

# Coping with Covid-19 among staff and students at universities and university colleges in Sweden

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## 1. Summary

1. **Using the force of nature.** Academics in Sweden i.e. university staff and students turn to nature to deal with their thoughts and feelings due to the Covid-19 crisis. A majority (56%) say that nature is an important resource for them to deal with stress and sadness during the crisis. In a ranking list over different coping methods used in this survey, three out of four of the most common coping methods used have to do with the connection to nature: to see nature as a resource, to listen to the sound of surrounding nature and to do different outdoor activities. Women and older people use these coping methods relatively more often than men and younger people do.
2. **Spiritual without being religious.** Beside the force of nature, academics in Sweden turn to spiritual thoughts about life as a part of a greater whole. As many as 45% often have these thoughts. Women, and relatively more often those living in bigger cities, have these thoughts more than men do. In addition, 21% think or feel that a spiritual force exists within them to help them deal with this very special situation.
3. **Contemplating to help to deal with crisis.** Another relatively common among academics is to solve the dilemma silently on their own. Almost three in ten (28%) say that they often deal with the Covid-19 crisis by just being alone and contemplating. Women, especially those with time left over working part time only, do this relatively more often.
4. **Religious coping methods less common.** In principal, all the seven religious coping methods tested in this study are at the bottom of the frequency usage list. Of these, the most common religious coping method used is to pray to God or other religious figures, but only 17% do this often. A majority (58%) never do this. Men use religious coping methods more often than women do, for example: visit religious places, listen to religious music and have a feeling of strong connection with God.
5. **Three broad types of coping methods revealed.** A factor analysis principally shows the use of three types of coping methods among academics. The first type involves religious/spiritual coping i.e. when religious methods are used in parallel with spiritual ones. The second type is more about meaning-making existential coping methods. The third type of coping methods concerns the so-called negative religious methods e.g. thinking that an evil power caused Covid-19, or the thinking that God abandoned them during the crisis.

6. **Two different academic segments identified.** Academics in Sweden can be divided into two segments created by an auto-generated cluster analysis based on the frequency of the coping methods used. The first segment is a group of “religious coping method users”, who also use all coping methods more often than the second segment, the group of “non-religious coping method users”. These two segments are quite similar from a sociodemographic perspective, but the big difference lies in their belief in God. As many as nine out of ten among the religious coping users believe in God, while only three out of ten among the non-religious coping method users do so.
7. **Family – important source for life meaning.** Academics regard family as the most important source that gives meaning to life during Covid-19 crisis.
8. **More satisfied with work from home arrangement if workload has not increased.** Academics in Sweden, who have worked less or have had the same work load during the Covid-19 crisis compared with before crisis, are more satisfied with their work from home arrangement than those who say they now work more than before.
9. **Prioritizing kindness to other people – and their own health.** Most often, the academics cope with the “working from home” situation by providing kindness to other people around them, including family and friends. They mostly use this way of dealing with their “work from home” situation in combination with caring for their own mental and physical health.
10. **Important to have a mindset about what can be done.** For the academics, thinking about what they can do during the crisis, rather than what they cannot do, seems to have the strongest impact on being satisfied with their “working from home” situation. In addition, having access to medical resource when sick seems to have a relatively strong impact on the academics’ level of satisfaction with their “work from home” situation. The third most important factor related to satisfaction with working from home is trust in the local authorities who deals with the Covid-19 situation.

## 2. Introduction

The main purpose of the study was to investigate the coping methods are used, sources of life meaning, and the level of resilience during Covid-19 crisis among academics at universities and university colleges in Sweden. The study also investigated coping with the situation of working from home. By academics, we refer to all staff and students at universities and university colleges. We use the term university when referring to university colleges as well. Professor in Sociology, Fereshteh Ahmadi, together with Andreas Önver Cetrez, associate professor in Psychology of religion are responsible for this study.

## 3. Methodology

The study was quantitative. The authors developed a questionnaire (see appendix) to identify the a) *meaning-making coping methods*, b) *meaning and resilience*, and 3) *work-related health* used in academic settings in Sweden.

### 3.1 Target group and sampling process

The target group for this study was academics i.e. staff and students from different universities in Sweden. We chose a list-based sampling frame with a simple random sample for this study. We found this approach most useful because the academic groups were homogenous and their e-mail addresses were available (Fricker, 2008).

Most respondents were Swedish while some lived in Sweden but had another native country. According to Statistics Sweden, there were approximately 429 000 students and 38 000 staff at universities and colleges in Sweden in 2019/2020, and the staff at universities counts to approximately 38 000. The population size in this study was estimated at approximately 470 000 people. We made a representative list of different universities and colleges in different regions in Sweden. Based on the list, we listed staff and students for purposes of setting up the sampling frame i.e. the actual list of individuals from which we drew the sample. Ideally, the sampling frame should include the entire target population (and nobody who is not part of that population) in random sampling. However, the selected subgroup of universities had considerably similar characteristics in comparison to a possible sample from whole population.

### 3.2 Data collection

Data was collection through an open online questionnaire from the University of Gävle using their survey tool *Sunet*. Staff and students at the different universities got an e-mail with the link to the online survey on 30 May 2020. The e-mail and online survey had an invitation letter explaining the research project, informing about voluntary participation, and requesting the addressees to participate in the project. In



total, 277 female and male staff and students responded by the time data gathering was terminated in December 2020.

### 3.3 Margin of error

In this report, the margin of error is +/- 6 percentage units for results around 50%, and 3.6 percentage units for results around 10 or 90%.

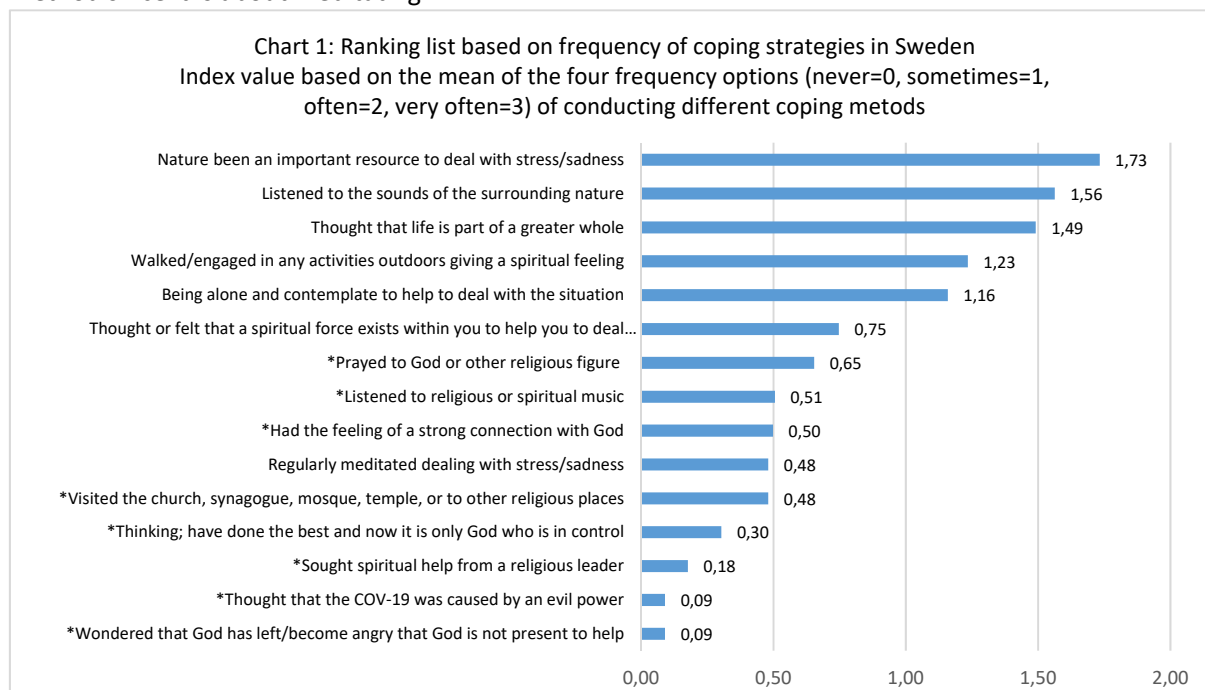
## 4. Coping methods used in Sweden

### 4.1 Coping methods used by academics in Sweden

In Sweden, it is not surprising that people tend to turn to nature to deal with their situation, thoughts and feelings, during the Covid-19 crisis, and not to a religious environment. Most students and staff at the universities in Sweden reveal that nature has been the most common coping method to deal with stress and sadness (1.73 index value (see calculation method in diagram down below)).

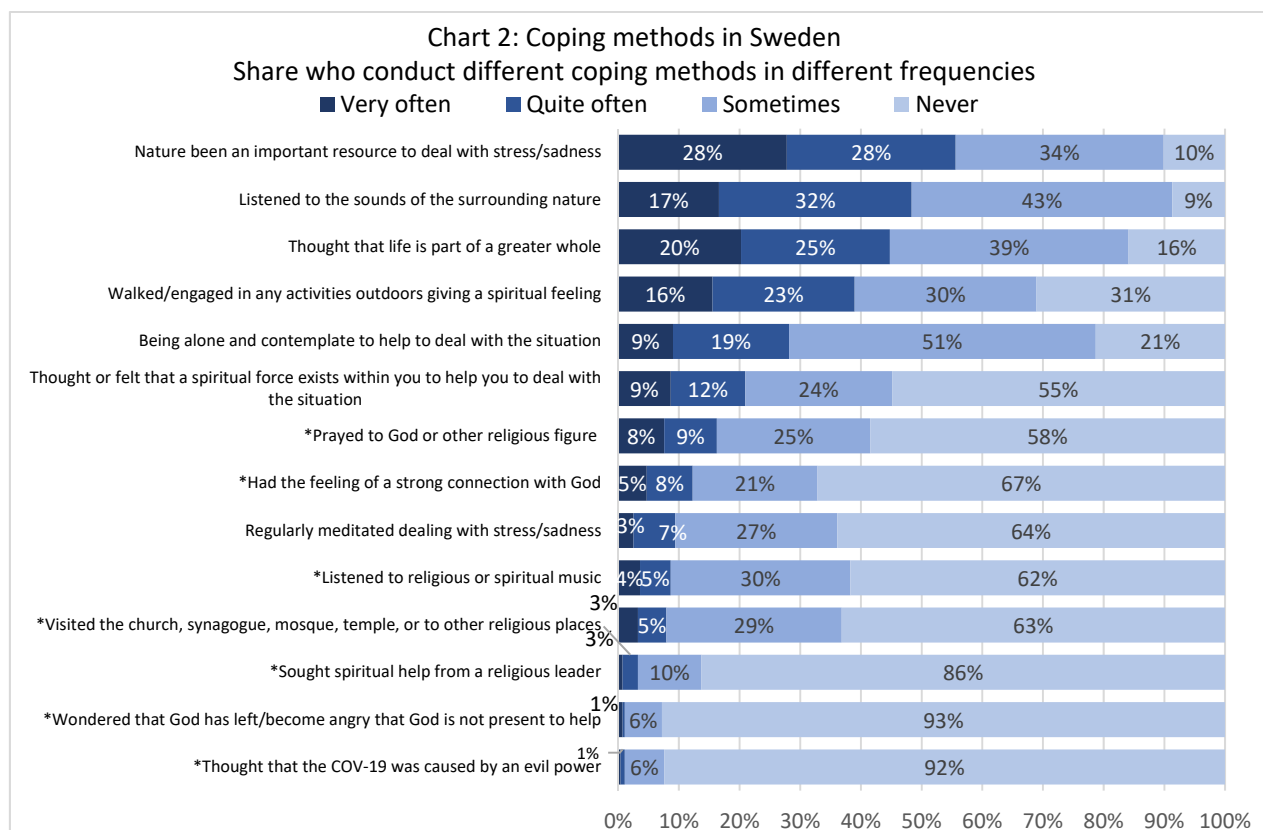
The second most commonly used coping method is also a nature experience, namely, listening to the sounds of the surrounding nature (1.56 index value). These two coping methods, together with the third most common method, thinking that life is a part of a greater whole (1.49 index value), are in a distant position far ahead of other methods in terms of how often they are used. The next three methods are also non-religious ones: walking or being outdoors, just being alone, and thinking that a spiritual force exists within them to help in crisis.

In the chart below, coping methods are divided into religious and non-religious methods. All religious coping methods are marked with an (\*) to easier highlight the answering pattern. There is a clear pattern that religious coping methods are at the bottom regarding how often they are used. Among the bottom nine methods used, only one is non-religious. Moreover, that method is a kind of a religious coping method since it is about meditating.



The chart below lists the different coping methods with details about how often respondents use the different methods. It shows that almost six in ten of the respondents claim that they quite or very often think that nature has been important for them during this period. Only one in ten never think this way. About half of the respondents also listen to nature quite often or very often. Almost as many think, quite often or very often that life is part of a greater whole. Four in ten engage in different activities outdoors to get a spiritual feeling. Three in ten never engage in outdoor activities.

A majority, about six in ten of the respondents, never use religious coping methods. It is least common to seek help from a religious leader, as demonstrated by nine in ten respondents. Nevertheless, having obvious negative religious thoughts to deal with the situation e.g. by thinking that God abandoned them or that an evil power caused Covid-19 is very unusual. As many as nine in ten academics have never thought so.





## 4.2 Three different types of coping methods revealed

Factor analysis is a technique used to reduce many variables into fewer factors to investigate the variables' relationships with each other. This also makes it easier to group all the coping methods into fewer more understandable factors. This study's automated factor analysis shows three factors namely: religious/spiritual coping factor, existential coping factor, and negative religious coping factor. The religious coping factor has nine statements that have close relationships with each other. If a respondent has marked one of these, he or she has marked any of the other statements too. The Existential coping factor has only four statements about nature and meditation, while the negative religious coping factor is only two statements namely thinking that an evil power caused Covid-19 or that God has abandoned the respondent. Table 1: Factor analysis of coping methods among academics in Sweden

Table 1: Factor analysis of coping methods among academics in Sweden

	1. Religious/spritual coping factor	2. Existenstial factor	3. Negative religious coping factor
Have you thought that your life is part of a greater whole?	0,568	0,329	-0,172
Have you thought or felt that a spiritual force exists in you to help you deal with the situation?	0,844	0,185	-0,002
Has being alone and having the chance to contemplate help you deal with the situation?	0,358	0,304	-0,386
Have you sought spiritual help from a religious leader?	0,636	0,033	0,444
Have you had the feeling of a strong connection with God?	0,876	0,135	0,097
Have you visited the church, synagogue, mosque, temple, or to other religious places?	0,634	0,029	0,282
Have you prayed to God or other religious figure to make things better?	0,826	0,138	0,147
Have you listened to religious or spiritual music?	0,784	0,033	0,115
Do / did you think that you have done your best and now it is only God who is in control?	0,684	0,049	0,196
Has nature been an important resource for you in how to deal with your stress/sadness or other negative feelings?	0,102	0,825	-0,095
Have you listened to the sounds of the surrounding nature?	0,006	0,809	-0,020
Have you walked or engaged in any activities outdoors that give / gave you a spiritual feeling?	0,115	0,750	0,211
Have you regularly meditated dealing with your stress/sadness or other negative feelings?	0,342	0,362	-0,031
Have you thought that the covid-19 was caused by an evil power?	0,235	0,082	0,814
Have you wondered if God has left you or become angry that God is not present to help you?	0,190	0,001	0,786

### 4.3 Coping methods used by different subgroups

In this section, the results are broken down based on selected sociodemographic variables namely: gender, age group category, job situation and the size of the town the respondents live in. The following tables show the same index value from table 1.

**Comparing coping methods *within* each subgroup.** The first table does the analysis horizontally comparing the coping methods used within each subgroup (Dark green is very often and dark red very rarely). The results show that using nature, as an important resource, is the most commonly used coping method among all subgroups (men, women, different age groups, job situation and the size of the city they are live in). Overall, the color analysis shows that the subgroups have very similar ranking of the methods they use the most, with a few exceptions. Listening to nature and thinking of life as part of a greater whole are the second and third most common coping methods among all subgroups. Walking and doing activities outdoors and being alone with spiritual forces are the fourth and fifth most common methods for all subgroups. All the religious methods are used the least among all subgroups as presented in table 2.

Table 2: Comparing coping methods within each sub group

Horisontel analysis - what type of coping method is used the most in respectively subgroup		Nature been an important resource to deal with stress/sadness	Listened to the sounds of the surrounding nature	Thought that life is part of a greater whole	Walked/engaged in any activities outdoors giving a spiritual feeling	Being alone and contemplate to help to deal with the situation	Thought or felt that a spiritual force exists within you to help you to deal with the situation	*Prayed to God or other religious figure	*Listened to religious or spiritual music	*Had the feeling of a strong connection with God	Regularly meditated dealing with stress/sadness	*Visited the church, synagogue, mosque, temple, or to other religious places	*Thinking; have done the best and now it is only God who is in control	*Sought spiritual help from a religious leader	*Thought that the COVID-19 was caused by an evil power	*Wondered that God has left/become angry that God is not present to help
	Total	1,74	1,57	1,49	1,25	1,16	0,76	0,66	0,51	0,51	0,49	0,48	0,31	0,18	0,09	0,09
GENDER	Man	1,40	1,38	1,35	1,02	1,02	0,71	0,65	0,65	0,55	0,45	0,58	0,28	0,22	0,11	0,14
	Woman	1,93	1,68	1,58	1,37	1,23	0,78	0,67	0,43	0,48	0,51	0,43	0,33	0,15	0,08	0,06
AGE	Younger than 35 years	1,64	1,45	1,35	1,13	0,93	0,69	0,66	0,45	0,45	0,48	0,49	0,31	0,21	0,16	0,13
	Between 35 and 49 years old	1,67	1,46	1,51	1,20	1,32	0,79	0,76	0,56	0,58	0,47	0,39	0,39	0,13	0,09	0,08
	50 years or older	1,87	1,75	1,59	1,35	1,21	0,75	0,56	0,51	0,47	0,49	0,55	0,23	0,19	0,03	0,07
JOB SITUATION	Employed full-time	1,75	1,58	1,51	1,27	1,14	0,77	0,65	0,56	0,52	0,45	0,47	0,29	0,18	0,07	0,07
	Employed part-time	1,80	1,61	1,61	1,15	1,39	0,83	0,76	0,46	0,51	0,71	0,49	0,37	0,22	0,12	0,10
	Campus or distance student	1,63	1,48	1,33	1,17	1,04	0,61	0,59	0,35	0,41	0,43	0,52	0,30	0,15	0,13	0,17
LIVING IN	Capital	1,76	1,35	1,73	1,29	1,14	0,82	0,69	0,41	0,45	0,65	0,43	0,24	0,10	0,08	0,02
	Mid-large city, not capital	1,68	1,50	1,49	1,14	1,11	0,70	0,68	0,58	0,54	0,39	0,47	0,31	0,23	0,10	0,10
	Small town	1,80	1,76	1,37	1,33	1,24	0,77	0,59	0,45	0,46	0,52	0,53	0,33	0,14	0,09	0,12

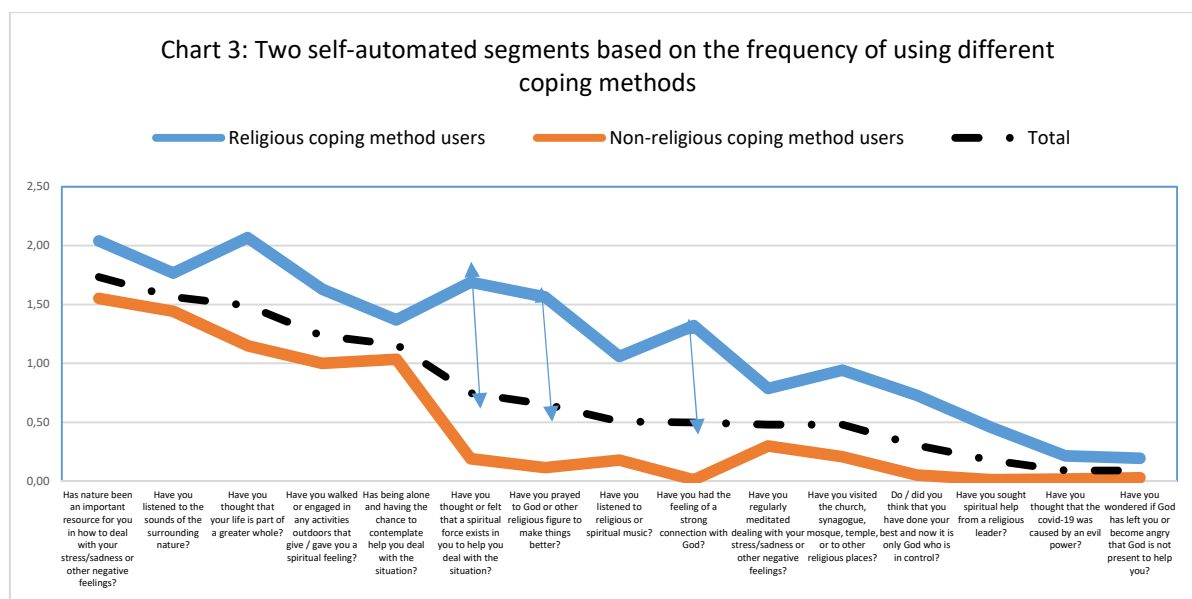
**Comparing coping methods *between* different subgroups.** The table below shows a vertical analysis meaning that each coping method is compared between the different subgroups (Dark green is very often and dark red is very rarely used). The table shows that using nature, as a resource, is most common among women and persons older than 50 years. Listening to sounds from nature is most common among those living in small towns, but also those older than 50 years and women. Thinking of life as a part of a greater whole is most often used by those living in the capital, Stockholm, but also those who are part-time employed at the university. The only coping method used mostly by students in comparison with other subgroups is negative religious coping, and in particular wondering if God has abandoned them and thereby getting angry (0.17). The coping methods used mostly by men in comparison with other subgroups are listening to religious music (0.65) and visiting religious places (0.58). The methods women use more often than any other subgroups are being in nature (1.93) and doing activities outdoors (1.37).

Table 3: Comparing coping methods between different subgroups

Vertical analysis - how each coping method is used across different subgroups		Nature been an important resource to deal with stress/sadness	Listened to the sounds of the surrounding nature	Thought that life is part of a greater whole	Walked/engaged in any activities outdoors giving a spiritual feeling	Being alone and contemplate to help to deal with the situation	Thought or felt that a spiritual force exists within you to help you to deal with the situation	*Prayed to God or other religious figure	*Listened to religious or spiritual music	*Had the feeling of a strong connection with God	Regularly meditated dealing with stress/sadness	*Visited the church, synagogue, mosque, or to other religious places	*Thinking; have done the best and now it is only God who is in control	*Sought spiritual help from a religious leader	*Thought that the COV-19 was caused by an evil power	*Wondered that God has left/become angry that God is not present to help
	Total	1,74	1,57	1,49	1,25	1,16	0,76	0,66	0,51	0,51	0,49	0,48	0,31	0,18	0,09	0,09
GENDER	Man	1,40	1,38	1,35	1,02	1,02	0,71	0,65	0,65	0,55	0,45	0,58	0,28	0,22	0,11	0,14
	Woman	1,93	1,68	1,58	1,37	1,23	0,78	0,67	0,43	0,48	0,51	0,43	0,33	0,15	0,08	0,06
AGE	Younger than 35 years	1,64	1,45	1,35	1,13	0,93	0,69	0,66	0,45	0,45	0,48	0,49	0,31	0,21	0,16	0,13
	Between 35 and 49 years old	1,67	1,46	1,51	1,20	1,32	0,79	0,76	0,56	0,58	0,47	0,39	0,39	0,13	0,09	0,08
	50 years or older	1,87	1,75	1,59	1,35	1,21	0,75	0,56	0,51	0,47	0,49	0,55	0,23	0,19	0,03	0,07
JOB SITUATION	Employed full-time	1,75	1,58	1,51	1,27	1,14	0,77	0,65	0,56	0,52	0,45	0,47	0,29	0,18	0,07	0,07
	Employed part-time	1,80	1,61	1,61	1,15	1,39	0,83	0,76	0,46	0,51	0,71	0,49	0,37	0,22	0,12	0,10
	Campus or distance student	1,63	1,48	1,33	1,17	1,04	0,61	0,59	0,35	0,41	0,43	0,52	0,30	0,15	0,13	0,17
LIVING IN	Capital	1,76	1,35	1,73	1,29	1,14	0,82	0,69	0,41	0,45	0,65	0,43	0,24	0,10	0,08	0,02
	Mid-large city, not capital	1,68	1,50	1,49	1,14	1,11	0,70	0,68	0,58	0,54	0,39	0,47	0,31	0,23	0,10	0,10
	Small town	1,80	1,76	1,37	1,33	1,24	0,77	0,59	0,45	0,46	0,52	0,53	0,33	0,14	0,09	0,12

#### 4.4 Two different coping method segments identified

Two auto-generated segments from a cluster analysis are identified from the data. This segmentation is based on how often the different coping methods are used. Respondents are clustered based on similarity in how often they use different coping methods. The chart below shows the first segment named Religious/spiritual coping methods users (RCOPE) and the other segment named Non-religious coping methods users (Non-RCOPE). Only two segments result from the analysis because the academics are quite similar regarding their usage of the different coping methods. The cluster analysis shows that the RCOPE segment uses all religious/spiritual coping methods more often than the other segment does. However, three specific coping methods seem more important in differentiating the RCOPE and Non-RCOPE segments. These include thinking that a spiritual force exists, praying to God, and having a feeling of connection to God.



#### Characteristics of the two auto-generated segments

There is a small difference regarding socio-demographics aspects. The percentage of men and women is almost the same, 39% men and 61% women for the RCOPE segment, and somewhat more women (66%) than men (34%) in the Non-RCOPE segment. There is somewhat a larger percentage of people younger than 35 years in the Non-RCOPE (33% versus 27%), and somewhat more of those 50 years or older in the Non-RCOPE segment (40% versus 35%). The RCOPE segment has to larger extent full-time employees (68% versus 64%), while Non-RCOPE segment has more students (22% versus 15%). The vast majority in both groups has university education, i.e. 93% in the Non-RCOPE and 94% in the RCOPE segment. There

is similarity in the percentage that has children, i.e. 65% in the RCOPE and 63% in the Non-RCOPE segment. There is similarity in the two segments based on the size of the city of residence. There is a small difference regarding country of birth since eight in ten were born in Sweden among the Non-RCOPE segment and about seven in ten were born in Sweden among the RCOPE segment. The RCOPE segment has somewhat more marrieds as compared to the Non-RCOPE segment (55% versus 47%).

Religious aspects account for the biggest difference between the two segments. Ninety percent (90%) in the RCOPE segment believe in God, while only 27% in the Non-RCOPE segment do so. As many as 72% in the RCOPE segment come from a religious family and only 41% in the Non-RCOPE segment do so. Additionally, the RCOPE segment has a bit less respondents satisfied with working from home (57% versus 62%), and they tend to work more now as compared to before Covid-19 (38% versus 23%). There is no difference regarding how the two groups perceive their health.

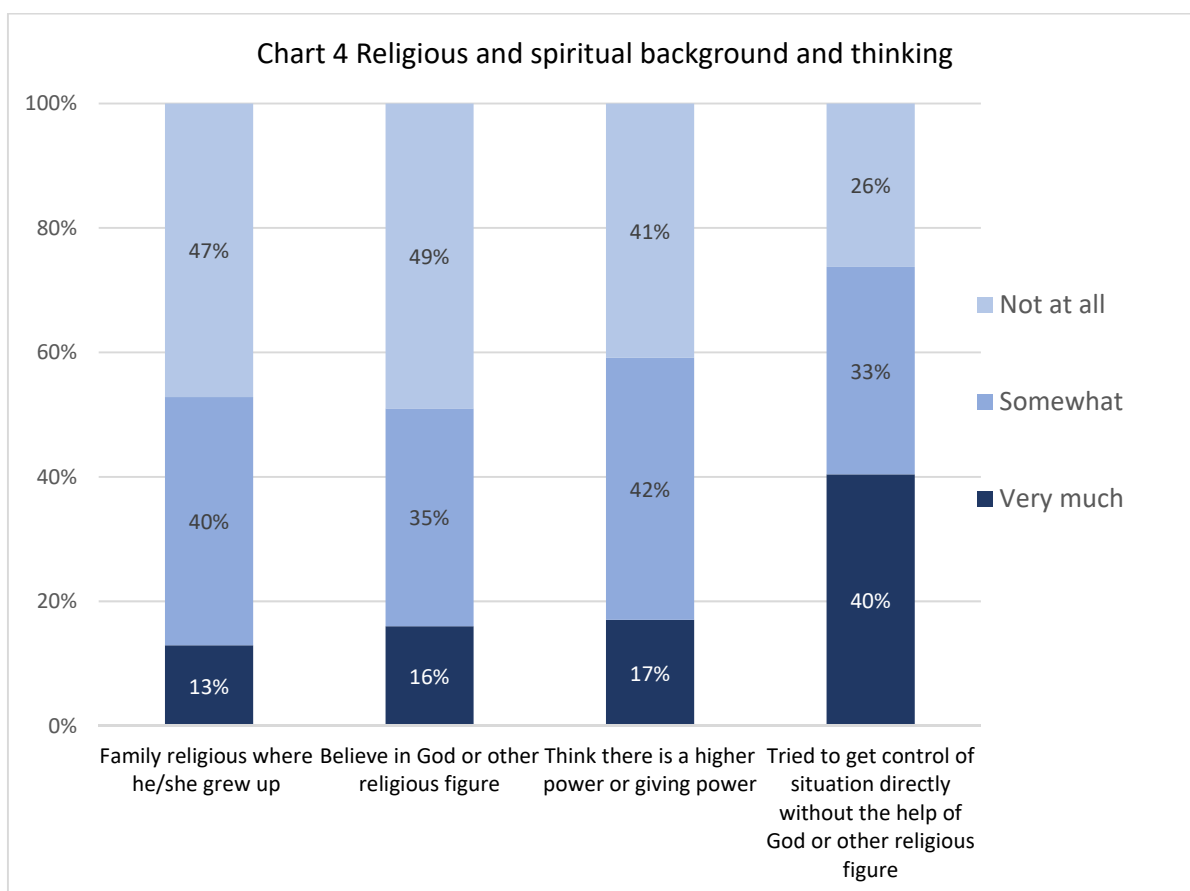
## 5. HOME SITUATION DURING COVID-19 CRISIS

This section focuses on the academics' home situation now when they stay and work from home more than before the Covid-19 crisis. The section does not focus on the usage of different coping methods during the Covid-19 crisis.

### 5.1 Religious and spiritual background

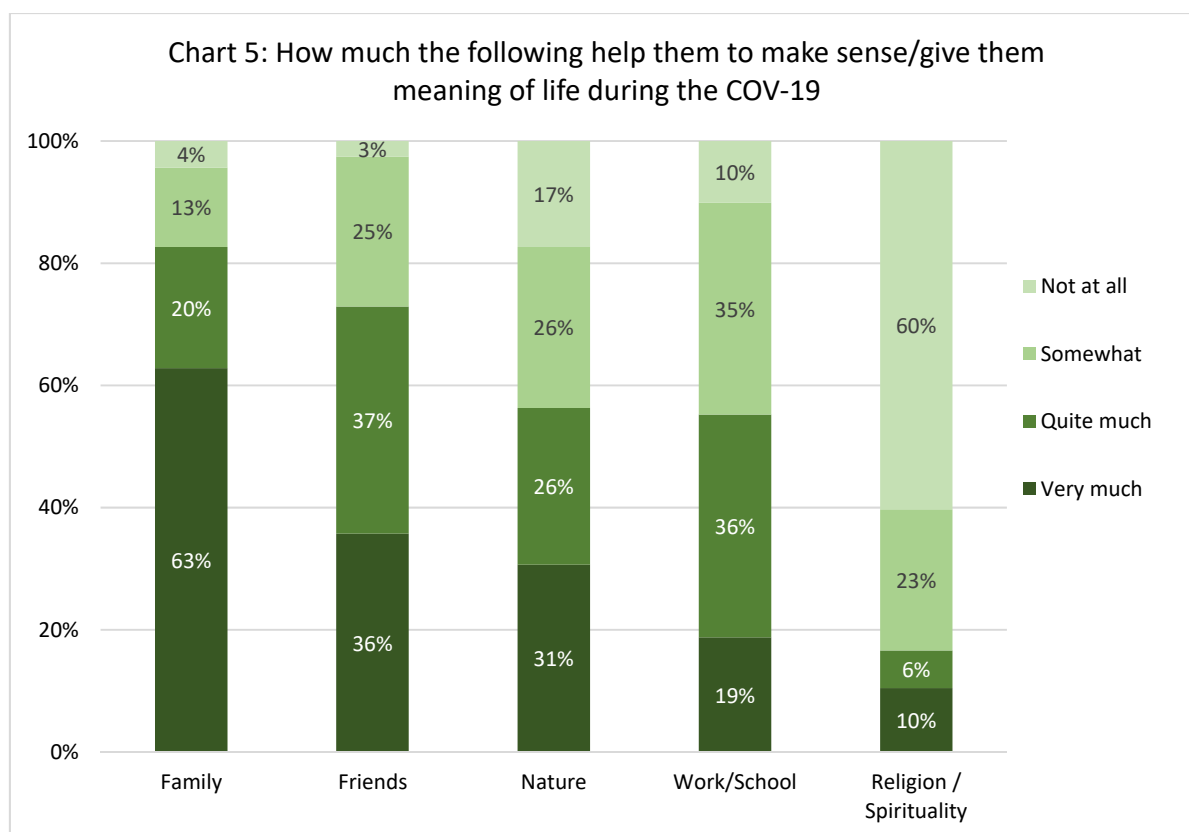
Among the academics in Sweden, 51 % claim that they believe in God or another religious figure to some extent, with about 16% claiming that they believe very much. This figure mirrors the percentage who say they grew up in a religious family, and those who think there is a higher power or giving power.

On the other hand, 73% have tried to get control of the situation directly without the help of God or another religious figure.



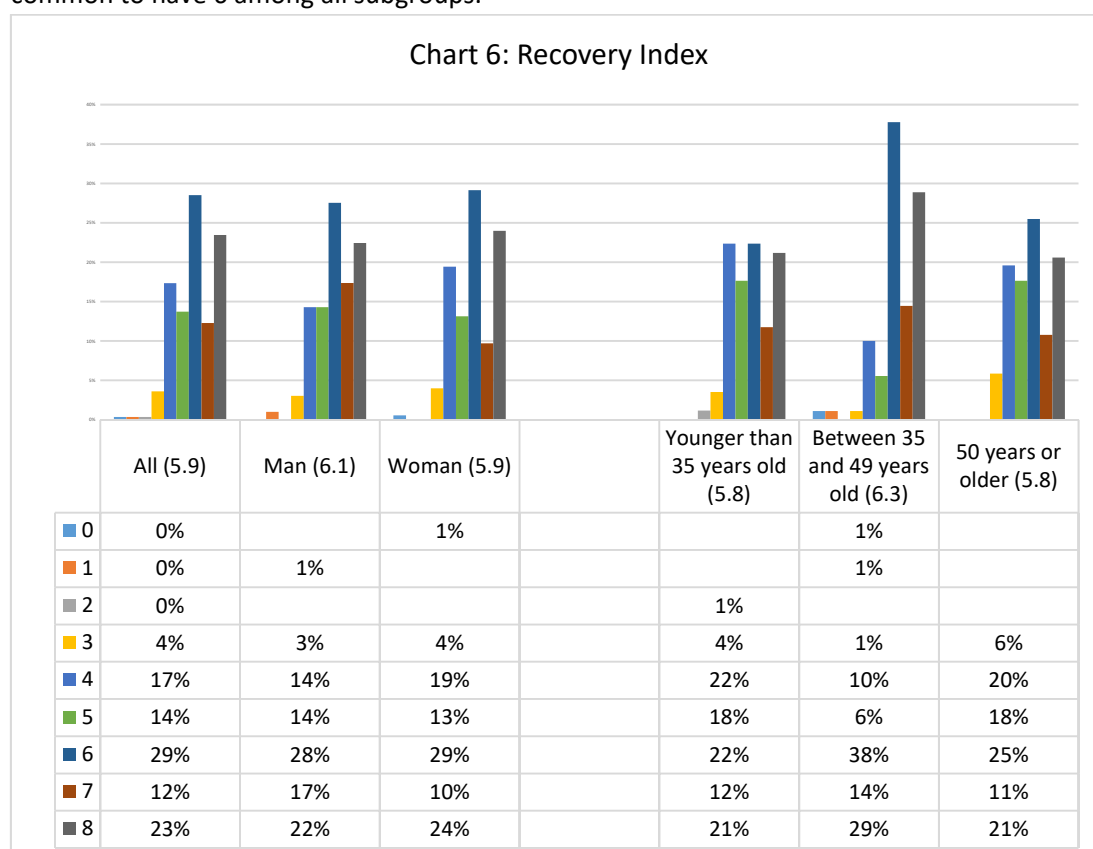
## 5.2 Meaning of life, resilience, and self-rated health during Covid-19 crisis

**Meaning of life.** Among five factors that give meaning to life for academics (family, friends, nature, work/school, and religion/spirituality), family is the strongest during the Covid-19 crisis. As many as 83% believe quite much or very much that family gives life meaning. On the contrary, only 4% say that family does not matter at all. The second most important factor is friends, with 73% academics believing quite much or very much that friends give meaning to life. Academics rank religion lowest among the factors that give life meaning; 60% believe that religion does not give life meaning at all. Only 10% believe very much that religion give life meaning.



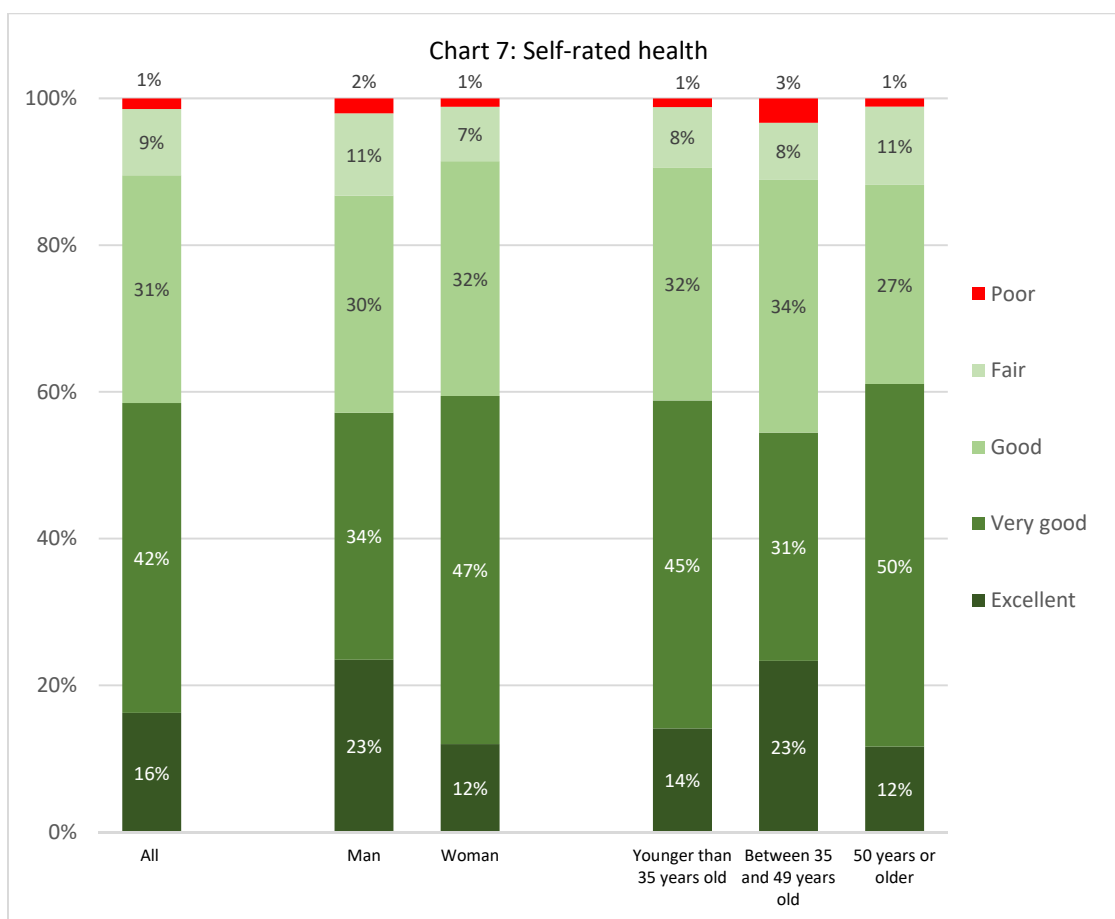
**Resilience.** Regarding the capacity to recover from a disease like Covid-19, the respondents were asked two questions: if they can adapt when changes occur, and if they tend to bounce back after illness, injury, or other hardships. These questions with a scale from 0 (not at all) to 4 (all the time) create an index of 0 to 8. In the analysis presented in the chart below, an index of at least 6 means high resilience. The Index for all academics is 5.9, which is close to high resilience. While men have high resilience at 6.1, women have close to high at 5.8. Further, academics between 35 and 49 years old have high resilience with a resilience index of 6.3 whereas those younger than 35 years, and the ones above 49 years do not have high resilience.

The results show that 64% of all respondents have high a resilience index (index 6-8). Resilience is higher among men (67%), and much higher among those aged between 35 and 49 years (81%). It is most common to have 6 among all subgroups.





**Self-rated health.** The respondents in this survey claim that they are quite healthy. Overall, a majority (58%) say their health is excellent or very good while 31% say their health is good. This adds up to 89% who rate their health as good or better. Only 1% claim that their health is poor. More men than women tend to claim that their health is excellent (23% versus 12%); however when combined with those who claim that their health is very good, there are slightly more women than men (59% versus 57%). Across all ages, the difference is small among those who claim to have very good or excellent health. However, more respondents aged between 35 and 49 years claim that their health is excellent. About 10% across all age groups perceive that their health to be fair.



## Correlations.

The table below shows the correlations between the different variables in this section. The results show that there is strongest positive correlation between friends and family giving life meaning during the crisis (0.46). There is also a relatively strong positive correlation between family and friends giving life meaning, as well as work/school and nature as a source of meaning to life. (0.24-0.28) On the other hand, there is relative weak positive correlation between religion and the other factors that give meaning to life.

Friends as a source of meaning to life has a relatively strong positive correlation with gender (0.24) since women score friends relatively higher than men do. On the other hand, family as a source of meaning to life has a relatively strong relation to age (0.16). The older they academics get, the more meaning to life they get from family.

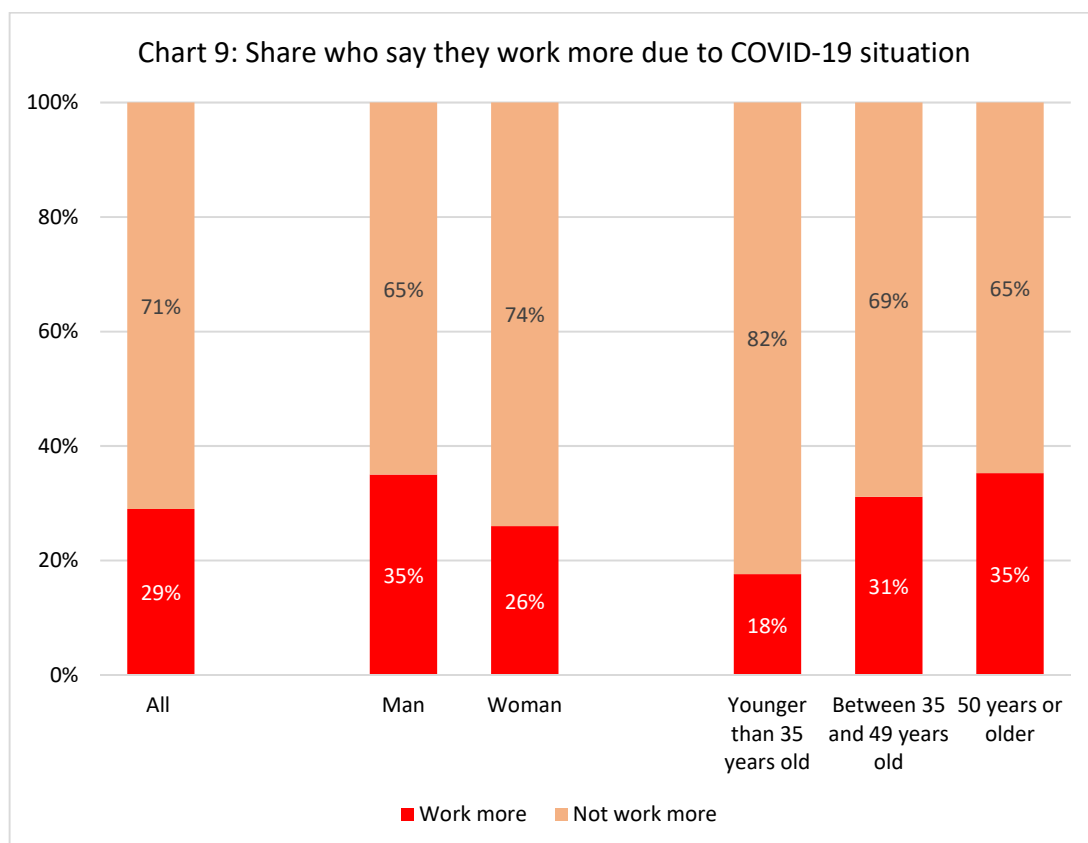
Self-rated health, satisfaction with working from home, and resilience index seem to have a similar correlation. Self-rated health has the strongest correlation with resilience Index (0.25). The better health the academics have the better their resilience. Satisfaction working from home does also have a relatively strong positive correlation with resilience index (0.19). Finally, satisfaction with working from home also has a relatively strong correlation with self-rated health (0.16).

Chart 8: Correlations

Correlations										
	Family makes sense/gives your life meaning during the covid-19	Friends makes sense/gives life meaning during the covid-19	Religion/spirituality makes sense/gives life meaning during the covid-19	Work / school makes sense/gives life meaning during the covid-19	Nature makes sense/gives life meaning during the covid-19	Self-rated health	Satisfaction with current work/study from home arrangement	Recovery Index	Age categories	Gender
Family makes sense/gives your life meaning during the covid-19		0,46	0,09	0,26	0,24	0,03	0,08	0,14	0,16	0,14
Friends makes sense/gives life meaning during the covid-19			0,04	0,28	0,25	0,04	-0,05	0,08	-0,07	0,24
Religion/spirituality makes sense/gives life meaning during the covid-19				-0,01	0,07	0,04	0,04	-0,03	-0,06	0,03
Work / school makes sense/gives life meaning during the covid-19					0,18	0,05	0,15	0,11	0,06	0,09
Make sense/give your life meaning during the covid-19						-0,02	0,05	0,03	0,05	0,16
Self-rated health							0,16	0,25	0,00	-0,02
Satisfaction with current work/study from home arrangement								0,19	0,09	0,01
Recovery Index									-0,01	-0,05
Age categories										0,01
Gender										

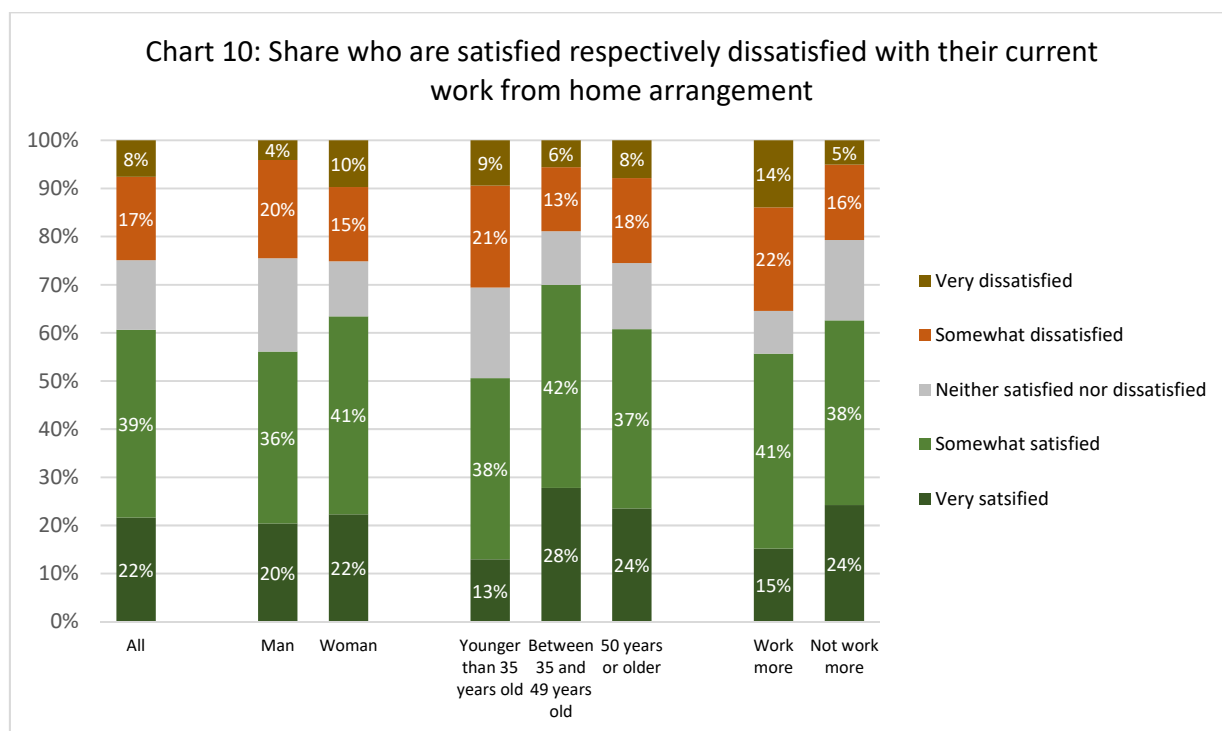
### 5.3 Working from home during crisis

The findings of this study show that three in ten work more during the crisis. However, there is no clear indication as to why people would work more or less during the crisis. Working more is somewhat more common among men, but also among the oldest age group. This could be due to greater responsibilities when academics are older, or the fact that men more often than women have leading roles. The crisis can mean different routines and new ways of working which means more hours spent while working. It can also depend on more uncertainties at work. Other studies have also shown that some tend to work more when working from home since the working life and private life melt together, and it is easier to work in the evenings.



## 5.4 Satisfaction with working from home

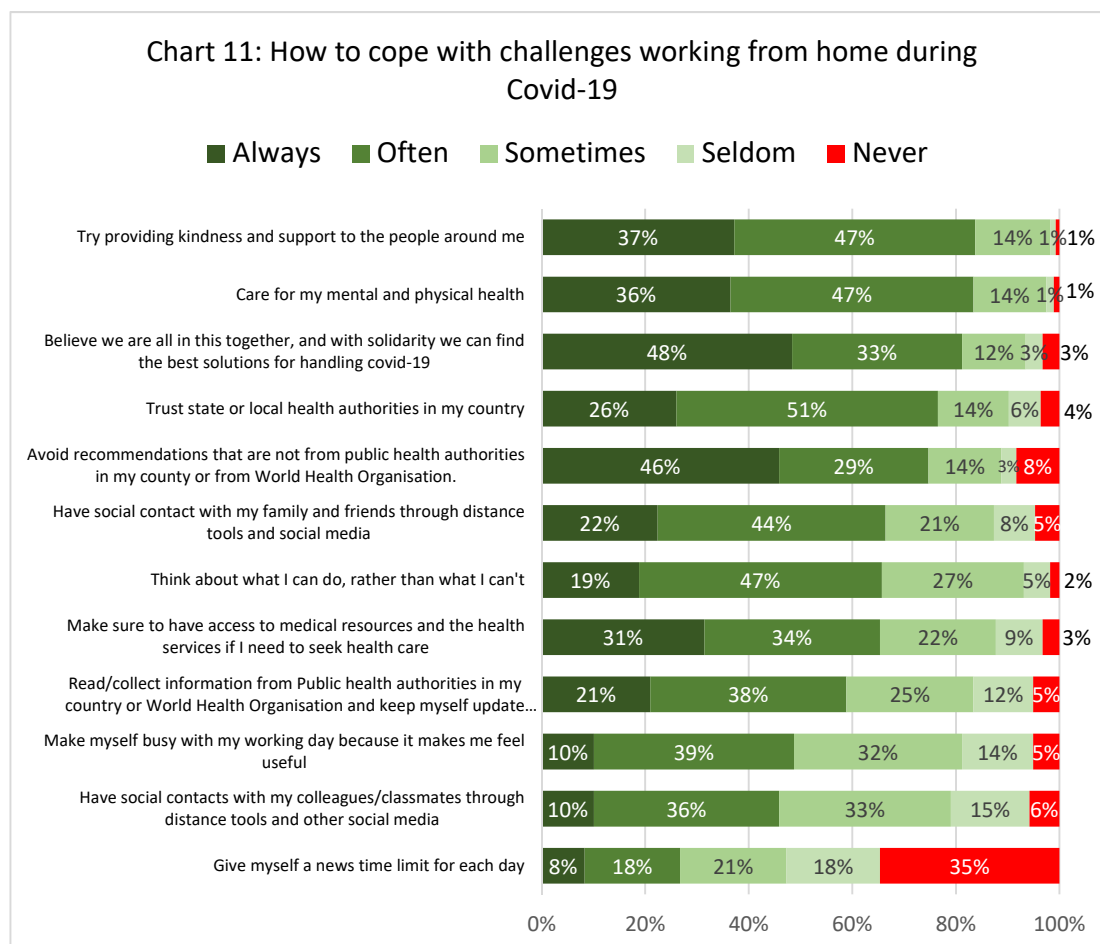
Most academics in Sweden are satisfied with their current “work from home” arrangement. As many as 61% are very or at least somewhat satisfied with their working situation, and only 25% are dissatisfied. Women tend to be more satisfied with their “work from home” arrangement than men are, but the difference is marginal (63% versus 56%). Logically, men are more dissatisfied (30% versus 19%). When comparing the three age groups, the mid-aged are more satisfied than the younger and older groups. Probably, this has to do with being in the middle of life and having children at home and therefore being able to spend more time with them when working from home. Younger groups, with fewer children, require more for social life at work, and older persons whose children have moved out may be more eager to meet other people. These opportunities are limited when working from home. It might also be a requirement for mid-aged people with children to plan their work at home since other family members are at home. It is interesting to note that those who claim that they do not work more during the crisis are also more satisfied. It is unclear what this depends on. Does satisfaction with their situation keep them from working more? Are they more efficiency, or does their satisfaction depend on having less work? Further investigation of these issues is necessary.



## 5.5 Coping with challenges of working from home

Among the 12 ways of coping with challenges related to working from home during the crisis, 11 are being utilized by more than 90% of the sampled academics. The only thing not done by 90% of the respondents is giving themselves a news time limit every day.

The 3 most often used ways to cope with challenges of working from are about kindness, focus on own health and feeling solidarity. Eighty-four percent (84%) often or always try to provide kindness or support to the people around them. 83% care for their own mental and physical health. 83% care for their own mental and physical health. Almost as many believe that they are in this crisis together with other people, and show solidarity and find the best solutions together.



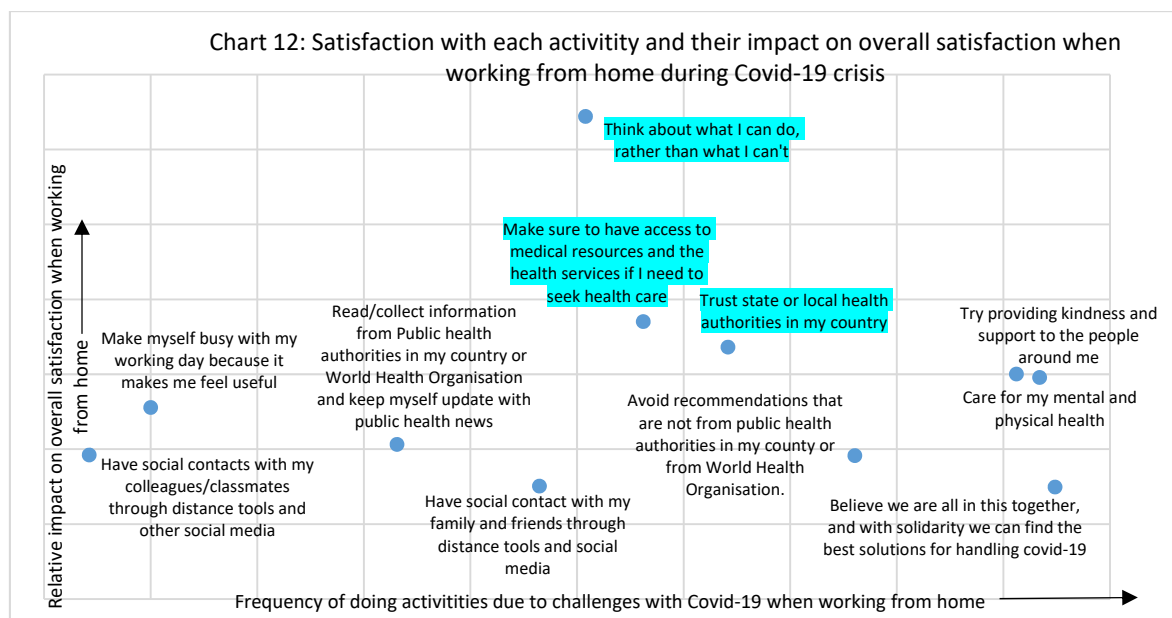
We have done a factor analysis to understand the twelve different ways of coping with the challenges. From the statements mentioned about coping, four statements often come together; we have named this factor “Trust in authorities and solidarity in society”. Four other statements create another factor named “Active care of own health and near friends”. Statements about own health and taking care of close friends are linked to each other. A third way of dealing with the situation is simply getting busy. Finally, statements about social contacts with family, colleagues and friends on social media form the fourth factor.

Table 4: Factor analysis of ways of coping with challenges

	1. Trust in authorities and solidarity in society	2. Active care of own health and near friends	3. Get busy	4. Social contacts with social media
Read/collect information from Public health authorities in my country or World Health Organisation and keep myself update with public health news	0,639	0,101	0,265	0,028
Trust state or local health authorities in my country	0,796	0,030	-0,136	0,138
Avoid recommendations that are not from public health authorities in my county or from World Health Organisation.	0,541	0,228	-0,012	-0,105
Believe we are all in this together, and with solidarity we can find the best solutions for handling covid-19	0,714	0,221	0,159	0,166
Think about what I can do, rather than what I can't	0,184	0,507	0,440	-0,051
Care for my mental and physical health	0,050	0,823	0,021	0,101
Try providing kindness and support to the people around me	0,201	0,751	0,181	0,119
Make sure to have access to medical resources and the health services if I need to seek health care	0,285	0,564	0,047	0,196
Make myself busy with my working day because it makes me feel useful	0,179	0,124	0,750	0,100
Give myself a news time limit for each day	-0,071	0,060	0,758	0,077
Have social contacts with my colleagues/classmates through distance tools and other social media	0,130	0,007	0,090	0,817
Have social contact with my family and friends through distance tools and social media	-0,005	0,309	0,068	0,713

## 5.6 Importance when working from home during crisis

In this correlation analysis, we correlate the overall satisfaction with working from home with each single activity to reveal which of them has the strongest impact on overall satisfaction. Since we already know the frequency of the different activities from the previous chart (chart 11), the most important aspect in this chart is the relative impact on overall satisfaction, as measured on the y-axis! The relative impact between the different activities is more important than the strength, therefore a scale on the y-axis is not necessary.



It is interesting to analyze what people do the most during a situation like this to deal with the challenges. This correlation shows that how often people do certain activities is not the most important factor for satisfaction with their “work from home” situation. As seen from the previous chart (chart 12), providing kindness and support is done most often. In this chart, the frequency of doing activities due to challenges when working from home is horizontal. The more often they do an activity the more to the right on the chart it is placed. This was analyzed in the previous diagram.

But the chart also reveals what is more important to get more satisfied with their situation. That is something else, but more important. The analysis shows that the way to think about what they can do, rather than what they cannot do, has the highest impact on overall satisfaction with working from home. This variable has relatively more impact on satisfaction than any other variable tested in this analysis. The second relatively most important activity for satisfaction with working from home is about being able to access a health network, such that a person has access to medical resources and services if the need arises. The third most important factors is having trust in the state or health authorities in the country.

In conclusion, the most important factor for satisfaction with working from home is to think about what you can do and not what you cannot do. However, this must be combined with the feeling of being secure of what the health sector is able to offer if you get sick, and to trust that the government and/or health authorities are making the right decisions in this difficult life situation.



## 6. Appendix

In this appendix the sociodemographic variables are presented for the sample used in this study.

Variable	Variable value	10%
Gender	Man	36%
	Woman	64%
Age groups	Younger than 35 years old	31%
	Between 35 and 49 years old	32%
	50 years or older	37%
Education	University	94%
	Gymnasium or similiar	6%
Country of birth	Sweden	75%
	Other country	25%
Job / student situation	Full-time employment	66%
	Part-time employent	15%
	Student	19%
Social status	Married	50%
	Divorced	5%
	Engaged	11%
	Other relationship	17%
	Single	1%
Children	Children	64%
	No children	36%
Place living in	Capital	18%
	Mid-large city	48%
	Small town	34%