

O impacto na saúde mental de estudantes do curso de licenciatura em ciências biológicas do IFMG - Campus Bambuí submetidos ao Ensino Não Presencial durante a pandemia de Covid-19

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Resumo

A COVID-19 iniciou-se em 2020 e, rapidamente, medidas como cuidados com higiene, uso de máscaras e isolamento social foram instauradas. Fazendo um recorte para os estudantes, a implementação do Ensino Não Presencial (ENP) e as alterações na rotina de estudos afetaram repentinamente o cotidiano desse público. Assim, objetivou-se analisar como a situação de ENP provocada pela COVID-19 afetou a saúde mental de estudantes do curso de Licenciatura em Ciências Biológicas do IFMG - *Campus* Bambuí. A coleta de dados foi realizada pelo Google *Forms* com 58 respondentes, em sua maioria, adultos jovens, feminino, morando com os pais. Respostas acerca do estado de saúde mental apresentaram implicações negativas, como momentos de incertezas, ansiedade e sentimento de solidão. O ENP contribuiu negativamente trazendo frustrações e excesso de atividades; positivamente, trazendo segurança por estarem em casa, e confiança de aprovação nas disciplinas.

Palavras-chave: Coronavírus. Ensino Remoto Emergencial. Isolamento social.

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The impact on the mental health of students of the Biological Sciences degree course at IFMG - Campus Bambuí submitted to Non-Presential Education during the Covid-19 pandemic

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Abstract

COVID-19 started in 2020 and, quickly, measures such as hygiene care, use of masks and social isolation were introduced. As for students, the implementation of Non-Presentation Education (ENP) and the changes in the study routine suddenly affected their daily life. Thus, the objective was to analyze how the ENP situation caused by COVID-19 affected the mental health of students of Biological Sciences degree course at IFMG - Campus Bambuí. Data collection was performed by Google Forms with 58 respondents, mostly young adults, female, living with their parents. Answers about mental health status had negative implications, such as moments of uncertainty, anxiety and feelings of loneliness. The ENP contributed negatively by bringing frustrations and excess of activities, and positively, by bringing security for being at home, and confidence in passing the school tests.

Keywords: Coronavirus. Emergency Remote Teaching. Social isolation.

El impacto en la salud mental de los estudiantes del curso de licenciatura en ciencias biológicas del IFMG - Campus Bambuí sometidos a educación no presencial durante la pandemia del Covid-19

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Resumen

El COVID-19 comenzó en 2020 y, rápidamente, se introdujeron medidas como el cuidado de la higiene, el uso de mascarillas y el aislamiento social. Haciendo un corte para los estudiantes, la implementación de la Enseñanza No Presencial (ENP) y los cambios en la rutina de estudio afectaron repentinamente el cotidiano de este público. Así, el objetivo fue analizar cómo la situación ENP provocada por el COVID-19 afectó la salud mental de los estudiantes de la Licenciatura en Ciencias Biológicas de la IFMG - Campus Bambuí. La recopilación de datos fue realizada por Google Forms con 58 encuestados, en su mayoría adultos jóvenes, mujeres, que viven con sus padres. Las respuestas sobre el estado de salud mental tuvieron implicaciones negativas, como momentos de incertidumbre, ansiedad y sentimientos de soledad. La ENP contribuyó negativamente, trayendo frustraciones y exceso de actividades; y positivamente, aportando seguridad por estar en casa, y confianza para aprobar las materias.

Palabras clave: Coronavirus. Enseñanza Remota de Emergencia. Aislamiento social.

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Introduction

For over three years, the world has been facing a pandemic known as Severe Acute Respiratory Syndrome (SARS-CoV-2), also known as the coronavirus or simply COVID-19, which presents a clinical spectrum ranging from asymptomatic infections to severe cases. This disease is a mutation of the coronavirus family, with the first human cases of this family being isolated in 1937 (BRASIL, 2020a; OPAS/OMS, 2020a).

From the first officially confirmed case of coronavirus in Brazil on February 26, 2020, until the moment when health authorities implemented personal safety measures—ranging from physical contact restrictions, the use of masks, 70% ethanol gel, to the closure of non-essential services such as stores, gyms, clubs, banks, and educational institutions—there were, on average, only 20 days (BRASIL, 2020b).

Since then, the Federal Institute of Minas Gerais (IFMG) established preventive measures to be adopted at all its campuses to prevent the spread of the coronavirus. Among these measures were the authorization for remote work for staff and the suspension of classes at all campuses starting March 18, 2020 (IFMG, 2020a; 2020b).

From this point on, the situation of the students became uncertain. Without exact information, forecasts, and solutions for the suspension of classes, anxiety took hold of many students who, like the global population, saw the pandemic worsening exponentially.

After a period of organization, academic activities shifted to a remote format using the Virtual Learning Environment (AVA) platform, offering continuity in education through Non-Presential Teaching (ENP). Now, students faced additional anxieties including the fear of not succeeding, the fear of the unknown, lack of resources (computer, internet, cell phone), the absence of physical presence of peers for support, and the increasingly necessary social isolation to contain the rapidly advancing pandemic.

This pandemic scenario of insecurity, fear of contamination, risk of unemployment, need for social isolation, along with ENP and uncertainties about the future, has brought significant psychological impacts, potentially contributing to feelings of anxiety, depression, loneliness, boredom, addiction, and stress, which can lead to more severe conditions such as psychosis and suicide. Additionally, the need to (re)adjust routines and habits related to work, study, and social life can directly affect mental health.

Thus, this study aimed to analyze whether and, if so, how the mental health of a sample of students from the Bachelor's Degree in Biological Sciences at IFMG - Campus Bambuí was affected due to the non-presential studies caused by COVID-19.

This target group was chosen because these are students of a night course, many of whom work during the day, allowing for a correlation between ENP (Non-Presential Education), employment, and the pandemic.

It is believed that identifying the impact of the new routine of life after the onset of ENP is of great importance so that IFMG can provide some form of mental support service during and after this period of the pandemic.

Non-Presential Education Amid the COVID-19 Crisis

The global educational community was caught off guard by the pandemic emergency and the World Health Organization (WHO) guidelines, which recommended isolation and treatment for identified cases, mass testing, and social distancing for the population (OPAS/OMS, 2020b).

On March 17, 2020, in an exceptional and urgent manner, the Ministry of Education issued Ordinance No. 343, which outlines the substitution of in-person classes with digital classes for the duration of the COVID-19 pandemic (BRASIL, 2020c). According to Alves (2020), this action significantly affected students, parents, and teachers at various educational levels, generating feelings of confusion, doubts, and anxiety due to the need to stay at home, away from school spaces, and consequently, from the social interaction dynamics that are crucial for human development.

In response to this new educational scenario, Hodges et al. (2020) coined the term "Emergency Remote Teaching" (ERT) to represent the exceptional circumstances of the teaching-learning process during the pandemic. Some educational institutions, such as IFMG - Campus Bambuí, used the term Non-Presential Education (NPE), which is defined similarly to ERT. These are temporary, fully remote solutions, adapted to available resources and possibilities, with synchronous interaction for mediation, and are not characterized merely by the transposition of in-person classes to the digital environment (O'KEEFE; *et al.*, 2020).

Various measures have been taken by competent authorities to implement Non-Presential Education (NPE), including: the expansion of virtual meeting room capacities at universities and

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federal institutes, the use of new virtual spaces to meet educational needs, and the training of teachers and students, among others. However, the lack or shortage of infrastructure (such as a study space at home), access to reliable internet, and competencies for using technology have been (and continue to be) significant problems faced by teachers and students. The implementation of new technologies involves the challenge of acquiring new skills for which not all students and teachers are prepared (BRASIL, 2020d; DVORAK; ARAUJO, 2016).

Regarding infrastructure, a study conducted by the Regional Center for Studies on the Development of the Information Society (CETIC.br) in 2020 showed that 55% of Brazilian families do not have a computer and 17% do not have internet access. When considering families with incomes of up to one minimum wage, these percentages rise to 82% and 32%, respectively, according to the same study (CENTRO REGIONAL DE ESTUDOS PARA O DESENVOLVIMENTO DA SOCIEDADE DA INFORMAÇÃO, 2020). Furthermore, students from lower social classes, without access to digital technologies, live in small homes where there is often no dedicated study space. Another issue is that, during social distancing, parents, grandparents, and siblings are also confined at home, frequently leading to stressful and violent situations within the family.

Alves (2020) points out that teaching practices being carried out reproduce the worst aspects of in-person classes, using a broadcasting interaction model, where teachers transmit information and instructions to a group of students who do not always manage to follow or participate in these virtual meetings. It is also noted that, despite the belief that adolescents are familiar with digital platforms due to their interactions with games and applications, the relationship established in these environments for promoting remote education is quite different and often unpleasant.

Mental health

The concept of mental health is not only the absence of mental disturbances; it includes well-being (physical, mental, social), perceived self-efficacy, autonomy, competence, among others. This broader concept has come into use due to studies that have proven the influence of biological, psychological, and social factors on most mental and physical illnesses. Thus, the relationship between physical, mental, and social health is increasingly evident, highlighting the importance of

mental state for the overall well-being of individuals. It is also stated that individuals of any age and gender can have their mental state affected, potentially causing suffering not only at the family level but also within communities (WHO, 2019).

However, in most countries, the emphasis given to mental health is not comparable to the importance given to physical health care, with necessary treatments to maintain and improve the condition of patients suffering from mental distress often being neglected. There are various mental disorders with different criteria, generally characterized by a combination of irregular thoughts, perceptions, emotions, behaviors, and relationships. Examples of mental disorders include depression, anxiety, stress, bipolar disorder, schizophrenia, and dementia, with depression and anxiety being the most common (WHO, 2019).

Depression is the most disabling condition affecting anyone, from any community, disrupting productive activity. It is defined as a common mental illness that presents various symptoms, such as depressed mood, loss of interest or pleasure, lack of energy, negative feelings of guilt, poor concentration, etc. Depressive disorders are considered to have different degrees of intensity and can become a serious health issue, causing significant suffering to the affected person and impacting work, school, and family life. At its extreme level, if not properly identified and treated, depression can lead to suicide, being the second leading cause of death among young people aged 15 to 29 years. All depressive disorders share a common aspect: the presence of deep sadness, emptiness, or irritability, often accompanied by somatic and cognitive changes that significantly affect the individual's functioning (WHO, 2020).

According to the definition from the Virtual Health Library of the Ministry of Health (BVSMS, 2011), anxiety disorder is,

A phenomenon that sometimes benefits us and other times harms us, depending on the circumstances or intensity, and can become pathological, that is, detrimental to our mental (psychic) and physical (somatic) functioning. Anxiety stimulates the individual to take action; however, in excess, it does precisely the opposite, hindering reactions (BVSMS, 2011).

According to BVSMS (2011), anxiety disorders are characterized by excessive fear, anxiety, and related behavioral disturbances. Individuals with anxiety tend to exaggerate the danger in situations they fear or avoid, in a way that is disproportionate. A significant portion of people is affected by both anxiety and depression simultaneously.

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Hans (1959) was the first to define stress in a biological dimension. According to the author, stress is an inherent element of all diseases, producing certain modifications in the body's structure and chemical composition, which can be observed and measured.

Rodrigues (1997), with a biopsychosocial approach to stress, provides the following definition:

a particular relationship between a person, their environment, and the circumstances to which they are subjected. This relationship is evaluated by the person as a threat or something that demands more than their own skills or resources and endangers their well-being (RODRIGUES, 1997, p. 24).

The biopsychosocial view of stress considers stressors arising from both external sources (physical or social stimuli, such as work) and internal sources (thoughts, emotions, fantasies, and feelings, such as anxiety, fear, joy, and sadness) (RODRIGUES, 1997).

Mental health and the pandemic

Social distancing has significant impacts on basic human needs for social connection and can highlight individual vulnerabilities related to mental disorders (HAGERTY; WILLIAMS, 2020). While it is necessary to adhere to physical distancing, it is important, in some way, to remain socially connected to prevent negative impacts of isolation and loneliness on psychological health.

Faro et al. (2020) divide the pandemic and its implications for mental health into three phases: pre-crisis, intra-crisis, and post-crisis. The pre-crisis phase is when the primary information about the public health problem and the ways of contagion, transmission, or development of the disease and its symptoms are conveyed. During this phase, unrealistic optimism and negative emotions may be triggered as a consequence of media influence surrounding the pandemic.

The second phase, intra-crisis, is described as the time when the health problem emerges, with the realization of its severity and vulnerability to illness, and the recognition of the eventual risk of contagion. This phenomenon leads to intense repercussions on social functioning and has the potential to severely impact mental health. Adding to this situation is the fact that, due to the high contagion potential, families around the world are unable to mourn or bury their relatives affected by the virus.

Such circumstances have generated a range of emotional issues, in addition to those commonly associated with loss (FARO; *et al.*, 2020).

The third phase of the crisis can be understood as a period of social reconstruction. After the decline in the number of new cases and the reduction of community transmission, social distancing measures were eased, and the outbreak of contamination tends to be under control, though not eradicated. People began to resume their usual activities, and despite this gradual return to daily routines in the short term, a number of consequences from the pandemic require medium- and long-term periods to be addressed. A study in China found that, among 1,210 participants, 53.0% experienced moderate or severe psychological sequelae, including depressive symptoms (16.5%), anxiety (28.8%), and moderate to severe stress (8.1%) in the post-crisis phase (WANG; *et al.*, 2020).

Mental Health of Students and ENP During the Pandemic

Studies have shown that being a university student is already a risk factor for increased levels of anxiety and depression compared to the general population. When comparing the mental health of young individuals, there is a higher prevalence and severity of mental health issues among students compared to those already in the workforce. Additionally, studies related to the SARS virus outbreak indicated that being under 30 years old is a risk factor for developing symptoms of anxiety and depression (ADLAF *et al.*, 2020).

In the context of the current study, students have been living away from their in-person academic activities and daily interactions with peers. They have faced an unexpected and indefinite interruption of their extension projects, research, and internships. Their life and educational projects have been put on hold. Students have had to adapt to new ways of learning with greater autonomy, increased responsibility, and reduced support from professionals. They are also affected by external factors such as increased family unemployment, sadness, panic, insecurity, fear of contracting the virus, and the unpredictable nature of the pandemic situation. According to the literature, fear and unpredictability seem to be the main sources of stress and anxiety (ASMUNDSON; TAYLOR, 2020).

Becker *et al.* (2021) conducted a literature review focusing on terms such as "university student," "anxiety," "depression," "burnout," "mental fatigue," "stress," "somatic symptoms," "academic satisfaction," and "motivation" during the pandemic. The authors observed a large volume of articles within a short period and found an association between remote learning and increased

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prevalence of anxiety, stress, and burnout among university students. However, it is noted that the studies did not reach conclusive and consistent results regarding the increase in depression, somatic symptoms, and motivation. The review suggests that future studies should focus on evaluating the long-term impact of remote digital learning on students' mental health during the pandemic.

Vieira et al. (2020) provide results from the Special Home Exercise Regimen at the Federal University of Santa Maria, indicating that most students are practicing isolation and leaving home only for essential purchases. In this "stay-at-home" process, students reported decreased productivity, mood changes, and feelings of distress and anxiety, with current life satisfaction being lower compared to the pre-pandemic period.

Coelho et al. (2020), in an experiential report, addressed the topics of "physical distance" and "sleep patterns" during the pandemic period. As a result, students reported changes in sleep, lack of motivation for activities, absence of an academic environment and peers, questions related to productivity, and concerns about family members in risk situations. Through dialogue and listening, the authors noted that extension activities are essential for addressing university students' mental health needs.

Methodological procedures

A questionnaire titled "Mental Health of Students from the Biological Sciences Teaching Program at IFMG - Bambuí Campus" was created via Google Forms, comprising 28 multiple-choice questions and 1 open-ended question, divided into five sections: 1) Student characterization; 2) Student life; 3) Feelings and emotions during the pandemic; 4) Mental health during the pandemic; 5) Routine during the pandemic. The survey was voluntary and anonymous, with the link sent through an email list of all students enrolled in the course.

Within the investigation, it was necessary to consider various ethical issues to avoid compromising the participants' well-being. Specifically, it was essential to ensure participants' voluntary participation and their ability to consent, while also guaranteeing anonymity and data confidentiality. Thus, an Informed Consent Form (ICF) was developed based on the ethical guidelines

of the Plataforma Brasil. After reading the consent, students could choose whether or not to participate in the study (PLATAFORMA BRASIL, 2022).

The survey was available from March 2 to August 16, 2021, and received a total of 58 responses.

Results and discussion

The Biological Sciences undergraduate program at the Bambuí campus had 121 students enrolled at the time of the research. Of these, 58 responded, which represents approximately 48% of the total.

This sample of 58 respondents included students aged between 18 and 50 years, with the majority (68.8%) in the 19 to 26 age range, which is considered young adult. Most identified as female (74.1%), single (86.2%), and childless (89.7%). Regarding self-reported race/ethnicity, 41.3% identified as white, followed by 39.7% as brown, and 17.2% as black.

Most respondents, 60.3%, lived in households of three to four people during the pandemic. Of these, 72.4% lived with their parents; 48.3% with siblings; 12.1% with some other relative; 10.3% with a spouse; 10.3% with children; 5.2% in a shared house/boarding house; and 3.4% lived alone.

The "work" variable is of great importance as it directly impacts students' mental health. The results show that 39.7% of students were working; 44.8% were not working at the time; 3.4% were working from home; 20.7% were receiving some form of assistance; and 5.2% had been laid off during the pandemic. This question was designed to assess whether family income had been affected since the beginning of the pandemic, as this is considered one of the main initial impacts of the pandemic on the economic environment of Brazilian families. It was concluded that this sample of students experienced slight negative changes in family income, with the rate of job losses during the pandemic being 5.2%.

Student life in ENP

The students' routine was severely impacted by the pandemic, requiring them to adapt to the new reality and find different ways to keep their studies up to date. With this in mind, this section aims to analyze the study routine.

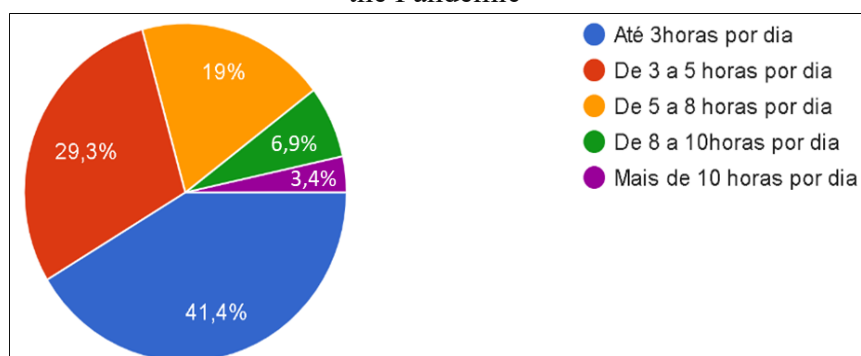
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It was inquired about the year of entry into IFMG - Campus Bambuí, and it was found that most students, 68%, entered before the pandemic. That is, these students participated in in-person classes, which contributes to the analysis regarding the comparison between in-person and remote learning.

Regarding the type of internet, 93.1% use Wi-Fi/cabled connections, meaning that most students have favorable internet access conditions.

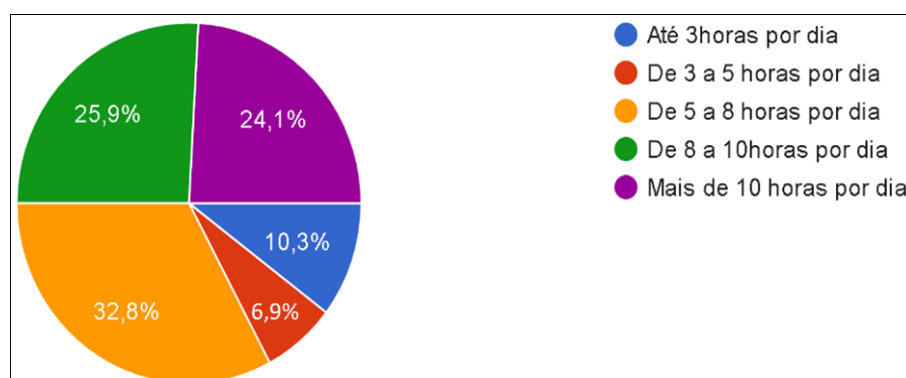
An extremely important and alarming piece of information was the amount of time students spent in front of the computer/tablet/smartphone before and during the pandemic. Graphs 1 and 2 present these results, respectively.

Graph 1 - Data Related to Responses to the Question “Time Spent Using Technology Before the Pandemic”



Source: Author's own data, 2022.

Graph 2 - Data Related to Responses to Question 12 “Time Spent Using Technology After the Pandemic.”



Source: Author's own data, 2022.

The results clearly show an increase in internet usage, which was expected due to remote learning and the imposed social distancing. Notably, 50% of the survey participants spend 8 to more than 10 hours a day in front of their computer/tablet/smartphone. Experts have noted that excessive online engagement during the pandemic can become difficult to control, gradually becoming central to the routine of vulnerable individuals, thus affecting their quality of life (KIRÁLY et al., 2021).

According to Mota et al. (2021), the intense digital sociability should be considered in mental health care actions directed at university students in the context of COVID-19. Beyond the effects of intensive internet use on mental health and decreased quality of life, there are also impacts related to reduced physical activity and detrimental changes in eating habits, which contribute to worsening health conditions such as obesity and diabetes.

Regarding both positive and negative aspects of remote learning, students were asked: “The remote learning brought you...” with the option to select more than one alternative. Notably, 31% of respondents felt “Safety, as I remain at home,” while 20.7% responded “Confidence, as I might not pass certain subjects in face-to-face classes.” Additionally, 15.5% marked “Relief, as I can make my own schedule and thus study better.” Studies report that the biggest difficulty for students is time management and personal organization, which are key to success in this period. Moreover, a positive aspect of remote classes is the flexibility to study at a more convenient time, given that the platform allows for class recordings (PEREIRA et al., 2020). Due to this, the authors of the current research expected a higher percentage of positive responses, as the target audience includes individuals who work during the day and studying at home can be an advantage brought by remote learning.

For the same question, “The remote learning brought you...,” negative responses were also recorded. Symptoms such as frustration and complications in studies were chosen by more than 50% of the respondents, and fatigue, stress, and overload also received a high level of selection.

A more detailed analysis of the responses revealed that among the 45% of participants who marked at least one positive aspect of remote learning (ENP), only 15.5% indicated solely positive aspects; the remaining 29.5% highlighted some negative factors as well. It is observed that 38% marked only negative aspects brought by the ENP.

Significant numbers were found in responses considered alarming for a possible mental health disturbance, using the Self Report Questionnaire-20 (SRQ-20) as a parameter. This tool is designed

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for screening mood disorders, anxiety, and somatization, which are known as Common Mental Disorders (GONÇALVES, 2016).

What the authors of this study aim to emphasize is that 67.5% of the studied population was negatively affected in some factor contributing to potential mental disturbances due to this new (and necessary) form of studying.

Feelings and Emotions During the Pandemic

Throughout the days during the pandemic, a greater number of feelings, both pleasant and unpleasant, may have been generated, which is natural given the circumstances. Students assessed their feelings, emotions, and the intensity of these during this period.

For the question "The following statements are related to your feelings and thoughts during the pandemic...", participants had to choose one of the following options: never, sometimes, or always, for each statement. The responses generally indicate a significant need for care for the students targeted in this study. Stress/nervousness, uncontrollable irritation, and insecurity were the most frequently marked as "always." Some responses were particularly concerning; for example, 6.88% responded that they "Always think about death/dying/suicide," and 31% responded that they do so sometimes. Additionally, 3.45% said they "Always wanted to harm themselves or someone else," and 22.35% said they wanted to do so sometimes. While recognizing that various stages are involved in diagnosing a mental health disorder and that only professionals in this field can make such assessments, this data suggests a group of individuals experiencing some level of mental health issues that requires attention. A study of university students in China found alarming rates of psychiatric symptoms, with 67.05% reporting traumatic stress, 46.55% depressive symptoms, 34.73% anxiety symptoms, and 19.56% suicidal ideation among participants (SUN; *et al.*, 2021).

The question "Read the statements and mark the level/intensity with which you experience them during the pandemic, as follows: 1- weakly, 2- moderately, 3- strongly" returned the following results: 43% of participants marked "I have excessive worries," and the same percentage marked "I do not react well to stressful situations." A smaller but equally concerning proportion reported "I cannot have positive thoughts," "I feel that I am worthless," and "I feel that life has no meaning." Studies have shown that quarantine measures, social distancing, or isolation were significantly associated with the risk of mental disorders, and university students appear to have been negatively impacted by

COVID-19 with increased symptoms of anxiety, depression, and other psychiatric disorders. Lockdown orders, school closures, and confinement at home have increased the risk of emotional distress in this population (BROOKS; *et al.*, 2020; MOTA; *et al.*, 2021; FRUEHWIRTH; BISWAS; PERREIRA, 2021).

With these data, it becomes evident, alongside the frustrations of not being able to control the current period of uncertainty, the vulnerability to a range of difficult feelings and emotions. It is believed that interventions for promoting mental health care, even in a virtual format, could help fill the gap created by the coronavirus pandemic.

Mental Health in Times of Pandemic

In scenarios like a pandemic, a range of emotional reactions is expected. However, it's important to investigate whether these reactions are due to people spending more time at home and changing their routines, or if they relate to a pre-existing mental health issue that has worsened with the current conditions. The questions in this section aimed to understand how students' mental health was affected by the suspension of classes.

Responses to the question "What is your mental health status during the pandemic?" reveal the state of students' mental health during the pandemic. It was noted that 79.3% indicated that their mental health went through ups and downs; 10.3% reported it as good; and 10.4% reported it as poor. It's important to observe that these data reflect the psychological impact of the pandemic.

Regarding "Emotional/Mental Condition," students could select more than one option. Of those surveyed, 39.7% reported a worsening of their emotional/mental condition during the pandemic, 19% remained stable, 32.8% stated that their mental health was already compromised before the pandemic, 39.7% felt uncomfortable during this period, 3.4% reported an improvement in their emotional/mental condition during the pandemic, and 36.2% experienced more instability after the pandemic began.

Specifically for those who selected "Already compromised before the pandemic," a more detailed analysis of responses showed that out of the 32.8%, or 19 people who chose this option, only 1 also indicated that their emotional/mental condition "Improved during the pandemic"; 14 selected "Worsened during the pandemic," "Feel uncomfortable," or "Became more unstable during the pandemic"; and 4 people selected only "Already compromised before the pandemic." It is important to highlight these data as they reveal the extent to which the pandemic has exacerbated the pre-existing emotional/mental conditions of these students.

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A comparison of the frequency with which students consulted psychiatrists and psychologists before and during the pandemic was conducted. The results indicate a decrease in the number of consultations with psychiatrists, and most students (67.2%) had never consulted a psychologist before the pandemic. With the onset of the pandemic, there was a further decline, with 77.6% of students not consulting a psychologist. In general, the frequency of visits to psychologists decreased during the pandemic. It was expected that respondents would report non-face-to-face psychological services using Information and Communication Technologies (ICTs), also known as online psychological services, but there were no such reports from the respondents. According to Viana (2020), there was a significant increase in demand for psychological services through ICTs, mainly due to social isolation and the various forms of psychological suffering triggered by the pandemic. The fact that interviewed students did not seek psychological help may indicate a culture of neglect regarding mental health and potential prejudice or lack of awareness about the professional role of psychology.

Routine During the Pandemic

The pandemic directly impacted everyone's routine and daily life, restricting people from their tasks in order to prevent the spread of the virus. In this block, students were asked about their routine and it was noticed that most are leaving only to perform essential activities (37.9%), followed by the answer "I go to work", with 27.6%. It is also noted that a significant portion of people continues to go out to perform physical activities, 24.1%.

Considering the direct and beneficial relationship between mental health and physical activity, students were asked, "Are you engaging in physical activity?" Unfortunately, 44.8% reported not participating in any physical activity, 29.3% engage once or twice a week, and 25.9% practice three or more times a week. Physical activity is a crucial tool for promoting mental health, helping to reduce levels of anxiety, stress, and depression overall. Nabuco, Oliveira, and Afonso (2020) state that physical activity is associated with positive affective states and contributes to health and well-being during periods of trauma and uncertainty.

Self-medication was also a focus of this research, with two direct yes/no questions related to mental health treatment/medication. A significant 74.1% of respondents indicated they are not undergoing any form of treatment, and 70.7% reported not using medication, even for self-medication, to address mental health issues.

It is noteworthy that most students are neither seeking alternative treatments nor using medication. According to Andrade, Moreno, and Lopez-Ortiz (2021), a study assessing the medication use profile in a university population during the COVID-19 pandemic found that 84.75% of participants reported self-medication, with many believing in the efficacy of unproven medications.

Completion of the Questionnaire

The final question of the questionnaire was presented in a descriptive format, allowing students to write their responses to the following question: “How can Campus Bambuí currently contribute to your mental health?” Here, we have chosen to transcribe some of the responses exactly as they appear in the questionnaire, aiming to cover all the themes mentioned.

The responses were categorized, with most falling into the following categories:

1 - Responses requesting psychological support:

“Although I have never consulted with the campus psychologist, everyone speaks very highly of their service. Remote classes are a way to contribute to mental health, as the student has the responsibility to complete the activities, so they don't stay idle.” [SIC]

“Hiring another psychologist and reviewing mental health policies. We are living in a very technological era, where we live a life of appearances on social media that does not match people's reality.” [SIC]

“Adopting some support methods through campus psychologists, with virtual meetings and discussion groups.” [SIC]

2 - Responses involving the faculty:

“Fewer pressures from professors regarding assignments; too much to do in such a short time.” [SIC]

“Professors should not assign too many activities for the same week/day.” [SIC]

3 - Responses with suggestions on what can be done:

“Well, I'm not sure how the Campus could contribute to my mental health, as I'm maintaining mental stability thanks to the ways I've found to cope with the current global situation. Some of these include reading, studying things I'm interested in, even if they're not related to my course, practicing hobbies, etc. However, it would be interesting if the Campus could offer some mini-courses or workshops for personal growth, such as foreign languages, how to conduct high-quality academic research, programs encouraging healthy eating, reading, writing, and so on.” [SIC]

“Continuing to support the academic community and, upon resuming classes, checking in with everyone to see how their mental health is post-pandemic.” [SIC]

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4 - Responses with praise:

“The studies are already helping me a lot; it's a way to occupy my time with good things. Thank you very much for the opportunity to study at 52 years old.” [SIC]

“They are already contributing; we just need to ask for help. I myself want to start seeing a psychologist because I'm experiencing a lot of anxiety.” [SIC]

“The distance is a bit of a hindrance, but continuing with the work and providing more support to those who need it is important.” [SIC]

Final considerations

Through the responses, it was observed that this work has been important for some students. Although many have the material conditions to carry out their studies in the ENP routine, they feel tired and demotivated.

Overall, mental health data reveal that the ENP negatively impacted students, as instability may have led to the development of various thoughts and actions, causing mental health to fluctuate with highs and lows. So far, the data indicate that the pandemic has caused significant psychological impacts, including increased levels of stress, depression, anxiety, among others. It is noteworthy that the majority of the interviewed students do not receive psychological or psychiatric support.

The authors of this work have brought it to the attention of the relevant campus management to enable interventions with the target audience, aiming at improvements for their mental health.

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