Psychological Impact Of Covid-19 On Academic Activities Of Academic Researchers: A Repertory Grid Analysis

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Abstract

This study investigated the psychological impact due to the emerging COVID-19 pandemic on the activities of academic researchers by using the repertory grid analysis technique. It was hypothesized that COVID-19 had a negative significant psychological impact e.g., panic disorder, obsessive behavior, anxiety, paranoia, depression, and fear of being infectious. A repertory grid was administered to Ph.D. Education scholars of public sector universities of Punjab. There were 20 respondents who took part in the study and they were selected by snowball sampling. Research activities engage students in different activities and let them work together in a collective institutional environment. This practice keeps their mental health good. On the other side, isolation is a provoking factor in the mental health of individuals. The isolation or quarantine state of a well-socialized person may cause stress disorder, frustration, and confusion. Study concluded that the pandemic (COVID-19) has significantly affected the psychological state of academic researchers. The academic researchers are facing psychological problems e.g., fear of being infectious, depression, rapid change in mood variations, impulsive actions, the feeling of anger, feeling loneliness being in home confinement, waves of sadness, feeling of helplessness, and panic. The severity of symptoms is different from person to person.

Keywords: Pandemic, Covid-19, Psychological, researchers, education

Introduction

Due to evolved situation of the pandemic (COVID-19), all segments of society are under negative impact. The pandemic has forced masses to confine themselves to stay at their homes and created uncertain circumstances for unpredicted time. People around the globe are in extreme fear as there is no approved proper cure introduced for this deadly virus. Qiu, Shen, Zhao, Wang, Xie & Xu, (2020), stated that the eruption of COVID-19 has seriously disturbed the physical and mental health of people at large. Due to this pandemic, a

large number of psychological issues like anxiety, depression, and other disorders have emerged. Many countries have shown great concern over the increasing number of patients due to Coronavirus and the prevailing despair among masses arising due to this outbreak, which intensified fear (Bao, Sun, Meng, Shi, & Lu, 2020). As well as this pandemic affecting other walks of life there is also an impact on the educational environment. Advised precautionary measures and the closure of educational institutions, it has affected the teaching and learning activities. Faculty and students are connecting through online

means of learning while staying at home. This has changed the routine tasks of learners and the traditional activities they were engaged in before the pandemic.

The focus of this study is to determine the psychological impacts on academic scholars. Researchers have to perform many tasks to complete their research work while interacting with different situations. They need to reach respondents and mentors to set direction and meet the formalities of projects. This emerged situation has restricted them to perform this. This may create fear of delay in academic activities and failure to complete tasks within the stipulated time. Cao, Fang, Hou, Han, Xu, Dong & Zheng, (2020) concluded that stressors associated COVID-19 include with economic stressors. The impact on daily life and the academic slowdown is positively related to the level of anxiety symptoms experienced by Chinese students during the epidemic. Pakistan with its developing economy is also a victim of this deadly disease. As per studies, the situation can be worse because of a low level of awareness and sense of responsibility towards this phenomenon. In Pakistan, Government has suspended educational activities at all levels. This has stopped all ongoing research programs in different fields. Higher Educational institutions have started online learning programs but a few Universities have still not become able to establish online learning ventures. This also causes disruption and problems for scholars to get connect with their institutions.

Literature

The life of Pakistanis is interdependent i.e., people live their lives which are not independently. They closely knitted together. They frequently visit each other. They cannot live in isolation. The pandemic has cracked their lifestyles. Resultantly they have been suffering from emotional, psychological, behavioral, and social disorders. Even the school and college life of students is highly disrupted. Academic and research activities in universities engage students in different activities and let them work together in a collective institutional environment. This practice keeps their mental health good. On the other side, isolation is provoking factor in the mental health of individuals. The isolation or quarantine state of a wellsocialized person may cause stress frustration, and confusion disorder. (Brooks, Webster, Smith, Woodland, Wessely, Greenberg, & Rubin, 2020). A literature review-based study indicated that lockdowns, isolations, and quarantine can be the cause of acute panic, obsessive behavior, anxiety, paranoia, hoarding, depression, and post-traumatic stress disorder in the long run (Dubey, Biswas, Ghosh, Chatterjee, Dubey, Chatterjee & Lavie, 2020). Due to the fear of coronavirus infection, people have been suffering from mental illness. The quality of life has been altogether affected. The psychological indications have arisen and consequently, major psychological indications like mood alterations, insomnia, anger, emotional exhaustion, etc., of people have appeared which ultimately has disrupted their routines. (Gianluca, Bianca, Andrea, Andrea, Leo, & Mario, 2020).

Due to the outbreak of the pandemic, people have started to react atypically around them. This is a phenomenon that is not difficult to understand because people of any gender or socio-demographic status can be infected. This is especially true for COVID-19 when there are many hypotheses about the mode and rate of transmission and the disease is spreading at such an unprecedented rate, and no definitive treatment is currently available. Ho, Chee, & Ho (2020) stated that compared to the SARS period of 17 years ago, psychological anxiety may now have increased even more: the increase in air travel and the improvement in global connections have made the spread of pandemics easier. The variation of rate of psychological impact in different communities. At the beginning when the COVID-19 outbreak in China, many people complained of severe anxiety, particularly, female students complained of particular physical indications due to the psychological impact of the pandemic like anxiety and stress etc (Wang et al., 2020). The declaration of pandemic has increased the negative emotions e.g., depression, indignation and anxiety and more sensitivity to social risk (Li, Wang, Xue, Zhao, & Zhu, 2020). Those who are more close to this situation like families of infectious & caregivers are vulnerable in regard of psychological impact (Tan et al., 2020).

Fear, anxiety and situation like panic disorder disrupt normal routine practices. Educational activities are strongly influenced by the psychological effects e.g., anxiety, depression, fear of death, and panic disorder. Russell and Topham (2012) stated that social anxiety impacts on learning and well-being. There is a significant negative relationship between social anxiety and academic performance (Brook & Willoughby, 2015). Due to anxiety, students miss a lot of learning opportunities as they cannot attend classes in physical settings. There remains a weak psychological attachment also with institutions. Academic information remains **Results of Grid**

inaccessible due to their extra concerns regarding pandemic which is genuine and real. Concern about academic information can be inferred from excessive attention to their fear (Topham & Russell, 2012).

Methodology

present study investigated the The psychological impacts due to emerged COVID-19 pandemic on activities of academic researchers by using repertory grid analysis technique. It was hypothesized that COVID-19 had significant psychological impacts e.g., obsessive panic, behavior, anxiety, paranoia, hoarding, depression and fear of being infectious. A repertory grid was administered to PhD Education scholars of public sector universities of Punjab. There were 20 respondents who took part in the study and they were selected through snow ball sampling. The respondents were contacted via social media Application (Whatsapp) and responses were received. Data analysis was done by using ideographic analysis software version 2.4. Repertory grid analysis is based on George Kelly's Psychological Theory of Personal The interpretations Constructs. of individuals are called constructs (Coshall, 2000). Kelly argued that interpretations of individuals form their constructs that are used to appraise the phenomenon. Each construct is bipolar in nature and has two poles which are associated with each other (Gains, 1994).

Attention	defici	t					
	Any	kiety					
•	•	Dep	oress	ion			
	•		Ch	anges	s in m	lood	
		•		Err	atic tl	hinkiı	ing
	•				Imp	oulsiv	ive actions
					•	Ang	nger
	•	•	•	•			Fear

					•	•	Feel	ing of l	oneline	ess	
	•	•		•	•			Sadnes	SS		
	•	•		•		•		Feel	ings of	helple	ssness
	•		•		•		•	•			Panic
Respondent 1 4.00	1.00	2.00	3.00	4.00	1.00	3.00	4.00	2.00	2.00	3.00	3.00
Respondent 2 4.00	2.00	3.00	4.00	4.00	3.00	2.00	4.00	2.00	4.00	0.00	4.00
Respondent 3 5.00	1.00	0.00	4.00	3.00	4.00	5.00	3.00	5.00	2.00	3.00	4.00
Respondent 4 1.00	0.00	3.00	1.00	3.00	2.00	2.00	4.00	5.00	4.00	2.00	3.00
Respondent 5 4.00	3.00	3.00	2.00	3.00	3.00	4.00	2.00	3.00	3.00	3.00	2.00
Respondent 6 4.00	0.00	4.00	2.00	4.00	4.00	2.00	1.00	2.00	3.00	3.00	2.00
Respondent 7 2.00	2.00	3.00	4.00	1.00	2.00	0.00	1.00	2.00	4.00	4.00	4.00
Respondent 8 0.00	1.00	2.00	3.00	2.00	3.00	4.00	2.00	3.00	4.00	5.00	2.00
Respondent 9 4.00	2.00	3.00	2.00	4.00	3.00	3.00	4.00	5.00	2.00	4.00	2.00
Respondent 10 4.00	2.00	3.00	4.00	1.00	2.00	3.00	2.00	3.00	3.00	3.00	4.00
Respondent 11 2.00	1.00	2.00	3.00	4.00	2.00	3.00	3.00	5.00	2.00	3.00	4.00
Respondent 12 5.00	2.00	3.00	0.00	4.00	1.00	3.00	2.00	3.00	2.00	2.00	3.00
Respondent 13 2.00	2.00	3.00	3.00	2.00	3.00	4.00	4.00	5.00	2.00	3.00	5.00
Respondent 14 2.00	2.00	4.00	2.00	3.00	2.00	2.00	3.00	5.00	2.00	3.00	4.00
Respondent 15 4.00	3.00	1.00	3.00	4.00	2.00	4.00	2.00	2.00	4.00	5.00	2.00
Respondent 16 3.00	2.00	3.00	2.00	2.00	3.00	2.00	2.00	2.00	4.00	2.00	4.00
Respondent 17 5.00	2.00	3.00	4.00	2.00	2.00	4.00	4.00	5.00	2.00	3.00	2.00
Respondent 18 2.00	2.00	0.00	5.00	2.00	1.00	4.00	0.00	4.00	4.00	2.00	3.00
Respondent 19 5.00	2.00	1.00	3.00	3.00	2.00	2.00	4.00	5.00	2.00	4.00	2.00
Respondent 20 2.00	2.00	0.00	0.00	2.00	3.00	2.00	2.00	5.00	3.00	2.00	3.00

Descriptive Statistics for Elements

		Mean							
		M	edian						
			Mod	le					
				Numb	er of M	odes			
				5	Standard	l Devia	tion		
					Su	m of So	quares		
						% T	otal Sum	of Squ	ares
							Skewne	ess	
							K	urtosis	
								Min	imum
								Max	kimum
Attention deficit	20.00	1.70	2.00	2.00	1.00	0.80	12.20	4.06	-1.44
0.58 0.00 3.00									
Anxiety	20.00	2.30	3.00	3.00	1.00	1.26	30.20	10.05	-1.58
-0.43 0.00 4.00									
Depression	20.00	2.70	3.00	3.00	1.00	1.34	34.20	11.38	-1.07
-0.01 0.00 5.00									
Changes in mood	20.00	2.85	3.00	4.00	1.00	1.04	20.55	6.84	-0.58
-1.15 1.00 4.00									
Erratic thinking	20.00	2.40	2.00	2.00	1.00	0.88	14.80	4.92	0.16
-0.48 1.00 4.00									
Impulsive actions	20.00	2.90	3.00	2.00	1.00	1.17	25.80	8.58	-0.88
0.52 0.00 5.00									
Anger	20.00	2.65	2.50	4.00	2.00	1.23	28.55	9.50	-0.75
-0.71 0.00 4.00									
Fear	20.00	3.65	3.50	5.00	1.00	1.35	34.55	11.49	-0.27
-1.91 2.00 5.00									
Feeling of loneliness	20.00	2.90	3.00	2.00	1.00	0.91	15.80	5.26	0.42
-1.87 2.00 4.00									
Sadness	20.00	2.95	3.00	3.00	1.00	1.15	24.95	8.30	-0.70
1.45 0.00 5.00									
Feelings of helplessnes	ss 20.00	3.10	3.00	4.00	2.00	0.97	17.80	5.92	0.33
-1.25 2.00 5.00									
Panic	20.00	3.20	4.00	4.00	1.00	1.47	41.20	13.71	-0.96
-0.69 0.00 5.00									

Results mean value (2.77) indicated that most of respondents were facing sort of psychological symptoms and pandemic has significantly affected their psychological state. There was more severity in some psychological elements e.g., depression (m-2.70), change in mood (m-2.85), impulsive action (m-2.95), anger (2.65), fear (m-3.65), feeling of loneliness (m2.90), sadness (m-2.95), helplessness (m-3.10) and panic (m3.20). The value of SD (1.22) indicating high variation in the data. It's indicating that the level of severity of symptoms may vary from individual to individual. The skewed value (-0.87) is the indication of moderately negatively skewed data.

	SS	df	MS	F	
Constructs	19.71	19	1.04	0.78	
Elements	54.15	11	4.92	3.68	
Residual	279.44	209	1.34		
Total	353.30	239			
	• .				

ANOVA Source Table and Consistency Indices

Construct Consistency: 0.73 Element Consistency: -0.29

The table is indicating the f value for elements (3.68) is proving the null hypothesis true that there is significant psychological impact of pandemic out break on academic researchers & scholars. The results of study proved that there is significant psychological impact on researchers doing researcher activities.



Discussion

This repertory grid analysis proved that there is significant psychological impact of COVID-19 on mental health of academic researchers. Other studies have also proved that pandemic has negatively affected mental health of individual. A study indicated that compared to those who were not present (37%), those who were present (47%) reported that the negative mental health effects of corona virus-related concerns or stress were significantly higher. The negative mental health effects caused bv social segregation are particularly pronounced in older and adolescent families, as these groups are already at risk of developing depression or thoughts of suicide (Panchal et al., 2020). Due to pandemic break out individuals were advised to stay at home while terminating running activates. The educational institutions were also shut down to stop the spread. This lead to home confinement and prolongation of school closures and imprisonment of the family during the outbreak of illness can adversely affect children's physical and mental health (Li et al., 2020). Negative psychological impacts negatively affect learning and learning environment. The class is influenced by related thinking disorders and excessive self-attention and physical effects, such as blushing and stuttering. These beliefs are widely trusted research shows that memory performance and attention to task content reduce highly threatening conditions for patients with a social anxiety disorder (Russell, & Topham, 2012).

Conclusion

Study concluded that pandemic (COVID-19) has significantly affected psychological academic researchers. state of The academic researchers are facing psychological problems e.g., fear of being infectious, depression, rapid change in mood variations, impulsive actions, feeling of anger, feeling loneliness being in home confinement, waves of sadness, feeling of helplessness and panic. The severity of symptoms is different from person to person. Many research studies on pandemic and its effects on mental health of people have been conducted. Almost emerging

research has been assessing that implications of pandemic on mental health has prevalence from moderate to high depression, anxiety and other relevant indications among the general public (Wang et al., 2020).

Suggestions

There are several techniques that adopt to minimize the psychological impacts of COVOD-19 e.g., regular sleep, focus on personal hygiene, regular and healthy meals, exercise, spend time in activities related to personal choices, less focus on news feed, consume less screen time, help others and do have positive thinking.

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