

UDC 316.4.063.6

DOI 10.33251/2522-1477-2021-9-118-125

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### **LIFE QUALITY OF WOMEN DURING COVID-19 PANDEMIC: PRELIMINARY RESEARCH**

**Abstract.** *The COVID-19 pandemic, due to its global nature, has changed the lives of most people in the world. However, there are not enough scientific endeavours that would reliably describe individual and social experiences in the context of the problem under discussion. The symptoms and health consequences of the COVID-19 disease continue to take doctors aback around the globe, and its multifaceted impact on people's lives has not been clarified yet. The obtained research results can be used in the design of assistive and supportive activities. The paper aims at discussing the problem of the life quality of young women on the basis of the results of the survey carried out with the students of two universities in southern Poland. The preliminary study was conducted with the use of a diagnostic survey consisting of 53 questions. The survey was designed to identify the opinions of the respondents in terms of: 1) characteristics of certain life areas under the circumstances of the COVID-19 pandemic; 2) general life quality assessment; 3) assessment of certain life areas "before", "during" and "after" the COVID-19 pandemic.*

*The results of the study showed a slight decrease in the life quality scores of women "during" the pandemic in relation to the "before" and "after" period assessments. The respondents declared the impact of the pandemic on many areas of their lives, expressing the cases of experiencing fears, anxiety caused by a risky for life situation of being infected with the SARS-CoV-2 virus; there were also reported cases of decreased energy to life as well as depression. The women assessed their overall life quality with the index of "average" or "high", and they made their assessment dependent on eight issues. In terms of the assessment of areas of life by the respondents, there was a noticeable predominance of "high" assessments before the pandemic, "average" during the pandemic, with a tendency to disperse between "high" and "average" after the spring 2020 lockdown.*

*Our research shows that the majority of women rate their quality of life as high, although there were also people whose assessment appeared to be quite low (especially in relation to different time perspectives: before, during or after the pandemic). It can certainly be said that in the current situation, that of deliberate temporary social isolation, restriction of mobility and other limitations related to the sanitary regime, a support system should be built for all those individuals (in our case – students) who declared life problems in connection with the COVID-19 pandemic. This could be, for example, in the form of psychological support at their home universities or the help of an appropriate specialist.*

**Key words:** *life quality, women, students, COVID-19 pandemic, coronavirus SARS-CoV-2.*

**Introduction.** The term "quality of life" comes from the humanities, but is often used in medicine, sociology, economics, and demography, showing its complex and interdisciplinary character. "So, in their opinion, sociologists deal with the quality of life in the context of the styles and principles of social life, psychologists deal with the sense of satisfaction, happiness or well-being, and educators deal with values, goals and aspirations related to the quality of life. The

literature review shows that such generalizations are valid and have the appropriate explanatory power only to a certain extent, thus meeting the postulate of striving specific fields of science to strict specialization. Meanwhile, the concept of quality of life as multidimensional and interdisciplinary subject often eludes researchers who perceive it from too narrow a perspective" (Wnuk, Zielonka and others, 2013, p. 11).

Among the approaches to define the term, the following can be distinguished: broad and narrow, objective and subjective, evaluating, descriptive, based on the theory of needs, viewing it as a process, expert or lay approach etc. (Wnuk, Zielonka and others, 2013, p. 10-16).

In the context of our own research, the subjective approach to the term "quality of life" is the closest in terms of meaning. Following the World Health Organization (WHO), "quality of life" means an individual way of perceiving a person's life position in the context of the value system and the culture in which he/she lives, and with reference to tasks, expectations and standards determined by environmental conditions (The World Health Organization Quality of Life assessment). The mentioned above approach shows the growing importance of the indicators of individual life assessment. The theoretical basis of the research is also the concept of partial satisfaction. Satisfaction with life means its well-thought-out assessment, formulated on the basis of cognitive processes, reflection on one's own life and value judgments (Zalewska, 2003, p. 21). Partial satisfactions create human judgments and feelings relating to specific areas of life (Daszykowska, 2007, p. 151). In our research, the following categories were selected for the assessment (satisfaction) of life areas: the quality of the present day life, health, my strength, life energy, capability (ability) to learn (absorb new things), level of education, decision-making abilities, level of self-satisfaction, opportunities to lead a normal life, support from family, relationships with family members, having children, marriage/personal relationships, support from friends, relationships with friends/acquaintances, opportunities to provide for or support your relatives, financial situation, housing conditions, sense of security, work, ways of spending free time, environment (attractiveness of the place of residence, climatic factors etc.), social environment, sex life, norms prevailing in society, faith, life achievements, prospects for the future (Daszykowska, 2007, p. 153).

**Research questions.** The aim of the study was to obtain the answers to the following research problems: 1. How do female students characterize their life style during the COVID-19 pandemic? 2. How do women rate their overall quality of life? 3. How do the respondents assess their life (partial satisfaction): before, during and after the COVID-19 pandemic ("after" means the time of October 2020, when coronavirus cases were the least numerous of the whole period and certain freedoms of movement and socialization, although following all precaution measures, were granted for local communities)?

**Research methodology.** 127 students majoring in pedagogy from the State University named after Jan Ogrodek in Sanok (68 people) and the University of Bielsko-Biała (59 people) participated in the study. There were 79 women aged 19-24 years old (62.2%), in the age group of 25-30 there were 22 people (17.3%), the age group of 31-36 was represented by 19 respondents (15.0%), and there were 5 students representing the age group of 37-42 years old, which constituted (3.9%), over 43 years old representatives were only 2 respondents (1.6%). Participation in the study was voluntary, the respondents were acquainted with its purpose and ensured anonymity. 127 out of 129 sent questionnaires were accepted for analysis.

**Research results.** The respondents described the risk of contracting SARS-CoV-2 coronavirus as: very high – 18 people (14.2%); quite high – 42 women (33.1%); average – 45 respondents (35.4%), low – 17 (13.4%), very low – 5 students (3.9%). The women declared that the COVID-19 pandemic could affect their lives. An affirmative answer ("Yes") was given by 118 women (92.9%), there was no indication for the answer "No", and 9 people (7.1%) opted for the answer "I don't know".

One of the important goals of the study was to find out about the opinions of respondents on the characteristics of the areas of their lives during the COVID-19 pandemic.

In terms of health, 26 respondents (20.5%) indicated most often low mood, 25 (19.7%) felt anxious and frightened, and 18 (14.2%) "felt healthy". Women less often chose answers like: I get

sick more often, I have no control over my emotions. The respondents noticed a decrease in life energy – 53 (41.7%), felt depression and resignation – 26 (20.5%), slightly fewer respondents declared showing optimism and enthusiasm – 18 (14.2%), feeling the harmony of their body – 17 (13.4%).

As for study abilities during the pandemic, the following responses were dominant: "I have trouble concentrating" – 35 (27.6%), "I can learn as before" – 31 (24.4%), "My motivation for learning has dropped" – 24 (18.9%), "the problem lies planning and organizing learning" – 21 (16.5%). For two-thirds of people, the pandemic did not constitute an obstacle to the achievement of the assumed goal; only 10 women thought about quitting studies.

In connection with the ongoing pandemic, the respondents (64 people) declared the possibility of making life decisions, mainly with regard to current affairs, 30 women (23.6%) indicated slight limitations in this regard, and 33 respondents (26.0%) made similar decisions as before the pandemic.

The students were asked to describe their everyday life. The most frequently chosen answers included: spending time studying remotely – 70 (55.1%), performing (in general) more duties related to studying – 63 (49.6%), the problem of reconciling all duties – 47 (37, 0%) compliance with the sanitary regime – 44 (34.6%), reorganization of the current daily routine – 40 (31.5). The least frequent answers were: regular food consumption – 7 (5.5%) and spending more time sleeping – 5 (3.9%).

During the pandemic, women could count on the following types of support: emotional – 78 (61.4%), information – 35 (27.6%), financial – 5 (3.9%), spiritual (alleviating spiritual suffering and pain in critical situations) – 3 (2.4%).

50 people (39.4%) could count on understanding from relatives in mutual relations, 38 people (29.9%) on mutual help, and 16 respondents (12.6%) on trust. The remaining responses (several indications) included: provoking tensions and conflicts, excessive involvement, excessive control.

Women with children (42) considered combining work with remote education for children as the greatest challenge – 12 (28.6%). The respondents were concerned about the health of children attending school and the level of education, they had to take care and look after the children at home, they also pointed to the positive sides under such conditions – that of spending more time with children.

For female students, having support from a spouse / partner was a very important issue, especially in difficult times – e.g. death of a loved one – 36 (36.6%), sharing responsibilities with a spouse / partner – 16 (17.6%), completing tasks beyond the capabilities of women in case of disability of a spouse/ partner – 14 (15.4%). Fewer women (several indications) described the relationship with the spouse / partner as follows: "I have to listen to complaints and bear the whims of my spouse / partner" – 6 (6.6%), "I have to take care of my family without my spouse's involvement" – 4 (4.4%), "I have to support my spouse / partner in case of job loss" – 2 (2.2%), etc.

As far as the relationships between the respondents and their friends are concerned, they mainly declared: mutual understanding – 61 (48.0%), mutual help – 35 (26.0%) and trust – 11 (8.7%).

The women were to describe their financial situation. When asked about the possibility of securing or financially supporting relatives during a pandemic, they stated the following: "I have opportunities to physically engage for the benefit of my relatives (e.g. housework)" – 70 (55.1%), "I have funds to support my loved ones" – 19 (15%), "I have the possibility to undertake organizational activities for my loved ones" – 10 (7.9%). Financial support for relatives was declared by 18 (14.2%) women.

As a rule, the respondents could afford everything (good economic level) – 69 (54.3%), from time to time they lacked money (average economic level) – 40 (31.5%), there were those who declared often lacking resources for the most urgent needs (low economic level – 10 (7.9%), having no money for the most urgent needs (poverty line – very low economic level) – 6 (4.7%). Only two respondents answered: "I have money for everything" (very high economic level).

Women highly rated their housing situation: satisfactory conditions – 55 (43.3%), comfortable conditions – 51 (40.2%), acceptable housing conditions – 18 (14.2%). Two pointed to unsatisfactory conditions, and one to a very difficult housing situation.

During the COVID-19 pandemic, 69 (54.3%) respondents did not feel safe, while 58 (45.7%) people declared feeling secure. The sense of security was primarily experienced by those women who could count on the support of their spouse / partner, family and friends, as well as those who believed in a quick return to "normal life". The lack of a sense of security occurred in people who did not believe in the effectiveness of the government's actions in the fight against the pandemic, and who were afraid of some collapse of the health service and the loss of the source of income (job).

About half of the respondents employed so far have worked in a workplace, 11 people laboured in a hybrid mode, 8 women only in the remote mode, while the remaining ones resigned from part-time jobs, were made redundant, or remained on care allowance.

During the pandemic, women spent their free time mainly at home, for example: playing with their children – 21 (16.5%), watching TV – 17 (13.4%), cooking – 14 (11.0%), reading books – 15 (11.8%), listening to music – 12 (9.4%). The forms of free time away from home included mainly walks - 15 (11.8%).

Most of the respondents noticed the negative impact of the COVID-19 pandemic on the environment, mainly due to the scattered rubbish (used masks, gloves all over green locations) – 83 (65.4%).

Respondents described their interpersonal relations with neighbours as "no change – as good as before the pandemic" – 105 (82.7%), but there were also answers: "no changes – as bad as before the pandemic", "contacts deteriorated", "I avoid contacts with neighbours". One woman declared that "such contacts have changed for the better".

The assessment of the sexual life of female students was as follows: "neither successful nor unsuccessful" – 47 (37.0%), "successful" – 38 – (29.9%), "very successful" – 33 (26.5%), "very unsuccessful" – 7 (5.5%), "unsuccessful" – 2 (1.6%).

Women noticed certain trends in social norms during the pandemic, including: 39 persons (30.7%) – noticed that "society has become demanding towards the government (in terms of aid programs)" and "society isolates itself from others (reigned mistrust)" and – "society is ready to make sacrifices in the name of stopping the pandemic (eg. the observance of sanitary regime, compliance with the law)" – 12 (9.4%) or "society noticeably shows solidarity with patients with COVID-19" – 5 (3.9%).

The greatest life achievements mentioned by the students included the very fact of starting studies – 30 (23.6%), starting a family – 22 (17.3%), starting a job – 20 (15.7%), having children – 15 (11, 8%), graduation with honors and obtaining a dream job – 14 (11.0%) people. The other women mentioned: building a house, buying a flat, overcoming a disease.

The planned life achievements in the future include: starting a family – 37 (29.1%), graduating – 32 (25.2%), building a house – 19 (15.0%), getting a dream job – 18 (14.2%), having children – 14 (11.0%). In terms of assessing their future, the respondents made the following indications: "neither positive nor negative" – 77 (60.6%), "positive" – 25 (19.7%), "negative" – 14 (11.0%), "Very negative" – 6 (4.7%), "very positive" – 5 (3.9%).

High grades were predominant among assessments of overall life. The highest number of responses was: "high", successively "average", "very high", and definitely fewer responses were "low" and "very low". The results are presented in the table 1.

Among the factors of life assessment, the respondents most often mentioned: health – 46 (36.2%), life energy – 36 (28.3%), family support – 33 (26.0%), the possibility of leading a normal life (despite pandemic) – 30 (23.6%), quality of present-day life - 29 (22.8%), quality of marriage – 27 (21.3%), as well as the level of education, having children, ability to make decisions, sense of security, financial, quality of relationships and support from friends. The fewest indications (several in each) were found in: environment (attractiveness of the place of residence, climatic

factors, etc.), the possibility of securing an existence or providing support to one's relatives, housing conditions, sex life, social environment (e.g. neighborhood).

Table 1

### Assessment of general life quality

| No        | Life quality rating grades | Number of responses |              |
|-----------|----------------------------|---------------------|--------------|
|           |                            | N                   | %            |
| 1.        | Very high                  | 12                  | 9.4          |
| 2.        | High                       | 57                  | 44.9         |
| 3.        | Average                    | 51                  | 40.2         |
| 4.        | Low                        | 6                   | 4.7          |
| 5.        | Very low                   | 1                   | 0.8          |
| <b>6.</b> | <b>Together</b>            | <b>127</b>          | <b>100.0</b> |

Source: the authors' own calculations

An important element of the research was the assessment of the areas of life (the so-called partial satisfaction) by the respondents taking into account three time perspectives, i.e. before, during and after the pandemic.

The results of the research show that the majority of selected areas of life before the pandemic were rated "high" by the respondents. The areas of life that received the most indications include, first of all: relations with family members, support from the family, relations with friends and their support, sense of security, health, as well as attractiveness of the place of residence, spending free time, housing conditions or life energy. The areas of life assessed "average" by the largest number of women included: social norms, own financial situation, social environment (neighbourhood), life achievements, level of self-fulfillment, quality of present-day life etc. Among the "low" assessments of areas of life before the pandemic, most frequently indicated by the respondents were: having children (this answer was chosen by childless women), marriage / personal relationships (these were indications of single people), or professional activity (chosen by non-working women).

The assessment of the areas of life during the COVID-19 pandemic was the following. It turns out that there has been a slight shift from "high" to "average" and "low" levels in terms of the respondents' assessment of areas of life during the pandemic. Among the highest number of indications "high", there were: relations with family members and their support, also relations and support from friends, housing conditions, level of education.

The greatest number of the surveyed assigned average grades to such areas of life as: social environment, quality of present-day life, capabilities (abilities) to learn (acquire new things), life achievements, prospects for the future. The number of low ratings for areas of life during the pandemic increased, with the fewest indications for: level of education, life achievements, housing conditions and relationships with family members

Assessments of the areas of life after the pandemic according to the assumptions of the respondents differ from the assessments presented above. Here most areas of life in the "high" category received a greater number of respondents' answers than in the case of similar assessments during the pandemic, while less in relation to the pre-pandemic assessments. At the same time, it should be noted that the grades are dispersed between "high" and "average" grades. Significantly fewer respondents "assessed" the areas of their life low after the pandemic, compared to the assessments relating to life before and during the pandemic.

**Discussion.** Due to the relatively short duration of the COVID-19 pandemic researched (less than a year), the obtained research results cannot be compared with the results of the other authors' research. The European Foundation for the Improvement of Living and Working Conditions (Eurofound), as part of a new project for 2021-2024, has adopted the goal of analyzing the quality of life of societies (including women and men) and improving living conditions, taking into account the

COVID-19 pandemic, but it is a relatively new activity (Eurofound, 2021). Currently, there are no research results available in Poland on the assessment of the quality of life in the context of the COVID-19 pandemic, taking into account the gender variable (i. e. women – in the context of our own research). So far, similar studies have been carried out mainly in terms of age categories – most of them concerned young people (Markowska-Manista, Zakrzewska-Olędzka, 2020; Długosz, 2020).

The research titled *"Everyday life in the time of the pandemic"*, by R. Drozdowski, M. Frąckowiak, M. Krajewski, M. Kubacka, A. Modrzyk, Ł. Rogowski, P. Rura and A. Stamm, in which the issue of gender was discussed in a fragmentary manner (Drozdowski R. and others, 2020). The authors conclude that the consequences of the pandemic were drastic mainly for women burdened with the duties and responsibility for running homes, concern for the trouble-free functioning of the family (Drozdowski R. and others, 2020, p. 31). Similarly, the results of our own research proved that women – especially those who had children – struggled daily mainly with combining their own professional activity with remote teaching of children. It should also be added that these were women completing their studies, which was certainly an additional burden for them. The respondents complained about problems with concentration and a lack of motivation in terms of learning, however, they consistently achieved their study goals. The results of our own research, as well as the results of the above-mentioned authors, proved that mainly women organized their children's free time, spending it mainly at home, playing with children, watching TV, reading books or listening to music. Women experienced a high degree of uncertainty and fear related to the pandemic (Drozdowski R. and others, 2020), which is also evidenced by the results of our research. The vast majority of respondents confirmed the possible impact of the COVID-19 pandemic on their lives, women felt anxiety, fears, depressed mood due to the pandemic, they declared a decrease in energy to live, resignation and depression. More than half of them claimed they felt insecure. R. Drozdowski and others conclude that women coped with stress worse than men, and for them a kind of support was a simple conversation with a loved one, helping others or limiting their own needs for the benefit of others (family) (Drozdowski R. and others, 2020, p. 32). Most of the female students surveyed indicated a high quality of relations with their relatives (mainly their spouse / partner, other family members) and friends, they could count on their support (it seems that relations in society, e.g. with neighbours, were less important in the life of the respondents). This may explain why women, despite living in the face of the threat of SARS-CoV-2 coronavirus infection, rated their lives as overall rather high. It turns out that for most surveyed (Doroszewicz, 2008), especially women (Suwalska-Barancewicz, 2018), living in a happy relationship, deriving satisfaction from it, acts as a "bubble" protecting against negative events. Making life assessments dependent on health, energy, good housing conditions and financial security in most people affects the assessment of the quality of life. K. Włodarczyk, based on the analysis of the CBOS research results, argues that the general sense of satisfaction is most strongly related to the future prospects, place of residence, health and marriage (Włodarczyk, 2015, p. 11-12). Generalizing, it can be presumed that the assessments of the quality of life made by the surveyed women depended mainly on these factors.

Although the low quality of life scores in the study were rare, they were recorded. In this situation, we should think about helping women - especially those who do not have a sense of security in the time of COVID-19 pandemic. J. Heitzman offers support to people in such a situation (increasing the sense of individual security) in three areas: organizational, information and medical. Organizational support may include: recognizing the state of satisfying the needs of a given person, making decisions and responsibility, indicating the possibility of obtaining help, non-epidemic reasons. Information support may include: limiting the provision of information about a pandemic to only verified sources, limiting access to media information (press, television, the Internet). Medical support: discussing the bothersome symptoms with a given person, indicating how to control them (if necessary, consult them with a specialist), presenting the possibilities of individual support and self-reduction of the impact of a traumatic event (Heitzman, 2020, p. 195-196). The surveyed women are students of two universities, so we suggest the idea to help the respondents by means of psychological support provided at their home universities.

**Conclusions.** The results presented in this article, due to the type of research (preliminary study) and the small population sample (N = 127), do not allow for far-reaching generalizations. It would be even more unjustified as the statistical analysis was abandoned due to the low number of respondents. However, the obtained research results draw the picture of the problem undertaken:

1. Most of the surveyed female students highly rated the above-mentioned areas of life during the COVID-19 pandemic.

2. Women highly rated their life in general.

3. As regards the assessment of areas of life by the respondents before, during and after the pandemic (as defined in the paper above) – the prevailing scores were high before the pandemic, average during the pandemic, with a tendency to be dispersed between "high" and "average" after the pandemic.

The problem of women's quality of life in the context of the COVID-19 pandemic is an important area of deliberations, but requires in-depth analysis. The authors of the article intend to continue the international research on a large population sample.

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### **ЯКІСТЬ ЖИТТЯ ЖІНОК ПРИ ПАНДЕМІЇ COVID-19: ПОПЕРЕДНІ ДОСЛІДЖЕННЯ**

**Анотація.** У статті презентовано попередні результати проведеного авторками дослідження оцінювання якості життя під час пандемії, спричиненої COVID-19 вірусом, у баченні студенток двох польських вищих навчальних закладів. Дослідження стосувалося оцінювання якості визначених восьми аспектів життєдіяльності (у розрізі «до-під час-після» карантину) і здійснювалося у листопаді 2020 року з використанням розробленого авторками питальника за допомогою онлайн тестових ресурсів.

**Ключові слова:** якість життя, жінки, студентки, COVID-19 пандемія, коронавірус SARS-CoV-2.

Одержано редакцією: 04.01.2021 р.  
Прийнято до публікації: 19.01.2021 р.