



Original Article

Factors Influencing Women's Perceptions of Sense of Being, Becoming, and Belonging During the COVID-19 Crisis

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ABSTRACT

Background: Women faced enormous burdens during the COVID-19 pandemic. Due to specific conditions in homes during social isolation, women's occupational choices were limited by environmental factors. In a crisis, it is important to understand the human experience of what they do to meet the basic needs of Being, Becoming, and Belonging. This experience can reflect life participation and occupational wholeness during a pandemic. This research aimed to investigate the factors related to women's perceived experiences of Being, Becoming, and Belonging during social isolation/distancing.

Methods: This cross-sectional study's participants were 1,168 women from Arab countries, France, Germany, Greece, India, Iran, and Spain, recruited using snowball sampling in a larger survey of the COVID-19 pandemic. They completed an internet-based questionnaire with questions extracted from the Occupational Wholeness Questionnaire. This questionnaire also included demographic information, perceived stress, and physical health.

Results: Women with postgraduate education had a more positive sense of Being and Belonging. Women over 45 showed a higher negative sense of Being and Becoming. Stress was associated with the sense of Becoming.

Conclusion: Older women experience social isolation more negatively. Conversely, women with postgraduate education are more likely to have a positive experience in such a situation. We conclude that an occupational imbalance resulting from a crisis may also positively affect life.

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Introduction

The COVID-19 pandemic has rapidly transformed day-to-day life and has had different effects on men and women. For example, women seem to be more concerned about the health of family members than men, while men are more concerned about economic issues [1]. The topics

studied for women during the COVID-19 pandemic vary around the world. For instance, African women are being investigated for having difficulty accessing soap and water [2], while in Polish women, a topic of research has been the habits of using creams and makeup [3].

The impact of the COVID-19 crisis on women's occupational life is specific, and studies on this topic have clarified some facts. Women faced greater burdens and greater anxiety/stress than men during the COVID-19 crisis [4]. Due to the full-time presence of family members at home and the loss of women's privacy, it could be

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expected that they feel more stress and a more negative mental state than before the isolation/social distancing measures [5]. About two-thirds of the world's healthcare professionals are women who have experienced increased job stress and depression [6, 7]. During pandemics, women often handle unpaid household work and care for and educate their children or elderly family members [8]. They play the role of primary caregivers at home and consider themselves responsible for the healthcare of family members when there is a child or disabled person. Many occupations, such as online learning for children and all or part of the family livelihood, have been moved into the home [9]. Consequently, women might encounter higher risks of violence, abuse, or harassment during this lockdown [10]. With these points in mind, it might be better to consider women as vulnerable, along with the elderly and people with underlying diseases [4].

The COVID-19 pandemic and subsequent isolation/quarantine, like a shock to life, changed lived experiences due to altered activities and daily routines/habits, resulting in an imbalance in life [11]. In occupational science, balance or imbalance in life results from the activities people engage in (doing). A person's life is considered balanced if, through their activities, there is harmony in fulfilling the three basic needs of Being, Becoming, and Belonging [12,13].

"Being" is defined as time spent in reflection, introspection or meditation, self-discovery, enjoying the moment thoughtfully, and enjoying being with special people [12-14]. Being can be disrupted by injury, disease, or pathological environmental conditions. Therefore, people likely experience a different "sense of Being" during social isolation than before.

"Belonging" encompasses the desire for social interaction, connection, mutual support and friendship, and a sense of affirmation that one's life has value to others (family members, friends, communities) as well as to oneself [13-15]. Due to social distancing, people's relationships with others suddenly became minimal, likely altering their "sense of Belonging" and affiliation with others during that period.

"Becoming" is future-oriented and describes the idea that people can imagine future selves and possible lives, explore and pursue new opportunities and ideas about who or what they want to become throughout their lives, and how their lives will evolve [12-14]. It is likely that people experiencing different life circumstances after COVID-19 will have a different vision of the future and their potential selves. This perception can be termed the "sense of Becoming."

In occupational therapy texts, the concept of doing parallels the concepts of Being, Becoming, and Belonging. However, in the occupational wholeness model (one of the most recent models about occupational balance), doing is understood in connection with the other three concepts. The interaction of these three concepts forms a person's occupational wholeness [13, 16]. The positive sense of these elements is influenced by social and occupational factors that shape people's choices and actions, thereby guaranteeing health and well-being [17].

At first glance, the condition of COVID-19 seems to create a negative sense of Being, Becoming, and

Belonging. However, as shown by Yazdani et al. [18, 19], it may lead to positive experiences, such as improved health or family members being together. Their studies demonstrated that the isolation period after the onset of the pandemic positively affected the perceived sense of occupational wholeness, particularly on Being and Belonging, in a population consisting of both men and women. However, women can be psychologically more vulnerable due to changes in daily life [20]. Women's perceived experience of social isolation/distancing conditions has not been addressed in sufficient detail. Considering the particular problems of women during the social isolation/distancing period mentioned above, identifying factors related to the new lifestyle and experiences during this period helps us better understand the occupational wholeness of women's lives during crises such as pandemics. According to Skott's [21] study, the changed experiences regarding Being, Becoming, and Belonging during the period of isolation/social distancing compared to before probably led to a revision of their occupational identity. The present study was conducted to determine the factors related to women's perceived experiences of the sense of Being, Becoming, and Belonging during COVID-19 isolation/social distancing measures.

Methods

Study Design

A cross-sectional retrospective, secondary data analysis of previously collected data from an international cross-sectional survey [18] was conducted. For this secondary data analysis, we separated the data related to female participants.

Participants

In the main cross-sectional study, 1,624 people (67% response rate) participated and were recruited using convenience and snowball sampling. The participants were from Greece (20.7%), Iran (18.9%), France (16.2%), Arab countries (14.7%), Spain (7.5%), India (3.5%), Germany (2.0%), and other countries (16.4%). They were literate women who had access to the Internet and social networks. The inclusion criteria were experiencing a period of social isolation during COVID-19, having a smartphone, being literate, and being able to complete an electronic questionnaire. The exclusion criteria were incomplete or contradictory information.

Instrument

A questionnaire, including 27 main questions, was adapted from the Occupational Wholeness Questionnaire, the assessment tool suggested in the model of occupational wholeness [13]. According to this model, each question asks about what participants do, with the theme of each question relating to the concepts of Being, Becoming, or Belonging [13, 22]. The items were divided into three categories: Being (11 items), Belonging (8 items), and Becoming (8 items). The scoring of the items was 1 = no difference from pre-outbreak, 2 = strongly disagree, 3 = disagree, 4 = agree, 5 = strongly agree.

The psychometric investigation of the questionnaire was performed as follows. Four occupational therapists evaluated the relevance and necessity of the items. The face validity of the questions was confirmed by assessing the fluency and clarity of the items by five occupational therapy experts. Subsequently, eight people from different ages and socio-economic backgrounds commented on the items in terms of content validity through in-depth cognitive interviews. The research team reviewed these comments, and the necessary corrections were made to the questionnaire. The internal consistency using Cronbach's alpha for the whole questionnaire was 0.909, and for the three subscales measured good ($\alpha=0.815$), acceptable ($\alpha=0.727$), and acceptable ($\alpha=0.734$), for Being, Belonging, and Becoming, respectively [18, 19].

Procedure

An online questionnaire was created from the instrument described above. It consisted of two sections. The first section collected demographic information, and participants rated their perceived stress and physical health from 1 to 10. As explained above, the second section included 27 items on Being, Becoming, and Belonging.

The research project received ethics approval from Oxford Brookes University (code: L20206) and Shahid Beheshti University of Medical Sciences (IR.SBMU.RETECH.REC.1399.843). All participants approved the written consent section before completing the online questionnaire. By providing a contact number, they could be informed of the final findings.

The questionnaire was published anonymously as a self-report using the Porsline software (<https://porsline.ir/>) on virtual social networks, including LinkedIn, WhatsApp, Facebook, and Telegram. The data gathered were checked for correctness, completeness, and non-contradiction. Of these, the data of 1,168 women were valid and analyzed.

Data Analysis

The data were related to participants' answers to the demographic questions and the items related to the Occupational Wholeness Questionnaire (Being, Becoming, and Belonging). Based on the demographic

characteristics of the participants, one-sample t-test, ANOVA, and Pearson correlation were used in SPSS software to compare positive/negative attributions to the sense of Being, Becoming, and Belonging during the isolation period.

Results

A total of 1,168 women participated in the study. The mean (\pm SD) age was 33.4 (\pm 11.9) years. Table 1 presents the demographic characteristics of the participants. The duration of isolation was more than a month for 90.5% of participants.

Table 2 shows the results related to the mean differences based on education, living with elders above 60 years or with someone with a disability, number of children, and age. The results based on the demographic characteristics show some significant differences in positive or negative attribution to the experience of isolation. A significant difference exists between the sense of Being and Belonging based on education. Participants with an undergraduate degree showed a higher negative attribution of sense of Belonging and Being compared to those with postgraduate education. Moreover, participants over 45 showed a higher negative attribution of a sense of Being and Becoming than those aged 25-35. There was no significant difference between the other variables (living with elders above 60 years or with someone with a disability and the number of children) and a sense of Being, Becoming, and Belonging.

The Pearson correlation was used to find the relationship between a sense of Being, Becoming, and Belonging with stress and physical health. The results showed a significant relationship between the sense of Becoming and stress ($r=0.063$; $P<0.05$).

Discussion

The current study aimed to determine the effect of COVID-19 isolation/social distancing measures on women's perceived experiences regarding a sense of Being, Becoming, and Belonging. We supposed that experiences in terms of a sense of Being, Becoming, and Belonging were different from the past because their

Table 1: Demographic characteristics of participants (N=1168)

Variables	n	%	Variables	n	%
Age			Job		
<25	243	20.8	Business	83	7.1
25-35	341	29.2	Professor	51	4.4
35-45	303	25.9	Retired	64	5.5
>45	281	24.1	Unemployed	37	3.2
Education			Housewife	296	25.3
No higher education	261	22.3	Student	201	17.2
Graduate	470	40.2	Employee	265	22.7
Post Graduate	437	37.4	Teacher	171	14.6
Number of Children			A person with a disability in the family		
Non	445	38.1	Yes	85	7.3
One	257	22.0	No	1083	92.7
Two	327	28.0	Elders in family		
>Three	139	11.9	Yes	322	27.6
			No	846	72.4

Table 2: Perceived Attribution of Sense of Being, Becoming, and Belonging Based on Demographic Characteristics

Variables	Sense of Being			Sense of Becoming			Sense of Belonging		
	M	SD	t/F	M	SD	t/F	M	SD	t/F
Education									
No higher education	22.41	8.37	2.318*	16.40	6.46	0.962	13.82	6.50	2.465*
Graduate	23.58	7.28		17.00	5.76		14.61	6.00	
Postgraduate	23.52	7.28		16.87	5.21		14.84	5.61	
Elders in family									
Yes	23.05	8.02	-0.685	16.71	6.03	-0.402	14.33	6.27	-0.653
No	23.39	7.36		16.86	5.62		14.59	5.87	
A person with a disability in the family									
Yes	23.74	8.40	0.562	16.48	6.37	-0.569	14.80	6.49	0.441
No	23.26	7.47		16.85	5.68		14.50	5.94	
Number of children									
Non	23.33	7.21	0.091	16.97	5.52	0.243	14.24	5.81	0.786
one	23.30	7.61		16.64	5.77		14.47	5.97	
Two	23.14	7.98		16.83	5.88		14.90	6.15	
>Three	23.51	7.50		16.62	6.00		14.62	6.16	
Age									
<25	23.83	6.91	3.157*	17.55	5.16	4.493*	14.31	5.69	1.217
25-35	23.29	7.54		16.84	5.59		14.62	5.93	
35-45	23.91	7.44		17.13	5.69		14.98	6.20	
>45	22.17	8.07		15.82	6.28		14.08	6.05	

*P<0.05

activities were different [16]. Due to the pivotal role of women in the family, their mental, emotional, and physical health could affect both the health and well-being of family members. Contrary to previous reports, the present study's findings showed that women's experiences during this period, influenced by some factors, might be more positive or negative than in the past. Overall, the findings indicated that education, age, and stress affected the sense of Being, Becoming, and Belonging.

Education and sense of Being and Belonging

As the findings showed, women with postgraduate education had a better sense of Belonging than those with undergraduate education during the isolation/social distancing measures when communication and interactions were limited. According to Hammell's study [15], because Belonging is connectedness, if the possibility of engaging in and participating in meaningful occupations concerning others is greater, the sense of Belonging will be stronger. In the present study, women with postgraduate education had a better sense of Belonging. Higher education likely increases the ability to use technology to communicate with relatives, colleagues, and friends. This means these individuals could use their ability to establish more virtual communication with others. Virtual social networks and digital technologies can fill the social gap resulting from social isolation and activate interpersonal relationships [23]. Gil-Lacruz et al.'s [24] study also showed that health-related quality of life is directly related to education, and this relationship is stronger in women than in men.

On the other hand, as the level of education increases, jobs are likely to shift from manual to intellectual-specialized work, allowing people to perform work-related tasks virtually at home. Since there is a dynamic relationship between doing and Being [12, 13], the results of the present study showed that the sense of Being is more positive in postgraduate-educated women than in undergraduate-educated women. With the ability to use

technology, in addition to jobs and communications, these women could probably find virtual alternatives to real occupational performance. In other words, these women could maintain their doing and achieve a better sense of Being and Belonging. These individuals gave new meaning to their activities in a changed way. Their characteristics and context influence the meaning and value that people give to their life events. Sometimes, people may assign positive meanings to things that do not have a positive effect on their health and well-being [13]. It seems that the positive results of COVID-19 in women with higher education in this study resulted from their positive meaning-making for new circumstances.

The model of occupational wholeness suggests that although creating a balance in what people do helps them feel satisfied with their lives due to the fulfillment of their needs for Being, Becoming, and Belonging, sometimes imbalance (such as during the COVID-19 pandemic) becomes a part of a person's natural life that affects their satisfaction with their lives. Therefore, it can be concluded that imbalance in life does not always have negative consequences for health and well-being [13].

Age and Sense of Being and Becoming

The results of the present study showed that women over 45 years old did not have as positive an experience during isolation/social distancing as younger women. This is consistent with the results of Yazdani et al. [19], which included men and women from several countries. This finding may be because women at this age are more likely than younger women to have larger families, making them more responsible and with less free time. The Kolakowsky-Hayner [25] study showed that women in quarantine had a harder time decompressing than men. To have a positive sense of Being, we need time and space to explore and think about ourselves so we can take care of ourselves or choose the things we love.

Stress and sense of Becoming

Our results showed that high stress is associated with

a negative sense of Becoming. Becoming is oriented towards the future; it encompasses a person's sense of existing and using opportunities, hopes for spiritual growth, and, conversely, anxiety and frustration about future conditions [14]. Examination of the answers in the questionnaire of the present study revealed that women with higher stress, similar to the samples in Yazdani et al.'s study [19] (which also included men), were more concerned about the future. Glowacz and Schmits [26] also found that uncertainty and unpredictability about the future during the coronavirus pandemic were significant causes of stress. Other studies that reported increases in violence and divorce rates during the lockdown period confirm the rise in women's stress [10, 27, 28] and concern about the future, leading to a negative sense of Becoming. It appears that occupational imbalance resulting from COVID-19 is not accompanied by the hope of learning new skills and self-improvement among the elderly. Therefore, they perceive this imbalance negatively, contributing to stress.

In discussing the relationship between stress and Becoming, it should be noted that this relationship does not imply that women are more stressed at older ages. In the study by Glowacz and Schmits [26], stress decreased with increasing age. As Yazdani et al. have pointed out, it is important to distinguish between the mental experiences of Being, Becoming, and Belonging as they relate to occupations and psychological symptoms. The negative feeling of Becoming in women over 45 and its relationship with stress can be attributed to the increased risks associated with COVID-19 and greater functional limitations for this age group compared to younger individuals [29, 30].

The major limitation of this study was its international nature and the lack of direct access to participants, which prevented further examination of the inclusion criteria. The researchers had to rely on participants' subjective responses to the questions. Consequently, only individuals with access to the Internet and virtual networks were included, while those without these resources, as well as the illiterate and elderly, were likely excluded from participation. Regarding the generalizability of the findings, the sample size of this study appears to be reliable for survey studies [31]. By implementing a systematic approach to recruitment within the identified population, researchers aimed to minimize coverage and sampling errors [32].

Conclusion

Isolation/social distancing created unique conditions for women. Depending on their age and level of education, women's experiences may vary between negative and positive. Older women are more likely to have negative experiences of social isolation and quarantine, while higher education appears to be associated with a more positive experience in such situations. It seems that occupational imbalance in women's lives has also led to some positive effects. Utilizing the findings of this study can aid in mitigating the consequences of future crises and inform effective measures during such crises

to enhance mental and occupational health for women.

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