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Editorial

Understanding the psychological impact of the COVID-19 pandemic on university students

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The World Health Organization (WHO) on March 11, 2020, has declared the coronavirus disease 2019 (COVID-19) as a pandemic and public health emergency [1]. Globally, as of 22 December 2021, about 275 million cases and 5.4 million deaths have been reported [2]. The COVID-19 pandemic that is the most challenging crisis we have faced since the Second World War continues to affect global public health and economies, in turn, leads to an important change and transformation in all the sectors [3]. The pandemic has also disrupted education and has forced students to switch to remote learning [4,5]. According to the Organisation for Economic Co-operation and Development (OECD) report, "Widespread school closures affected over one billion students during the first year of the COVID-19 pandemic. The vocational education and training (VET) sector has faced particular challenges during the crisis, most notably the fact that the digital learning environments that most education institutions had to rely on during closures don't work as well for practice-oriented learning—a core component of VET instruction—as they do for academic learning" [6]. Therefore, university students have been affected by the COVID-19 pandemic [4,5].

It is well known that many psychological problems that accompany outbreaks are associated with younger age [7] and may persist long after these periods [8]. Previous studies suggest that university students are prone to mental health problems and have higher stress levels as a result of changes such as the transition from adolescence to adulthood, and academic pressure, which can impair academic performance, social function, and quality of life [9–12]. Meanwhile, the COVID-19 pandemic affects not only the physical health but also the mental health of university students and causes a mental health burden on this population [13–15]. Generally, students have experienced higher levels of the psychological impact of the pandemic than those who were employed [16–18]. Cao et al. [19] found that 24.9% of university students reported experiencing anxiety symptoms

during the COVID-19 pandemic, which were associated with economic problems, impacts on daily life, and concerns about academic delays. In a recent study, the prevalence rates of post-traumatic stress disorder and depression during the COVID-19 pandemic in a sample of home-quarantined university students were found to be 2.7% and 9%, respectively. In the same study, feeling extreme fear of contamination among the students was determined to be an important risk factor for both depression and post-traumatic stress disorder [20]. On the other hand, Marelli et al. [21] showed that, in university students, poor quality of sleep (73.3%) and poor sleep hygiene were very prevalent during COVID-19 lockdown. In the same study, a worsening of quality of sleep and of symptoms related to insomnia was found since the onset of the COVID-19 pandemic. In another study, 83% of young people with a history of mental health needs also reported that the COVID-19 pandemic has worsened their mental health [22].

Other studies have also showed that the prevalence of moderate-to-high stress among university students varies from 11.5% and 85.0% during the COVID-19 pandemic [12,15,17,23–26]. It is well documented that medical students have experienced a deterioration in mental well-being when compared to before the COVID-19 pandemic [23,27]. Ye et al. [12] found that medical students reported higher levels of stress than non-medical students during the pandemic. The researchers have also noticed relations between stress and loneliness, fear, anxiety, and depression among medical students [12]. Vahedian-Azimi et al. [28] also demonstrated that there were higher mean levels of stress, anxiety, and depression in medical students than the medical staff and community population. Medical students had a higher depression level compared with patients with COVID-19, although there were no significant differences in terms of perceived stress and anxiety levels between the students and patients [28]. Interestingly, we found that almost all of the undergraduate health professional students (98.2%) reported moderate-to-high levels of stress during the pandemic. In our study, the main predictors of stress were also age, self-rated health, the presence of sleep problems, the history of direct contact with suspected COVID-19 patients or infected materials, frequency of following the news about the COVID-19 pandemic, life satisfaction, and used coping strategies [5].

Consequently, university students have experienced psychological distress such as stress, depression or anxiety, and sleep problems because of the COVID-19 pandemic. Evaluation and management of psychological problems in this population should be key elements of the student-centered support systems. Comprehensive psychological support programs should be developed collaboratively in providing services to reduce psychological distress following crisis and improve coping skills [4,5]. A better understanding of the psychological impact of the COVID-19 pandemic on university students could contribute to design more effective interventions that improve mental health in this population.

Conflict of interest

The author declares that there are no conflicts of interest.

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