns about educational future, family stability, sleep disorders, feelings of anxiety, quarrels with family or excessive consumption of food, the Internet, tobacco, and alcohol. However, they also showed considerable optimism which indicates an important psychological resource. In this study, we found that family income and the size of family did not influence participants' stress or anxiety. Further research is needed to understand how these young people cope with challenges such as COVID-19. Given that young people use the Internet, mobile applications and social media to a great

extent, largely because they are attractive and easy-to-use, such tools can be used to deliver safety information, offer specialized emotional support (to help cope with stress and anxiety) and reduce risk behaviour (excessive usage of internet, alcohol, tobacco, food). Unfortunately, this kind of help is currently not available in Romania. There is only one application in Romanian for reducing alcohol consumption. There are no applications to help young people get in touch with psychologists. To reduce the risk of problematic consumption behaviour, families should consider substituting sedentary leisure for more active leisure pursuits (Moore *et al.*, 2020).

On the other hand, at the national level, the Ministry of Health or the Romanian College of Psychologists does not show much interest for specialized interventions to support young people during the pandemic. On the contrary, the COVID-19 pandemic could be an opportunity to improve mental health services (Morena *et al.*, 2020).

There were several NGOs, universities, and psychiatric hospitals in Romania that voluntarily provided psychological assistance but these services were not necessarily focused on young people. Moreover, volunteer psychologists did not receive specific training; for example, psychologists could have been offered a chance to register in volunteer databases. Finally, the pandemic has shown that the pre-university and university education system has major problems and has not been able to adapt quickly or efficiently.

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REZUMAT

Carantina impusă de pandemia virusului COVID-19 are un impact asupra sănătății mintale a tinerilor. Acest lucru a fost demonstrat după ce 1.207 de tineri din toată România au răspuns la un sondaj online derulat de Copăceanu. Subiecții au fost 72,4% de sex feminin și 27,6% de sex masculin, iar vârsta lor medie este de 21,93 ani. Rezultatele indică un consum crescut de tutun, alcool și alimente în această perioadă, tinerii fiind mai îngrijorați și mai anxioși. Participanții de sex feminin au prezentat o anxietate semnificativ mai ridicată ($p < 0,001$) comparativ cu băieții. Experimentarea anxietății nu diferă în funcție de numărul de persoane care trăiesc în aceeași casă cu subiecții. Am constatat că venitul familiei și dimensiunea familiei nu au influențat stresul sau anxietatea participanților. În ceea ce privește produsele alimentare, 50,9% au spus că au mâncat mai mult decât de obicei și 17% au îngreșat cel puțin 5 kg, în timp ce 13,8% au slăbit. Mai mult, tinerii care au folosit internetul în exces au raportat un procent mai mare (43,9%) de tulburări de somn, comparativ cu persoanele care nu folosesc internetul în mod excesiv (21,2%). Cu toate acestea, participanții au prezentat, de asemenea, un optimism considerabil, ceea ce indică o resursă psihologică importantă. Datele sugerează necesitatea intervențiilor psihologice adaptate nevoilor tinerilor.