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GENDER CHARACTERISTICS OF THE SUBJECTIVE ASSESSMENT OF QUALITY OF LIFE IN INDIVIDUALS UNDER FORCED SOCIAL ISOLATION DURING THE COVID-19 PANDEMIC

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Summary. *The article investigates gender-specific characteristics in the subjective assessment of quality of life among individuals who experienced forced social isolation during the COVID-19 pandemic. The study involved 81 participants, divided into two groups: the experimental group, which was subjected to isolation, and the control group, which continued their usual lifestyle. The assessment of quality of life was conducted using Oleg Chaban's scale and statistical methods. The results revealed significant gender differences in the perception of quality of life among both men and women. It was found that isolation had a markedly negative impact on quality of life, particularly among men. These findings highlight the necessity of gender-oriented psychosocial interventions to support mental health in conditions of social isolation.*

Relevance of the study: The COVID-19 pandemic has posed a global challenge to society, altering the daily lives of billions of people. One of the key measures to curb the spread of the virus was forced social isolation, which affected all age and social groups. The lack of physical contact, limited social interactions, and economic uncertainty created unfavorable conditions for mental health. The issue of subjective perception of quality of life under such conditions becomes particularly important, as this indicator reflects a person's overall well-being, emotional and physical state, ability to adapt to new circumstances, and maintain social connections.

Gender aspects of quality of life become a crucial factor in understanding, as men and women may experience isolation and other stressful situations differently.

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Studying gender differences in the perception of quality of life not only deepens our understanding of the pandemic's impact but also helps in developing targeted interventions to support the population's mental health. In situations where social connections are limited, it is important to determine how men and women respond to isolation and which factors contribute to their well-being or, conversely, increase the risks of deteriorating mental health.

The purpose of this study was to examine gender differences in the subjective assessment of quality of life among individuals who were subjected to forced social isolation during the COVID-19 pandemic and to compare these results with those of individuals who continued their usual way of life without restrictions. Special attention was paid to emotional well-being, physical health, social relationships, and the ability to adapt to isolation conditions.

Materials and Methods: In adherence to the principles of biomedical ethics and based on informed consent, we surveyed 81 individuals (35 men and 46 women) who were under conditions of forced social isolation, as well as 80 individuals in the control group (32 men and 48 women) who continued their usual way of life. The quality of life was assessed using Oleg Chaban's scale and statistical analysis methods.

Results: During the survey, the subjective perception of quality of life was evaluated among respondents who were in forced social isolation during the COVID-19 pandemic, as well as individuals from the control group. The overall results of the study revealed significant differences in the subjective perception of quality of life between men and women in both the study group and the control group (Table 1).

Table 1

Results of the Quality of Life Assessment (Oleg Chaban) in Individuals under Forced Social Isolation and the Control Group, Based on Gender

Quality of Life Scale	Study Group				p (Men/Women)	Control Group				p (Men/Women)	p (Study/Control)	
	Men		Women			Men		Women			Men	Women
	abs.	%	abs.	%		abs.	%	abs.	%			
Extremely Low	24	68,6	24	52,2	>0,05	5	15,5	8	16,6	>0,05	<0,01	<0,01
Low	3	8,6	10	21,7	>0,05	5	15,6	6	12,5	>0,05	>0,05	>0,05
Moderate	4	11,4	5	10,9	>0,05	6	18,8	9	18,8	>0,05	>0,05	>0,05
High	4	11,4	4	8,7	>0,05	2	6,3	8	16,7	>0,05	>0,05	>0,05
Very High	0	0,0	3	6,5	>0,05	14	43,8	17	35,4	>0,05	<0,01	<0,01
Total	35	100,0	46	100,0		32	100,0	48	100,0			

The table illustrates the distribution of the subjective perception of quality of life among individuals who were in forced social isolation (the study group) and those who continued their usual way of life (the control group). The comparison is

made based on gender (men/women), and the statistical significance of differences between the groups is provided.

The analysis of the study results shows significant differences in the levels of quality of life between the study and control groups. In the study group, an extremely low quality of life was observed in 24 men (68.6%) and 24 women (52.2%), while in the control group, this indicator was 5 men (15.5%) and 8 women (16.6%) ($p < 0.01$ for both genders). A low quality of life was found in 3 men (8.6%) and 10 women (21.7%) in the study group, compared to 5 men (15.6%) and 6 women (12.5%) in the control group ($p > 0.05$ for both genders).

A moderate quality of life was recorded in 4 men (11.4%) and 5 women (10.9%) in the study group, and in 6 men (18.8%) and 9 women (18.8%) in the control group ($p > 0.05$ for both genders). A high quality of life was observed in 4 men (11.4%) and 4 women (8.7%) in the study group, compared to 2 men (6.3%) and 8 women (16.7%) in the control group ($p > 0.05$ for both genders).

The most significant contrast was observed in the category of very high quality of life: in the study group, no men (0.0%) reached a very high level of quality of life, while 3 women (6.5%) did. In the control group, this indicator was 14 men (43.8%) and 17 women (35.4%) ($p < 0.01$ for both genders), highlighting the serious negative impact of forced social isolation on the quality of life of the individuals studied (Fig. 1).

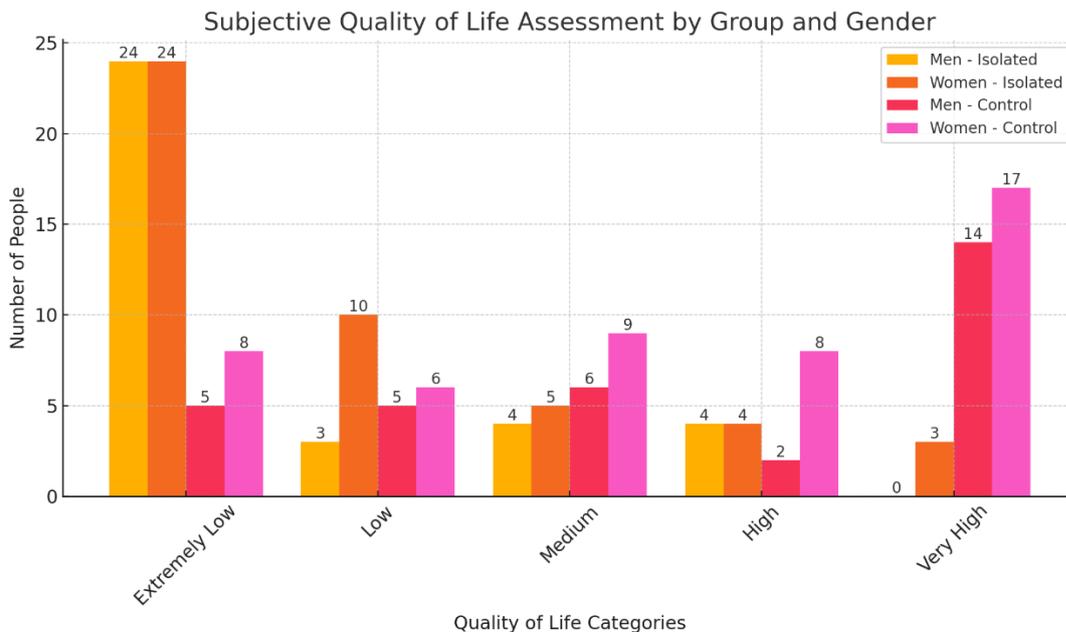


Fig. 1. Results of the Quality of Life Assessment (Oleg Chaban) among Individuals in Forced Social Isolation and the Control Group, Based on Gender

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The obtained results indicate that forced social isolation significantly reduces the quality of life for individuals in such conditions. Specifically, the study group demonstrated a higher percentage of extremely low quality of life cases and a considerably lower percentage of very high quality of life cases compared to the control group.

For men in isolation, the average quality of life score was 43.00 ± 22.65 (95% CI 35.22–50.78), with a median value of 39.00 and an interquartile range of 26.00–66.00. For women, this score was significantly higher at 51.30 ± 22.28 (95% CI 44.69–57.92), with a median value of 47.50 and an interquartile range of 36.00–68.00. However, the difference between men and women did not reach statistical significance ($p > 0.05$), indicating that although women generally had higher scores, this difference might be coincidental. In the control group, where there was no forced isolation, the average quality of life scores were significantly higher for both men (74.09 ± 23.47 , 95% CI 65.63–82.56) and women (72.65 ± 21.30 , 95% CI 66.46–78.83), with median values of 74.00 and 73.00, respectively. The statistical significance of the difference between men and women was high ($p < 0.01$), emphasizing the impact of social isolation on quality of life, particularly for men (Table 2).

Table 2

**Quantitative Indicators of the Quality of Life Assessment (Oleg Chaban)
in Individuals Under Forced Social Isolation and in the Control Group,
Based on Gender**

Indicator	Study Group			p	
	M±m (CI±95%) / Me / Q ₂₅ – Q ₇₅		p (Men/Women)		
	Men, n=35	Women, n=46			
Quality of Life Score	43,00±22,65 (35,22–50,78) / 39,00 [26,00–66,00]	51,30±22,28 (44,69–57,92) / 47,50 [36,00–68,00]	>0,05	Men	Women
Indicator	Control Group			p	
	M±m (CI±95%) / Me / Q ₂₅ – Q ₇₅		p (Men/Women)		
	Men, n=32	Women, n=48			
Quality of Life Score	74,09±23,47 (65,63–82,56) / 74,00 [64,00–96,00]	72,65±21,30 (66,46–78,83) / 73,00 [62,00–87,00]	>0,05	<0,01	<0,01

Under conditions of forced social isolation, women demonstrated higher quality of life scores compared to men, although this difference was not statistically significant. However, isolation had a substantial impact on overall quality of life scores, reducing them in both genders, with a more pronounced effect on men. This suggests that women may adapt better to isolation or possess more developed social coping mechanisms.

Conclusions:

1. *Negative Impact of Social Isolation:* The study results demonstrated that

forced social isolation had a significantly negative impact on the subjective perception of quality of life, regardless of gender. Specifically, both men and women in the study group showed much lower quality of life scores compared to the control group, which did not experience isolation. The most severe negative impact was observed in men, suggesting their higher vulnerability to social isolation or less developed coping strategies compared to women.

2. *Gender Differences:* Although women in the study group had slightly higher quality of life scores, this difference was not statistically significant. This may indicate that while women adapted better to isolation, their scores also decreased significantly compared to the control group. In contrast, in the control group, where no isolation occurred, men had significantly higher quality of life scores compared to men in isolation, emphasizing the substantial effect of social isolation on the male population.

3. *Need for Gender-Specific Interventions:* The data underscore the importance of developing gender-specific support programs aimed at minimizing the negative consequences of social isolation. Men, in particular, require special attention, as they may be more vulnerable to isolation. Support programs should include both psychological interventions and social initiatives aimed at enhancing adaptability and improving social connections.

4. *Increased Adaptability in Women:* Women in the study group demonstrated higher adaptability to isolation, which may be attributed to more developed social coping mechanisms and psychological adaptation strategies. These findings could be useful in developing support strategies for other social and gender groups in the event of future crises.

Thus, the study results highlight the need for comprehensive approaches to psychosocial support for the population during social isolation, taking into account gender-specific differences.

Future Research Prospects:

It is essential to continue research to develop effective interventions aimed at minimizing the negative consequences of social isolation and improving the quality of life for both men and women.

Relation to Other Scientific Research:

This article is part of the PhD dissertation titled "Development of Mental Disorders in Individuals Under Forced Social Isolation (Clinical and Pathopsychological Features, Modern Approaches to Correction and Treatment)" by Tetiana Ivanitska-Diachun («Розвиток психічних порушень в осіб, що перебувають в умовах вимушеної соціальної ізоляції (клініко-патопсихологічні і патопсихологічні особливості, сучасні підходи до корекції та лікування)» Тетяни Іваніцької-Дячун).



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