How Students Make Sense of Their Reality During the Covid-19 Pandemic

Interpretative Phenomenological Analysis of UPEI Student's Experience During Covid-19

Lauren Kelly

Department of Psychology, University of Prince Edward Island

Dr. Colleen MacQuarrie

University of Prince Edward Island

University of Prince Edward Island

Department of Psychology

Certificate of Examination

Examining Board	Thesis Advisor

Yoshiyuki Takano, Ph.D.   Colleen MacQuarrie, Ph.D.

Oct 29, 2021

Chistopher Friesen, M.E.d   Date

Thesis by **LAUREN KELLY**

Entitled

"How Students Make Sense of Their Reality During the Covid-19 Pandemic"

AN INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS OF THE

EXPERIENCES OF UPEI STUDENTS DURING THE COVID-19 PANDEMIC

Abstract

Students attending post-secondary education during the Covid-19 pandemic experienced countless changes to their university lifestyle to ensure their community continued to stay in good health, free of Covid-19. These experiences shaped how they made sense of their reality during the pandemic. Existing research discussed the implications of past pandemics and the consequences for individuals' well-being. Plenty of studies suggested recommendations for government policies in the case of a future pandemic to ensure past struggles were limited in the case of future ones. This study aims to explore the experiences of UPEI students during the Covid-19 pandemic. Four UPEI students were asked about their experiences during Covid-19 regarding their academic, physical, and mental well-being. Participants were asked general questions to explore their personal experiences without paying specific attention to assumptions made by others about their experience. An interpretative phenomenological analysis was conducted from the four research discussions. The main finding was that students all see themselves as resilient people while undergoing the pandemic's stresses. Resilience in this study is defined as the ability to overcome an adverse event. They demonstrated the qualities of a resilient person by practicing healthy coping strategies during the quarantine and choosing to look for positives during a challenging time in their lives. The results explore the overarching theme of "I am a resilient person" through the following subthemes: Healthier habits gained from Covid-19, Effective coping strategies, Uncertainties of the Future, Assumptions and expectations, Experiential changes, Work-life experience, and Educational experience. This study has several similarities with the findings of previous studies on the topic of post-secondary students during Covid-19. However, this thesis provides perspective from a set of individuals

living in a relatively safe zone during the coronavirus because of its global context and the

island's culture.

Table of Contents

Acknowledgements

Pandemics are commonly known as disease outbreaks that become widespread caused by human-to-human infection. There have been multiple disease outbreaks documented in history, involving the Spanish Flu, Hong Kong flu, SARS, H7N9, H1N1, and Ebola; just to name a few. Past global pandemics prepare humanity for current and future pandemics. Researchers are currently using information from past global pandemics to limit the negative psychological, social, and cultural contexts linked to the current pandemic impacting human civilization. Coronavirus disease 2019 (Covid-19) is a disease that has spread worldwide, leading to an ongoing pandemic. Given this context, I chose to look into how past pandemics have impacted peoples' overall well-being, focusing on resilience to be able to later conduct research on student's experience with Covid-19.

When people think of resilience, other similar terms may come to mind, such as strength and good mental well-being, because people who are known as resilient have gone through events that most would find difficult to overcome (Wilson, 2020). Understandably, pandemics are considered important as a part of the resilience discussion. Resilience is about being prepared for the unexpected, keeping safe, and recovering from disturbances in an individual's day-to-day life (Wilson,2020). During disease outbreaks, humanity's resilience is being tested as individuals, communities, and countries try to see what can be done to improve resilience. For the remainder of this paper, there will be examples of past global pandemics and what restrictions were put in place to stop the spread of infection. Bearing these restrictions in mind, there will be examples of how the restrictions during Covid-19 impacted people individually, socially, and culturally.

There are plans put in place by the Government of Canada to minimize the negative impacts of the restrictions put in place, and to maximize someone's resiliency; when the country

is experiencing a pandemic (Psychosocial annex, 2017). Canada's Public Health Services

explains what precisely the plan entails within the psychosocial planning principles. The

guidelines for planning and managing these principles involve effort in involving a

representative of those who experience dimensions of vulnerability (e.g. impaired mobility,

impaired cognitive ability, etc.) or those who experience barriers to accessing information or

resources (sex, age, language, poverty, geography). This plan also states programs should be

enhanced and support existing resources (e.g. social services, family support, counselling,

programming). Alongside this plan, an integrated approach should reach a broader range of

people to minimize the stigma associated with mental health services. The mentioned support

addresses different types of needs, including primary psychosocial care, treatment of mental

health problems, family and community support, education and stress management, and

specialized services for responders and the public. Public Health continuously reviews the plans

and services by assessing the direct and indirect consequences of the social and economic

impacts while updating plans as required to improve their services. They conclude their

psychosocial planning principles by mentioning that responsibility requires leadership, guidance,

and psychosocial support, and support must be linked and included in other public health and

medical emergency functions (Psychosocial annex, 2017). When addressed effectively, these

factors have the potential to positively impact the mental health and psychological safety of

individuals (Psychosocial annex, 2017).

　　　　These methods are also meant to be studied so professionals are able to create better

plans on how to promote strong resilience. The plan put in place by the Government of Canada is

titled the Canadian Pandemic Influenza Preparedness: Planning Guidance for the Health Sector

(2017). This psychosocial plan works to build, activate, and implement resilience. The focus of

psychosocial planning is to maximize personal and social resilience, occupational performance, and the likelihood of people's compliance with public health measures (Canada, 2021). Resilience is a learnable quality that can improve everyone's mental health, so implementing this plan is helpful for anyone experiencing the challenges the pandemic has caused for individuals. There is a range of difficulties that arise with psychosocial planning during global pandemics. People are trying to recover from the stress of the pandemic while also trying to live their life according to their routine (Smyton, 2020). Many individuals find it hard to cope with the uncertainty of what will happen to themselves or their loved ones regarding the infection while also taking the time to look after their own physical and mental health.

Some of the psychosocial implications for individuals and families during global pandemics can include: emotional and financial strain (job loss, worker shortages), increased mental health problems (anxiety, depression, grief), substance abuse, occupational issues (work overload, changes in routine), increased caregiving for loved ones, and increased family violence (Psychosocial annex, 2017). Statistics Canada compared the proportion of adults screened positive in spring 2021 compared with fall 2020 for major depressive disorder (19% vs. 15%) and generalized anxiety disorder (15% vs. 13%) (Government of Canada, 2021). In July the Labor Force survey showed that 27.8% of all unemployed had been continuously out of work for 27 weeks of more, compared with 15.6% in February 2020. This level of long-term unemployment is reflected in the profile of regular EI recipients (Government of Canada,2021). For some who experience mental health problems prior to the pandemic, pre-existing symptoms may have intensified during the pandemic (Government of Canada, 2021). The idea of psychosocial pandemic planning is to enhance personal and social resilience, occupational performance, and people's compliance with public health measures. This sort of response will

only work effectively if the general public has a sense of trust in health care and are willing to cooperate with given guidelines or restrictions. Research shows that transparency with the general public will increase trust and facilitate cooperation with the measures put in place for the pandemic (Psychosocial annex, 2017).

Since travel by plane is much more common in the last few decades, disease transmission happens much more rapidly. The SARS pandemic, which came from Southern China, was transmitted to more than 30 countries in 2003 (Wong & Leung, 2007). Officials encouraged the closure of airports, resulting in a damaged economy in those regions and therefore impacted people's occupations, economic status, and mental health.

For zoonotic diseases, there have been closures of food markets. This was done during the outbreaks of H5N1 AND H7N9 (Peiris et al., 2016). When these restrictions were put in place, there was a disruption of the food supply. People reported they could not find foods they would typically eat in their diet because markets and stores closed. This resulted in a change in people's diet. After the incidence of avian influenza, poultry products decreased in sales by more than 80% in the market of Jilin province in China, which affected farmers who made their living from selling these products (Peiris et al., 2016).

When global pandemics impact whether or not someone has a job to go to the next day, it can be hard to stay resilient. Many research teams said employers could play a crucial role in supporting their employees' mental health by empathizing with the increased anxiety workers experience when their job security feels threatened during the pandemic. Suppose employers can implement strategies such as allowing employees to continue to work from home or with reduced hours or income. In that case, it can help alleviate some of the financial anxieties people may have about losing their entire income. Employers can ease some stressors of uncertainty by

creating agency and instilling hope. By doing so, workers may become more resilient while facing global pandemics because they won't have the extra burden of job insecurity to try to overcome. During the pandemic, employers face various challenges including self, family, workers, customers, suppliers, business partners, government, and financial systems. Employers themselves are under a lot of pressure, but at the same time they have a crucial role to play in protecting their workers from the anxiety and pressure generated by the pandemic. The *Centre for Corporate Health*, created a detailed and concise document of what employers should be thinking of addressing during the Covid-19 pandemic to reduce psychosocial risks. Organization and communication of the businesses plan to all workers is important so they feel their safety is a top priority. Another important point made was to know your employers and whether any are at risk for social or mental health issues. Engage with psychological services to see if they can provide intervention strategies, wellness checks, or appointments to prevent small problems from becoming bigger. Employers should be making it a priority to check in and attend meetings to stay in communication with staff who work remotely or are in isolation due to being unwell.

School closure and public gatherings were restricted during the 1918 influenza epidemic and the Covid-19 pandemic. In the United States as an intervention to stop the outbreak. Similarly, more than 1,300 schools in 240 communities across the United States closed during the wave of the H1N1 pandemic (Navarro, Kohl, Cetron, & Markel, 2016). School closures should have many resources available for families because closures can result in various social issues. More specifically, families who come from underprivileged backgrounds are likely to be significantly influenced by this intervention. Family substance abuse, physical and verbal abuse are just a few of the negative social consequences associated with school closures. There are also difficulties for students who need extra support to be successful in their academics. When they

don't have the proper support, their mental health is threatened, and potentially their future

(Navarro, Kohl, Cetron, & Markel, 2016). In Canada, the H1N1 virus was the most damaging

pandemic of influenza which appeared during the First World War. In 1918-1919, the Spanish

flu killed approximately 50,000 Canadians. During this pandemic, there was reduced work,

municipal governments closed, and there were laws regarding quarantine and the wearing of

masks (Dickin et al., 2020).

For students who learn better in a school setting or those who have learning difficulties,

school closures may impact their mental health and their future if proper resources are not

implemented. Obviously, the history of the 1918 pandemic did not include much information

about the resources available for students with learning difficulties because the chances are that

those students would have either started working at a young age or would not have

strived to succeed in education so it is likely they may have dropped out. It was said that

homework sent home during this pandemic was minimal (Rich, 2020). Reading assignments

could have been sent home with students, but the likelihood of completing them because of

household chores was slim (Rich, 2020). In the current era, students would be expected to access

the internet to interact with their teacher or professor.

It's important to recognize when learning online, people could fall behind because of a

lack of motivation or a lack of structure. Students have been taught the standard structure of the

education system their whole life, so when expected to do their assignments and studies on what

is now their own time, challenges can be created. For students with learning difficulties in this

generation, people may be set up with online tutors that the school board has access to or extra

time with their educational assistants to ensure they are keeping up to date with their workload.

Many secondary school students were placed back into the school building where they have

access to resources, adaptations, and accommodations in person; while many university students used online databases to continue their education. Post-secondary students who are struggling to keep up with online learning need to contact accessibility services with their university so they can be given the appropriate services for them to be successful. Having to stay in contact with services such as these can be difficult for students to have to constantly advocate for themselves.

Public sports, leisure activities, and church gatherings were also closed during past pandemics as well as Covid-19 because public gatherings increase the spread of infection rapidly. These restrictions can test individuals' resiliency because they have to overcome the burden of not taking part in activities they enjoy, practicing their spirituality or faith, doing their job in the way they usually would, and not seeing loved ones in times of need. These social restrictions were put in place to reduce many pandemics, for example, during the Ebola outbreak (Folayan & Brown, 2015). People mentioned feeling fear, distrust, and ignorance about Ebola, which only increased the spread. A common fear among the general public during the Covid-19 pandemic is the effectiveness and safety of the vaccines available. There was also a trend of distrust of immigrants and people who speak other languages, lack of openness to differences, and the belief that policies would restrict people's way of life. These thoughts and behaviors can be witnessed in other global pandemics as well. People feel like their rights are being violated when they don't have a full understanding of infection. During times like these, people must be respectful when they educate others on the correct measures that need to be taken to protect society, no matter the differences between them. It is crucial to take the extra step to educate others because even though people may be acting ignorant to the safety precautions put in place, they could be projecting their mental health problems that may not be addressed.

During the Covid-19 lockdown, quarantine, and isolation policies; there were regular protests to lift those measures. Many citizens protested government mandated lockdowns regardless of the number of Covid-19 cases. Many criticized the lack of transparency and sufficient consultation with researchers in the decision making process, protesting that it reflects lack of focus on scientific research. The uninformed public, disconnected from the present scientific evidence, can be manipulated by misinformation leading to political and health consequences.

Resilience can act as a protective factor for the mental health outcomes of global pandemics (Resilience, 2020). When people have useful coping abilities, they show more strength during these events. It is vital to bear in mind that a person does not have to shy away from becoming a more resilient person if they have not exhibited that quality before. As long as a person is willing to put in the effort to practice different coping strategies to overcome their abnormal thoughts or behaviors, they should see progress in their well-being (Resilience, 2020). Effective coping strategies that are known to be effective from previous outbreaks were keeping in contact with loved ones through technology, online apps that involve mindfulness and mediation, regular exercise, and a healthy diet, as well as sleep routine, which were all encouraged by public health (Preti et al., 2020). If these simple practices are implemented into someone's life, their perspective may be altered to think more resiliently. Instead of thinking about how difficult social restrictions can be on their mental health; they may think of how far society has come in creating new ways to connect with one another (Preti et al., 2020). A study researching the issues people find most concerning during the Covid-19 crisis and ways in which they cope with stress had graduate and professional students as participants to identify what coping strategies they commonly use and whether they endorse that strategy as an effective one.

The most common coping strategy was distraction (43%), even though only 15% endorsed

distraction as an effective coping strategy. 27% used behavioral activation (physical activity,

going outside, social activities, and routine) as a coping strategy, with 50% of participants

endorsing this strategy as effective. Interestingly enough, in regards to Covid-19 during

quarantine; only 9% of participants found social support as a common coping strategy, with 12%

viewing social support as an effective coping strategy (Wasil et al., 2021). One study had 1,495

adults living in Australia between April 3rd and May 3rd 2020 complete an online survey

measuring psychological distress. Their results recognized the advantages to positive reframing,

acceptance, and humor as coping strategies. Participants who used those strategies, experienced

better mental health than those who experienced self-blame, venting, behavioral disengagement,

and self-distraction (Gurvich et al., 2020).)

During closures, quarantine, and isolation periods, it is essential to educate people on

how to leave or stay safe in an abusive household. Educating people on how to stay safe while

being in quarantine with an abuser helps those who cannot leave their situation without being in

great danger. Strategies include encouraging citizens to look out for warning signs and keeping

in contact (via technology) with their neighbors to see how they are doing. Given a few of these

strategies, hopefully, resilience can be strengthened for victims. Giving proper education about

abusive relationships and the warning signs may increase a victim's knowledge of their

circumstance and give them more hope to recover from the trauma they endure (Coulthard et al.,

2020). On the other hand, there has yet to be research done directed towards the abusers

themselves during Covid-19 quarantine.

When communities take an active approach to work with others and on themselves, it is

hopeful that people will have a more prosperous and productive experience with future global

pandemics to come. However, racialization is a systemic problem that is made even more visible during pandemics. It is necessary to address the racism that seems to repeat itself, one pandemic after another. This makes it difficult for people who are racist to be resilient because they are too busy putting blame on others rather than working on their own mental health and empathizing with others. On the other hand, people who are trying to stay resilient from being the victim of racism are struggling even more. People who are inflicting this suffering need to be more educated on this topic because it makes victims of verbal abuse feel more alone than they already feel, given the social restrictions.

Cultural context is important because the setting, meaning, and language people use are continually being learned by those surrounding them. In many cases, populations such as ethnic minorities or immigrant populations have been blamed for various pandemics throughout history. This is known as "germ panic" (Stann-Missouri, 2020). Germ panic has been identified in the bubonic plague's cultural responses in the middle ages to how immigrants and poor were blamed for tuberculosis in the Victorian era (2009). Today, there is anti-Asian racism during the COVID-19 pandemic (*Confronting Anti-Asian Racism During COVID-19* 2020). People need to be aware of the stereotypes, discrimination, and prejudice they have towards people of different colors or religions. Those of minority groups may become resilient to these sorts of accusations set towards them. One study suggested resilience is an outcome of repeated exposure to an environment that presents threats to a human's personhood and safety and is thought to put the individual at risk of harm (Burack, Gurr, Stubbert, & Weva, 2019). The author explained that when a child is called resilient, people say that being resilient can adapt to behaviors to suit challenging environments (Burack, Gurr, Stubbert, & Weva, 2019). Therefore, resilience may protect minorities from the racism and discrimination they face in the future, but that does not

mean it did not hurt them before and does not still hurt them today. They have the strength to recover from the unnecessary and move forward from the hurtful things said to them. To promote resilience, people have to work together. There can only be so much work done at an individualistic level; there has to be some collectivistic improvement for people (mostly Westerners) to break down racist ideologies so people can move forward and embrace their differences to support one another during crises such as global pandemics (Burack, Gurr, Stubbert, & Weva, 2019). Nonetheless, the best response is to address and change the systemic violence rather than trying to teach people how to cope with violence.

Obviously, resilience is not normally thought of as a negative trait. However, resilience can be considered negative when taking into consideration how people who illustrate clear characteristics of resilience, have faced many hardships or challenges. The author of this article explained that when we call a child resilient, we are in one way saying that being resilient is being capable of adapting to behaviors to suit challenging environments. This paper focuses on resilience positively when facing traumatic situations, but it is important to note that sometimes what looks like resiliency is someone who has become used to adapting to high stress environments and may feel helpless in changing the situation. This can be noticed among Indigenous youth in Canada. The term needs to become more individualized and culture specific to be meaningful for groups. The author concluded in this article saying resilience is how it unfolds as a protective factor at the individual level (Lovett, 2017).

However, the result of safety measures on humanity's social context is not all negative. During past pandemics, responses have been shown to improve society's altruism, volunteerism, and an enhanced sense of social cohesion (Psychological annex, 2017). There are two different outcomes from social restrictions and regulation; division or unification. When people feel

scared, vulnerable, and threatened, it is important to strengthen relationships with others to have the social support necessary to improve their resilience when they cannot predict the outcome. Despite the challenges faced during this pandemic, technology was to many people's benefit the past year as social support was possible through various social networks. During the Bubonic plague, people lived in sewers and barricading themselves from society, not to mention maybe were residing with the burdened thoughts that God sent the Bubonic plague to earth to punish them for their sins (Black death, 2010). Today, people working as government officials, health care professionals, educators, and employers need to recognize individuals' anxieties. Therefore, by implementing the psychosocial planning that was described earlier, it is helpful in alleviating concerns to help support a resilient society (Psychosocial annex, 2017).

It is important to review past traumas people have experienced and what effectively promotes good mental well-being and what is not sufficient. Looking back on collectivistic and individualistic traumatic events, we can identify the SARS outbreak, Hurricane Katrina, the 1972 mining disaster, and The World Trade Center attacks. Social support and community played a critical role in mental health recovery. Social support is a strong predictor of resilience after traumatic events and posttraumatic growth is also a consequence of social support after subjection to trauma (Wong, 2007). The term posttraumatic growth is a process that occurs when an individual who has suffered a traumatic experience finds a way to turn whatever happened to them into something good (Wong, 2007). Considering this information on past disasters and what was essential for individual's mental health, it is important to emphasize on social support and community ties as possible prevention of treatment for people who have experienced Covid-19 either directly. Interestingly enough, loneliness and neighborhood perception seems to influence post pandemic mental health, however it seems to also enhance social cohesion. It was

noted that individuals may attach more with their primary support systems in times of crisis (Lau et al., 2005). This research went on to reveal there was a significant 4-year reduction in divorce rates across New York when the World Trade Center Attack happened which insinuates that married couples postponed or waived planned divorces (Lau et al., 2005). The evidence that the Covid-19 pandemic might lead to an uptick in divorce rates came early this year. In the United States, it was found that divorce rates increased by 34% by April of 2020 and the researchers predict a continuation of this trend (Brownell, 2021). During the current Covid-19 pandemic, there is access to technology to the general public who have availability to internet and technological devices to help prevent loneliness and isolation that could result in mental health difficulties. There are also various social networks that promote resilience to stress and trauma which is very important in utilizing to strengthen one's mental health. Through social networks, individuals may be able to socialize while still socially distancing themselves from each other. By using technology in this way, they may prevent themselves from feeling isolated and alone. Researchers have found that self-care and techniques to promote well-being is key for strengthening overall well-being; but with social distancing regulations, most will need to find resources online rather than in person. This challenges people to change their current ways of coping.

Looking into how isolation and loneliness resulting from physical restrictions will affect an individual's mental well-being is critical during this pandemic (Saltzman, Hansel, & Bordnick, 2020). Researchers need to understand the bigger picture in regards to mental health and Covid-19 to make sure resources are accessible. Social support is noticed to be one of the most protective roles in mental health recovery, which is why it is so important to be able to help people connect during isolation. This can be possible through the use of targeted communication

and outreach to help normalize mental health response post-disaster, and provides psychoeducation as well. The authors of this research found that websites created from nonprofit sources such as the Tulane University School of Social Work (research was conducted at this university) self-care activities and the Centers for Disease Control and Prevention coping activities can help add on to psychological first aid as well as act as a free and accessible Covid-19 specific resource. Skills for psychological recovery can also strengthen coping skills and reinforce good mental health by expanding and focusing on social media for what may be for a prolonged isolation or future that may need periodic social distancing (Saltzman, Hansel, & Bordnick, 2020).

The coronavirus' effect on individuals' mental health is concerning to many health care professionals worldwide (Preti et al., 2020). Given the history of past epidemics and pandemics, hopefully we can learn from humanity's mistakes and become more resilient as this pandemic continues. Looking at research that actually compares past pandemics and epidemics to the coronavirus can be helpful in identifying what researchers are expecting to unfold in societies during the coronavirus Pandemic.

The Covid-19 pandemic has made an impact on individuals worldwide, physically and mentally. There has been extensive research on the effects of the coronavirus and how this virus is carried. Still, there has been little research on how the restrictions have affected individuals' mental health. As mentioned, global pandemics are not new to citizens (H1N1 in 2009); however, lockdown, quarantine, self-isolation, and mandatory masks were not expected in many people's future. The implications of these restrictions on individuals' mental health are worth studying since mental health can impact numerous aspects of one's life. In this period, the twelve

determinants of health came into play: (1) income and social status, (2) employment and working conditions, (3) education and literacy, (4) childhood experiences, (5) physical environment, (6) social supports and coping skills, (7) healthy behaviors, (8) access to health services, (9) biology and genetic endowment, (10) gender, (11) culture, and (12) race/racism. These factors are interconnected and played a part in how many people were affected by this pandemic (Singu et al., 2020). Many children depended on their schooling to provide an adequate internet connection, breakfast programs, and social support to fulfill their educational experience. Some children come from low-income families, some children come from abusive families, and some children are neglected and depend on their school to be where they feel the most supported. For many people, going to school and going to work was a part of their routine. They woke up every morning, knowing they would have specific tasks expected to be finished by the end of the day. These experiences give people a sense of accomplishment and appreciation for what they have completed, which helps them feel their life has meaning Singu et al., 2020). With quarantine sending people back to their homes to work or to be laid off, for the time being, people do not know what to do with all the extra time they have to themselves, leaving them rightfully confused as to what they are meant to fulfill their outlook on life.

The likelihood of becoming physically impacted by Covid-19 was ranked lower than the issues connected to social and psychological responses to the pandemic. A MQ: Transforming Mental Health (an international mental health research charity) survey was conducted on individuals who have pre-existing mental health issues (Holmes et al., 2020). In the survey participants showed general fear of increased anxiety, depression, and social isolation. Their main concern, however, was that their existing mental health issues would worsen because of difficulty accessing mental health services as well as being able to have the physical social

support of family and friends (Holmes et al., 2020). There is a call for action from the

multidisciplinary mental health science research to be central in finding the international

response to the Covid-19 pandemic. Interventions to address the psychological, social, and

neuroscientific factors of Covid-19. This indicated psychological interventions to enhance

wellbeing and to try to reduce mental health risks. In trying to promote this intervention, there

will need to be integration of all disciplines, incorporating industry, health, and social care

(Holmes et al., 2020). It is important to mention that when going through these times that mental

health research should be capitalized on because it will proceed to serve society and will satisfy

mental and physical health in the long term.

Great psychological risks to the public are said to be related to the uncertain incubation

period of the coronavirus and the fact that many people with the virus are asymptomatic causing

panic and fear among the general population. The second risk factor is the government's

downplaying of the pandemic's seriousness because this created distrust in the government's

competency. The next risk factor involves the social distancing and quarantine measure put in

place which has negative psychosocial effects on many. The fourth and last risk factor mentioned

was the shortage of resources available (Dong & Bouey, 2020). These risks to the public cause

unnecessary stress and anxiety and need to be addressed in order to have trust in the

government's decisions.

Resiliency is the ability to overcome difficult times in an individual's life. The

coronavirus presented society with a range of norms in everyone's day to day lifestyle to be

altered significantly. Many people had to resort to different coping mechanisms to manage the

difficulties that arose as a result of Covid-19. Resilient people would try to cope with these

changes positively, by acknowledging what is affecting their health, but also knowing they will

be able to overcome the stress they are (or are not) in. People who may not be as resilient might use unhealthy coping mechanisms to help them get through difficult times in their life. They may heighten their anxiety levels, have an irregular sleep schedule, unhealthy diet, or resort to drugs or alcohol to keep their minds off the difficulties they face in the current moment. Of course, many people will negatively impact their mental health because of inadequate coping mechanisms.

Although there is quite a bit of research done to study the effects coronavirus has on an individual's physical health, there is little peer-reviewed research on coronavirus's mental health impacts. The studies that have been published often reference psychological flexibility, which is the cornerstone of psychological health and resiliency, protecting people from poorer mental health outcomes. Psychological flexibility is known as behaving with one's values continuously, even when emotional and mental troubles arise (Landi, Pakenham, Boccolini, Grandi, & Tossani, 2020). Their findings usually found that designing interventions that cultivate resilience in the context of health-related adversities helps promote positive mental health outcomes. People with higher psychological flexibility were predicted to better mental health outcomes after school shootings, devastating storms, and global pandemics. In contrast, people with lower psychological flexibility have trauma and mental health issues after the same events. There are specific measures the government can take to increase the number of people who can practice psychological flexibility, which included acceptance commitment therapy; where the focus is on six processes to increase psychological flexibility: acceptance, cognitive delusion, present moment awareness, open and responsive awareness of the present, self-as-context, values, and committed action. This research supported the promotion of psychological flexibility

to enhance resiliency. Psychological flexibility involves an open, willing, nonjudgmental stance in relation to the full range of one's internal experiences, including trauma-related internal experiences such as intrusive memories, emotional distress, and physiological hyperarousal.

To promote resiliency to people who may be struggling during times such as these, human service workers need to be prepared to be forward thinkers regarding the unknown future. The possibilities of many career paths being reinvented due to the regulations Covid-19 brought to the table are essential to consider. Laura Nissen (2020), a Doctor of Social Work, suggested people who work in the social work field ask themselves questions such as how their profession will challenge, engage, and improve social work; what new tools or ideas will be required; and what history of pandemics have taught us about generational change and what profound experiences and tolls pandemics take. These questions should encourage people working in mental health roles to think critically of new ways to engage in new kinds and levels of courage and creativity. By working together to better the social work community, Covid-19 creates discussion on how to protect and strengthen people's mental health while experiencing the uncertainties of the future.

There is much fear around the globe about what this virus entails. One study done in India used a five-point Likert scale based on fear of Covid-19. They found that demographic variables such as females, married people, lower educational status, and health care workers have greater fear towards Covid-19 (Doshi, Parupalli, Rao Sukhabogi, Surya Prasanna, & Vishnu Mahajan, 2020). These results are likely, considering females are known to be more prone to stress, depression, and anxiety, making them 1.29 times more likely to fear Covid-19 compared to males. India's study found that people who identified as married had a greater fear of Covid-19. The authors guessed this could be attributed to the increased sense of responsibility and

added concern to loved ones. Educational status influences one's likelihood of contracting

viruses and infections. People of lower academic levels do not always comprehend how the virus

is caused, prevented, and how easy this specific virus is to transmit. The Likert-scale

questionnaire found that the hygiene code of behavior guidelines enhanced fear among lower

educational status people. This is how educational communication and messages that are easy to

access are essential to implement interventions to prevent the spread of Covid-19. Hopefully,

more educational awareness will put people more at ease to understand that as long as people

play their role as citizens to socially distance, wash their hands, and wear a mask, they should not

fear the virus as much as they did before. Understandably, their findings confirmed that

healthcare workers significantly feared the infection compared to non-healthcare workers. It can

be assumed that health care workers fear Covid-19 because of their interaction with patients

every day who could be positive, having a better knowledge of the disease and its progression

and consequences (Doshi et al., 2020). This can help to pinpoint who mental health workers

should be creating interventions for. Of course, multiple other demographics should be looked at

that were not considered within this study, creating various groups of people to pay more

attention to during this pandemic.

There was a study where data was collected from Canada and the United States by using

an internet-based self-report survey delivered in English between March 21st and April 1st,

2020. According to the results of this study, it is expected that mental health needs will emerge

in the public when this pandemic passes (Taylor et al., 2020). Community support services can

help identify individuals who are at risk during and after this pandemic. Hopefully these services

are helpful in finding resources necessary for mental health interventions. This study found five

main symptoms that identify those facing stress and anxiety symptoms during Covid-19: (1)

Danger and contamination fears, (2) fears about economic consequences, (3) xenophobia, (4) compulsive checking and reassurance seeking, and (5) traumatic stress symptoms (Taylor et al., 2020). This scale can also help to determine which people will follow health care suggestions and protocols. From this study, the researchers anticipate that when the pandemic passes, there will be significant mental health needs for the general public. To the researcher's knowledge, this study was the first assessment of pandemic-related emotional responses that includes specific evaluation of xenophobia as a contributory factor in fear and avoidance. This is important to consider for public health officials to be able to address emotional and behavioral responses to pandemics. The role of xenophobic reactions, in conjunction with other emotional indicators such as those identified in the CSS (Covid stress scale). The other indicators were recognizing as Covid-19 danger and contamination, socioeconomic consequences, Covid-19 traumatic stress, and Covid-19 checking and reassurance seeking,

Similarly, there is much consideration in post-traumatic stress disorder research during the Covid-19 pandemic. In a letter to the editor, an individual mentioned how Covid-19 could present a psychological challenge to health care workers and those who experience the virus. They believe there is a correlation between this outbreak and the SARS outbreak. Since it is likely to lead to a secondary disaster due to stress and psychological stress even after the outbreak is over (Liang, X., Zhu, Y., & Fang, Y.,2020). This letter identified some possible strategies during this stressful period, such as psychological services and crisis interventions to reduce PTSD and to alleviate the acute stress response of individuals and patients, and reduce the incidence of PTSD to prevent immunosuppression. They suggested evidence-based medicine, neuroimaging, and psychological crisis intervention. Everything mentioned by this is what many

people with some psychological background knowledge would think it is common sense.

However, to take these sorts of measures, numerous assessments will need to be performed to

give access to evidence-based medication and neuroimaging to all the individuals poorly

impacted by Covid-19. By giving access to neuroimaging, individuals will be able to assess their

brain health if they believe they may be more susceptible to a mental health disorder like PTSD.

Neuroimaging can also help psychiatrists determine the kind of medication that best works for

the patient. Those with lower education-status have a higher risk of fear towards global

pandemic because they may not have access to adequate mental health care.

There are various approaches people have taken to cope with the consequences of Covid-

19. In a letter to the editor in Italy, an association for research and education in sleep expressed

their concerns for sleep disorders during Covid-19. This research facilitated a survey to

understand the effects (Asif et al., 1970). They found that people were going to bed one to two

hours later than they usually would before the pandemic. They were also taking longer to fall

asleep, seeing that an individual who would typically take 1 hour to fall asleep would now take

approximately 2.8 hours to fall asleep. Before Covid-19, one out of ten people complained of bad

dreams, whereas during the pandemic, four out of ten people complain of bad dreams. This type

of sleep impacts individuals' mental well-being. Getting enough well-rested sleep is vital for one

to have the energy to do activities throughout the day to stay physically and mentally healthy.

This pattern could worsen chronic insomnia or other sleep disorders if not given the proper

attention initially. The association who conducted these surveys suggested measures such as

awareness campaigns

held by health authorities as well as education on sleep hygiene and cognitive behavioral therapy

is thought to be a helpful intervention that can be carried out in person typically but would also

be able to be carried out with web-based tools as well to put safety measures in place during the pandemic (Asif et al., 1970).

Sleeping patterns were not the only harmful patterns individuals had to conquer during the global pandemic. Substance use was also a factor that changed since the coronavirus disease. Canadian adolescents who completed an online survey reported on their alcohol, cannabis and vaping use three weeks before and directly after social distancing practices were mandatory. Their results found no significant change for people with alcohol use disorder, but that alcohol and cannabis use increased. They hypothesized that this behavior reasoned that there were more unstructured time and fewer leisure activities, and school was asynchronous. The logic they used behind no increase in vape use or binge drinking was that many people were likely to spend more time with family and not as much time spent with peers who may binge drink together or share vaping materials. They found it essential to note that their study's solitary substance use increased Covid-19 fears and depressive symptomatology. Substance use, therefore, could be a coping mechanism to use among people with more severe mental health concerns (Dumas, Ellis, & Litt, 2020). Again, information must be put forward regarding the risks associated with increased drinking among individuals during social distancing measures. The risks associated with increased drinking alone or with parents are that when able to drink outside the home, there could be more risks associated with their drinking than before regarding physical, sexual, social, and mental health.

Decreased stress was a result of medical support, education, protection, isolation, limiting mobility, and reducing gatherings to stop the spread of the virus. The researchers found that the most important element was community resilience and antifragility during Covid-19 crisis periods (Dong & Bouey, 2020). Public relations and inventive communication is vital for

management during this time. The main idea was that when public relations implemented good

communication skills by not only providing the necessary supports; but advocating for their

employees as well. They suggested checking in on their employees, allowing extended break

times, and giving the option for in-person and online meetings when in-person gatherings are

permitted (Doug & Bouey, 2020).

This review summarizes the past impact pandemics had on society mentally, physically,

economically, and academically. This summary can provide essential information to understand

the meaning of resilience further. Past research has shown the benefits of staying resilient during

times of great stress. This research will be furthered by interviewing university students and

asking them about their experiences during the pandemic. This study aims to understand better

how university students perceive their realities during the first year of the Covid-19 pandemic

using an interpretative phenomenological analysis.

Of course, this research required a qualitative study. However, the next step was

to examine which paradigm would be best for answering the research question; which was to

study how students make sense of their reality during the Covid-19 pandemic. IPA seemed to fit

this research as it can be extremely useful when a researcher is concerned with complexity,

process, or novelty (Broki & Wearden, 2006). The researcher and her supervisor decided that

since the experience of Covid-19 could be experienced differently for each participant and that

everyone has their personal interpretations of how the pandemic has impacted their life, using an

IPA study would be the best choice as the researcher was not looking for a specific answer to

their research. The researcher wanted to be able to reflect upon their own preconceived notions

about the data, but try to suspend those notions in order to focus on the participants view of their

experience.

The relatively new qualitative methodology, Interpretative Phenomenological Analysis (IPA), was introduced by Jonathon Smith in 1996 (Blore, 2011). IPA can be described as an approach that offers a theoretical foundation and a detailed procedural guide. This analysis is considered as connected to hermeneutics and the theories of interpretation. The assumption in IPA is that individuals self-reflect. The participants self-reflect and try to form an understanding of this reflection. This is achieved by investigating the participant's experiences, learning, and perceptions. An important thing to note about this analysis is that IPA does not seek an objective knowledge of reality but a subjective understanding. The interpretative phenomenological analysis is complex because assessing a participant's knowledge is difficult when a researcher has their insights and subjectivity. Therefore, it is acknowledged that the participant's ability to express their thoughts and experiences impacts interpretations together with the researcher's analytic and reflective skills. The concentration is on the participant to focus on meaning-making (Blore, 2011).

Methods

Recruitment

The UPEI Research Ethics Board approved this study in January 2021. Recruitment efforts started the day after receiving approval. All participants were recruited within four weeks of receiving approval. Four participants were recruited for this study, all of which came from the Facebook poster.

Participants were undergraduate students who were drawn from a number of different sources. There was a poster posted on Facebook (Appendix B), where the researcher asked for anyone interested in the research topic to privately message her for more information (Appendix

C). Six participants came forward who were interested in taking part in the research. Four

participants followed through with the research discussion.

Materials

The researcher developed discussion questions to use during the research conversation,

which can be found in Appendix D. Interactions were made with the research supervisor during

the process to create the final set of questions. The purpose of these questions was to have the

participants engage in a research conversation about their experience, while also staying on track

with the research topic. The general areas the researcher found important to focus on was UPEI

student's physical and mental wellbeing during the Covid-19 quarantine. The researcher

designed the questions so that the participants could look at the questions from multiple

perspectives and respond in a way that visualized what they thought was most valuable to them.

The researcher created the research questions in this manner because she wanted to understand

UPEI students' experience during the Covid-19. If the researcher asked too direct of questions,

she could misinterpret or have participants answer in a way that fit into her own idea of their

experience.

The researcher also generated a demographics form (Appendix E). This form asked the

participants questions before the research discussion so the researcher could adjust questions if

she thought anything could come up in the discussion that may be too overwhelming or

triggering for participants. It was also used to have a better understanding of the specific

everyday privileges that the participants may or may not have (internet, work, education). These

questions were asked so the researcher would be able to understand what struggles the

participants may have or may not have faced during the Covid-19 pandemic while attending

school.

 Data Collection

Approaching the time when participants were going to have their research discussion with the researcher, she emailed participants an information letter (Appendix F), consent form (Appendix G), demographic form (Appendix E), along with a list of mental health resources (Appendix A). After participants were able to read and sign the attachments she forwarded to the participants, they were able to schedule a virtual research discussion with each participant.

Each virtual research discussion was held via Google Meet and varied between fifteen minutes to a little over an hour. The participants were asked to answer any of the questions the co-investigator had for them regarding the trials and tribulations faced during the Covid-19 pandemic. If they at any time felt uncomfortable at all, they were able to not answer or discontinue the interview. This meeting was audio recorded and transcribed with the participant's knowledge.

Transcription

The transcript was transcribed verbatim by the interviewer. The interviewer told the participants they could ask to see their transcript, but only one was interested in looking at the transcript to make sure their pronouns were used correctly. The transcript was sent and no adjustments were made by the participant.

In the transcript, participants were labelled "participant 1," "participant 2, " "participant 3, " and "participant 4;" in order from when the interviews were taken. The researcher was labelled as "researcher." Commas were used to illustrate short pauses, and periods were used to show a break in between sentences, ellipses were used to indicate when the participant would pause between sentences for a little longer, while "[pause]" was used when the participants stopped what they were saying and seemed to be stuck on what they were saying. Square

brackets were used for clarity in situations where the participant would use names of people or places which could possibly break confidentiality. Square brackets were also used in situations where the participant was unclear of what they were talking about by using words such as "it, they, that." The researcher would put in square brackets and explain what the "it, they, or that," the participant was referring to was so that it was more clear to the reader. Words that took away the meaning or purpose behind the participant's quote were deleted if deemed necessary.

Participants

There were four participants involved in this research. All participants identified as women. There was three cis gender women, and one transgender woman who uses the pronouns she/they. All of the participants were Caucasian. The age range was from 19-22, with the median age being 20.75 years old. All participants were students studying at the University of Prince Edward Island and experienced their post-secondary education switch from in-person classes to online classes as a result of Covid-19. Two of the participants lived within the city where the university is located, while two of the participants travelled 20-30 minutes away from the school. Two of the participants were drawing employment insurance while in school, one participant was working part-time, and one participant was unemployed. Three of the participants answered yes to if they were income sufficient and one participant answered no to whether they were income sufficient. In regards to internet connection, two participants reported good Wi-Fi and two reported having fair Wi-Fi connection.

Interpretative Phenomenological Analysis

During the course of the analysis phase, each transcript was coded individually before starting onto the next transcript. In each transcript, the researcher would first open codes and

then connect the codes to specific themes and subthemes. The following process was completed

for each of the four transcripts:

Each transcript from the research discussion was read thoroughly and notes were made in

the researchers research journal anytime an idea emerged that related to the participants'

transcripts. The transcript was read a second time to check for typos, but to also open code each

line of the transcript. From those codes, themes were illustrated, as well as subthemes. A figure

was created for each transcript that described the themes and subthemes that the researcher found

relevant to the specific transcript. Every now and then, these themes would be changed based on

a new perspective of where the participant was coming from or by understanding the quotations

of the participant actually described another theme more clearly. These themes were discussed

with the researcher's supervisor and the researcher during online Google Meets to gain more

insight and another perspective. These individual theme charts can be found in the Appendices H

through K.

As soon as the individual theme charts were created and revised, there was a meeting

with the researcher's supervisor to go over the master theme table to develop the master level

themes applicable to all participants across all transcripts. This was more theoretical and acted on

the superordinate themes into a comprehensible narrative. This process was the development

towards the general themes.

The final analysis showed an overarching theme ("I am a Resilient Person) with three

secondary themes (Healthier habits gained from Covid-19, Uncertainties of the future, and

Experiential changes) where two of the secondary themes each had one subtheme (Healthier

habits gained from Covid-19-Effective coping strategies and Uncertainties of the future-

Assumptions and Expectations) and the third secondary theme had two subthemes (Experiential

changes-Work life experience and Educational experience). The final master table is described in

detail in the results section. Every theme is described and is illustrated with quotes from the

participants' research discussion.

Results

Figure one represents the overarching, secondary, and sub-themes associated with participant's

personal experiences during the Covid-19 pandemic. Themes from the research discussion create

this overarching theme and will be completely detailed below. The overarching theme of 'I am a

resilient person' explains how participants understand the meaning of resilience. All participants

had very similar views of what the meaning was, which was that resilience is to overcome an

adverse event. The secondary themes showed areas of resilience in which reflected the

participants experience during the Covid-19 pandemic.

Figure 1
Student Experience During Covid-19
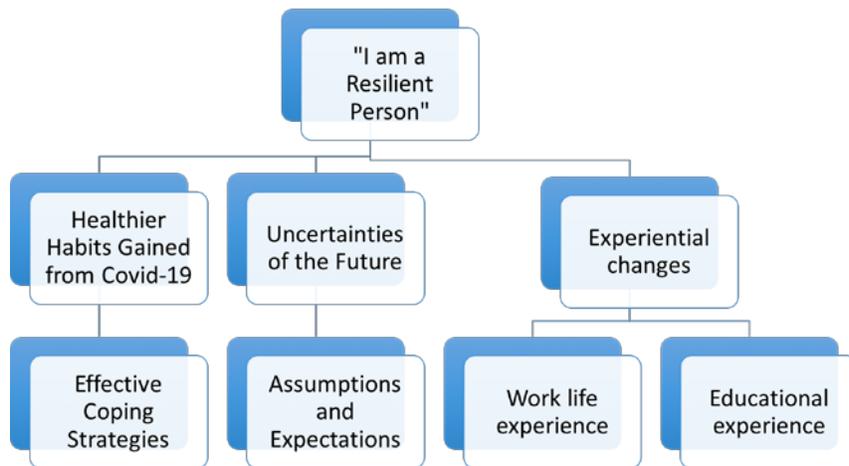
"I am a Resilient Person"

The overarching theme was created from the data after researching the discussions with the four participants, which was that the participants were all well aware of the meaning of resilience. They took time to give their own definition of resilience, which ultimately ended up describing it in very similar contexts in each discussion. The participants voiced their impression of the word resilience as someone who is able to overcome adverse challenges one may experience throughout life. They were able to define the value and meaning of the word resilient and identify themselves as already resilient, or capable of being resilient when faced with adversity.

> Participant one: [Pause] But I ultimately think, it's a very um personal kind of word [pause] not just for me, like engrained, but the sense of beyond adversity [pause] sticking through it kind of thing

Participant two: I think of someone that's been put, like, in a hard position but then worked through it, like worked through a hard time [pause] or worked through anything

Participant three: Um, resilience is the ability to bounce back from something from like a hard time or an adverse event and be able to come back stronger

Participant four: Oh wow [pause] I think a lot of things come to mind when I think of the term resilience [pause] in one bubble I am thinking of people who have been able to overcome really traumatic experiences, and used that trauma to become even stronger emotionally [pause] um but in another way, I think of someone being resilient by taking a boring or annoying everyday tasks and trying their best to turn them into something that doesn't interfere with their personal happiness

Participants not only were able to provide detailed descriptions of the term resilience, but were able to reflect on internal or external situations that they consider to be resilient. The theme in this case was that participants wanted to be able to explain the word deeper than just a basic definition. They not only wanted to answer the question of whether they thought they were resilient or not, but gave examples as to why they are resilient. At first, some were hesitant to actually say they were; but as they discussed further they came to the conclusion that they were in fact a reflection of the word they were describing. The participants began to recognize they were, in fact, resilient.

Participant one: Um I do believe I am a resilient person - I mean I've been so invested, in finally making my life make sense and part of that is I actually have a choice in ways that others don't

Participant one: I'm trying to live my life the most meaningfully and fully for myself as possible and any moments in which that hasn't occurred for me, I-I don't necessarily see that as failing at resilience in itself either [pause] so, I feel like essentially maybe there are different sides to the word and I've been always kind of devoted to trying my best with things

Participant one: I know it [the word resilience] through my dad, because being in the military himself, he would throw that word a lot and he used to use that word for me and I never fully understood what it meant but I tried very hard to fit within that paradigm [pause] and uh-I almost feel like by actually being resilient, was defining it for myself

Participant two: Um [pause] I do think I am [resilient] in certain situations, maybe an example of being cut from a team, but I worked hard and then was faced with being cut, but then the next year would work harder and then made the team, like I felt like in that way I was pretty like resilient

Participant three: Um, yeah, but I haven't experienced many things where I had to be resilient from I guess but I think if the time came I would be

Participant four: [Sighs] that is such a hard question to answer [pause] I want to say yes because I think everyone could be resilient in their own way I think but I don't think I have a reason where I uh, could back it up

Participant four: I don't know if they would be considered challenges or not [pause] but like a couple of years ago there were a few deaths in the family [pause] like my poppy and my great aunts [pause] that was hard because after my poppy it felt like we didn't get to properly grieve the other deaths [pause] but um I feel like dealing with

death which is really the only thing in life that is [inaudible] so early in my life has

happened to me recover from maybe when I start to see death more often in my adult

life. It's hard to say [pause] um I am not sure if that has made me more resilient or

just good at adapting [pause] I think maybe an easier thing I could think of is

whenever I was in grade 12 I had a bad concussion where I needed quite a bit of time

to recover from [pause] after the recovery time, I found it a lot harder to study and to

focus on really anything [pause] this experience kind of made me try to adapt to, like

my situation which really sucked and work harder to see the same or similar results

um I had before the concussion [pause] I think that could maybe be an example of

how I am a resilient person [pause] um not to mention, so many of us were able to

survive a pandemic [pause] which I would say is pretty resilient

The interesting thing to recognize from the excerpts, is that participants are wary of

whether they should be considered resilient; but still believe they have the ability to be. The

theme from the discussions seemed to be that they were not sure whether to consider their

challenges as something one would need to be resilient to overcome. However, when they did

start to open up more about the experiences they have faced; they began to come towards more

of an understanding of their resilience. They were able to reflect on the challenges they have

faced before and determine that they resembled resilience because of how they have coped or

adapted to certain challenges or hardships in the past. Participant three was the only one who did

believe they are and would be resilient if they were to ever face a challenge, but stated they did

not experience anything they would need to be resilient for. However, as the researcher and

participant three carried on their discussion, it was clear she had faced challenges during her

school year due to Covid-19 restrictions.

Healthier habits gained from Covid-19

Participants were thorough in narrating how the Covid-19 pandemic impacted their mental and physical wellbeing. Although these times were difficult, participants reflected positively on how quarantine shaped them to take better care of themselves during this time compared to how they were taking care of themselves prior to the pandemic. Participants discussed the unhealthy habits they practiced or mindsets they created before the pandemic started to impact PEI.

> Participant one: I really don't want to just keep on pushing, pushing, and pushing myself [pause] it's just not healthy for me and I did it for so long it hurt me [pause] and uh I'm still keeping that in mind that generally it seems like if I'm feeling good, like meds wise, and everything too that's generally the part that's what I'm missing currently

> Participant two: Yeah, um definitely, well um around that time it was like March so exams were about to start so I was pretty stressed and like again I wasn't like the healthiest I was so like mental health wise before like going into the lockdown was like not the best like pretty low

> Participant three: But it [quarantine] was a good chance to spend time with family and do other things that I normally wouldn't have time to do

> Participant four: Yeah, I mean, I was already ready for school to end, [prior to Covid-19] I didn't love the program I was in, and already knew I was going into nurse- the nursing program in the fall, so I was already losing motivation um in March to finish courses and I didn't necessarily really need to take

After reflecting on how they were on a personal level before Covid-19, they started to consider different ways they thought of how quarantine might have indirectly encouraged them to integrate healthier lifestyle changes that positively impacted their mental and physical well-being. One participant noted that spring courses during the pandemic encouraged her to look into accessibilities, which ultimately ended up in her gaining insight into her learning disability. Another participant said that this time allowed her to learn more about herself and even said the pandemic helped her to become a more patient person. Participant three opened up about how this experience gave her time to slow her life down a bit and just use her time to live and to do the things you would love to do when you know you can. Similarly, participant four said this time was beneficial for her to recognize people who her good friends were, to become closer to her family, and to take time to really enjoy life.

        Participant one: The summer courses are actually what lead me to getting into accessibility services and eventually getting my diagnosis so that was pivotal for me

        Participant two: I did-do feel like during quarantine I did learn to be more like, patient and I did learn more about myself [pause] like I literally look back and go wow all of the things I learned during that time

        Participant two: I do think I've gained some healthier habits because of quarantine

        Participant three: I think there were positives to it [quarantine] and just like kinda time to slow it all down was nice and beneficial

        Participant three: Just learning to do things when you can and have the opportunity because you never know what might happen that might make it impossible to do

        Participant four: You realize that those people were actually your good friends and that you miss them a lot

Participant four: I think uh I think I can see how spending more time with family

definitely made us more closer

Participant four: I think we overlook ourselves to the point where we are just

constantly going through the motions and not really taking the moment to enjoy life

Among all participants, there was a common theme of gaining healthier habits after

Covid-19. Participant one found that she was better able to decide what was worth her time and

what was taking up too much of her energy, participant two found that she spent more time with

her family, participant three realized she likes learning to do new things while she has the chance

to do them, and participant four was able to take more time out of her day to appreciate the little

moments in life.

Effective Coping Strategies. Interestingly enough, the positive perspectives students had

regarding the quarantine seemed to somewhat lead the students to act upon these positive

thoughts to have impacts on their mental and physical health. The participants discussed the

healthy habits they started to incorporate into their daily lives in order to achieve a healthier

lifestyle. Participant one touched on how they learned to set breaks and to paint herself in a

way that resonated to her, not just the people around her. She learned how to use coping

strategies, is seeing a psychiatrist, and is taking medication to help with her ADHD

diagnosis. One mentioned how making healthy meals and starting to care about what kind of

food she was consuming enhanced her mental and physical health. She also briefly discussed

how working out started to help her overall mental and physical health as well. Even going

for walks and reading were mentioned as healthy strategies used to enhance their mental

well-being. The participants took what was a struggling and challenging experience and

made the most of what they could, to improve themselves while they had the time to do so.

Participant one: It [Covid-19] allowed me to even set breaks even after work [pause]

I think the amount of selling yourself when you're like in an interview for a job and

stuff and perpetuating that version of yourself, to not have to do that for a while

allowed me to look more critically at myself, and I think of all those ways I painted

myself in the past and ugh to be someone completely different, and try to keep

everyone happy and impress them or impress a past version of myself, it's just ugh

exhausting and not healthy and not sustainable

Participant one: In any case like I've been receiving further screenings with like um

there's a psychiatrist or psychology student with her doctorate and she's taking a

practicum and I'm going through that with her as her little guinea pig

Participant one: But...um generally being on my ADHD meds and also Zoloft uh

that's helped that's helped a lot

Participant two: Once we were in quarantine we had so much more time, so I think a

lot of people focused more on like what they were cooking cause that's basically all

we had to do is like look forward to new meals coming that day, I tried healthier

meals and cared more about what was going into my body, and took notice to what I

was eating. And then tried to do some activity every day just to kind of, like waste the

time, but no I do think I've gained some healthier habits because of quarantine

Participant two: It was like maybe starting to work out more, then focusing on food so

then I actually did see more positive mindset towards the end of quarantine than I did

at the start

Participant three: I spent a lot of time outside too like going for walks um which was

good mentally and physically um and even just having time whenever there was the

> break from school like even just trying to read which was nice for my mental well-
>
> being
>
> Participant four: Honestly once that [school] ended I found myself doing more things
>
> which for um more things for myself which was kind of interesting [laughs] I guess
>
> we had no one else really to do anything with
>
> Participant four: I would go outside more than I would if I was going to school every
>
> day or studying [pause] I also started cooking more which if I didn't do that I
>
> probably would not have learned as much as I have at this point
>
> Participant four: I also spent a lot of time like, as I said, like learning how to cook and
>
> like trying new workouts, going for walks, and writing things I am grateful for and
>
> stuff like that

The common theme among participants was they were able to concentrate more on their well-being during the quarantine rather than letting school, social lives, extracurricular activities, etc., acting as a distraction from taking care of themselves. Once students to initiative to focus on their personal mental and physical health, they included various coping strategies noted above into their daily routine that were effective in helping their overall well-being during the quarantine.

Uncertainties of the future

The participants presented themselves as quite capable and confident university students who were navigating a difficult experience given the restrictions that the pandemic caused; participants did note their anxieties regarding not knowing what the future may hold for them. Many talked about how they had feelings of stress and anxiety of not knowing what to expect, but also trying to get used to the new protocols put in place.

Participant two: I didn't really know what to exp-I actually never thought it was going

to come to Canada

Participant two: Um but I think just expecting not the worst, which is just being

prepared for what can happen and being okay with like, not knowing

Participant two: It was hard not being able to do normal life [pause] just not being

able to go to the grocery store or anything so it was definitely isolating that way um

and just different cuz we like we never been told we can't do those normal things

before

However, the participants were not only worried about not knowing what quarantine was going

to look like in the coming weeks; they feared their loved ones getting sick, not knowing whether

they were going to need to find work, and not knowing how they were going to finish school.

Participant three: Um at the beginning of quarantine I was definitely stressed just

because I didn't know what was happening and just living in the fear of someone

getting Covid or myself getting Covid, or there being an outbreak on PEI and that

lasted I guess for most of the quarantine

Participant two: I didn't think it would amount to anything until those two days

before PEI was put into quarantine [pause] so I guess when it was announced, my

initial thoughts were, oh my god how am I going to finish my first year of university

Participant four: Like I just wanted to know if I would start, if I should start thinking

about looking for a job in the summer or if I was literally going to be in quarantine for

another year

> Participant two: Like everything was heightened [stress levels] cuz it just wouldn't,
> the uncertainty of everything I guess sort of heightened like the stress and anxiety of
> it like with school

These results demonstrate how even though the participants were able to illustrate what it means to be resilient during trying times such as a global pandemic, their mental health was really being challenged by all the stress, anxiety, and fear surrounding the fact that all they could do was wait for more information to surface to know what was going to happen in their life. For this generation, this is the first time anything like this has ever happened. So naturally, there was discomfort given these new and unusual restrictions.

Assumptions and Expectations. Although there were feelings of fear related to not knowing what to expect during quarantine, people were also making assumptions based on their lack of knowledge regarding the severity of the pandemic as well. Some participants did not think it was going to impact Canada at all, and even when the quarantine was announced they were still only thinking it would last up to two weeks. Others were very scared of Covid-19 because they didn't understand what it was, how long it was going to affect people, and how it was going to impact people's lives. A participant remembers thinking that Covid-19 was nothing to worry about because healthcare professionals in the early stages of the pandemic were informing people it was just like the flu. These results can represent how important it is to be transparent and informative to the media so misunderstandings like this do not occur on such a mass scale. There are measures the government can take to inform the public without instilling panic upon the nation.

> Participant two: Um I didn't really know what to exp-I actually never thought it was
> going to come to Canada

Participant two: I don't think I just thought it was so like, obviously it's different for everyone, like no one has ever been through something like this, but I also did think it was only going to last two weeks

Participant three: It was scary at first because nobody knew what was happening or how long it was going to last. Um or how it was going to affect our lives, um but as it went on and we learned more about it and it kind of became a little less scary but yeah

Participant four: Um it's funny because at the first we were all wondering why people thought it was such a big deal [pause] like nurses and [inaudible] made it seem just like a common cold you know? I didn't think it would amount to anything until those two days before PEI was put into quarantine

Participant four: I think before I was just delusional to how serious it was. I mean there were some people talking and taking it to an extreme and kind of created um, panic among a lot of people, but then again, I guess I was the one of the ones who was still not thinking about shutting down everything like my mom was.

Within these excerpts, it is clear what participant's initial thoughts were regarding the seriousness of the virus. They believed the virus was similar to a common cold and that the quarantine was not going to last more than a couple of weeks. This was a fair assumption. They were hearing this information from people they trusted based on their professional credentials, but it should be noted that this virus was never studied before so all the information was new to people in healthcare as well. Participants found as they learned more information about Covid-19, they were able to de-stress.

Experiential changes connected to Covid-19

The changes Covid-19 impacted into each and every person's life this past year are undeniable. There were diverse experiences described by the participants. Some talked more about their experience with staying home and difficult conversations with their families, some talked about how they could not see their friends and family, others talked about how their experience with this pandemic made it difficult feeling comfortable coming out of quarantine, while most discussed switching to online classes and changing the way they worked.

Participant one: I was talking to my dad and [he] was like [laughs] you don't need sleeping meds, like come on you need to exercise...and I do [sighs] ugh oh my god, so I get wound up about this kind of stuff, right [question] and so that self-improvement and all those other things trying to be a successful person, a happy person, and to communicate that to parents sometimes that's when the mental health gets a little discouraging

Participant three: I was excited to be able to interact with my friends, but I did still have some anxiety about going into stores or restaurants or anything [pause] um I didn't do that for the first little bit when the restrictions eased but um so I was nervous about that but I was excited at the same time to be able to see my friends and other family members that I wasn't able to see so it was kind of mixed emotions

Participant four: Um, after quarantine, I felt a little nervous because some of my friends thought that meant we could just carry on like we did before the pandemic and hang out with our whole group [pause] I think at the time it was like five or eight people [pause] that made it kind of hard to include everyone because you wanted to see everyone at the same time but couldn't

Mostly all participants touched on each of these experiences, with some of them placing more emphasis on one or the other. Participants expressed feelings of being stuck, isolated, and stressed during the pandemic. However, many spoke specifically on their work life experience during the year of Covid-19.

Work life Experience. During the research discussion, participants discussed the eagerness to get back into a routine after the quarantine from Covid-19. One participant talked about how hard it was to find work, but how beneficial it was for her to be able to make connections with her coworkers as well as take the learning opportunity to set some personal boundaries and routine into her lifestyle. It also helped that this participant was passionate about the kind of work her organization does. Getting back into the routine of work allowed this participant to find out what she was willing to sacrifice and what she was not willing to sacrifice to create a healthy relationship with her work. Participant four was happy to find work during the pandemic so she did not need to stress over the cost of tuition in September.

> Participant one: I was not thankfully uh it did make the whole summer job stuff tricky but um I did manage to find some work which was good [pause] I did some stuff with [LGBTQ+ organization] actually which was wonderful [pause] yeah and it was just a short term contract looking into this idea of social enterprising where they can be funding their social programming through other kinds of um, let me give you an example, like they put on workshops for businesses and that business pays for those workshops and then they have money to put that towards programming and stuff like
>
> Participant one: Beyond that I was on the student version of CERB and was doing other kind of stuff
>
> Participant one: That kept me company I suppose [talking about her summer job]

Participant one: Oh yeah, for sure [pause] in fact, uh, I think it gave me some

structure that helped [pause] I feel some elements of structure are probably important

for me and some are not [pause] I have to be kind of tweaking

Participant one: [LQBTQ+ organization] was a wonderful experience I love [person

participant worked with] to death and great, meaningful work [pause] I was a   little

self-conscious about how much I could work for a period of time you know there are

shifts for work like people work five hours to like nine hours and like I can't really do

that, I have to space it out sometimes [pause] so um that kind of gave me some sallus

to have a little bit more autonomy and to learn that [person participant worked with]

also has ADHD that was also pretty useful um like some of the most understanding

folks you'll meet

Participant four: I mean it didn't take over my summer which was nice because then

I could um spend time with my friends and family but it was nice to be able to even

find work so that I didn't have to be worried about money for school in September

[pause] I mean, yes I was nervous about Covid, but I don't think I really needed

something to distract me um from it to cope with the existing reality [pause] I don't

think I did anyway

     Participant two talked about the new protocols that were set in place when she

started work in the summer. This participant did say how the protocols were difficult to

adapt to, but once she got into the routine again, it was easy to go on. She found herself

making judgements of other people based on whether they were wearing a mask or not,

and adjusting her behavior to accommodate what she assumed they would appreciate

from her. For example, trying to stay as far away from the customers while taking their

order if the customers were wearing masks.

> Participant two: Um, I was a little nervous because when I first heard that things
>
> were opening up, I got my job at [restaurant participant worked at] I was like just
>
> trying to figure out what was going to happen, like thinking about like if the bubble
>
> was going to open and if we are all just going to go back [pause] uh my initial
>
> thoughts were like when things were going to go back to normal, I thought that we
>
> were all just going to like gonna get it, and then have to go back into lockdown so
>
> like I don't know if I was like-I was happy that it was opening but very nervous
>
> because I didn't wanna go back into the long lockdown like I was okay with taking it
>
> as slow as possible like getting things done
>
> Participant two: Um it was at first [hard adjusting to new work protocols] because we
>
> did have a lot of like restrictions like I remember at the very start I would have to give
>
> a speech to the table about how I'm going to have to stand 6 feet away and how you
>
> guys are going to have to move plates to the side, so like all that stuff was new in like
>
> the restaurant just because I wasn't like used to like the pro-like the new protocols
>
> that were put in place but like after a while it was easy to get into a routine again
>
> Participant two: It was funny because you could definitely tell like what customers
>
> were going to be anxious about it and what customers weren't just the way their body
>
> language was towards you and I know like starting towards the beginning of the
>
> summer the masks weren't required but some people would still and even for servers
>
> the masks weren't required until half way through the summer but people still were
>
> still showing up at the very start wearing masks so you knew you would have to kind

of take your space like from them and stuff like that but then you also like when it got

later at night at like 12 and stuff obviously like people- no one was real- and they're

very young like customers who I would have at that time and like people weren't as

anxious about it

Not only did this participant find herself trying to make her customers feel as comfortable

and safe as possible during this time, but she felt as though her safety was not a priority when

customers started to come close to her and hug her during her work hours. She felt

uncomfortable because sometimes she did not know said people and did not want to break the

rules and regulations set in place. However, she did say that these were the only moments she

felt unsafe. Aside from that, she found that going to work during Covid-19 was a healthy

decision because her coworkers were supportive, money was not something she had to worry

about, and her shift went by fast.

Participant two: Um, it was when I when I first started wearing the masks er even

before even if I wasn't wearing a mask but they were I felt like maybe I should be

wearing a mask because I was like maybe they feel uncomfortable and unsafe and

they probably don't wanna be close to me so then I'd always probably like I guess

like treat them differently than I should of like I'd always like far away I'd reach to

give them their food instead of probably coming a little closer and then I'd try my like

hardest not to touch as many things and then like I did feel myself backing like way

up to talk to them and like trying not to like talk directly on them or something like

that but as like things got further in, then when we started wearing a mask I guess I

did feel more safe talking to tables because I did feel like wearing the mask I could

stand a bit closer and serve and not have to like reach food [pause] but the biggest

problem I had over the summer was when it got to those like late nights, obviously [customers] don't really remember the protocols that were put in place so you couldn't go from table to table, and they'd be coming up to you and maybe they'd try to hug you and stuff like that and in those moments you feel kind of unsafe not just because you didn't want to get in trouble but sometimes you didn't even know these people and [they] could be from away and you're just questioning everything so just those were the only moments ever that I ever felt like unsafe like per say

Participant two: Yeah it was definitely a healthy to go right from quarantine to [restaurant] I think that was like the best decision like not to go back to [old place of work] but to go back to [restaurant] because it was like a fast-paced job, your shifts went by pretty short, you could see money pretty easy, like easy money, and like the people were all great um I was outside like some of the time so I was like used to being outside but no I do think going to [restaurant] like work right after was a great transition and like healthy

Participant four: The hours I worked were kind of convenient for me to enjoy most of my days, so I was really grateful for that [pause] I mean was even, even when I was at work I didn't really feel like it was hard work because I was with people I knew so it was kind of, not fun, but like better than a lot of other jobs I did have in the past [pause] so it was a good post-Covid job to have I guess

In the research discussions, participants expressed their desire to begin work again in the summer. This desire was mainly because when they started work they were able to see other people outside of their family and be able to get into the routine of waking up and doing something they believed was productive. Many of the participants discussed how they enjoyed

working mainly because of the social piece of being able to work with others. Participants did find the Covid-19 protocols implemented into their workplace were difficult to remember at the beginning, but that it became more natural with experience.

Educational Experience. Educational experiences were altered dramatically due to the Covid-19 pandemic this past year. University classes were mostly online, aside from labs and practicums. Although, there were diverse opinions on whether or not online learning was right for the participants; there was a lot of conversation surrounding how the participants were feeling while still participating in school at the beginning of the pandemic of March 2020 and when they started school again in September 2020. One participant mentioned how there was a lack of structure, but that they did not really mind the online courses. However, this participant was still able to go to a couple classes in-person. Therefore, she might have liked the variety that online and in-person classes gave her.

> Participant one: I feel like there is a lack of structure involved um that uh let me put it this way, when you have an in-person class you have to kind of plan your day around going to school and being there and stuff like that and people need that structure and some people really haven't prepared themselves to have something different
>
> Participant one: I like online stuff of course but uh generally I have become a lot uh I have been quite uh and since especially getting the ADHD I've been quite fascinated with uh that kind of thing making sure friends of mine who might be struggling have that strategies I have uh seeing the themes of like I have been through that whole stepping on that kind of question in my life and noticing other folks doing the same

Participant one: Uh, my experiences with online classes have been a little different than everyone else um honestly I have been one of the luckier ones because I've had an in-person class both this semester and last semester

Participant two mentioned how stressed she was with school when the pandemic just started. She believes she felt this way because exams were nearby and going into quarantine resulted in her mental health suffering. However, she now feels like she has developed some better coping strategies to handle the stress of school.

Participant two: Yeah, um definitely, well um around that time it was like March so exams were about to start so I was pretty stressed and like again I wasn't like the healthiest I was so like mental health wise before like going into the lockdown was like not the best like pretty low but then the start of quarantine was obviously like everything was heightened cuz it just like wouldn't, the uncertainty of everything I guess sort of heightened like the stress and anxiety of it like with school but then like that shifted a lot like just when you learn to have more patience with it and stuff I think stress levels went way down and and anxiety levels went way down when you're spending more time outside and caring about what like you put in your body [pause] like obviously like you're going to see more positive realizations like about everything [pause] but then now that we are out of that I do find that my mental health is probably way better than it was like a year ago like yes still stressed about exams but in a way healthier way than I was a year ago

Participant two went on to say that when she went back to school in September, she actually liked the online classes. She found the online courses allowed you to create your own schedule. However, when she went back to school in January 2021, she had a different experience. She felt

like she was not absorbing as much information as she normally would and was unmotivated to

go attend all of her classes. She expressed her learning experience is much more positive when

she is on campus where the setting is academic.

Participant one: Um at the start it's funny because at the start I actually really did like

them like obviously it was a learning curve and a transition but I did really like them

like I just found it easier to schedule and kind of do everything on your own but now

that we're like in second semester I just feel myself like I don't think absorbing as

much as the information as much as I would if I were in class like I see myself maybe

like okay I can miss this lecture online because I can just watch the next one but then

test rolls around and I'm like behind whereas if it was in person that wouldn't, would

never happen and like you just absorb more when you're hearing it in person and

seeing the prof talking so it's funny because I think for a lot of my friends, it was the

opposite [pause] like they hated it at first and now are starting to like it but I think I'm

like I started liking it but now I'm just really not liking it

Participant two: I think so 100 percent [that her learning would improve with in-

person classes] and I think like not being in the school like sometimes I will go to the

library or will go to McDougall to study and I'm just like, oh my goodness how much

I miss like just being in a facility of like learning because then you feel more

motivated to learn because, like, when you're just in your own house you're like okay

I can put this off and you're always looking for distractions and you're just not

motivated to learn

Participant three liked online classes, but did not like online labs and clinical. She explained

that transferring to online classes was a big change, especially when she was not in school

since March when the pandemic started. This participant missed out on a few important

opportunities in her nursing degree due to the Covid-19 pandemic.

Participant three: Um, I feel okay about it depending on the class [pause] like um like

class wise I'm okay with it being online and I'm okay with online learning but like in

terms of labs and clinical and stuff I didn't enjoy that online I would have preferred if

we were able to do that in person but classes I don't mind online

Participant three: Yeah, yeah it was definitely a change [getting back into the routine

of school] because it was between like March was the last time until September so it

was a really long gap to like not be doing that stuff when normally I would have done

it in May and June um so it was really long gap so it was kind of hard to get back into

the swing of it um of doing that stuff in person but uh I think everyone adapted

Participant three: Well it impacted my education because I was supposed to go on an

international placement and I never got to go which would have been a good learning

experience for me um so that was disappointing and also um it impacted me as a I

was supposed to do like a community nursing placement um that I wasn't able to do

like I had to do it online so it just wasn't as beneficial as being in the actual setting

um as well um there were some like labs and stuff that I was supposed to do during

Covid-19 that we never got the chance to do so I feel like we kind of missed out on

some of that so it definitely did effect it but in the end it will all be okay

Participant three: Um yes and no, like, like in our fourth year we learned about how to

give blood administration, okay [verifying researcher understood] And so usually you

would go and you would go to the lab at UPEI and you would like practice it but

because of Covid we just learned about it in a lecture online and nobody actually got

to get hands on and like practice it so like things like that I think we missed out on

and like there were things that they weren't able to replicate online

Participant four found online classes beneficial for her this past year. She explained that she was able to save money on gas and money, while being in the comfort of her home. Like participant three, she did go on to say that she does not appreciate online labs as much as online lectures.

Participant four: Um, I actually really like them [pause] I feel like a lot of my friends would rather be in school [pause] but I don't live close to the school so it's nice being able to work from home, so when I don't have to pack a lunch, waste gas, and I can get everything done in the comfort of my home [pause] I don't love online labs because I don't really feel like I am learning all that much but I really don't find online classes bad at all [pause] I am nervous for the day where I have to write a test in person again though

Participant four discussed how she developed a good work ethic working on school on her own, however found it a little more difficult being involved in group work online.

Participant four: Um yes probably [pause] I mean I feel like I have developed a pretty good work ethic this year but I don't know if this type of work ethic will only apply to online-learning or if it will also be beneficial for in-person learning too I guess we will see when the time comes

There is no doubt student's educational experience was impacted during the Covid-19 pandemic. Even though there was diverse input in regards to how good students grew accustomed to online learning; resilience was present with each viewpoint the participants held.

In each research discussion held, every participant was willing to give online learning a try whether they believed it would be beneficial or not to them.

Discussion

In this research, many participants were talked about the term "Resilience. I understand that the word resilience can have many meanings to different people. However, many people had the same understanding of the definition of resilience. Basically, resilience to the participants I talked with, is when people are able to overcome the struggles they are facing. As a researcher, I am curious because I know everyone has struggled with something in their life whether that struggle was considered big or small. Therefore, I asked participants whether or not they considered themselves resilient. It was surprising to me to discover how many people did not see themselves as truly resilient until they did more self-reflection. I feel like going over what the word meant to them in the beginning of our discussion allowed them to analyze their own life experiences and come to the realization that they were more resilient than they believed themselves to be.

The Covid-19 pandemic created havoc in the lives of all students. Educational institutions either transitioned to online learning or cancelled classes. Even with some classes cancelled, many teachers still sent students work they could do on their own time if they wished. As Covid-19 progressed, more innovative methods for teachers to deliver their curriculum were introduced. Although this technology is efficient and effective in carrying out information to students, there needs to be more attention placed on the overall wellbeing of the students while being placed in this atmosphere. Participants used their voice in the research to express how they made sense of their reality during Covid-19. Being introduced to such major life-altering changes has a significant impact on the overall wellbeing, education, and daily routine of students. These

impacts require individuals to practice resilience whether they are consciously addressing this skill or simply trying to survive. Research exploring what resilience is and how it can be practiced in everyday life were similar to what participants in this study illustrated. The discussion will describe the link between the experience of the participants through this research and the literature in ways that show how your research connects to what is already known to expand and challenge current knowledge or practices. When students were asked to explain their understanding of the word resilience, they all had very similar responses. Terms and sayings like overcome, strength, challenges, struggles, adversity, worked through, and bounced back were common among participants. The idea was the same. Resilience is about being prepared, keeping safe, and recovering from disturbances in an individual's lives (Wilson, 2020).

All participants who were a part of this study stated they were either already resilient, or could be resilient if they were placed in a challenging situation. These undergraduate students explained themselves by giving examples of how they believe they are resilient. They provided examples of physical injuries they endured, being cut from a team, surviving the pandemic, etc. All of these examples can relate to properties of the above definition of resilience. Students can get better by listening to their doctor, students can work harder to get a spot on the team, and students can work on their overall well-being during the state of the pandemic. Resilience is a learnable process where anyone can work to regain one's strength. One thing noticed by the researcher was that the participants seemed hesitant to talk about the challenges they faced in their lifetime. It was interpreted by the researcher that students did not want to talk about their struggles because they are aware there will always be someone who has gone through something that may be considered by others as more challenging.

Similarly, during the research discussion with participant three; she announced that she has not experienced anything she had to be resilient for, but still described herself as a resilient person. However, as she began to speak of her changes in plans with her educational opportunities; it was clear she had faced challenges that would have required some resiliency to move forward. It was interpreted that she was confident in her ability to be resilient because she already has been, she just did not recognize herself as such. This participant had to cancel her clinical that was supposed to take place outside of Canada, missed out on certain practicum, and was to do online labs in place of in person labs. This may not be a life altering experience as much as Covid-19 was, but she was definitely placed in a situation where she needed to recover quickly from the difficulties faced as her field of work is constantly hands-on. Missing out on practicums and watching labs online can create confusion in a line of work that is fast paced and does not leave much room for error. Given her circumstance she was able to make light of the situation and has enough confidence in her capabilities to thrive in her practice.

Although resilience has a pretty flexible definition, there are some individuals who only see resilience as a certain characteristic [e.g. strong]. One participant who is a trans woman, mentioned that her dad who works in the military "used" to use that word for her, but does not anymore. The participant did not blatantly say her father does not call her resilient anymore because of her gender. This may imply that resilience is defined differently in certain groups of people. This particular student is in the process of trying to live their life in the most meaningful way possible in order to make their life make sense to them. This participant went on to say that they are able to have a choice in ways that other people do not. The reasoning behind this could have a variety of layers. However, the reason that seems the most logical is that the participant is identifying their White privilege in a Western dominated culture which is predominantly

individualistic. One thing to note is that she is hurting because others are not supporting her

journey, but she is still choosing to try her very best; which is recognized in itself as resilient.

Prior to Covid-19 these participants were enrolled full-time in their undergraduate

programs. Students were finishing up last minute assignments and would be potentially studying

for upcoming exams that were coming up in April. During this time of year, it is not abnormal

for students to abandon a few of the self-care practices a person would regularly try to

incorporate into their day or week. Stress causes distraction, which is why the researcher believes

it is worthwhile to take into consideration whether it was solely quarantine that enabled them to

develop effective coping strategies. Quarantine played a major role in having students reflect on

their lifestyle choices and choose to incorporate positive changes, however the researcher cannot

help but wonder if quarantine started in September, if participants would feel the same

experience of a high-stress lifestyle, to a stress-free lifestyle [excluding the anxieties of the virus

itself]. Nonetheless, participants used coping strategies that were best suited for them during this

time. They tried to take the adverse event and make the most of it. This resulted in some students

creating boundaries for themselves and others; consisting of what they are willing and not

willing to withstand. One student was able to connect with accessibility services to help her with

her ADHD. Others focused more so on their physical health by cooking healthy recipes and

incorporating more activity into their life than they normally would. Many participants

mentioned the value of spending time with family and going outdoors. These coping strategies

connected well with the literature that was done in the past after life altering events which caused

individuals to go into quarantine because people reacted to their experiences very similarly by

using coping strategies mentioned above to foster positive overall wellbeing.

During the research discussions, participants expressed their fear of the unknown. Many students noted how at the beginning of the pandemic, they did not know whether or not it would come to Canada, let alone how long it would last. Students mentioned that they controlled their emotions by not always expecting the worst and by being prepared for the unexpected. This fits in nicely with the literature as a major component of resilience is about being prepared for the unexpected (Wilson, 2020). Participants spoke of the fears they faced of themselves or someone they know catching the virus, others were concerned of whether or not they should look for work in the summer, while many were concerned about how they were going to finish the school semester. Since CERB (The Canada Emergency Response Benefit) was available in the 2020 summer, the researcher was surprised that only one participant mentioned using this financial aid. All participants mentioned that they liked structure and routine, which makes sense as to why all participants found employment for the summer. While the concerns students had because of the uncertainty are all valid, the researcher would like to put into perspective that these may be common concerns among students who are a part of racial, ethnic, or cultural minority groups. A limitation of this research is that all four participants were White adolescents, who were permanent residents of PEI. These participants most likely were never asked to abide by such strict rules and regulations by the government to stay at home, stay six feet away from anyone who does not live in their household, and to wear masks to any public facility. People who have immigrated to a different area, were most likely asked by the government to abide by strict rules and regulations at some point in their lives or their family members' lives. People who immigrate to Canada need to follow immigration rules and international rules for international students carefully, and either be able to find alternative sufficient programs as they are excluded from government programs; such as employment insurance, scholarships, and bursaries. In future

research, it would be well-connected to see whether different racial, ethnic, or cultural groups adapted easier to the Covid-19 protocols compared to people who come from privileged backgrounds.

The number of participants who had created assumptions and expectations without knowing anything about the virus was astonishing for a group of university students who have learned to discern credible sources from less reliable ones. Students expressed their confusion based on the fact that they did not believe Covid-19 would even make its way into Canada, they did not believe the virus was any more harmful than the flu, and they thought it was going to last two weeks. These misconceptions of the seriousness of the disease were most likely influenced by false information found via the internet shared by people participants trusted. No one is at fault here. There was little to no peer reviewed research on Covid-19 even after three months of its existence. Journalists may base their information from politicians. Another possible reason why participants did not understand the severity of the virus is because they never experienced a pandemic that has succeeded in causing household quarantines and mandatory masks. Whereas Eastern Cultures have been wearing masks since the Spanish flu outbreak in 1918. They continued to wear masks for a variety of other reasons such as to hide their face when they are not wearing makeup, to give them a sense of security, and because of the air pollution (Reznik et al., 2020). People from Western cultures never really witnessed the effectiveness of wearing a mask while sick. Therefore, it is understandable that they could not imagine something like the coronavirus happening in their lifetime.

Participants had mixed emotions about their time before, during, and after quarantine. While most of the research discussion was surrounding the topic of changes connected to education and the work, participants did talk about the feelings they experienced while in

quarantine. Participants wanted to be able to see their other friends and family and experienced feelings of isolation by not being able to see them. One participant discussed having a hard time communicating with parents about their personal life. They said they started to realize On the other hand, once the quarantine was over participants were unsure of how to react. There was a sense of relief because they were free to do what they wanted outside of their home, but they still felt like they should stay cautious since the pandemic itself was not over. One of the main concerns of the Covid-19 quarantine was that mental health would worsen because people would not be able to have the physical social support of friends and family who are outside of their home (Holmes et al., 2020). This connects to the realities of the students as they found it difficult not being able to see their friends and family during the quarantine. Participant one had difficulty talking to her parents about her personal life because she felt like they did not understand or agree with her about her choices.

One of the psychosocial implications for families during pandemics can include mental health problems (Psychosocial annex, 2017). The researcher interpreted from the participant that she loved her family, but did not feel comfortable sharing her true self with them because she feels they do not understand. This participant also was staying with her parents during quarantine, so having these experiences so often would make it hard to stay positive. Participant one is a part of the LGBTQ+ community and recognized that her friends who are also transgender friend have come to the realization that they were living their life in a way that was more for other people than it was for themselves.

The participant discussed how there were many positives for their transgender friends as quarantine gave them time to reflect on who they have been living their life for, which resulted in her reflecting on how she has been living her life for other people as well. This goes to show how

resilience played such an important role in the pandemic this year. People are coming to more realizations about themselves and choosing their overall wellbeing to prioritize. They were able to come to these realizations during a time where many were facing uncertainty, fear, and anxiety. The researcher would have liked to dive a little deeper into these realizations with participants. Questions as simple as, what was the driving force to becoming the person they are now? Why did it take a global pandemic for participants to start choosing their path to happiness now? How do they continue to take care of themselves now that quarantine is over?

The researcher would like to acknowledge the limitations of her study. The participants in this research consisted of three cis gender White women and one transgender White woman. This is a small number of participants, who are the same ethnicity and gender. It is important to recognize that these results may not be transferable to other groups of contexts and might only be relevant to students who are White on PEI. Future research would benefit by having research discussions with a more diverse group of people. Culture and gender is a major part of human's identity and ultimately influences how they perceive the world. Therefore, understanding in greater depth how they may have experienced Covid-19 could enrich the results by noticing the advantages and disadvantages some may have. It would be interesting to see how more collectivistic cultures found their experience in quarantine while living with their family.

By looking back on the history of pandemics, it is important to use the information that worked in the past into future pandemics and to try to create new strategies for the factors that did not work in the past. It is important to start thinking about implementing these strategies before a new pandemic arises, so society can recover quicker than they have in the past. It is a simple concept to grasp, if a person is more resilient they will be able to cope with the reality they are facing better than a person who is not resilient. However, in a society that uses social

support as a source of self-worth and self-love, this can become difficult when they are no longer allowed to be in physical contact with those supports. Being resilient naturally has a lot to do with what type of environment an individual was raised in. However, that does not mean that a person cannot practice resilience as a skill to have when faced with life challenges. Anyone has the ability to strengthen their resiliency. The time is now. Coronavirus has limited society's ability to be together physically; but by respecting the rules and regulations set to give us more freedom in the future, people can unite to become a stronger and more united society than ever before.

When using an IPA approach, it was difficult not to interpret another person's experience while ignoring one's own experiences. Throughout this study, I reflected on my own experience as a student during Covid-19 while also learning how others' described their experiences. I chose to study resilience among UPEI students during Covid-19 because I had personally struggled with the isolation while committing to my academic work and wanted to know what others were experiencing.

I think the Covid-19 pandemic was a unique experience for me because I have always loved having people around me at all times. I loved having people to lean on for support and being that support for others. In March 2020, when quarantine started, I was scared. I did not know the number of weeks, months, or years that we were expected to live like this. I did not know whether my friends and I were going to be able to keep in contact through Zoom calls for much longer. I also did not know how much longer I could do the same yoga routine, walking route, and countless drives; until I made those activities boring routines as well. Something that resonated with me while having research discussions with participants is that we were all stressed about the unknown. We felt like if we knew the severity of the pandemic, knew the

number of days we would be in quarantine, and knew what risks to worry about; we would have felt more prepared or more understanding. However, I do not know whether or not in reality that would be the case. If we knew everything that was going to happen throughout the past year and a bit, I am sure there would have been some disadvantages that could have talked about the would have led this research down different path. I also related with other researchers by trying to find other coping strategies. I definitely tried to make out a schedule for my days to avoid staying in bed which for the most part worked. However, by the end of week two I was exhausted. I think being able to study how people react to uncertainties, rules, and regulations in times of stress is something that really influenced me as a researcher. I think this research persuaded me to be more self-aware of the reasons behind why I am feeling specific emotions. The weight of helplessness over our shoulders was something I never really considered until I recognized that the participants and myself are privileged to live a life that is not heavily influenced by authority figures which is something I think could be worth studying in the future.

Prior to Covid-19, I had the intent to study post-traumatic growth. I wanted to study this concept of post-traumatic growth as I am a big believer in being able to change your outlook or perspective on a traumatic event with the proper support and willingness to accept said support. I think this comes from personal experiences, while also witnessing it happen to others in settings I have worked and volunteered in. However, even though my study was not focused on this concept, I can see a great connection between resilience during the Covid-19 pandemic and post-traumatic growth which is the ability to be able to look from a more positive perspective after a traumatic event.

References

Banerjee, A. K. (2020). "Stop scaring the children": A call for resilient and tenacious optimism.

Journal of Clinical Investigation, 130(6), 2733-2737. doi:10.1172/JCI139537

Black Death. (2010). Retrieved from https://www.history.com/topics/middle-ages/black-death

Blore, D. (2011, September). *AN INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS (IPA)*. INVESTIGATION OF POSITIVE PSYCHOLOGICAL CHANGE (PPC), INCLUDING POST TRAUMATIC GROWTH (PTG). Retrieved October 29, 2021, from https://etheses.bham.ac.uk/id/eprint/3328/1/Blore_12_PhD.pdf.

Bohlkken, J., Scomig, F., Pumberger, M., & Riedel-Heller, S. (2020, May). *Commonly reported problems and coping strategies during the COVID-19 crisis: A survey of graduate and professional students*. Frontiers in psychology. Retrieved September 10, 2021, from https://pubmed.ncbi.nlm.nih.gov/33716864/.

Burack, J. A., Gurr, E., Stubbert, E., & Weva, V. (2019). Personality development among indigenous youth in canada: Weaving together universal and community-specific perspectives. *New Ideas in Psychology, 53*, 67. doi:https://doi.org/10.1016/j.newideapsych.2018.04.002"

Bohlken, J., Schömig, F., Lemke, M. R., Pumberger, M., & Riedel-Heller, S. (2020). COVID-19-pandemie: Belastungen des medizinischen personals: Ein kurzer aktueller review =

COVID-19 pandemic: Stress experience of healthcare workers: A short current review.

Psychiatrische Praxis, 47(4), 190-197. Retrieved from

https://proxy.library.upei.ca/login?qurl=http%3a%2f%2fsearch.ebscohost.com%2flogin.a
spx%3fdirect%3dtrue%26db%3dpsyh%26AN%3d2020-35955-002%26site%3dehost-
live%26scope%3dsite%26profile%3Dehost

Centre for Corporate Health. (2020, March 16). *Covid-19: Psychosocial risks your workplace

should be addressing*. Centre for Corporate Health. Retrieved September 11, 2021, from

https://cfch.com.au/2020/03/16/covid19-psychosocial-risks-workplace/.

Chesak, S. S., Perlman, A. I., Gill, P. R., & Bhagra, A. (2020). Strategies for resiliency of

medical staff during COVID-19. *Mayo Clinic Proceedings, 95*(9), S56-S59.

doi:10.1016/j.mayocp.2020.07.002

Dawson, J. (2020). Reassurance and resilience. *Canada's History, 100*(3), 64-65. Retrieved from

https://proxy.library.upei.ca/login?qurl=http%3a%2f%2fsearch.ebscohost.com%2flogin.a
spx%3fdirect%3dtrue%26db%3da9h%26AN%3d143239681%26site%3deds-
live%26scope%3dsite%26profile%3Deds

Doshi, D., Karunakar, P., Sukhabogi, J. R., Prasanna, J. S., & Mahajan, S. V. (2020). Assessing

coronavirus fear in indian population using the fear of covid-19 scale. *International

Journal of Mental Health and Addiction,* doi:10.1007/s11469-020-00332-x

Dumas, T. M., Ellis, W., & Litt, D. M. (2020). What does adolescent substance use look like

during the covid-19 pandemic? examining changes in frequency, social contexts, and

pandemic-related predictors. *Journal of Adolescent Health,*

doi:10.1016/j.jadohealth.2020.06.018

Ellis, G. (2020). In the midst of COVID-19, chemical industry executives voice optimism, look

to path forward. *Chemical Engineering Progress, 116*(6), 53-54. Retrieved from

https://proxy.library.upei.ca/login?qurl=http%3a%2f%2fsearch.ebscohost.com%2flogin.a

spx%3fdirect%3dtrue%26db%3dedo%26AN%3d144368713%26site%3deds-

live%26scope%3dsite%26profile%3Deds

Folayan, M., & Brown, B. (2015). Ebola and the limited effectiveness of travel restrictions.

Disaster Medicine and Public Health Preparedness, 9(1), 92. doi:10.1017/dmp.2015.1

Gurvich, C., Thomas, N., Kulkarni, J., Sharp, G., Arunogiri, S., Isaacs, A., Sutton , K.,

Fabiatos , K., Sood, L., Hudaib, A. R., & Thomas , E. (2020, October 4). Coping styles

and mental health in response to societal changes during the COVID-19 pandemic.

SAGE Journals.
https://journals.sagepub.com/doi/10.1177/0020764020961790?url_ver=Z39.88-
2003&rfr_id=ori%3Arid%3Acrossref.org&rfr_dat=cr_pub%2B%2B0pubmed&.

Government of Canada, S. C. (2021, September 27). *Survey on covid-19 and mental health,*

February to May 2021. The Daily - . Retrieved September 27, 2021, from

https://www150.statcan.gc.ca/n1/daily-quotidien/210927/dq210927a-eng.htm.

Government of Canada, S. C. (2021, September 23). *Employment Insurance, July 2021*. The

Daily. Retrieved September 27, 2021, from https://www150.statcan.gc.ca/n1/daily-

quotidien/210923/dq210923a-eng.htm.

Hill, R., Butnoris, M., Dowling, H., Macolino, K., Patel, B., Simpson, T., & Trevillian, S.

(2020). Reflection on our leadership during COVID-19: Challenging our resilience.

Journal of Pharmacy Practice & Research, 50(4), 294-296. doi:10.1002/jppr.1681

Holmes, E. A., O'Connor, R.,C., Perry, V. H., Tracey, I., Wessely, S., Arseneault, L., . . .

Bullmore, E. (2020). Multidisciplinary research priorities for the COVID-19 pandemic: A

call for action for mental health science. *The Lancet Psychiatry, 7*(6), 547-560.

doi:10.1016/S2215-0366(20)30168-1

Innocenti, P., Puzella, A., Mogavero, M. P., Bruni, O., & Ferri, R. (2020). Letter to editor:

COVID-19 pandemic and sleep disorders—A web survey in italy. *Neurological Sciences,

41*(8), 2021-2022. doi:10.1007/s10072-020-04523-1

Karampampas, P. (2020). Partying at times of crises and pandemics: Solidarity, resilience and

coping with the measures against COVID-19. *Social Anthropology/Anthropologie

Sociale, 28*(2), 292-293. doi:10.1111/1469-8676.12887

Killgore, W. D. S., Taylor, E. C., Cloonan, S. A., & Dailey, N. S. (2020). Psychological

resilience during the COVID-19 lockdown. *Psychiatry Research, 291*, N.PAG.

doi:10.1016/j.psychres.2020.113216

LaHue, S. C., James, T. C., Newman, J. C., Esmaili, A. M., Ormseth, C. H., & Ely, E. W. (2020).

Collaborative delirium prevention in the age of COVID-19. *Journal of the American*

Geriatrics Society, 68(5), 947-949. doi:10.1111/jgs.16480

Landi, G., Pakenham, K. I., Boccolini, G., Grandi, S., & Tossani, E. (2020). Health anxiety and

mental health outcome during COVID-19 lockdown in italy: The mediating and

moderating roles of psychological flexibility. *Frontiers in Psychology*, NA. Retrieved

from https://link-gale-

com.proxy.library.upei.ca/apps/doc/A634038865/PPPC?u=otta0998&sid=PPPC&xid=96

d3658a

Leigh, J., Bolton, M., Cain, K., Harrison, N., Bolton, N. Y., & Ratcliffe, S. (2020a). Student

experiences of nursing on the front line during the COVID-19 pandemic. *British Journal*

of Nursing, 29(13), 788-789. doi:10.12968/bjon.2020.29.13.788

Leigh, J., Bolton, M., Cain, K., Harrison, N., Bolton, N. Y., & Ratcliffe, S. (2020b). Student

experiences of nursing on the front line during the COVID-19 pandemic. *British Journal*

of Nursing, 29(13), 788-789. doi:10.12968/bjon.2020.29.13.788

Liang, X., Zhu, Y., & Fang, Y. (2020). COVID-19 and post-traumatic stress disorder: A vicious

circle involving immunosuppression. *CNS Neuroscience & Therapeutics, 26*(8), 876-878.

doi:10.1111/cns.13431

Liu, N., Zhang, F., Wei, C., Jia, Y., Shang, Z., Sun, L., . . . Liu, W. (2020). Prevalence and

predictors of PTSS during COVID-19 outbreak in china hardest-hit areas: Gender

differences matter. *Psychiatry Research, 287*, 112921.

doi:https://doi.org/10.1016/j.psychres.2020.112921

Lovett R. (2017) Indigenous Children's Resilience: The Role of Demographics, Relationships,

Achievement and Culture. In: Walter M., Martin K., Bodkin-Andrews G. (eds)

Indigenous

Children Growing Up Strong. Palgrave Macmillan, London. https://doi.org/10.1057/978-1-137-

53435-4_13

Munk, A. J. L., Schmidt, N. M., Alexander, N., Henkel, K., & Hennig, J. (2020). Covid-19-

beyond virology: Potentials for maintaining mental health during lockdown. *PLoS ONE,*

15, e0236688. Retrieved from https://link-gale-

com.proxy.library.upei.ca/apps/doc/A631557024/PPPC?u=otta0998&sid=PPPC&xid=44

3ae0c5

Navarro, J. A., Kohl, K. S., Cetron, M. S., & Markel, H. (2016). A tale of many cities: A

contemporary historical study of the implementation of school closures during the 2009

pA(H1N1) influenza pandemic. *Journal of Health Politics, Policy and Law, 41*(3), 393-

421. doi:10.1215/03616878-3523958

Newhagen, J. E., & Bucy, E. P. (2021, February 6). *Overcoming resistance to COVID-19 vaccine adoption: How affective dispositions shape views of science and Medicine: HKS Misinformation Review*. Misinformation Review. Retrieved September 10, 2021, from https://misinforeview.hks.harvard.edu/article/overcoming-resistance-to-covid-19-vaccine-adoption-how-affective-dispositions-shape-views-of-science-and-medicine/.

Nissen, L. (2020). Social work and the future in a post-covid 19 world: A foresight lens and a call to action for the profession. *Journal of Technology in Human Services,* doi:10.1080/15228835.2020.1796892

Peiris, J. S., Cowling, B. J., Wu, J. T., Feng, L., Guan, Y., Yu, H., & Leung, G. M. (2016). Interventions to reduce zoonotic and pandemic risks from avian influenza in asia. *The Lancet.Infectious Diseases, 16*(2), 252-258. doi:S1473-3099(15)00502-2 [pii]

Pelly, F. E., Wiesmayr-Freeman, T., & Tweedie, J. (2020a). Student placement adaptability during COVID-19: Lessons learnt in 2020. *Nutrition & Dietetics, 77*(4), 481-483. doi:10.1111/1747-0080.12625

Pelly, F. E., Wiesmayr-Freeman, T., & Tweedie, J. (2020b). Student placement adaptability during COVID-19: Lessons learnt in 2020. *Nutrition & Dietetics, 77*(4), 481-483. doi:10.1111/1747-0080.12625

Resilience in a time of crisis. (2020). *Nursing, 50*(6), 49-51.

doi:10.1097/01.NURSE.0000669240.74723.b7

Reznik, A., Gritsenko, V., Konstantinov, V., Khamenka, N., & Isralowitz, R. (2020). Covid-19

fear in eastern europe: Validation of the fear of covid-19 scale. *International Journal of*

Mental Health and Addiction, doi:10.1007/s11469-020-00283-3

Preti, E., Di Mattei, V., Perego, G., Ferrari, F., Mazzetti, M., Taranto, P., Calati, R. (2020).

The psychological impact of epidemic and pandemic outbreaks on healthcare workers:

Rapid review of the evidence. *Current Psychiatry Reports, 22*(8), 43.

doi:10.1007/s11920-020-01166-z

Psychosocial annex: Canadian pandemic influenza preparedness: Planning guidance for the

health sector. (2017). Retrieved from https://www.canada.ca/en/public-

health/services/flu-influenza/canadian-pandemic-influenza-preparedness-planning-

guidance-health-sector/pandemic-influenza-psychosocial-annex.html

Qiu, W., Rutherford, S., Mao A., & Chu, C. (2017). The pandemic and its impacts . *Health,*

Culture, and Society, , 3-9. doi:https://doi.org/10.5195/hcs.2017.221

Rich, G. (2020, May 13). *During the 1918 flu pandemic, at-home learning meant little*

schoolwork. The Washington Post.

https://www.washingtonpost.com/lifestyle/kidspost/school-during-the-1918-spanish-flu-

pa

ndemic/2020/05/12/7d606c90-7f32-11ea-9040-68981f488eed_story.html.

Ryan T., M., Priti, G., Robert, U., Sara B., M., Charles D., K., Aaron, I., . . . David K., C. (2020).

Modification to neurology residency training: The toronto neurology COVID-19

pandemic experience. *Neurology: Clinical Practice,*

doi:10.1212/CPJ.0000000000000894

Saltzman, L. Y., Hansel, T. C., & Bordnick, P. S. (2020). Loneliness, isolation, and social

support factors in post-COVID-19 mental health. *Psychological Trauma: Theory,*

Research, Practice, and Policy, 12, S55-S57. doi:10.1037/tra0000703

Shader, R. I. (2020). COVID-19 and depression. *Clinical Therapeutics, 42*(6), 962-963.

doi:https://doi-org.proxy.library.upei.ca/10.1016/j.clinthera.2020.04.010

Stogner, J., Miller, B. L., & McLean, K. (2020). Police stress, mental health, and resiliency

during the COVID-19 pandemic. *American Journal of Criminal Justice, 45*(4), 718-730.

doi:10.1007/s12103-020-09548-y

Sussex Publishers. (n.d.). *Resilience*. Psychology Today.

https://www.psychologytoday.com/us/basics/resilience.

Talevi, D., Socci, V., Carai, M., Carnaghi, G., Faleri, S., Trebbi, E., . . . Pacitti, F. (2020). Mental

health outcomes of the CoViD-19 pandemic. *Rivista Di Psichiatria, 55*(3), 137-144.

Retrieved from

https://proxy.library.upei.ca/login?qurl=http%3a%2f%2fsearch.ebscohost.com%2flogin.a

spx%3fdirect%3dtrue%26db%3dpsyh%26AN%3d2020-46657-001%26site%3dehost-

live%26scope%3dsite%26profile%3Dehost

Wang, W. (2020, December 2). *Politics, science, COVID-19: Where does it all intersect?* CSPC.

Retrieved September 10, 2021, from https://sciencepolicy.ca/posts/politics-science-covid-

19-where-does-it-all-intersect/.

Wasil, A. R., Franzen, R. E., Gillespie, S., Steinberg, J. S., Malhotra, T., & DeRubeis, R. J.

(2021, February 25). Commonly Reported Problems and Coping Strategies During the

COVID-19 Crisis: A Survey of Graduate and Professional Students. Frontiers in

psychology. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7947789/.

Wilson, A. (2020, March 16). *Resilience in a Pandemic*. Resilient Design Institute.

https://www.resilientdesign.org/resilience-in-a-pandemic/.

Wong, G. W. K., & Leung, T. F. (2007). Bird flu: Lessons from SARS. *Paediatric Respiratory*

Reviews, 8(2), 171-176. doi:https://doi.org/10.1016/j.prrv.2007.04.003

Appendix A: Mental Health Supports

Mental Health Supports Available on PEI

Canadian Mental Health Association
PEI Division: 566-3034
E. Prince: 436-7399
W. Prince: 853-4180
Kings: 838-4180
Indiv., Family & Peer
Supports: 628-1648
Suicide Prevention
(Non-crisis): 628-3669
Fitzroy Centre: 566-5111
Hope Centre: 853-3871
Notre Dame place: 888-2237
Toll Free (non-crisis): 1-800-682-1648
Crisis Help Toll Free/24hr
Island Helpline: 1-800-218-2885
Canada Suicide Prevention Service: 1-833-456-4566
First Nations & Inuit Helpline: 1-855-242-3310
Trans Lifeline Can: 1-800-218-2885
Walk-In Clinics
Abegweit Wellness Centre: 676-3007
Ch-town (Boardwalk Ctr): 367-4444
Ch'town (Parkdale Med Ctr): 892-2111
Ch'town (Sherwood Med Ctr): 628-8900
Lennox Island Health Centre: 831-2711
Stratford Medical Centre: 892-2111
Community Mental Health services: 1-866-833-5443
Abegweit: 676-3007
Alberton: 853-8670
Evangeline: 854-7259
Lennox Island: 831-2711
McGill Centre: 368-4911
Richmond Centre: 368-4430
Send a list of resources supports anytime talking to them
UPEI Supports
UPEI Student Services: 902-566-0488

Appendix B: Poster Advertisement

Resilience and Challenges Faced for
University Students during Covid-19

Looking for UPEI Undergraduate Student Participants!

Where? That can be up to you! This research discussion will take place online on the social media platform, Zoom.

Time required of participants? The research conversation will take about 60 minutes.

Who with? Lauren Kelly, whose Honours research is focused on resilience during Covid-19.

Inclusion Criteria:

- UPEI student in progress of completing their undergraduate degree
- Speaks English
- Lived in a region that advised against public gatherings during Covid or lived or is living in a region that experienced Covid-19 restrictions on public gatherings.

Exclusion Criteria:

- Students other than UPEI
- Graduate students
- Students who have lived in an area that did not enforce quarantine or restrictions during the pandemic.

Interested in Participating?

1. Contact laukelly@upei.ca or
   (902)-388-5727 for more information
2. She will send:
   - participant information letter
   - research questions
   - consent form to read and sign prior to the Zoom call.

Not Interested?

Tell friends or family members who you think might be interested and who meet the inclusion criteria!

Appendix C: Facebook Advertisement

Hi guys! I am looking for volunteer participants to help out with my honors research! I

am looking for 10 UPEI students who are willing to take an hour out of their day to talk about

their experience of struggles or challenges faced during Covid-19 as a UPEI student. If you are

unable to for any reason but know someone who may be interested, feel free to pass on this

information 😊

Appendix D: Research Conversation Guide

Interview Questions
This is a template for you as the participant to know what to expect during the conversation with the researcher.
1. When you think about the term resilience-what do you think that means?
  - Do you think of yourself as a person who is resilient and why or why not?
2.   What were your initial thoughts on the Covid-19 pandemic?
3.   What were your initial thoughts on the Covid-19 quarantine?
4.   How did you find this life change impacted your outlook on life?
5.   Is there anything you can think of that is a positive outcome for your personal wellbeing during the covid-19 quarantine and/or restrictions?
6.   Did you find you used your time more so for pleasure, work, or self-improvement? Did you find using your time in this way was beneficial or detrimental to your mental well-being?
7.   Did you find there was any difference in your mental-wellbeing before, during, and after quarantine?
8.   When Covid-19 restrictions were loosened on May 22nd, what was your initial reaction?
  - Did you have any anxieties about going into public?
  - If you were called back to work-did you find it hard to get back into your routine?
9.   Were you able to work during the covid-19 pandemic? Was work a healthy or unhealthy distraction for you during this way and how?
10.   How do you feel about online classes being the new normal at UPEI?

Appendix E: Demographics Form

Demographics Sheet
Please do not write your name on this sheet. This information will allow us to provide an accurate description of the sample involved in the research.
For the following items, write whatever is most descriptive of you as the participant.

Gender:
Age:
Major in school:
Year of study:
Ethnicity:
Do you have adequate internet access at home? (good, fair, not good):
Are you working full-time or part-time during school? (yes-PT, FT or no- unemployed, EI, looking):
Do you have health care insurance? If you do, does your insurance cover mental health counseling services?
Income Sufficient? (Yes/No):

Appendix F: Participant Information Letter

PARTICIPANT INFORMATION LETTER
Resiliency and Challenges Faced for University Students During Covid-19

Hi, my name is Lauren Kelly. I am asking students to talk with me about their experiences over the last several months with the Covid-19 restrictions. This study is being conducted to fulfill the requirements of my Honours degree under the supervision of Dr. Colleen MacQuarrie, Department of Psychology, University of Prince Edward Island.

Our project is interested in gathering your reflections on how the Covid-19 pandemic has influenced your life. We will talk one-on-one about how your student life has been impacted as well as other aspects of your life that you feel has been influenced in both positive and negative ways. The research will be on-line through a zoom link. Our research conversation will take approximately 60 minutes. Your participation is voluntary. You can skip questions you do not wish to answer. There is no penalty or consequence to your decision to participate as much or as little as you wish. The online interview is being administered by Zoom©, which is an American software company. It is important to understand the data can be accessed by Homeland security as per the US Patriot Act so data confidentiality cannot be guaranteed. The risks associated with participation are minimal, however, and similar to those associated with many e-mail programs, such as Hotmail© and social utilities spaces, such as Facebook© and MySpace©.

If you wish to participate, contact me, Lauren Kelly, 902-388-5727, [laukelly@upei.ca.](laukelly@upei.ca) I will answer any questions you have and include information for you to look over before we start the research. You will receive another copy of this participant letter, the informed consent form, a short demographics form, and a list of guiding questions for our conversation. If you wish to continue in the research, we will set up a time and I will send you the link for our online conversation. When we meet on line, I will answer any questions you have, go over your participant rights and the informed consent which I will ask you to sign electronically or give your verbal consent if an electronic signature is not possible. I will ask your permission to record our conversation. I will ask you to repeat your verbal consent for participation. I will then ask you to complete the demographics form or send it to me if you have already filled it out. You will be one of ten participants involved in the study.

All UPEI students are eligible to participate. Participants should have lived in a region that experienced Covid-19 restrictions on public gatherings. Your participation in the research study will pose no harm to you. Your participation in this research study is governed by your decision about what to include in the discussion during the interview. You can withdraw participation at any time without consequence. The researchers have no conflict of interest.

The information collected in this study will be used in an honors thesis to create an understanding of how students experience the pandemic. You will receive a participant number and create a pseudonym, so you are not identified in the research. Any identifying information will be altered to protect your anonymity. The researchers agree to keep the data they have control over to be confidential. The audio recording of the interview will be destroyed after it has

been transcribed. If you wish to review this transcript, let the co-investigator know and they will send a copy to your private E-mail for your review within a specified time frame. The email list with participant numbers will be kept separate from the transcripts in a secured folder. Only Lauren Kelly and Dr. Colleen MacQuarrie will have access to the data resulting from this research study.

All participants will receive an email letting them know the link for the thesis in the Robertson Library Database. Anyone with access to the Robertson Library will be able to find the results from the research.

If you have any questions or concerns about this research study, you may consult with Dr. Colleen MacQuarrie, cmacquarrie@upei.ca or Lauren Kelly, 902-388-5727, laukelly@upei.ca
I understand that I can contact the UPEI Research Ethics Board at (902)-620-5104, or by email at researcherportal@upei.ca
 if I have any concerns about the ethical conduct of this study.

This research has been approved UPEI REB # _____ effective date
_____.

Appendix G: Participant Consent Form

Participation Consent Form

I have read and understood the material about this study in the Information Letter.
I consent to participating in research on:
Resiliency and Challenges Faced for University Students During Covid-19

I understand that my participation involves:

Reading the information participant letter and consent letter prior to meeting
- Voluntariness and right to withdraw without repercussions
- Meeting online for the one-on-one interview via a Zoom link sent by the researcher.
- On-line discussion with researcher for approximately one hour
- Having notes taken by the researcher
- An audio-recording taping the discussion
- Having my participation transcribed with a pseudonym
- Data retrieved from the one-on-one interview will be transcribed so study may involve quotations with pseudonyms to ensure confidentiality and anonymity.

I understand that:

- My participation in the study is limited to what I choose to disclose during the interview
- My responses will be part of an honors thesis
- Benefits associated with this participation could be gaining understanding of how this experience impacted me. There are no real risks or conflict of interests in this research
- If after conversation I feel in need of support, I can contact UPEI counselling services at (902)-566-0488 or studentserv@upei.ca
- I have the freedom to withdraw at any time and/or not answer any questions without penalty or prejudice
- The information will be kept confidential within the limits of the law
- My participation in the interview will be recorded and analyzed
- I can keep a copy of the signed and dated consent form
- No waiver of rights is sought
- The online interview is being administered by Zoom©, which is an American software company. The data can be accessed by Homeland security as per the US Patriot Act so data confidentiality cannot be guaranteed. The risks associated with participation are minimal, however, and similar to those associated with many e-mail programs, such as Hotmail© and social utilities spaces, such as Facebook© and MySpace©.

- I can contact the UPEI Research Ethics Board at (902)-620-5104, or by email at researcherportal@upei.ca if I have any concerns about the ethical conduct of this study

This research is being conducted by an honors student enrolled in psychology 4900 (Honors Thesis) under the supervision of Dr. Colleen MacQuarrie, the principal investigator of this research, in the Department of Psychology at UPEI. Any questions or concerns about this study can be directed to Dr. Colleen MacQuarrie, 566-0617, cmacquarrie@upei.ca or by Lauren Kelly (honours student), 388.5727, laukelly@upei.ca

Signature of participant _____
Signature of witness _____

Appendix H: Participant one's Themes

```
                        "I am resilient"


        Learned Self during              Fitting
           Covid-19                   Expectations of
                                      parents and
                                       educators


  Triumphs and     Strategies  to      Trials and
   Surmounts      promote overall      Tribulations
                     wellbeing
```
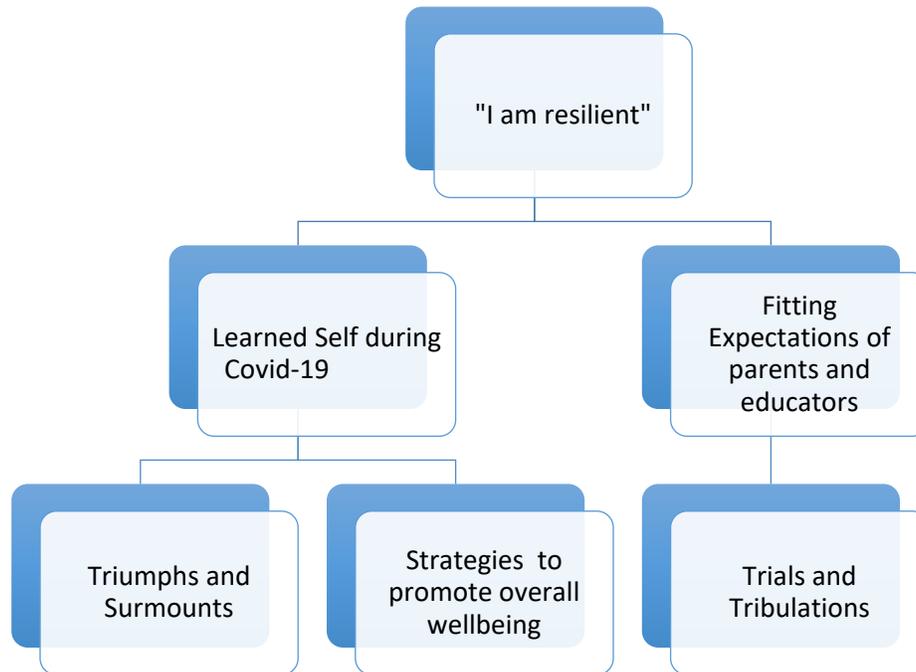
Figure two: Figure presents the consecutive overarching theme, two secondary themes, and three sub-themes of participant one's transcript.

"I am Resilient"

Participant has supported herself in a manner throughout the interview discussion which created a narrative of the journey to becoming their true self. The participant explained what struggles she had faced, what measures she took to overcome those struggles, and what her relationship with the term resilience meant to her. She placed emphasis on how far she has come in the past year and that she believes that she is, in fact, resilient. In detail, the participant describes her trials and tribulations she faced by coming to terms with who she is and was difficulties she had in her life. She gives a lot of thanks to those who helped her stay resilient throughout her struggles; such as friends, coworkers, her psychiatrist, and the accessibility services at UPEI. She does not deny she had known that her father may have a different perspective on what the word

resilient means. She felt as if she tried to fit into the person her dad wanted her to be but realized that is not what is best for her. She had to come to terms with recognizing her trauma as trauma to have closure from those events. The participant did note that she is privileged compared to many of the other LGBTQ friends who may not have the same supports that she had. Regardless of the hardships faced by this participant, she had a very optimistic view of how every experience will lead them to a greater good and a better outcome than before.

Supporting quotations from the discussion

Oh my goodness [pause] uh, I have such a complicated relationship with that specific word [resilience]

Uh I feel like my experience with it is so engrained with that personal relationship. I mean I know it through my dad because being the the military himself he would throw that word a lot and he used to like use that word for me and never fully really understood what it meant but I tried very hard to fit within that paradigm [pause] and uh- I almost feel like by actually being resilient, was defining it for myself and sadly it was by doing so that I strayed from his definition of resilience

Um I do believe I am a resilient person - I mean I've been so invested, in finally making my life make sense and part of that is I actually have a choice in ways that others don't

I've been so invested in finally making my life make sense and part of that is I actually have a choice in ways

Trauma that I am recognizing in my life so far and only allowing myself to even call trauma,

trauma like in the past year

Meaning of life is either being as happy as you can or figuring out what the meaning of life is

for yourself

We're getting there [friends and family knowing about their gender identity]

I'm usually a big believer in success isn't a straight line kind of thinking and sometimes

falling upwards is what you need um generally I'm making a lot of progress forward [pause]

I wish it was a little more easy going

So I feel like essentially maybe there are different sides to the word and I've been always

kind of devoted to trying my best with things

Secondary Theme

Learned Self During Covid-19

Participant has gone through many obstacles this year but has committed to focusing on her

journey to learn more about herself. Her ultimate goal in life is to be happy and to find her

purpose. In her post-secondary education, she studied music but took many other art courses as

well. Before the interview discussion started, she informed the research assistant she goes by

she/they pronouns and that she said she just started going by them this year. She emphasized that

in this past year she had made a lot of progress with respect to her gender identity. She also told

the research assistant that she was just recently diagnosed with ADHD. This knowledge was

also new to the participant. She discusses how she has always been devoted to trying her best and

listening to her body at the moment. She recognizes that in the past she continued to push herself until she was exhausted emotionally, so she is trying to be easier on herself. As long as she feels good on her medication, she feels like that is what is important. She considered career paths such as becoming a counsellor or working at veteran's affairs as outreach for those who may be in a similar place she was in as a child who identifies as queer with a military father. When she reflects on her motivation and the progress she has made in her life, she is very self-aware of what kind of person she is and what her motives and values are in life. She is confident she is a caring and supportive person, who enjoys making connections with others.

Supporting quotations from the discussion

"There is the like the gender identity part where like I am using the name [name she was born with] now, instead of [chosen name] um

I learned so much about myself. Like even in the past year, and it's a little dis-seeing, but all for the greater good, right

I'm trying to live my life the most meaningfully and fully for myself as possible and any moments in which that hasn't occurred for me, I don't know necessarily see that as failing at resilience in itself either

I've been always kind of devoted to trying my best with things and even if trying my best is listening to my body telling me your best is listening to your body right now um yeah

I've had some progress in that respect I guess but I imagine that would have happened just in general

I'm making a lot of progress forward I wish it was a little more easy going

Aw man, I'm-I'm so glad I'm actually like have the resources now to and it's-it's-it's so much better

I'm looking into veteran affairs now and uh I think it would be a good fit for me just cause because of my military family experience particularly uh there's not enough outreach for uh kids growing up and like how confusing that is

I really don't want to keep pushing, pushing, and pushing myself it's just not healthy for me and I did it for so long it hurt me

I uh have always enjoyed caring and listening and all that stuff and my mind seems to love making connections between things

The meaning of life is either being as happy as you can or figuring out what the meaning of life is for yourself

 It seems like if I'm feeling good like meds wise and everything too that's-that's generally the part that's what I'm missing currently

Subthemes of Learned Self During Covid-19

Triumphs and Surmounts

This participant has an abundance of triumphs and surmounts spoken of during this interview.

This semester she will be graduating from UPEI after studying music. She hopes to have a career

in either counselling or as an outreach at veteran affairs. She has been looking over her resume to

apply for a job within this year or next, depending on whether she wants to begin work right after

school or not. She has come far by coming out with her gender identity and learning how to cope

with her difficulties that come with her diagnosis of ADHD. She has also found a positive

support system through the UPEI accessibility services who have helped him with his diagnoses

to offer strategies to cope with the symptoms of ADHD. and has a community of friends who

also are in the LGBTQ+ community. She was thankful to work at Peers Alliance during the

summertime so she could have more routine back to her schedule. She also believed that working

helped her to build more autonomy and connections with new people. The participant found this

job fit well with her personality and allowed her to look more critically at herself to incorporate

breaks and to be herself rather than pretending to be someone she was not.

Supporting quotations from the discussion

    I have been wondering about being life a counsellor myself

    I afterwards was doing some resumes and stuff and ultimately decided just to take it easy and

    it definitely was the right course of action

    Uh, pronouns being like she slash they, kind of like whatever, kind of use both

    interchangeably

Uh and also to you like I have ADHD [pause] oh my god [pause] we didn't know that and it's I don't know how I've done it [pause] yeah so there might be, I might be coloring a bit

Uh I almost feel like by actually being resilient, was defining it for myself

I mean it is nice to be in this apartment rather than upstairs and to have a place with [participant's brother] because he actually lives in town now um so that-that was a happy coincidence

I mean there has been a lot of positives for other people like um a lot of trans friends specifically like being in quarantine and realizing holy shit I've been living so much for other people and now I'm like oh god [pause] now it like holds up a mirror to everything right [pause] so it's that positive for some people [pause] I have had some progress in that respect I guess but I imagine that would have happened just in general, so yeah

Aw man, I'm-I'm so glad I actually like have the resources now to and it's-it's-it's so much better
I'm looking into veteran affairs now and uh I think it would be a good experience particularly uh there's not enough outreach for uh kids growing up and like how confusing that is when uh what if you're queer and military dad is like you know part of that culture

Um I did manage to find some stuff with Peers Alliance actually which was wonderful

I think it gave me structure that helped. I feel some elements of structure probably important

for me and some are it's not I have to be kind of tweaking

So um that gave me some sallus to have a little bit more autonomy and to learn that [girl she

works with] also has ADHD that was also pretty useful um like some of the most

understanding folks you'll meet

I think of all those ways I painted myself in the past and ugh to be someone completely

different and try to keep everyone happy and impress them or impress a past version of

myself and-and all that it's just like ugh it's exhausting and also not healthy and not

sustainable

Strategies to Promote Overall Well-being

The participant was dedicated to practicing strategies that would help her with the characteristics

ADHD presents. Her goal in life is to be as happy as possible and to find her purpose in her life.

The way in which the participant promotes overall well-being presents how the proper resources

can aid in teaching people how to be the best version of themselves. In the research discussion,

the participant shows interest in continuing to stay mentally fit and wanting to create the same

attitude among others who may have been in her situation in the past.

Supporting quotations from the discussion

Uh and also to you like I have ADHD [pause] oh my god [pause] we didn't know that and

it's I don't know how I've done it. Yeah so there might be, I might be coloring a bit

Just to keep my hands going

Uh-I almost feel like by actually being resilient, was defining it for myself and sadly it was by doing so that I strayed from his (participant's father) definition of resilience

I've been always kind of devoted to trying my best is listening to my body telling me your best is listening to your body right now um yeah

 I was already trying to figure out my ADHD stuff and to a large degree I didn't have a diagnosis until this September um so I was trying my best not to take the news too hard and continue to do my work but I couldn't do that anymore

I mean there has been positives-positives in my life but to link it immediately with quarantine um like as the thing that made it the case um I mean it is nice to be in this apartment rather than upstairs and to have a place with [participant's brother] because he actually lives in town now um so that-that was a happy coincidence

I think in general my life is a balance of all three of those things, recently, at least, and as far as progressing my mental health goes, I'm usually a big believer in a success isn't in a straight line kind of thinking and sometimes falling upwards is what you need um generally I'm making a lot of progress forward I wish it was a little more easy going...Um some days are trickier than others

I was talking to my dad and was like [laughs] you don't need sleeping meds like come on you need to just exercise and I do [sighs] ugh oh my god I get wound up about this kind of stuff right [pause] and so that self-improvement and all those other things trying to be a successful person, and to communicate that to parents sometimes that-that's when the mental health gets a little discouraging and all that stuff, right

Aw man-I'm so glad I'm actually like have the resources now to and it's-it's-it's so much better

It does make me feel better about having nights in and that though which is awesome [discussion about quarantine]

I was taking some thought into like maybe doing it next years instead of this summer uh just cause I-I really don't want to just keep on pushing, pushing, and pushing myself it's just not healthy for me and I did it for so long it hurt me

I'm keeping in mind that generally it seems like if I'm feeling good like meds wise and everything too that's that's generally the part that's what I'm missing currently

It allowed me even to set breaks even after works

It's uh there's still some question marks I would say but um generally being on my ADHD meds and also Zoloft uh that's helped a lot

I just wish there was more outreach as far as like I know a lot of people that struggle just

having that and I feel like it might speak to a larger portion of folks that don't realize that

they might have ADHD or other things that they struggle with AD they don't have the proper

things to fulfill that and I think in general I would really appreciate the university to be

pushing their accessibility services a bit more because there's so many students who say oh

well like I'm doing fine enough like my grades are good like like I can't I just like my grades

are great but also I was so unhappy and I feel like I'm completely broken

If I can put music in my ears or like a podcast I'm doing so much better doing what I do um

knowing how to do those actually works for me and what to-do lists don't work for me

I have to answer a question or ask my own question just cause that's important for my own

learning

Secondary Theme

Fitting Expectations of Parents and Educators

The participant was comfortable discussing her difficulty achieving her parent's expectations

because those expectations were not who she felt she was meant to be. She described her

experience of having a dad in the military and a mother who most likely has ADHD as well and

how she felt like she had to pretend she was someone she was not just to feel accepted. She talks

about how it can be difficult identifying as queer with a father in the military who may have a

different perspective on the transgender community because of the social norms in his

community. She can become frustrated when talking to her father about her struggles because his

solution is exercise when that is not the sole remedy for issues such as sleeping. The participant

feels like her mom exhibits ADHD characteristics and believes her mom throws her own

misfortunes onto her for not getting the helpful resources the participant has received. Besides trying to act as a male for so long while feeling like a female and trying to get a career straight out of university, the participant also mentions the struggle of fitting in with educators. She mentions that asking and answering questions in school was her best learning strategy and that teachers have actually told her that she talking too much in front of the class which resulted in her feeling invalidated and anxious. She felt her talking was a burden on every teacher she had and that she did not receive enough attention in her elementary school years when she felt like teachers did not help even when they noticed she was struggling. From then on, she felt discouraged from asking for help again.

Supporting quotations from the discussion

I know it [resilience] thorough my dad because being in the military himself he would throw that word a lot and he used to like use that word for me and never fully really understood what it meant but I tried very hard to fit within that paradigm

I know there's been a lot of positives for other people like um a lot of trans friends specifically like being in quarantine and realizing holy shit I've been loving so much for other people and now I'm like oh god [pause] now it like holds up a mirror to everything right [pause] so it's that positive for some people [pause] I have had some progress in that respect I guess but I imagine that would have happened just in general

Some days the ADHD wins, sometimes I have phone calls with my parents where like you guys just don't understand slash you mom

I have worse sleeping issues that her and I was talking to my dad and was like [laughs] you don't need meds like come on you need to just exercise and I do [sigh] ugh oh my god so I get wound up about this kind of stuff, right [pause] it's maybe not directly my dad saying you're making this up. But I mean when he's saying that, isn't that just like you can't separate that thought from what he just told me

Oh my god it's kind of a trip living as long as you are, in that boy phase and feeling like you got to hold your tongue the entire time

I'm looking into veteran affairs now and uh I think it would be a good fit for me just cause because of my military family experience particularly uh there's not enough outreach for uh kids growing up and like how confusing that is when uh what if you're queer and military dad is like you know part of that culture, he's generally okay but like all parents are generally okay with like all of those knives and stuff right? Those words that hurt and stuff

It's hard growing up in a family when you realize what you always told yourself was just completely normal and okay but um yeah, it's uh a little hard but yeah that answers the question

I have my parents expectations way too high on my list-it's hard to, anyway

Ugh it's such a strength but also the bane of every teacher I've ever met [about giving detailed answers]

Oh my god [pause] and ugh, I have so many stories with like one of my professors just saying you talk too much and saying that in front of the whole class and just like so invalidating and like

It gives me a whole like every time I have to answer a question or ask my own question just cause that's important for my own learning, oh my god. Now I have immense anxiety about that. Now of course it's based on past stuff too but like

When I talked to my parents about it I almost feel like I'm getting distracted and failing on their version of success and like who cares, I'm 22, I'm going to be 23 soon

Subtheme

Trials and Tribulations

The participant discusses the trials and tribulations faced that are very well interconnected with previous themes and subthemes mentioned above. The participant speaks of being put on hold by the Island Helpline for hours when she was in need of their service and not receiving decent respect from past professors and teachers. This experience has a lot to say about the mental health services we have readily available for islanders who are struggling with their mental health. She struggled with feelings of inferiority coming out to her parents as transgender and had a hard time branching from their idea of what success and resilience meant to them and finally defining it for herself. The participant mentioned how tiring it was trying to manage her symptoms related to ADHD when she did not have a diagnosis or the support to help her manage her disability. She mentions how moving out of her apartment and moving back home was the

best decision for her during the Covid-19 quarantine, however found it tricky and complicated

when her roommate decided she wanted to live on her own even after the quarantine. This

resulted in the participant being able to live with her brother, which ended on a positive note. She

did mention how sleeping can be really hard for her and how communicating this struggle can be

difficult. The participant also mentioned struggles directly related to Covid-19. She found it hard

to trust that loosening the restrictions would be what was best for islanders as well as adjusting to

the masks because of her sensory issues. Some struggles she has also recognized was that when

applying to government jobs it is hard to identify as anything between the binary and not does

not seem ADHD accommodating.

Supporting quotations from the discussion

I've had some like scuffles with the island helpline putting me on hold for two hours-ugly

[pause] but um anyways yes [pause] good, thanks for putting that out there in your recording

for everyone who may need that

When everything hit the fan uh it was very tricky [pause] not just between me and her we're

good but like uh it was decided that I was going to move back home for a bit just to keep

things simple and then essentially there was uh her realizing that loving alone was what's

best for me so that was a bit complicated

I was at the stage where I was already trying to figure out my ADHD stuff and to a large

degree I didn't have a diagnosis until September um so I was dealing with like executive

dysfunction and other things that I didn't really have solutions at that rate so I was trying my

best not to take the news too hard and continue to do my work but I couldn't do that anymore and honestly I mean it's a god damn pandemic like it didn't really matter anyway

Like I am terrible at sleeping, sleeping is so hard for me, I literally have insomnia and [laughs]

And to communicate that to parents sometimes that-that's when the mental health gets a little discouraging and all that stuff, right

Oh my god I'm so scared they shouldn't do this I'm pretty sure [pause] that's generally been my reaction like all the time like this circuit breaker we're currently in is literally like I am I have the same schedule again like I still have in person classes and like there have been cases on the literal bus I was on [pause] I was also a close contact once which was icky

Like I have sensory issues and unfortunately I have to be quite cognizant of that and like oh my god he masks just like ugh [pause] I come home and my nose is just like pressed down and my teeth are like this [clenches teeth] all day

Being able to self-declare as like a woman or as like someone with disabilities and stuff, like there's no way for me to do anything in terms of between the binary and like it's it's so anti-ADHD friendly too it's just like ugh so, I don't know where the question was [laughs]

I am a little self-conscious about how much I talk

Reading always been difficult for me too um but um what else could I say [pause] it's uh there's still some question marks I would say but um generally being on my ADHD meds and also Zoloft uh that's helped that's helped a lot

Appendix I: Participant two's Themes
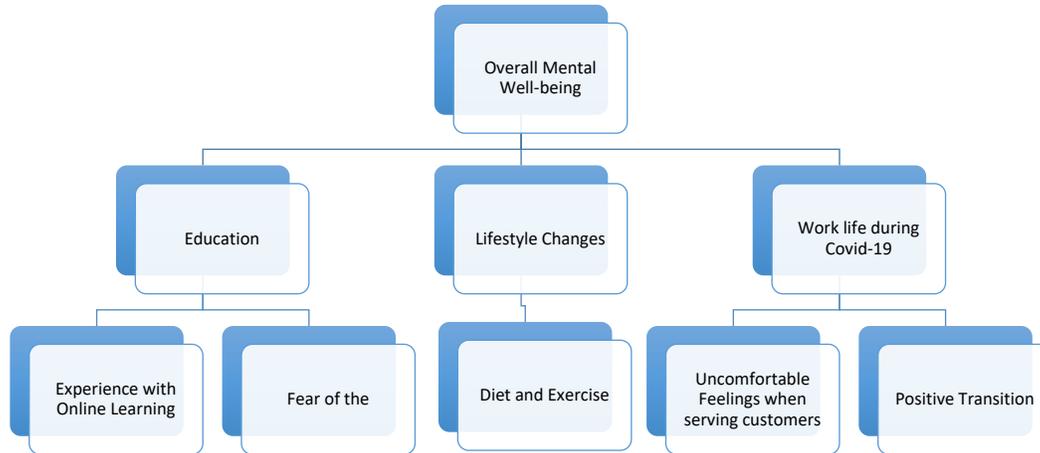
Figure three: Figure represents the constitutive overarching theme, three secondary themes, and four sub-themes of participant two's transcript.

Overall Mental and Physical Well-being

Participant two was open about her past and experience during the Covid-19 pandemic. She discussed how she neglected taking care of her physical and mental health before Covid-19 quarantine. For her, quarantine provided time for her to cook healthier meals and to really care about what she was putting into her body. To waste some of the extra time she had, she began physical activity. She turned these changes into healthy lifestyle habits that were a result of quarantine. The participant also mentions learning more about herself, learning to be more patient, and learned how to be okay with not knowing everything that is going on. By practicing all of these new skills, she said she had a much more positive mindset on the later bit of quarantine than she did at the beginning. She was positive in saying that her mental health is way better than it was a year ago.

Supported quotations from the discussion

As school stopped we still had more time to ourselves until like May [pause] so it felt

like more maybe I had chances to do something else for a while [pause] it was like

maybe starting to work out more, then focusing on food so then I actually did see more

positive mindset towards the end of quarantine then I did at the start

I did learn to be more like, patient and I did learn like, more about myself. Like I literally

look back and go wow all of the things I learned during that time. Um but I think just um

expecting like not the worst which is just being prepared for what can happen and not -

like being okay with like, not knowing

before like going into quarantine I was not didn't really like stopped working out didn't

really care about like what I was eating and stuff like I just ate what was fastest and then

obviously once we were in quarantine we had so much more time so I think a lot of

people focused more on like what they were cooking and like cause that's basically all

we had to do is like look forward to new meals coming that day like I tried healthier

meals and cared more about what was going into my body and like took notice to like

what I was eating. And then tried to do some activity every day just to kind of, like waste

the time but no I do think I've gained some healthier habits because of quarantine

I think stress levels went way down and anxiety levels went way down when you're

spending more time outside and caring about what like you put in your body [pause] like,

obviously like you're going to see more positive realizations like about everything but

then, now that we are out of that I do find that my mental health is probably way better

than it was like a year ago like yes, still stressed about exams but in a way healthier way

than I was a year ago

Secondary Theme

Education

When Covid-19 started to come to Canada, the participant remembers being nervous when she

was noticing that students from McGill were playing against the UPEI hockey team after hearing

Quebec was impacted by Covid. She notes that she was more nervous about not knowing how

she was going to finish the semester than she was of Covid-19. She also did not believe that

quarantine was going to last any longer than two weeks. The participant did not feel adequately

prepared for her education to be online. In March 2020, she was nervous about how the semester

was going to end and was living with her family who all had to access the internet as well,

therefore making the connection poorer. She felt very overwhelmed, stuck, and stressed during

that time because exams were right around the corner. She says this year she still feels the stress

of exams, but in a much healthier way. The participant expressed enjoying online classes when

they first started in September, but is now struggling to find motivation to sign into lectures and

absorb the information from home. She feels as though she would do much better if her classes

were in person because she would be in a facility where they encourage learning, not in the

comfort of her own home. The participant finds her friends are having a different experience,

where they did not enjoy online classes at first, but now do enjoy the online classes.

Supporting quotations from the discussion

Once we started getting cases in um Canada like in Quebec, Ottawa uh I was really

nervous because I literally remember being at school and like all of the national girls

were at the school like walking around like McGill and all those schools were walking

around so I was just like scared [pause] like oh my goodness like we're going to get it,

we're going to get it here [pause] um but then I was nervous for school [pause] I didn't

know what was going to happen with, like how we were going to finish off our semester

[pause] and that's probably what I was most nervous about [pause] like I don't think I

was even that nervous about getting Covid, I was more nervous about how we were going

to finish the semester

I thought we were just going to have two weeks off and then we were going to go right

back to normal

Um it felt like stuck-Okay so like it was weird because during the start of it like

quarantine I felt very like stuck like I couldn't go anywheres because we did have to

proceed with the rest of the semester so I felt stuck, I couldn't go anywhere, I was forced

to study and obviously my house in [location participant lives] does not have good Wi-Fi

and [brother 1] was on it, [brother 2] came back, and my parents were on it so Wi-Fi was

not good at all like I just felt very very overwhelmed

Yeah, um definitely, well um around that time it was like March so exams were about to

start so I was pretty stressed and like again I wasn't like the healthiest I was so like

mental health wise before like going into the lockdown was like not the best like pretty

low but then the start of quarantine was obviously like everything was heightened cuz it

just like wouldn't, the uncertainty of everything I guess sort of heightened like the stress

and anxiety of it like with school

Um at the start it's funny because at the start I actually really did like them like obviously

it was a learning curve and a transition but I did really like them like I just found it easier

to schedule and kind of do everything on your own but now that we're like in second

semester I just feel myself like I don't think absorbing as much as the information as

much as I would if I were in class like I see myself maybe like okay I can miss this

lecture online because I can just watch the next one but then test rolls around and I'm like

behind whereas if it was in person that wouldn't, would never happen and like you just

absorb more when you're hearing it in person and seeing the prof talking so it's funny

because I think for a lot of my friends, it was the opposite [pause] like they hated it at

first and now are starting to like it but I think I'm like I started liking it but now I'm just

really not liking it

I think like not being in the school like sometimes I will go to the library or will go to

McDougall to study and I'm just like oh my goodness how much I miss like just being in

a facility of like learning because then you feel more motivated to learn because like

when you're just in your own house you're like okay I can put this off and you're always

looking for distractions and you're just not motivated to learn

Subthemes of Education

Experience with Online Learning

As previously mentioned above, the participant talked of her struggles with online learning and

how she had feelings of being stuck. She felt this way because she could not go anywhere, was

forced to stay in her family home, and felt overwhelmed trying to study when her internet

connection was not working well because of all of the users using it. She said that it was funny because at the beginning of the fall semester she did enjoy the online courses even though it was a learning curve because they were more flexible with her schedule, but now that she is in the winter semester she is finding that she does not absorb as much information as she would if it was in-person. The participant explained this by saying that she would miss one lecture online and then say to herself that she could just watch the next one, but then a test would come up and she would be unprepared. She feels like being in a facility where people are encouraging learning, where you can hear and see you professor, and be able to take out that time to physically go to class would help her absorb more of the information than she would online.

Supporting quotations from the discussion

> Um it felt like stuck-Okay so like it was weird because during the start of it like quarantine I felt very like stuck like I couldn't go anywheres because we did have to proceed with the rest of the semester so I felt stuck, I couldn't go anywhere, I was forced to study and obviously my house in [Location participant lives] does not have good Wi-Fi and [brother 1]was on it, [brother 2] came back, and my parents were on it so Wi-Fi was not good at all like I just felt very very overwhelmed

> Start of quarantine was obviously like everything was heightened cuz it just like wouldn't, the uncertainty of everything I guess sort of heightened like the stress and anxiety of it like with school

> Um at the start it's funny because at the start I actually really did like them like obviously it was a learning curve and a transition but I did really like them like I just found it easier

to schedule and kind of do everything on your own but now that we're like in second

semester I just feel myself like I don't think absorbing as much as the information as

much as I would if I were in class like I see myself maybe like okay I can miss this

lecture online because I can just watch the next one but then test rolls around and I'm like

behind whereas if it was in person that wouldn't, would never happen and like you just

absorb more when you're hearing it in person and seeing the prof talking so it's funny

because I think for a lot of my friends, it was the opposite [pause] like they hated it at

first and now are starting to like it but I think I'm like I started liking it but now I'm just

really not liking it

I think like not being in the school like sometimes I will go to the library or will go to

McDougall to study and I'm just like oh my goodness how much I miss like just being in

a facility of like learning because then you feel more motivated to learn because like

when you're just in your own house you're like okay I can put this off and you're always

looking for distractions and you're just not motivated to learn

Fear of the Unknown

A commonality found within this discussion is the participant being anxious about not knowing

what could possibly happen in the future, but trying to be okay with not knowing at the same

time. She mentioned that she didn't know what to expect when she was hearing of cases in the

US, started to become scared when there were cases in Canada, and then worrying about the

spread of Covid-19 when the girls hockey team from Quebec was on PEI. However, what this

participant was most particularly nervous about was how the school semester was going to end.

Originally, she believed the quarantine was only going to last a couple of weeks and then they

would go back to normal. So when that was not the case, she felt stuck. She mentioned how it

was a good strategy for her to be prepared for what can happen, but also being okay with not

knowing everything.

Supporting quotations from the discussions

      Um I didn't really know what to exp-I actually never thought it was going to come to

Canada. Like when it was still talk in like early Mar- Well like late February, or like early

February I never thought it would come to Canada and then when it came to the US then

I started getting more scared and then once we started getting cases in um Canada like in

Quebec, Ottawa uh I was really nervous because I literally remember being at school and

like all of the national girls were at the school like walking around like McGill and all

those schools were walking around so I was just like scared [pause] like oh my goodness

like we're going to get it, we're going to get it here [pause] um but then I was nervous for

school [pause] I didn't know what was going to happen with, like how we were going to

finish off our semester [pause] and that's probably what I was most nervous about

[pause] like I don't think I was even that nervous about getting Covid, I was more

nervous about how we were going to finish the semester

      I thought we were just going to have two weeks off and then we were going to go right

back to normal

      But I think just um expecting like not the worst which is just being prepared for what can

happen and not - like being okay with like, not knowing

Secondary Theme

Lifestyle Changes

Participant 2 believed the Covid-19 quarantine was beneficial to her mental and physical well-being because she was able to take the time to cook healthy meals, therefore caring more about what kind of food was going into her body. She also started exercising more than she was before Covid-19. Reflecting on her lifestyle before Covid, she realizes she was not living a healthy lifestyle; and sees now that she is living a much healthier lifestyle. She also mentioned that she became more patient and understanding because of the Covid-19 quarantine. She believes that her overall mental health has improved as she mentioned how this time last year, she was much more stressed and had a lower mood than she does currently.

Supporting quotations from the discussion

> Um I did-do feel like during quarantine I did learn to be more like, patient and I did learn like, more about myself [pause] like I literally look back and go wow all of the things I learned during that time

> Right before like going into quarantine I was not didn't really like stopped working out didn't really care about like what I was eating and stuff like I just ate what was fastest and then obviously once we were in quarantine we had so much more time so I think a lot of people focused more on like what they were cooking and like cause that's basically all we had to do is like look forward to new meals coming that day like I tried healthier meals and cared more about what was going into my body and like took notice to like what I was eating [pause] and then tried to do some activity every day just to kind of, like waste the time but no I do think I've gained some healthier habits because of quarantine

I actually do think I learned a lot about myself like during quarantine like I think it was in

all of the most positive way possible like for pleasure like Netflix and that stuff but I do

think a lot of positive things came from that

Around that time it was like March so exams were about to start so I was pretty stressed

and like again I wasn't like the healthiest I was so like mental health wise before like

going into the lockdown was like not the best like pretty low but then the start of

quarantine was obviously like everything was heightened cuz it just like wouldn't, the

uncertainty of everything I guess sort of heightened like the stress and anxiety of it like

with school but then like that shifted a lot like just when you learn to have more patience

with it and stuff I think stress levels went way down and and anxiety levels went way

down when you're spending more time outside and caring about what like you put in

your body [pause] like, obviously like you're going to see more positive realizations like

about everything [pause] but then, now that we are out of that I do find that my mental

health is probably way better than it was like a year ago like yes, still stressed about

exams but in a way healthier way than I was a year ago

Subtheme of Lifestyle Changes

Diet and Exercise

Although the participant discussed a lot about how she became healthier mentally and physically

due to quarantine, there were specific changes in her life that she felt made the most significant

difference. Diet and exercise were mentioned many times throughout the conversation with this

participant. She mentioned how she wasn't caring what she put into her body and stopped

working out right before she went into quarantine. Quarantine gave her time to start cooking her

own meals and working out just to pass the time. However, she mentioned that these strategies

turned into habits which ultimately bettered her physical health during and after the Covid-19

quarantine.

Supporting quotations from the discussion

> Yeah so like during that time like I think right before like going into quarantine I was not
>
> didn't really like stopped working out didn't really care about like what I was eating and
>
> stuff like I just ate what was fastest and then obviously once we were in quarantine we
>
> had so much more time so I think a lot of people focused more on like what they were
>
> cooking and like cause that's basically all we had to do is like look forward to new meals
>
> coming that day like I tried healthier meals and cared more about what was going into my
>
> body and like took notice to like what I was eating. And then tried to do some activity
>
> every day just to kind of, like waste the time but no I do think I've gained some healthier
>
> habits because of quarantine

> I think stress levels went way down and and anxiety levels went way down when you're
>
> spending more time outside and caring about what like you put in your body [pause] like,
>
> obviously like you're going to see more positive realizations like about everything

> As school stopped we still had more time to ourselves until like May [pause] so it felt like
>
> more maybe I had chances to do something else for a while [pause] it was like maybe

starting to work out more, then focusing on food so then I actually did see more positive

mindset towards the end of quarantine then I did at the start

Secondary Theme

Work Life During Covid-19

The participant talks about how she was nervous when she heard that things were opening

because she just started her summer job at a very popular restaurant in PEI and wanted to know

what was going to happen. She remembers being fearful of the bubble opening in case they

would need to go back into quarantine again, but happy to have the restrictions loosened as well.

She found adjusting to the changes set in place at her work were difficult because she would

have to give a speech, stand far enough away from the customers, and reach for plates and water

glasses in a way that was safe; however she said it was easy to get into that routine after a while.

She found work as a positive and healthy transition for her because the shifts went by fast for

her, money was nice to have, and she was able to be outside. She mentioned how she could tell

when customers were anxious about being out in the public during Covid and how she would

treat them differently than customers who did not seem as anxious. The participant also

mentioned her struggle to enforce some of the different protocols that were being broken by

customers at the restaurant she worked at. She said this made her feel unsafe in some situations.

Supporting quotations from the discussion

> Um, I was a little nervous. Because I was like when I first heard that things were opening
>
> up like I got my job at [restaurant] I was like just trying to figure out what was going to
>
> happen like thinking about like the bubble was going to open and like if we are all just
>
> going to go back uh my initial thoughts were like when things were going to go back to
>
> normal I thought that we were all just going to like gonna get it and then have to go back

into lockdown so like I don't know if I was like I was happy that it was opening but very

nervous because I didn't wanna go back into the long lockdown like I was okay with

taking it as slow as possible like getting things done

Um it was at first because we did also have a lot of like restrictions like I remember at the

very start I would have to like give a speech to the table about how I'm going to have to

stand 6 feet away and how you guys are going to have to move plates to the side so like

all that stuff was new in like the restaurant just because I wasn't like used to like the pro-

like the new protocols that were put in place but like after a while it was easy to get into a

routine again

It was funny because you could definitely tell like what customers were going to be

anxious about it and what customers weren't just the way their body language was

towards you and I know like starting towards the beginning of the summer the masks

weren't required but some people would still and even for servers the masks weren't

required until half way through the summer but people still were still showing up at the

very start wearing masks so you knew you would have to kind of take your space like

from them and stuff like that but then you also like when it got later at night at like 12

and stuff obviously like people- no one was real- and they're very young like customers

who I would have at that time and like people weren't as anxious about it

Um, it was when I when I first started wearing the masks er even before even if I wasn't

wearing a mask but they were I felt like maybe I should be wearing a mask because I was

like maybe they feel uncomfortable and unsafe and they probably don't wanna be close to me so then I'd always probably like I guess like treat them differently than I should of like I'd always like far away I'd reach to give them their food instead of probably coming a little closer and then I'd try my like hardest not to touch as much many things and then like I did feel myself backing like way up to talk to them and like trying not to like talk directly on them or something like that but as like things got further in than when we started wearing a mask I guess I did feel more safe talking to tables because I like did um I just did I did feel like wearing the mask I could stand a bit closer and serve and not have to like reach food but the biggest problem I had over the summer was when it got to those like late nights obviously like don't really remember the protocols that were put in place so like you couldn't go from table to table and like they'd be coming up to you and like maybe they'd try to hug you and stuff like that and in those moments you feel kind of unsafe like not just cause like you didn't want to get in trouble but sometimes you didn't even know these people and like could be from away and you're just questioning everything so just those were the only moments ever that I ever felt like unsafe like per say

Yeah it was definitely a healthy to go right from quarantine to [restaurant] I think that was like the best decision like not to go back to [old job] but to go back to [restaurant she worked at last summer] because it was like a fast-paced job your shifts went by pretty short, you could see money pretty easy, like easy money and like the people were all great um I was outside like some of the time so I was like used to being outside but no I do think going to [restaurant] like work right after was a great transition and like healthy

Subthemes of Work life during Covid-19

Uncomfortable Feelings when Serving Customers

The participant spoke of some experiences she had while working as a server at a very popular restaurant/bar on PEI during the summertime. Although, she enjoyed her time there and found it to be a great decision to work during the summer; there were some instances where she felt that she was trying to make assumptions about people based on whether they were wearing a mask or not when there was no mandatory mask rule. She remembers seeing people wearing masks and treating them differently than she would someone who was not wearing a mask. She may have treated them differently by maybe standing further away from those customers or reaching and trying to not touch as many of their things. While reflecting on this, she decided that she probably should have treated everyone the same. When the mask rule wasn't mandatory for servers, she felt as though she should put one on for customers who were wearing one so they would feel more comfortable and safe. Aside from her own assumptions, she faced some other difficult situations. She found that at night time people would tend to forget the rules and regulations put in place and would be travelling from their table to another and at some points would even come up to her and hug her which made her feel unsafe.

Supporting quotations from the discussion

> It was funny because you could definitely tell like what customers were going to be anxious about it and what customers weren't just the way their body language was towards you and I know like starting towards the beginning of the summer the masks weren't required but some people would still and even for servers the masks weren't required until half way through the summer but people still were still showing up at the very start wearing masks so you knew you would have to kind of take your space like from them and stuff like that but then you also like when it got later at night at like 12

and stuff obviously like people- no one was real- and they're very young like customers who I would have at that time and like people weren't as anxious about it

Um, it was when I when I first started wearing the masks er even before even if I wasn't wearing a mask but they were I felt like maybe I should be wearing a mask because I was like maybe they feel uncomfortable and unsafe and they probably don't wanna be close to me so then I'd always probably like I guess like treat them differently than I should of like I'd always like far away I'd reach to give them their food instead of probably coming a little closer and then I'd try my like hardest not to touch as much many things and then like I did feel myself backing like way up to talk to them and like trying not to like talk directly on them or something like that but as like things got further in than when we started wearing a mask I guess I did feel more safe talking to tables because I like did um I just did I did feel like wearing the mask I could stand a bit closer and serve and not have to like reach food but the biggest problem I had over the summer was when it got to those like late nights obviously like don't really remember the protocols that were put in place so like you couldn't go from table to table and like they'd be coming up to you and like maybe they'd try to hug you and stuff like that and in those moments you feel kind of unsafe like not just cause like you didn't want to get in trouble but sometimes you didn't even know these people and like could be from away and you're just questioning everything so just those were the only moments ever that I ever felt like unsafe like per say

Positive Transition

The participant was positive that she made the right choice choosing to work during the first summer of Covid-19. She felt as though working during the summer was a positive and healthy transition. The fact that she was able to be in a fast-paced environment, the shorts went by quick, was able to see money easily, and was outside; were all attractive to her as a summer job. The participant also mentioned that it was fairly easy to get back into the work routine again after getting used to the new protocols that were put in place. She found the masks made her feel safer talking to tables because she could stand closer to customers and not have to reach as much.

Supporting quotations from the discussion

Yeah it was definitely a healthy to go right from quarantine to [restaurant she works at]I think that was like the best decision like not to go back to [restaurant participant used to work at] but to go back to [restaurant she works at]because it was like a fast-paced job your shifts went by pretty short, you could see money pretty easy, like easy money and like the people were all great um I was outside like some of the time so I was like used to being outside but no I do think going to [restaurant she works at] like right after was a great transition and like healthy

when we started wearing a mask I guess I did feel more safe talking to tables because I like did um I just did I did feel like wearing the mask I could stand a bit closer and serve and not have to like reach food

I wasn't like used to like the pro-like the new protocols that were put in place but like after a while it was easy to get into a routine again

Appendix J: Participant three's Themes
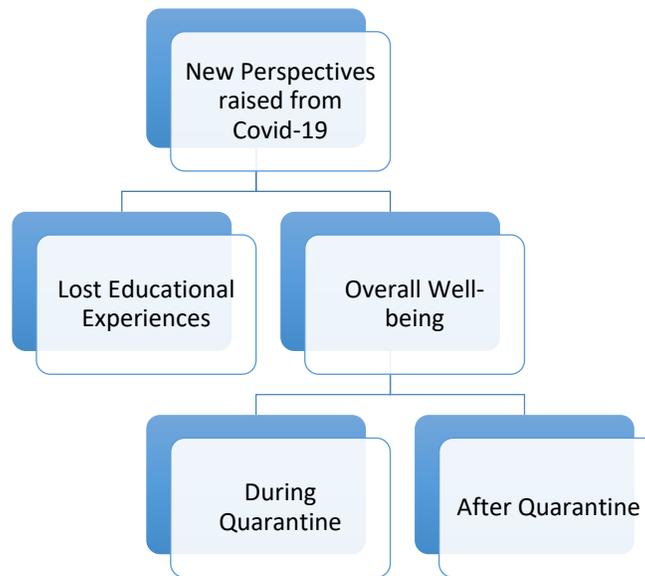

Figure four: Figure presents the consecutive overarching theme, two secondary themes, and three sub-themes of participant one's transcript.

New Perspectives raised from Covid-19

Participant three discussed with the research assistant how she started to have a different philosophy on life when Covid-19 began to impact PEI. She said that when quarantine started, she realized how quickly things can change. She said for people to do things when they can rather than waiting for the perfect moment because you never know what might happen that might make it impossible to do those things. The participant also mentioned that being in quarantine was kind of nice in a way because she was able to slow everything down. The research assistant believes the participant was talking about slowing down the things in life that can cause stress as the participant was just talking about how it was nice to be able to have a break from school. The participant also discussed how there were difficulties accommodating her nursing degree as many of the important elements of her education are labs, clinical, and

placements. However, the participant seemed to have a positive attitude that everything in the end would be okay. The theme for this participant seemed to be an overall appreciation for information regarding the Covid-19 pandemic. Her anxieties on the matter seemed to ease when she learned more.

Supported quotations from the discussion

Um it was scary at first because nobody knew what was happening or how long it was going to last [pause] um or how it was going to affect our lives um but as it went on and we learned more about it and it kind of became a little less scary but ya

I think that it made me think that things can change really quickly like I had a lot of plans that didn't happen because of Covid-19 so um just learning to do things when you can and have the opportunity because you never know what might happen that might make it impossible to do those things kinda doing the things that you want to do when you want to do them [laughs]

So yeah I think there were positive to it and just like kinda time to slow it all like, everything down was nice and beneficial

So I feel like we kind of missed out on some of that so it definitely did affect it [education] but in the end it will all be okay

Secondary Theme

Lost Educational Experiences

The participant discussed missing out on educational opportunities that would normally be a part

of her degree, but were cancelled because of the Covid-19 pandemic. She acknowledged that

these things could not happen because it was in everyone's health's best interest. However, she

was disappointed she did not experience more hands on work as the career she will have after

she graduates is primarily hands-on. Her perspective was that even though she does not think that

she received the ideal education she wanted to receive, she was able to make do with what

resources she was given, and believes everything will work out in the end.

Supported quotations from the discussion

Um, I feel okay about it depending on the class [pause] like um like class wise I'm okay

with it being online and I'm okay with online learning but like in terms of labs and

clinical and stuff I didn't enjoy that online I would have preferred if we were able to do

that in person but classes I don't mind online

Yeah, yeah it was definitely a change because it was between like March was the last

time until September so it was a really long gap to like not be doing that stuff when

normally I would have done it in May and June um so it was really long gap so it was

kind of hard to get back into the swing of it um of doing that stuff in person but uh I

think everyone adapted

Well it impacted my education because I was supposed to go on an international

placement and I never got to go which would have been a good learning experience for

me um so that was disappointing and also um it impacted me as a I was supposed to do

like a community nursing placement um that I wasn't able to do like I had to do it online

so it just wasn't as beneficial as being in the actual setting um as well um there were

some like labs and stuff that I was supposed to do during Covid-19 that we never got the

chance to do so I feel like we kind of missed out on some of that so it definitely did

effect it but in the end it will all be okay

Um yes and no, like, like in our fourth year we learned about how to give blood

administration, okay [pause] and so usually you would go and you would go to the lab at

UPEI and you would like practice it but because of Covid we just learned about it in a

lecture online and nobody actually got to get hands on and like practice it so like things

like that I think we missed out on and like there were things that they weren't able to

replicate online

Secondary Theme

Overall Well-Being

During the research discussion, the participant discussed how her well-being was before and

after the quarantine. The participant talks about her feelings regarding being isolated from her

friends and other family members and how she managed those feelings. She also discussed how

she felt when the restrictions were eased and she could finally see people outside her immediate

family. The participant showed her resilience through the difficulties faced through the year of

the pandemic by the way she chose to overcome different challenges and her mindset towards

said challenges.

Supporting quotations from the discussion

Um, yeah, but I haven't experienced many things where I had to be resilient from I guess

but I think if the time came I would be

It was like hard just not being able to do normal life [pause] like just not being able to go

to the grocery store or anything so it was definitely isolating that way um and just

different cuz we like we never been told we can't do those normal things before

So yeah I think there were positive to it and just like kinda time to slow it all like

everything down was nice and beneficial

I think it was beneficial because at the time I didn't have any other commitments so it

was nice to take that time to just do what I wanted to do

Subtheme of Overall Well-Being

During Quarantine

During quarantine the participant talks about her overall well-being during the Covid-19

quarantine At the beginning of quarantine she found her experience being stressful and fearful

because she felt like she did not know what was going on. She was nervous that she could have

Covid or that someone else would get Covid that would set off an outbreak on PEI. She

concluded that once PEI seemed to have all their protocols under control, she felt a lot better and

said that knowing that PEI's measures seemed to be working improved her mental well-being.

The participant also mentions how quarantine was beneficial to her mental well-being because

she did not have anything to commit to and could do what she wanted to do. She used this time

to go on walks, read, and spent time with family.

Supporting quotations during this discussion

Um, it was scary at first because nobody knew what was happening or how long it was going to last [pause] um or how it was going to affect our lives um but as it went on and we learned more about it and it kind of became a little less scary but ya

It was like hard just not being able to do normal life [pause] like just not being able to go to the grocery store or anything so it was definitely isolating that way um and just different cuz we like we never been told we can't do those normal things before um but it was a good chance to spend time with family and do other things that I normally wouldn't have time to do

Um I spent a lot of time outside too like going for walks um which was good mentally and physically um and even just like having time whenever there was the break from school like even just trying to read which was nice for like my mental well-being so yeah I think there were positive to it and just like kinda time to slow it all like everything down was nice and beneficial

I think it was beneficial because at the time I didn't have any other commitments so it was nice to take that time to just do what I wanted to do

Um at the beginning of quarantine I was definitely stressed just because I didn't know what was happening and just living in the fear of someone getting Covid or myself getting Covid or there being an outbreak on PEI um and that lasted I guess for most of the quarantine, but coming on the end it was kind of um seemed like we have everything under control and the measures were working so I was feeling a lot better about it then

and then afterwards I think I felt better just being able to interact with people who I

haven't seen in a month or so um that was better for my mental well-being

After Quarantine

The participant addressed how her wellbeing was after PEI loosened their restrictions and were

allowing small gatherings. She remembers feeling anxious about going into stores or restaurants

at first, but also felt excited to be able to see friends and family that she was not able to see

during the quarantine; therefore, having mixed emotions about the decision. She found it was a

little different getting used to working and committing to that set schedule, but found that it was

good to be able to get back into that routine again. She found work to be a healthy distraction

after quarantine and gave her more motivation to get up and do something. Like mentioned

above, she did find it hard to adjust to online classes but does not mind them as much as she does

online labs. She was disappointed that she missed out on learning opportunities but did realize

that there were not many safe options for her to be able to practice while living in the pandemic.

Supporting quotations from the discussion

Um yeah I was excited to be able to interact with my friends, but I did still have some

anxiety about going into stores or restaurants or anything [pause] um I didn't do that for

the first little bit when the restrictions eased but um so I was nervous about that but I was

excited at the same time to be able to see my friends and other family members that I

wasn't able to see so it was kind of mixed emotions

Um yeah I did [pause] cuz I was off for quite a long time with Covid so just getting back into actually committing to something was different but um but it was good to get back into a routine

It was a healthy distraction cause it meant I wasn't um just at home every day it gave me like the motivation to like get up and do something when I didn't want to so it was a healthy distraction I think it was a good choice um to work

Um, I feel okay about it depending on the class [pause] like um like class wise I'm okay with it being online and I'm okay with online learning but like in terms of labs and clinical and stuff I didn't enjoy that online I would have preferred if we were able to do that in person but classes I don't mind online

Yeah, yeah it was definitely a change because it was between like March was the last time until September so it was a really long gap to like not be doing that stuff when normally I would have done it in May and June um so it was really long gap so it was kind of hard to get back into the swing of it um of doing that stuff in person but uh I think everyone adapted

Appendix K: Participant four's Themes

```
                         ┌─────────────────┐
                         │ Realizations of │
                         │   Resilience    │
                         └─────────────────┘
```
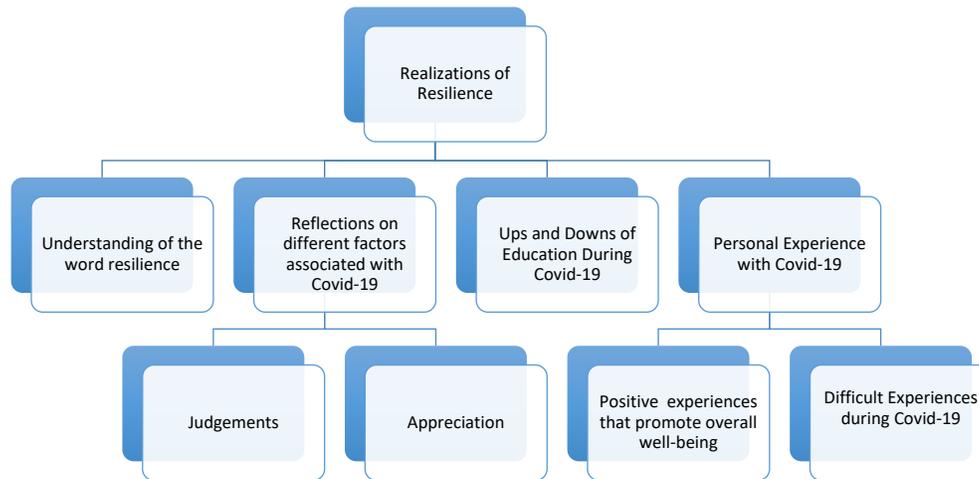

Figure five: Figure represents the overarching constitutive theme, along with the four secondary themes, and 8 subthemes that portray the participants overall experience with Covid-19 and the assumptions made of others while the rules and regulations were being put in place.

Realizations of Resilience

Participant four did not see her resilience in the beginning of the research discussion. She was not sure whether her challenges were hard enough and did not know if she could give reasons to defend why she was resilient. She went on to dive into the hardships she has faced in her life which resulted in her feeling a bit more comfortable with identifying as resilient. Throughout the rest of the interview, she talks about different hobbies she took up during quarantine that benefited her overall wellbeing as well as the positive experiences she has encountered during Covid-19. The strategies she used to stay mentally and physically healthy during a difficult

experience can demonstrate how resilient she was without regarding her mindset and behavior as resilient.

Supported quotations from the discussion

> I want to say yes [in response the question, "do you think you are a resilient person"] because I think everyone could be resilient in their own way but I think but I don't think I have a reason where I uh, could back it up

> Well um I just-I don't know if they would be considered challenges or not [pause] but like a couple of years ago there were a few deaths in the family [pause] like my poppy and my great aunts [pause] that was hard because after my poppy it felt like we didn't get to properly grieve the other deaths [pause] but um I feel like dealing with death which is really the only thing in life that is [inaudible] so early in my life has happened to me recover from maybe when I start to see death more often in my adult life [pause] it's hard to say [pause] um I am not sure if that has made me more resilient or just good at adapting [pause] I think maybe an easier thing I could think of is whenever I was in grade 12 I had a bad concussion where I needed quite a bit of time to recover from [pause] after the recovery time, I found it a lot harder to study and to focus on really anything [pause] this experience kind of made me try to adapt to, like my situation which really sucked and work harder to see the same or similar results um I had before the concussion [pause] I think that could maybe be an example of how I am a resilient person [pause] um not to mention, so many of us were able to survive a pandemic [pause] which I would say is pretty resilient

I think my mental health generally stayed pretty stable throughout the whole quarantine

[pause] I was stressed and had low moods, but for the most part I was understanding

[pause] when the restrictions were loosened a bit I felt a little more free

I found myself doing more things which for um more things for myself which was kind

of interesting [laughs]. I guess we had no one else really to do anything with

Secondary Theme

Understanding of the Word Resilience

In the beginning of the discussion with participant four, she talks about how the term

resilience can have multiple aspects or phases. She found it difficult trying to come up with a

solid answer because she had many ideas of how the word resilience she be illustrated. First, she

describes the term as someone who was able to overcome traumatic experiences and used that

trauma to become stronger emotionally. However, she then describes resilience as something

people could use every day by taking tasks said people may not enjoy doing, but turn those tasks

into something that brings them happiness or at least does not interfere with their happiness. The

participant notes that no matter how big or small one's challenge may be; a person can still be

resilient. The participant then used examples that other people may have encountered before and

examples of how she thought she may demonstrate resiliency in her life. She found using

examples could make the definition of resilience become more straightforward to her.

Supported quotations from the discussion

Oh wow [pause] I think a lot of things come to mind when I think of the term resilience In

one bubble I am thinking of people who have been um able to overcome really traumatic

experiences and used that trauma to become even stronger emotionally um but in another

way, I think of someone being resilient by um like taking uh like taking a boring or

annoying everyday tasks and trying uh their best to turn them into something that doesn't

interfere with their personal happiness [pause] but I really have no idea [pause] It's a big uh

word to think about [pause] however, I feel like maybe you don't need to go through

something, some major tragedy um to be resilient [pause] some people go through

challenges that um may be small to some people but not to other people [pause] so I feel like

it could be defined differently by anyone [pause] I am uh I am trying to think of possible

examples to help me think of, um a clearer definition

As discussed, the participant was detailed in definition of resilience. She recognized the term

was could be used in different contexts and could mean something different to each person.

She goes on to say that she would describe resilience as someone who has either gone

through something traumatic and has used their trauma to become emotionally stronger or

someone who takes challenges that are not appealing and turn those challenges into

something that does not stop them from staying happy. She also said that the challenges or

traumas that a person may go through could look differently to everyone, but that should not

be discarded as any less or more important.

In one bubble I am thinking of people who have been um able to overcome really

traumatic experiences and used that trauma to become even stronger emotionally [pause]

um but in another way, I think of someone being resilient by um like taking uh like taking

a boring or annoying everyday tasks and trying uh their best to turn them into something

that doesn't interfere with their personal happiness

It's a big uh word to think about however, I feel like maybe you don't need to go through

something, some major tragedy um to be resilient some people go through challenges that

um may be small to some people but not to other people so I feel like it could be defined

differently by anyone

I want to say yes [in response the question, "do you think you are a resilient person"]

because I think everyone could be resilient in their own way but I think but I don't think I

have a reason where I uh, could back it up

The participant went on to explain different circumstances where people would be considered as

resilient. When the research assistant went on to ask if she thought she was resilient, she was not

sure if the challenges she faced would be considered challenges to someone else. This can go to

show how some people can be accepting of others struggles, yet can be defying to their own. She

believed that using examples of resilience would help look at the bigger picture of what it really

means to be resilient.

Well um I just-I don't know if they would be considered challenges or not [pause] but

like a couple of years ago there were a few deaths in the family [pause] like my poppy

and my great aunts [pause] that was hard because after my poppy it felt like we didn't get to properly grieve the other deaths [pause] but um I feel like dealing with death which is really the only thing in life that is [inaudible] so early in my life has happened to me recover from maybe when I start to see death more often in my adult life [pause] it's hard to say [pause] um I am not sure if that has made me more resilient or just good at adapting [pause] I think maybe an easier thing I could think of is whenever I was in grade 12 I had a bad concussion where I needed quite a bit of time to recover from [pause] after the recovery time, I found it a lot harder to study and to focus on really anything [pause] this experience kind of made me try to adapt to, like my situation which really sucked and work harder to see the same or similar results um I had before the concussion [pause] I think that could maybe be an example of how I am a resilient person [pause] um not to mention, so many of us were able to survive a pandemic [pause] which I would say is pretty resilient

Like sometimes you see women-women who were wronged by men maybe like were assaulted or something become lawyers for young girls who experienced similar things or you see people who may have gone through miscarriages and stillbirths and then worked at a women's clinic to offer support to women who experienced what they have experienced kind of thing [pause] that's just what I think of when I think of that term [pause] do you know what I am saying

Secondary Theme

Reflections on different factors associated with Covid-19

The participant discussed many factors associated to the covid-19 pandemic. She reflected on past conversations she had with peers about why everyone was so anxious about the virus because she thought healthcare professionals made it seem like it was just like the flu. She also discussed how there were different levels of extremes to how people were handling all of the news and information surrounding Covid-19, where some people were very panicked about the virus and others did not think much about it at all. She also spoke about the Canada Emergency Response Benefit (CERB) and how that income helped many people her age. However, she did make a few assumptions or judgements about how the older population may think towards the younger population being able to take a break and use CERB to their advantage. She touched on some of the fact that even though she was excited to see her friends when the Covid-19 restrictions were loosened, she found it hard because she thought her friends did not take the rules as seriously as she did.

Supported quotations from the discussion

> Um ah I talk about this with my friends all the time [pause] um it's funny because at the first we were all wondering why people thought it was such a big deal [pause] like nurses and [inaudible] made it seem just like a common cold you know [pause] I didn't think it would amount to anything until those two days before PEI was put into quarantine [pause] so I guess when I was announced my initial thoughts were oh my god how am I going to finish my first year of university

> I don't know if during the quarantine I would have loved to be working when everyone else was getting CERB [pause] um I think a lot of people my age would have benefited from this break

I think a lot of adults think of us as lazy for taking CERB money and stuff like that but I don't think they realize how the expectations jobs and schools had of them um when they were young are almost completely different, like when they were young it's way different than how it is now [pause] I think we overlook ourselves to the point where we are just constantly going through the motions and not really taking the moment to enjoy life Um going outside and spending time with family I think was really beneficial to me [pause] I think it was also nice being able to see friends on things, um I think it was also nice being able to see my friends on things like Zoom and stuff because you realize that those people were actually your good friends and that you miss them a lot

Oh god yes I think before I was just delusional to how serious it was [pause] I mean there were some people talking and taking it to an extreme and kind of created um panic among a lot of people, but then I guess I was the one of the ones who was still not thinking about shutting down everything like my mom was
I definitely struggled, but I knew that what PEI was doing was better than what other places were doing and like having so many cases because everyone is carrying on as if the coronavirus didn't exist [pause] um yeah after quarantine, I felt a little nervous [pause] because some of my friends thought that meant we could just carry on like we did before the pandemic and hang out with our whole group [pause] I think at the time it was like five or eight people [pause] that made it kind of hard to include everyone because you wanted to see everyone at the same time but couldn't

I think my mental health generally stayed pretty stable throughout the whole quarantine

[pause] I was stressed and had low moods, but for the most part I was understanding

[pause] when the restrictions were loosened a bit I felt a little more free

At first my thoughts were basically like finally I wanted to be able to see other loved ones

other than my immediate family [pause] um but I was still a little nervous that people

were going to take it too far and when we would all just like, need to go back to

quarantine [pause] I was positive it was going to happen [pause] um I kind of held back

going to restaurants and stores in person for a while until I felt more comfortable [pause]

um yeah so I was a little nervous, but I also had a lot of trust in Heather Morrison

Yeah I feel like it was a little harder just starting back to work in previous years [pause]

but the hours I worked were kind of convenient for me to enjoy most of my days, so I

was really grateful for that [pause] I mean was even, even when I was at work I didn't

really feel like it was hard work because I was with people I knew so it was kind of not

fun but like better than a lot of other jobs I did have in the past [pause] so it was a good

post-Covid job to have I guess [laughs]

Subthemes of Reflections on different factors associated with Covid-19

Judgements

Throughout the interview, the participant made certain judgements about the seriousness of the

pandemic because of sources from either healthcare workers, friends, and family members. She

also made judgements about how others obeyed the rules when PEI was no longer in quarantine

and were able to have small gatherings. The participant also assumed adults think of her age as

lazy but went on to say how overworked her generation is. These judgements were not mean-spirited. they were from her perspective about how she was interpreting her reality around her.

Supported quotations from the discussion

Um after quarantine, I felt a little nervous. Because some of my friends thought that meant we could just carry on like we did before the pandemic and hang out with our whole group [pause] I think at the time it was like five or eight people [pause] that made it kind of hard to include everyone because you wanted to see everyone at the same time but couldn't

I mean there were some people talking and taking it [Covid] to an extreme and kind of created um panic among a lot of people, but then I guess I was the one of the ones who was still not thinking about shutting down everything like my mom was

I think a lot of adults think of us as lazy for taking CERB money and stuff like that but I don't think they realize how the expectations jobs and schools had of them um when they were young are almost completely different, like when they were young it's way different than how it is now

Um ah I talk about this with my friends all the time [pause] um it's funny because at the first we were all wondering why people thought it was such a big deal [pause] like nurses and [inaudible] made it seem just like a common cold you know [pause] I didn't think it would amount to anything until those two days before PEI was put into quarantine

Appreciation

The participant recognized the work put into accommodating the public during the Covid-19

pandemic. She realized that she could have been working a lot more without income coming in

such as CERB. She believed a lot of people have benefited from the break during the summer

time. She believes her age group is so overworked that they are not able to take time for

themselves to enjoy their life. Looking back, the participant talked about how quarantine was

beneficial to her because she was able to go outside and spend time with her family and was still

able to talk to her friends on apps such as Zoom. These moments helped her realize that her

friends were true friends because of how much she missed them. She discussed how she was

lucky to have a good job after quarantine and was able to be understanding when different

measures were put in place. All in all, the participant was grateful to live in PEI because of the

lower number of cases compared to other places and her trust in Heather Morrison.

Supported quotations during the discussion

> Yeah I feel like it was a little harder just starting back to work in previous years [pause]
>
> but the hours I worked were kind of convenient for me to enjoy most of my days, so I
>
> was really grateful for that [pause] I mean was even, even when I was at work I didn't
>
> really feel like it was hard work because I was with people I knew so it was kind of not
>
> fun but like better than a lot of other jobs I did have in the past [pause] so it was a good
>
> post-Covid job to have I guess [laughs]

> At first my thoughts were basically like finally [pause] I wanted to be able to see other
>
> loved ones other than my immediate family [pause] um but I was still a little nervous that
>
> people were going to take it too far and when we would all just like, need to go back to
>
> quarantine [pause] I was positive it was going to happen [pause] um I kind of held back

going to restaurants and stores in person for a while until I felt more comfortable um yeah

so I was a little nervous, but I also had a lot of trust in Heather Morrison

I think my mental health generally stayed pretty stable throughout the whole quarantine

[pause] I was stressed and had low moods, but for the most part I was understanding

[pause] when the restrictions were loosened a bit I felt a little more free

Um going outside and spending time with family I think was really beneficial to me

[pause] I think it was also nice being able to see friends on things, um I think it was also

nice being able to see my friends on things like Zoom and stuff because you realize that

those people were actually your good friends and that you miss them a lot

I don't know if during the quarantine I would have loved to be working when everyone

else was getting CERB [pause] um I think a lot of people my age would have benefited

from this break

Secondary theme

Ups and Downs of Education during Covid-19

During the research conversation, education was brought up a few times to touch on the

participants experience with online learning. The participant found online classes beneficial to

her because she does not live close to the school so it was nice not to spend money on gas, taking

the time to either pack a lunch, or spending money on food in town. She felt comfortable being

able to do work in the comfort of her home. She thinks she developed a good work ethic, but is

not sure if her work ethic is only applied to online learning or if it will help her during in-person

classes too. The participant did say that she was nervous to write a test in person again, which the

research assistant assumes is because when the participant is doing an online test she can use the material she studied while writing. The participant found doing group work hard because she will end up doing the work and the day before something is due, she can see that her group did not contribute their part of the work. She thinks that in-person classes would hold people more accountable to do their work. The participant stressed that it was harder to communicate with professors because when she had an online lecture, she did not want to take any more of her professor's time to ask more questions, whereas it is a lot easier to talk to a professor after class when she could visibly see that the professor was not in a rush to do something after.

Supported quotations during the discussion

Um, I actually really like them [pause] I feel like a lot of my friends would rather be in school [pause] but I don't live close to the school so it's nice being able to work from home, so when I have to pack a lunch, waste gas, and I can get everything done in the comfort of my home

I don't love online labs because I don't really feel like I am learning all that much but I really don't find online classes bad at all [pause] I am nervous for the day where I have to write a test in person again though

I mean I feel like I have developed a pretty good work ethic this year but I don't know if this type of work ethic will only apply to the online-learning or if it will also be beneficial for in-person learning too I guess we will see when the time comes

Like I don't love doing group work because I can't um I can't see myself finishing my

part then looking the night before to see what my group did and see they did nothing

[pause] um it's a little easier to hold people accountable in person I would say

I also find it a little more difficult to communicate with professors [pause] especially

being in nursing, since the classes are a bit smaller I think it would be nice for me to be

able to talk to a professor after class if I had any questions but when it's online-I mean

you can still do that, but no one feels like they should I don't think [pause] I guess the

motivation or drive is a little harder to have when you are online, but I feel like my

individual skills are better online

Secondary Theme

Personal Experience with Covid-19

During the course of the Covid-19 pandemic, the participant was able to articulate how

she found quarantine beneficial to her mental and physical well-being as well as noting

the factors that made living during a global pandemic especially difficult. The participant

was able to express her gratitude for many different things during Covid-19 as

documented under the subtheme "Appreciation," however she also learned new

perspectives and was able to learn more positive habits during the pandemic as well. She

found that she was doing things more for herself such as going outside, cooking, working

out, and practicing different mindfulness exercises. She said that she thought this was

good for her as she probably would not have if she was going to school every day and

studying.

Supported quotations during the discussion

Um during the quarantine I wouldn't say I hated it, but it was definitely stressful not

knowing what the future held [pause] like I just wanted to know if I would start, if I

should start thinking about looking for a job in the summer or and if there were literally

going to be in quarantine for another year

I spent a lot of time like, watching shows and Tik Toks and stuff like that, but I also spent

a lot of time like, as I said, like learning how to cook and like trying new workouts, going

for walks, and writing things I am grateful for and stuff like that

I found myself doing more things which for um more things for myself which was kind

of interesting [laughs]. I guess we had no one else really to do anything with

Um yeah [pause] I think uh I think I can see how spending more time with family

definitely made us more closer

I think it was also good for me because I would go outside more than I would if I was

going to school every day or studying

I also started cooking more which if I didn't do that I probably would not have um

learned as much as i have at this point

I spent a lot of time like, watching shows and TikToks and stuff like that, but I also spent

a lot of time like, as I said, like learning how to cook and like trying new workouts, going

for walks, and writing things I am grateful for and stuff like that

Difficult Experiences during Covid-19

The participant was able to speak in a positive light about her experience with the pandemic, however was still open to discuss about her struggles during Covid-19. She found it hard not being able to see her boyfriend and friends. She also found it difficult not knowing what the future held. She did not like not knowing because she was unsure if she should start looking for a job or not. She also found it difficult trying to include all over her friends when the limit was only five to eight people. What seems to be an annoyance to the participant, was talking about Covid-19. The research assistant assumed she did not like talking about Covid-19 with friends because people hear about it all the time through television, newspaper, Facebook lives, and through work. It is safe to assume that the topic is talked about a lot considering life on PEI is not too restricted compared to other places.

Supported quotations during the discussion

I mean there were definitely things that were negative outcomes [pause] like I really didn't like not being able to see my boyfriend and my friends, but I guess most other people weren't able to see their people either

Um during the quarantine I wouldn't say I hated it, but it was definitely stressful not knowing what the future held [pause] like I just wanted to know if I would start, if I should start thinking about looking for a job in the summer or and if there were literally going to be in quarantine for another year

Um yeah [pause] um after quarantine, I felt a little nervous because some of my friends thought that meant we could just carry on like we did before the pandemic and hang out with our whole group [pause] I think at the time it was like five or eight people [pause]

that made it kind of hard to include everyone because you wanted to see everyone at the same time but couldn't

Yeah I feel like me and my friends talked about this more than I would have liked to [covid-19]