



RESEARCH ARTICLE

PREVALENCE OF LONELINESS AMONG PHYSIOTHERAPY STUDENTS DURING THE COVID-19 PANDEMIC: A CROSS SECTIONAL STUDY

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ABSTRACT

Background: Covid-19 pandemic has created a huge disruption in people's life around the world. Physiotherapy students are not far off from its influence in their daily life. Not only has the pandemic affected their academics, it also has affected their daily life, their mental health and their productivity. Because of the lockdown, most people have undergone social isolation and loneliness. This study was conducted to find the impact of loneliness in Physiotherapy students during the Covid-19 pandemic. **Methodology:** The primary data was collected from students studying physiotherapy in various colleges in Karnataka. A cross-sectional research design was used for this study. 121 students have been selected for this study purpose. UCLA Loneliness Scale Version 3 was used to collect data. **Results:** The results of this study clearly show that the almost 99% of the Physiotherapy students in Karnataka suffer from some form of loneliness which has mostly been caused because of the ongoing pandemic. **Conclusion:** After the Covid-19 pandemic it is conclusive that the prevalence of loneliness among the physiotherapy students in the state of Karnataka has significantly increased and should be a subject of concern and also be addressed as soon as possible.

INTRODUCTION

On 11th March 2020, WHO declared the global spread of Novel Corona virus disease (Covid-19) outbreak as a pandemic (Domenico Cucinotta, 2020). After the onset of Covid-19 pandemic, students are not able to interact with their peers on and off the class like they used to before Covid-19. Covid-19 pandemic has created a huge disruption in people's life all around the world. Physiotherapy students are not far off from its influence in their daily life. Not only has the pandemic affected their academics, it also has affected their daily life, their mental health and their productivity. Because of the lockdown, most people have undergone social isolation and loneliness. According to WHO a simple and acceptable definition of loneliness is: a feeling of malaise or distress that the person concerned attributes to a lack of relationships with other people with whom to exchange feelings and ideas and to do things. Loneliness is due more to the quality of contacts people have than to the number of them. So it depends less upon the contacts that an individual actually has than on how he or she feels about them (Rene Diekstra, 1988). The COVID-19 pandemic is likely exacerbating loneliness by drastically reducing routine and intimate interactions and substituting face-to-face contact with modes of communication that may increase loneliness, such as social media (Nicolas, 2020).

Several populations are at increased risk. Several studies of the general population have found an increase in loneliness since the outbreak of COVID-19 (Lana Dalhberg, 2020). The Corona virus pandemic is severely impacting the life of the individuals on the whole. It has created an environment of fear, anxiety and stress among the developed and developing societies. WHO and all the member nations have issued advisories related to the impact of the Novel Corona Virus. But this disease creates several issues including social anxiety, panic states due to uncertainty, economic recessions and extreme mental stress (Jaspreet Singh, 2014). There are several studies giving a vague idea of prevalence of loneliness in the people of India, all of them showing different results but all of them had one similar conclusion that loneliness is highly prevalent in people across India. According to one article 37.6% of the participants suffered from loneliness, among males and females it was observed 29.6% and 42.7% respectively (Anil). While another article suggested that the number was in excess to 40%. Both of these articles implied that the increase in prevalence was proportional to their age group. Elderly people aged 80 years and above were more affected (Bhatia, 2007). Also a country wide survey conducted by Ipsos concluded that 50% of Indians felt lonely in the last year during the pandemic. According to nine different studies conducted in India, the severity of loneliness among the general population was reported to be between moderate to high with a mean loneliness score ranging between 27.93 and 55.85 (Md Mahbub Hossain, 2020; Sandeep Grover, 2018; Archana Singh, 2009; Manoj Shettar, 2017).

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The primary aim of the study was to evaluate the impact of loneliness among the physiotherapy students studying in Karnataka as a result of the recent Covid-19 pandemic and how lonely they feel because of it. Many studies have been done correlating loneliness amongst people as a result of the ongoing pandemic but this study specifically emphasizes on its relation amongst physiotherapy students studying in Karnataka.

METHODOLOGY

The main source of the data was taken from physiotherapy students predominantly studying in Padmashree Institute of Physiotherapy. A minority of the population who have voluntarily taken part in the study not studying in the Padmashree Institute of Physiotherapy were either studying Bachelors and Masters elsewhere or pursuing their internship. For the collection of data a questionnaire was formulated based on the UCLA Loneliness Scale Version 3 which was then circulated among the physiotherapy students of different ages ranging from 18 to 30 studying in different levels including various levels of Bachelor's degree or Master's degree and some even undergoing their internship. The response to the questionnaire was however not forced and only those participants willing to give their personal information and share their views were considered for the study. All the responses from the participants were taken and accumulated in a single excel sheet for the purpose of examination and the degree of loneliness of each individual was calculated. The complete process to complete the evaluation of the degree of loneliness of each candidate took about a month. The sample size was 121 participants and the sampling design and technique were non probability sampling and convenience sampling respectively. The study done was a cross sectional study that took about a month to complete (From 1st June 2021 to 30th June 2021).

Both male and female candidates were considered but the age limit was between 18 and 30 years. However, students who were under any type of medication for psychological issues and those who stayed in hostel during lockdown were excluded. For the purpose of collection of data a number of materials were used. The study was conducted in three steps each using a different form to be filled by the candidates. Firstly an information consent form was given to all the volunteers where they would have to say that they are willing to participate in the study and share their personal information with the concerned personnel. Secondly, a personal data collection sheet was shown where the willing participants would have to fill in their personal information such as name, age, gender, grade, height, weight and with whom they have spent the current lockdown. Lastly, an UCLA loneliness questionnaire was used which is the main part of the study. In this part of the study the participants has to answer 20 questions designed to measure one's subjective feelings of loneliness. Participants have to rate each question on a scale from 1(Never) to 4(Often).

RESULTS

After obtaining 121 responses through google forms, using the method to evaluate the degree of loneliness explained in the UCLA loneliness scale the results were calculated using MS Excel 2010. Table 1 outlines the breakdown of gender, age and body mass index and shows that the average age of the participants in the study was between 21 and 25. Among the 121 participants 57% of them were females and 47% were males which equated to 52 males and 69 females.

Furthermore the general BMI of the candidates ranged from 19 to 26 all of which can be seen in the table below.

Table 1. Characteristics of Participants

Characteristics	Value
Age(Mean±SD)	23.08±2.47
Gender(Male/Female)	52/69
BMI(Mean±SD)	22.84±3.86

After the calculation of the degree of loneliness of each participant they were categorized into three different categories based upon their score. Depending on the score the participants got after the evaluation of their answers, candidates were placed in either No/Low Loneliness category, Moderate Loneliness category or High Loneliness category. The percentage of people that fall in each category is shown in the table below.

Table 2. Percentage of students falling in different loneliness category

Category	Number of students (%)
No/Low Loneliness	0.84
Moderate Loneliness	40.83
High Loneliness	58.33

DISCUSSION

This COVID-19 pandemic seems to have brought our frenzied speed of modern society to a grinding halt and has literally crushed the wings of unlimited social interaction. Under these social restrictions, individuals are forced to reconcile with this terrifying reality of isolation which can contribute to domestic inter-personal violence and boredom. This has increased the prevalence of depression, anxiety, post-traumatic stress disorders and insomnia in the population. It also contributes to fatigue and decreases performance in health-care workers. But neither life nor the society had probably readied us for this task (Debanjan Banerjee, 2020). Previous research has highlighted that particular groups at risk of loneliness include women, being either younger (e.g. aged younger than 25 years) or older (e.g. aged older than 65 years), living alone and having low socioeconomic status, as well as poor mental and physical health (Pinquart, 2003; Victor, 2012). Preliminary research within Europe has suggested that these groups may indeed be at risk during lockdown and heightened loneliness is also affecting distress levels (Losada-Baltar, 2020). However, it is also possible that enforced lockdowns are actually meaning that new groups are now at risk of loneliness (Fancourt, 2020). Furthermore, being a student emerged as a higher risk factor during lockdown than usual, although this builds on wider research suggesting that loneliness can be a problem for students and has been rising over the past six years (Hysing, 2020). Of the respondents it is clearly conclusive that majority of the candidates suffer from some form of Loneliness with only one reporting to have No/Low Loneliness. The various other studies conducted to find out the prevalence of loneliness has suggested that loneliness only prevails amongst an average of 40% of the total participants of the study and also that loneliness is a determined by various factors in one's personal life with age being the major cause of it. There is conclusive evidence given in different studies conducted across the world that loneliness amongst the population only increases with age which makes our findings in this study to be of a curious

nature. Keeping in mind that we have only taken participants who are relatively young and are still studying or putting their first step towards building their career the amount of people who have stated with their answers that they are lonely is astounding.¹⁸ The ongoing pandemic clearly has a big role in creating the feeling of loneliness in people but no one could have ever imagined the sheer amount of people reporting to be lonely at this day and age.

Conclusion

Despite the relatively low sample size and a specified age group of participants, this review provides a ground to recognize the growing cases of loneliness among the youth after being compelled to socially isolate themselves because of the ongoing Covid-19 pandemic. The high cases of loneliness reported in our study simply shows the extent of impact that has been caused due to the extended period of limited social contact with the outside world and being confined to only one's household. The causes of feeling lonely may be different things but in this case, majority of the data from the study points toward the fact that candidates feel lonely because of the limited social interaction they have with the outside world which is because of the pandemic. Loneliness has been identified as a significant risk to health. However, our health care system and nursing care have limited means to recognize people who may suffer from loneliness and to alleviate loneliness with nursing intervention.^{19,20}

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