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Quality of Life during COVID-19 Pandemic in a Romanian Sample

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Abstract

Objectives: The aim of this study was to analyze the factors related to quality of life in the context of COVID-19 pandemic in Romania.

Research Approach: cross-sectional study.

Sample/Participants: The study group consisted in 504 people aged 18 to 65, M = 42.12, SD = 12.36. Full-time or part-time employed in Romania.

Method: The study was conducted using the following instruments: WHOQOL-BREF, Field Trial Version, General Self-Efficacy Scale (GSE), and Quantitative Job Insecurity Scale. The data were collected online through Google Forms, including socio-demographic information.

Findings/Conclusions/Interpretation: The results obtained through hierarchical regression analysis suggest that gender (male), monthly income (higher), but not education level (higher) are positive predictors of quality of life. Self-efficacy, as an inner individual resource, is positively associated with quality of life, but job insecurity is negatively and stronger associated with quality of life, above and beyond gender, monthly income, and self-efficacy.

Implications for Practice: Our conclusions can help develop appropriate career plans for certain groups of employees. The risk of job loss is high, so employees must be supported to train their self-efficacy and build new career plans, in different fields of activity, where their chances of success may be higher, in accordance with the current requirements of labor market. By achieving job security and an acceptable income, the perception of quality of life is likely to increase.

Keywords: Quality of Life; Self-Efficacy; Job Insecurity; Income; COVID-19

Introduction

People's perception of their quality of life changes dramatically when faced with crisis situations. The COVID-19 pandemic is a globally propagated crisis, and its effects are felt in all states of the world [1]. The COVID-19 pandemic has brought major changes in all areas of life, with direct and indirect psychological and social consequences that affect the person's perception of their own life [2]. Beyond the real risk of pandemic, such as contamination, illness, death or the general context in which the states' authorities have instituted numerous restrictions with negative effects on the

quality of life of the population, there are inherently economic and social effects [3]. In the context of critical situations, such as pandemics, wars or natural disasters, the quality of life can be perceived as lower due to fear, worry and illness, but also due to the limitation of everyday activities [4,5].

One of the consequences of the economic downturn caused by the COVID-19 pandemic was the restructuring of jobs. This phenomenon usually leads to an increase in the uncertainty of employees regarding their workplace and implicitly to a decrease in the quality of life [6,7]. However, not everyone is equally impacted by crisis situations, and there are individuals who manage to successfully cope with most of the problems they face. One of the important factors that can be a positive predictor of quality of life, regardless of the circumstances, is self-efficacy. It is assumed that self-efficacy influences the adaptation of the individuals and the changes they made [8].

In the present study, we aim to analyze the relationship between a series of socio-demographic variables, self-efficacy (as an inner resource), job insecurity and quality of life. This research adopts the COR theory which states that people have the basic motivation to preserve, protect, and create valued resources [9]. When an individual faces job insecurity, there is a loss of inner resources. If these inner resources are not replaced immediately, or the replacement supply is less than that which is lost, a secondary loss of inner resources can occur [10]. If the individuals are unable to provide adequate resources or none at all, they will not have enough inner resources to adjust their behaviors and attitudes [11], leading to negative perceptions, outcomes and behaviors. Thus, job insecurity can be a significant negative predictor of quality of life, above self-efficacy (considered an inner resource).

Aspects of the COVID-19 Pandemic in Romania

The socio-economic changes produced by the COVID-19 pandemic in Romania propagated later, namely in the second half of 2020, recording an economic decline of 3.9%, after 2019 had recorded the highest economic growth in recent years. Industry was one of the most affected domains in 2020, against the background of reduced external demand, the added value of this sector decreasing by 9.1%. Also, services were strongly impacted by the restrictive measures, certain categories of services being closed or limited. The most affected domain was that of shows, cultural and recreational activities, followed by the domain of trade, transport and storage, hotels and restaurants, together being responsible for a real decrease in GDP of 1.7 percentage points, approximately 44% of the reduction in GDP [12]. Under these conditions, in 2020, employment decreased by 1.8%, while the number of employees in the economy (77.7% of the employed population) decreased by 1.0%. The number of employees decreased by 5.3% for employees in industry, by 3.0% for employees in agriculture, the only field that registered an increase was that of construction [12]. All these economic aspects can lead to a decrease in the quality of life, with numerous studies showing that insecurity and uncertainty negatively impact most plans of human existence [13].

Quality of Life

Quality of life generally refers to individuals' functional capacities, living conditions, social interactions, employment, life style and health perception. Quality of life represents the overall general well-being, consisting of objective descriptors and subjective evaluations of physical, material, social, and emotional well-being plus levels of personal development and purposeful activity, all of which are considered by a set of personal values [14]. The World Health Organization conceptualized quality of life as the individual's perception of his position in life, in the cultural context in which he lives and in relation to his goals, expectations, standards and concerns [15].

The literature mentions numerous socio-demographic factors that can affect the quality of life, especially in co-relation with the labor market. Although in the period 2000-2019 the differences between men and women faded noticeably in Western countries, this gap has widened in four European states: Hungary, Poland, Romania, and Sweden. The most dramatic difference is in Romania, driven by an increase in men's employment and a decrease in women's employment. A more severe impact on women can be seen in the slower recovery of women's employment at the end of 2020 [16]. Also, in the EU, women register lower levels of life satisfaction, having a higher risk of depression (25%) compared to men (19%), a situation aggravated by the COVID-19 pandemic, the risk of depression in women being 54 %, and in men 46% [17]). Another cause of gender differences in quality of life is that women in EU are more financially fragile. The pandemic mainly affected the services sectors with a high level of social contact, including those dominated by women and where the average pay levels are lower [18].

Another factor that can have negative effects on the quality of life is monthly income. The World Bank has estimated that 71 to 100 million people are being pushed into poverty due to the COVID-19 pandemic [19]. The COVID-19 pandemic has crippled the economy and heightened the financial strain among populations. A significant number of people suffered from financial loss due to job dismissal and pay cuts [20]. Financial issues are important stressors that can lead to low perception of personal life [21]. Thus, a lower

income may have consequences for many aspects of life, affecting individuals' quality of life in society.

While income is naturally viewed as one of the factors that influences a person's well-being [22], many scholars have argued that education also plays an important role in influencing individual's life satisfaction and quality of life [23,24]. In a comprehensive review of the benefits of education, Oreopoulos and Salvanes [25] concluded that education was one of the most important predictors of one's health status, employability, and probability of being married, all well-known predictors of life satisfaction [26,27]. Taking into account the above, we can assume that gender (male), monthly income (high) and education level (high) are positive predictors of quality of life.

Self-Efficacy (as an inner resource) and Quality of Life

According to Bandura, self-efficacy means how individuals perceive their ability to cope with certain situations. Self-efficacy refers to individuals' internal appraisal of their ability to execute an action successfully in order to achieve a desired outcome [28]. Self-efficacy is concerned with an individual's beliefs about whether they can perform a particular behavior and is considered a dynamic and situation-specific characteristic [29]. Bandura's model of self-efficacy comprises three major constructs: magnitude (the level of difficulty assigned by an individual to the performance of a particular behavior), generality (the degree of positive relation between self-efficacy beliefs across contexts or time), and strength (an individual's level of confidence in the performance of a specific behavior) [28,29].

Individuals with a high self-efficacy will persevere with a behavior, even in the absence of a positive outcome. By contrast, individuals with a low self-efficacy may confine their confidence to behaviors that they perceive as easy to accomplish. An individual's self-efficacy beliefs are variable across different behaviors, contexts, and time. In this way, self-efficacy can influence an individual's choice of activity and setting, by limiting activities and restricting participation when a situation is perceived to exceed their coping skills [30]. For this reason, we assume that self-efficacy is an important individual inner resource and a positive predictor of high quality of life.

Job Insecurity and Quality of Life

In the context of the COVID-19 pandemic, in Romania, small and medium-sized companies continued their activity in conditions of limiting expenses, including those related to human resources, which led to the dismissal of a large number of people or to the reduction of the number of hours of work, with negative effects on the incomes of the population. Thus, the unemployment rate in Romania was 5.6% in 2021 compared to 3.6% in 2020 and 3.3% in 2019 [31]. Job insecurity refers to the perceived threat of job loss and concerns about job loss [32]. In other words, it constitutes an anticipatory perception that has as its starting point the fear regarding the future continuity of one's job in the short or long term. Job insecurity is characterized by the subjective experience, perception and response to the anticipated view of job loss and depends on perceived situational control, threat duration and volition. Low control, long duration and lower volition lead to increased employee distress, with detrimental effects on mental health and well-being [33,34]. It is thought that the concern for job insecurity will decrease with the high self-efficacy of the employees. Employees with high self-efficacy will reduce their perceptions of job insecurity, and on the other hand, the quality of their work and life will increase [35].

Job insecurity is a stressful phenomenon associated most of the time with affected mental health and quality of life [36,37]. The emergence of a pandemic can endanger the safety of the workplace by reducing the activity at the general economic level, by closing some companies or by reducing the actual working time. Income reduction is a determining component of job insecurity, and its causes can be found in the context of the COVID-19 pandemic. Income limitation can lead to decreased quality of life [38]. A series of meta-analyses have shown that job insecurity is associated with deteriorating mental health [39] and with decreasing well-being, life satisfaction, and quality of life [40]. Taking into account the above, we assume that although self-efficacy contributes to increasing the quality of life, being considered a valuable inner resource, job insecurity diminishes the perception of the quality of life through its negative effects on the well-being of employees.

Research Hypothesis

Based on the literature presented above, the following hypothesis was formulated:
H1. Job insecurity is a significant and negative predictor of quality of life, above and beyond gender, education level, monthly income, and self-efficacy.

Method

Participants and Procedure

The study group consisted in 504 people aged between 18 and 65, M = 42.12, SD = 12.36, of which 159 in the 18-34 age group (31.55%), 192 in the 35- 49 years (38.10%) and 153 in the 50-65 age group (30.35%), 241 men (47.82%) and

263 women (52.18%), 147 with secondary education level (29.17%) and 357 with higher education level (70.83%). Regarding the localities of residence, 148 come from Bucharest (29.37%), 125 from localities with a population between 100-199 thousand inhabitants (24.80%), and 231 come from localities with over 200 thousand inhabitants (45.83%). Of the total participants, 48 have a part-time job (9.5%), and 455 have a full-time job (90.5%), 116 declare that they have incomes below 1500 RON (23.02%), 272 declare that they have incomes between 1501 and 3000 RON (53.87%), and 115 declare that they have incomes over 3001 RON (23.11%) (1 EUR = 4.80 RON and 1 USD = 4.50 RON).

The data were collected online through a Google Form, between March and April 2020 immediately after the lockdown was imposed. The distribution of the questionnaires was carried out by email by ISRA Center, a market research company with a very large portfolio of clients, having access to a large part of the general population. The questionnaire was distributed to 600 email addresses, receiving correct and complete completion of only 504 (84%). The inclusion criteria of the participants were to be older than 18 years and to have a job.

In order to conduct the study, the approval of the Ethics Commission of the University of Bucharest was obtained. The first two sections of the online questionnaire included the brief description of the study, the informed consent form, and the personal data processing agreement. After marking them, the participants proceeded to complete the questionnaires. The completion process took about 15 minutes.

The study design is cross-sectional. For data organizing and hypothesis testing we used IBM SPSS 24 [41].

Instruments

Quality of life was measured with WHOQOL-BREF, Field Trial Version [15]. The instrument includes 26 items, of which the first two refer to individual overall perception of quality of life, and the rest of 24 items are grouped into four distinct domains (physical, psychological, social, and environmental quality of life). A five-point Likert scale was used, where 1-not at all/unsatisfied/never and 5-very much/satisfied/always. The scores on the subscales were obtained by calculating the arithmetic mean of the scores obtained on the items of each domain. In the present study we used the global score calculated by summing the mean scores for each domain. Examples of items: "Do you have enough energy for everyday life?", "How much do you enjoy life?" High scores indicate an increased level of quality of life perception. Self-efficacy was measured with General Self-Efficacy Scale (GSE) [42], translated into Romanian by Dimache and Şulea in 2019. The instrument includes 10 items, and the global score is obtained by adding up the scores of all 10 items. A four-point Likert scale was used, where 1-not at all true and 4-completely true. Scores can range from 10 to 40, with high scores indicating an increased level of self-efficacy. Examples of items: "If someone opposes me, I can find the means and ways to get what I want", When I am confronted with a problem, I can usually find several solutions".

Job insecurity was measured with the Quantitative Job Insecurity Scale [43], translated into Romanian by Fischmann and Şulea in 2019. The instrument includes four items, and the global score is obtained by summing them. A five-point Likert scale was used, where 1-totally disagree and 5-totally agree. Scores can range from 4 to 20, with high scores indicating increased levels of job insecurity. Examples of items: "Chances are, I will soon lose my job" and "I think I might lose my job in the near future".

Results

Descriptive Statistics

Mean scores, standard deviations, ranges, Cronbach Alpha coefficients, and Pearson correlations are presented in Table 1.

	M	SD	Range	α	Self-efficacy	Job Insecurity	Quality of Life
Self-efficacy	35.14	5.11	26	0.93	1		
Job Insecurity	7.22	4.71	16	0.97	-.56**	1	
Quality of Life	13.77	2	11	0.88	.16**	-.29**	1
**.p < .01.							

Table 1: Means, standard deviation, ranges, Cronbach Alpha coefficients, Pearson correlations.

Hypothesis Testing

H1. Job insecurity is a significant and negative predictor of quality of life, above and beyond gender, education level, monthly income, and self-efficacy. In order to test this hypothesis, we performed a hierarchical multiple regression analysis, with gender, education level and monthly income as predictors in the first step, self-efficacy in the second step, and job insecurity in the third step and quality of life as the dependent variable.

Quality of Life						
Variables	**Model 1**		**Model 2**		**Model 3**	
	B	β	**B**	β	**B**	B
Gender	-.50**	-0.13	-.49**	-0.12	-.57**	-0.14
Education level	-0.17	-0.04	-0.17	-0.04	-0.18	-0.04
Monthly income	.34**	0.13	.31**	0.12	0.2	0.08
Self-efficacy			.06**	0.15	-0.01	-0.01
Job Insecurity					-.12**	-0.29
R	0.19		0.24		0.34	
R^2	0.03		0.06		0.11	
F	5.94**		7.63**		12.74**	
ΔR^2			0.03		0.06	
ΔF			12.29**		31.34**	

Table 2: The hierarchical multiple regression predicting quality of life from gender, education level, monthly income, self-efficacy, and job insecurity. B=Non-standardized regression coefficient; β=Standardized coefficient; R2=coefficient of determination; ΔR2=R2 change; ΔF=F change; ** < .01.

At step 1 (Model 1) it is observed that the three socio-demographic variables are responsible for 3% of the quality of life variance; the regression equation is statistically significant, $F(3, 500) = 5.94$, $p < .01$. Of the three variables, only two are significantly associated with quality of life, namely gender, $\beta = -.13$, $p < .01$ and monthly income, $\beta = .13$, $p < .01$. Thus, both male gender and high monthly income are positively associated with quality of life. At step 2 (Model 2), after introducing self-efficacy into the regression equation, the intensity of the relationship between gender ($\beta = -.12$, $p < .01$) and monthly income ($\beta = .12$, $p < .01$) with quality of life decreases slightly, all predictors in the model being responsible for 6% of the quality of life variance, $F(4, 499) = 7.63$, $p < .01$, self-efficacy having an incremental contribution $\Delta R2 = .03$. Self-efficacy is significantly and positively associated with quality of life, $\beta = .15$, $p < .01$. At step 3 (Model 3), after introducing job insecurity into the regression equation, the association between gender and quality of life intensifies ($\beta = -.14$, $p < .01$), the association between monthly income and quality of life becomes statistically unsignificant ($\beta = .08$, $p > .05$), as well as the association between self-efficacy and quality of life ($\beta = -.01$, $p > .05$); all predictors in the model are responsible for 11% of the quality of life variance, $F(5 , 498) = 12.74$, $p < .01$, job insecurity having an incremental contribution $\Delta R2 = .05$. Job insecurity is significantly and negatively associated with quality of life, $\beta = -.29$, $p < .01$.

Discussion

The results obtained in this study show that the research hypothesis is largely supported by the analyzed data. Thus, gender (male) and monthly income (high) are positively associated with quality of life, but not education level (high). At the same time, self-efficacy is significantly and positively associated with quality of life, slightly mitigating the role of gender and monthly income. Finally, job insecurity, through its negative association with quality of life, nullifies the association between monthly income and self-efficacy with quality of life, proving to be a much stronger predictor than those in Model 1 and Model 2.

These results show that work-related problems have a significant impact on quality of life. In situations where individuals feel their job is at risk, concerns for quality of life activities diminish, with individuals investing less time and attention in other aspects of life. It is possible that when they feel job insecurity, people lose their self-efficacy beliefs, no longer trust their own abilities to overcome obstacles or can no longer use their problem-solving skills in everyday life. In the context of the COVID-19 pandemic, job insecurity has become a reality, so the physical and mental energy balance can be destabilized. At the same time, the perception of health can deteriorate. These have negative consequences on the quality of life because there is a change in priorities and a shift towards "survival". Job insecurity can have effects on physical and mental health because people will tend to worry especially about the financial problems they may face in the future, perhaps giving up actions aimed at maintaining health. Moreover, stressors adjacent to the risk of job loss may constitute etiological factors for a number of mental disorders and medical conditions [44,45]. Thus, in Romania, where the unemployment rate is already quite high and medical services barely meet the current needs of

the population, in the context of the COVID-19 pandemic, it is understandable that job insecurity affects the global perception of quality of life.

Job insecurity diminishes self-efficacy perhaps because it represents an external threat, which is not related to the individual's qualities, but to unpredictable and uncontrollable factors. This result is consistent with COR theory. Thus, employees who feel more acute job insecurity report poorer mental and physical health, display more negative work attitudes and behaviors with negative consequences on quality of life [46]. Similar results were obtained by Sarwar, Maqsood and Mujtaba [47] in a study in which they found that job insecurity due to COVID-19 decreased employees' well-being via financial stress. Job insecurity has been also associated with employees' health stress [48] or financial stress [49]. These results are consistent with previous literature in which specialists claim that job insecurity represents a major risk for employees and often lead to the deterioration of well-being [50] and with COR theory [51] which argues that the loss of cognitive and emotional resources due to stressors can lead to deterioration of well-being and life satisfaction.

Regarding gender aspects, it is possible that during the lockdown, women felt more pressure in terms of work-life balance. Among the factors possibly responsible for this aspect are working from home combined with family duties, taking over most of the tasks related to children, increased emotional sensitivity, the higher risk of job loss or reduced income. So it seems that COVID- 19 pandemic affects the quality of life more significantly in females than males. This is in agreement with other studies where higher stress levels were reported in women than in men in students in Turkey [52] and in Philippines [53], in teachers and students in Philippines and Chile [54-56], and in general population in Australia [57], Italy [58], and Brazil [59]. This can be explained by the fact that women play an important role in all aspects related to family responsibilities. Moreover, hormones and overthinking about social situations make women more emotional and stressed [60]. All these factors impacted females' quality of life more than males'.

Another important factor to our study is monthly income. Our results show the important role that financial stability and the material aspects of life play, especially money, which is the currency of exchange for the joy of living. In a 21st century Romania, having money is equated with being satisfied with your own life, and in the context of the COVID-19 pandemic, this reality becomes even more emphasized, as people probably feel more secure when they feel they have the means to meet their needs. It is possible that people with high incomes have the certainty that they can more easily solve possible health-related problems, they can have access to medical services in private clinics, and they are less dependent on public health services or transport. High incomes allow people to continue their lives as close to normal as possible, regardless of the general political, social or health context. Regarding personal monthly income, there are a limited number of studies to analyze the effect of income on quality of life during COVID-19 [61]. However, the research involving the relationships between income and quality of life showed that low income is related to poor quality of life [62,63]. Increased public concern about financial conditions and economic pressure could exacerbate the pandemic influence on quality of life [64].

The education level did not register significant associations with the quality of life, although most researchers believe that a high level of education contributes to a better perception of the quality of life [65-67]. It is possible that the level of education represents only a means to reach a certain social position and a certain status, which eventually will contribute to the increase of the quality of life. Thus, the level of education can have indirect effects on the quality of life, such as obtaining a better-paid and more valued job, understanding some contextual aspects related to protective measures against COVID-19 or other risk situations for health, compliance with the rules and norms of hygiene and protection, calling for specialized support when needed. The indirect effect of education level on quality of life was studied in Australian adults, showing that its role should be interpreted with great caution [68].

Conclusions

The COVID-19 pandemic has brought a lot of changes to people's lives. The quality of life is changing its coordinates, attention being mainly paid to maintaining health and a decent life. In adverse situations, people manage to prioritize their actions so as to conserve their resources. Financial aspects such as personal income represent an essential resource, but also a means of meeting basic needs. Complex situations call for complex measures. Thus, during the COVID-19 pandemic, but also during other critical life events, greater attention should be paid not only to maintaining health by protecting against illness, but also to maintaining an adequate mental balance for a high quality of life. In Romania, faced with an aging and ineffective public health system, the population must protect itself and keep its quality of life at acceptable levels. Women seem to be more affected than men, which require taking protective measures not only at the organizational level, but at the family and community level. Women themselves must try to balance their lives and balance their daily activities in ways that do not expose them to additional stress.

Self-efficacy as an internal resource can contribute to increasing the quality of life providing the individuals with the confidence that they can successfully face various problems and that they can overcome the obstacles they face. However, when the person is faced with the imminent loss of the job and therefore with the insecurity of a certain income, self-efficacy loses its meaning. Job insecurity exceeds the protective potential of self-efficacy, which means that the individual's efforts must be directed towards career reconfiguration or finding new sources of income.

Implications For Practice

The results obtained in this study can contribute to the development of protection programs addressed especially to women. These programs can be implemented at the community level and can include training for time management, emotional balancing, and harmonious combination of daily activities by eliminating those activities that are unnecessary or that can be postponed, by practicing relaxation techniques or by assigning tasks to the other members of the family. Within organizations, such programs can be implemented within employee protection policies and can be materialized in differentiated working schedules, combining work from home with work from the office, extending deadlines, etc.

In order to alleviate the effects of job insecurity, programs can be created to be distributed online or in person, and through which the population can learn to protect themselves. These protective measures can materialize in ways of maintaining a lifestyle as close as possible to the normal one, by not giving up daily habits even in the situation of working from home. In addition, people must learn to adapt to this new normal even by reconfiguring career plans by targeting fields that work profitably in crisis situations. Any event of the proportions of a pandemic brings major changes in societal life. In the present case, we are witnessing an expansion of the digitalization of all economic branches, which, on the one hand, blocks, but on the other hand, opens up new opportunities. In support of people with insufficient income or high job insecurity, professional training programs can be developed for fields that are still functioning well, such as the IT field or the construction field in Romania. Reconsidering the professional trajectory can be one of the most suitable solutions for the subsequent increase in the quality of life.

Limitations

A limitation of the present study is the collection of data that was carried out online, through self-report questionnaires, but also the time of data collection, namely at the beginning of the lockdown, when people were still confused about the COVID-19 pandemic and its dramatic consequences. However, the data obtained by us can constitute the baseline of further studies that could highlight the real effects of the COVID-19 pandemic on the quality of life. Another limitation of the study is that the four domains of quality of life, namely physical, mental, social and environmental, were not analyzed separately. Also, the scores from the simplified questionnaire measuring the quality of life were used, as they are not aligned with the 1-100 scores (although they were calculated and can be provided upon request if necessary).

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