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"This pandemic has changed our daily living": Young adults' leisure experiences during the COVID-19 pandemic in South Africa

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ABSTRACT

The COVID-19 pandemic is a global human ecosystem disruption affecting almost every facet of daily living. South Africa adopted a risk-adjusted approach comprising five-levels to curb the spread of COVID-19. Early in 2020, the country experienced level 5 and 4 restrictions, indicating high COVID-19 spread with low to moderate health system readiness. South Africans were largely confined to their homes. This study explored young adults' experiences of leisure engagement during the confinement, adaptations made, and the influence on health and well-being. Thirteen occupational therapy student researchers conducted individual qualitative, exploratory-descriptive studies on young adults' leisure experiences during the level 5 and 4 confinements. The authors used a qualitative meta-analytic approach to review the student researchers' primary studies and synthesize findings for this paper. The sample comprised 65 participants aged 18 to 32 years (mean age 22.2 years), the majority being either students or employed. Participants were interviewed online or submitted written responses to open-ended questions focusing on their leisure engagement during the confinement. Relevant data were extracted from the primary studies and analyzed thematically. Four themes emerged: 1) disruption, 2) time, 3) adaptations to change, and 4) leisure benefits. Although participants experienced the confinement as disruptive, and restricting their leisure and social engagement, they adapted and developed new leisure occupations, which had a positive influence on their health and well-being. In conclusion, the young adults dealt with the occupational injustices of confinement by adapting their leisure engagement, thus displaying occupational resilience, which positively influenced health and well-being.

Human ecosystem disruptions such as pandemics, natural disasters, and socio-economic crises threaten the health and well-being of individuals across the globe. As devastating as human ecosystem disruptions are, they highlight inequities and injustices, and afford opportunities to examine how to do things differently. A recent human ecosystem disruption was the arrival of the severe acute respiratory syndrome coronavirus 2, or SARS-CoV-2, which was detected in South Africa for the first time on March 5, 2020 (Schröder et al., 2021). The virus and the resulting coronavirus disease 2019 (COVID-19) confronted the entire world with unprecedented challenges. The World Health Organization (2020) announced a pandemic as the virus spread rapidly all around the globe.

Countries responded differently in efforts to curb the spread of the virus. The South African Government adopted a risk-adjusted approach comprising a five-level alert system (South African Government, 2022). From March 27, 2020, until April 30, 2020, the country was on level 5, indicating high COVID-19 spread with low health system readiness. Level 5 restrictions meant that drastic measures were taken to contain the spread of the virus and save lives; the citizens of South Africa were confined to their homes, unless they were identified as essential workers, only being allowed out to visit grocery shops or obtain healthcare. During May 2020, the country moved to level 4, indicating high COVID-19 spread with low to moderate health system readiness. Under Level 4 restrictions some daily occupations could resume. These restrictions and the ensuing confinement became known in South Africa as "lockdown".

The subsequent emergence of new variants of SARS-CoV-2 and challenges with vaccinating the population mean that COVID-19 is likely to be an ongoing phenomenon for the immediate future and possibly years to come. Healthcare professionals need to prioritize research on the experiences of individuals during the pandemic to understand how to address the implications and consequences of COVID-19, such as confinement. The current study explored young adults' leisure experiences during the level 5 and 4 confinements in April and May 2020 in South Africa. Young adults for the purposes of this study were defined as aged 18 to 34 years, with South Africans aged 15 to 34 years comprising 34.3% of the total population (Statistics South Africa, 2021a). Unemployment is nearly 60% in young adults aged 15 to 24 years (Statistics South Africa, 2020). In 2016, close to 62% of young adults lived in poor households, of which 14% had no piped water (Statistics South Africa, 2016). Around 55.1% of South Africans finish secondary school and only 12.1% complete post-secondary school education (Statistics South Africa, 2021b).

The stringent COVID-19 lockdown restrictions have affected the mental health and well-being of many individuals, and exacerbated anxiety and social isolation (South African Society of Psychiatrists, 2020). Young adults, due to their age and stage of development, actively engage in leisure and naturally seek social interaction. The COVID-19 lockdown restricted leisure and social engagement. However, little is known about how COVID-19 and the social isolation caused by the restrictions influenced health and well-being in young adults. Therefore, the current study addressed the research question: What were young adults' leisure experiences during the COVID-19 lockdowns in South Africa, and how was their health and well-being influenced?

Literature Review

Engagement in leisure and social occupations contributes to giving life meaning. Hammell (2004) proposed four dimensions of meaning inherent in occupation: doing, being, becoming, and belonging. She explained that becoming relied on receiving motivation, critique, and opinion from others. Belonging comprises social interaction, mutual support, friendship, a sense of inclusion and affirmation from others, and correlates with interpersonal relationships and connectedness of people. Additionally, Hammell indicated that belonging contributes to feeling that life is worth living. Thus, when young adults are unable to engage in leisure and social occupations, they may experience diminished meaning in life that negatively influences health and well-being.

Social isolation is the objective physical separation of a person which results in a lack of quality and meaningful contact with other individuals and communities (Cattan et al., 2011). Social isolation limits individuals' social relations and social participation and is correlated with poor physical and mental well-being (Toepoel, 2013). Considering Erikson's psychosocial stages, it is important that young adults who are in the sixth stage of 'intimacy versus isolation' (Rosenthal et al., 1981) form close, committed, long-lasting relationships that are both romantic and friendships. Individuals who are unsuccessful in this stage may experience isolation and loneliness. It is therefore crucial for the healthy development of young people to engage in meaningful social interactions and develop social connectedness.

One way for young people to develop social connectedness is through leisure engagement.

Leisure engagement enhances young people's mental, social, psychological, emotional, and physical well-being (Caldwell, 2015). Caldwell described the importance of healthy leisure occupations, positive experiences, and supportive contexts in contributing to positive youth development. Meaningful leisure is defined as "enriching forms of leisure engagement experienced in a number of different ways personally, socially, spiritually, and/or culturally" (Hopper & Iwasaki, 2017, p. 22). Iwasaki et al. (2010) argued that for individuals with mental illness, meaningful leisure offers opportunities for active living, health promotion, and life-quality from a holistic, strengths-based, and humanistic perspective. Additionally, Caldwell reported that leisure engagement is beneficial for coping with stressors and negative life events, thus assisting individuals to maintain their mental health. Caldwell, however, cautioned that negative emotions such as boredom can arise during leisure and, while boredom can be a catalyst for creativity, it can also lead to engagement in risk behavior. A qualitative study of adolescents living in resource-constrained contexts in Cape Town, South Africa, found that while young people valued free time, having excessive free time with nothing to do was linked to leisure boredom and risk behavior such as substance use (Wegner, 2011). Wegner concluded that impoverished environments contributed to boredom due to restricted occupational choice, which constituted an occupational injustice.

Wilcock and Townsend (2000) have described occupational justice as all individuals having fair and equal opportunities and resources to participate in meaningful occupation. Furthermore, individuals have rights: the right to exert autonomy through choice in occupation, the right to develop through participation in occupations for health and social inclusion, the right to experience occupation as meaningful and enriching, and the right to benefit from fair privileges for diverse participation in occupations (Hocking et al., 2019). Occupational injustices occur when rights are violated and include occupational marginalization, occupational deprivation, occupational alienation, and occupational imbalance (Townsend & Wilcock, 2004).

Young people who are unable to engage in leisure may experience occupational injustice due to the risk of compromised development and negative health outcomes. Occupational injustice occurs when daily life routines are disrupted (Kharma, 2010). Occupational disruption has been defined as a temporary interruption to individuals' occupational engagement (Nizzero et al., 2017). Sima et al. (2017) described the challenges individuals faced as a result of a natural disaster, as they began prioritizing returning to employment, thus relinquishing their leisure occupations. Additionally, the value, meaning, and sense of attachment to leisure occupations were also compromised. Individuals highlighted the need to adapt their relationship with their leisure occupations in order to continue the recovery process (Sima et al., 2017). During the COVID-19 lockdown restrictions, individuals were restricted to their home environments with levels of confinement and opportunities for engagement in leisure differing dramatically, influenced by individuals' environments. Thus, the likelihood of occupational rights being violated during this time is high.

A study of the psychological impacts of COVID-19 in more than 2,500 students at seven universities in the U.S. found that the most common changes in how students felt compared to before the pandemic were increased lack of motivation, anxiety, stress, isolation, and boredom (Browning et al., 2021). Similarly, since the start of lockdown in South Africa, 34% of South African adults reported depression, 62% were stressed, 40% were bored and 35% felt lonely (Orkin et al., 2020). Clearly, the occupational injustices experienced by South Africans during the lockdown have taken their toll on mental health and well-being.

The literature is less clear on how individuals coped with the challenges created by the COVID-19 lockdown restrictions. COVID-19 brought about a major paradigm shift in everyday life and individuals are dealing with a multitude of challenges. A recent study in Poland (Babicka-Wirkus et al., 2021) analyzed university students' strategies of coping during the COVID-19 pandemic, with the students mostly choosing planning, acceptance, and seeking emotional support as coping strategies.

Similarly, a study conducted in Belgium highlighted that resilience was the second strongest contributor to mental health after meaning in occupation, and that people needed to cope with the ongoing stressors and minimize psychological distress, although specific coping strategies were not mentioned (Cruyt et al., 2021).

In summary, the literature review highlighted how young people need leisure engagement and social interaction to experience meaning, health, and well-being. Social isolation can lead to negative mental health and well-being. Leisure provides opportunities for social interaction and positive development; however, less than optimal leisure engagement may be associated with boredom and other mental health challenges. As the COVID-19 pandemic is a recent phenomenon, little previous research has explored the occupational injustices experienced by young adults through the consequent occupational disruption. Little is known about how they managed the challenges created by confinement, and specifically, how social isolation changed their leisure engagement, adaptations made, and the influence on health and well-being.

Methodology

The aim of the study was to explore and describe young adults' experiences of leisure engagement amidst the COVID-19 lockdown, adaptations they made, and the influence on their health and well-being. A qualitative meta-synthesis approach was used to aggregate and synthesize findings from 13 primary qualitative studies. Qualitative meta-synthesis is a secondary qualitative analysis of primary qualitative findings, the purpose being "to provide a more comprehensive description of a phenomenon" (Timulak, 2009, p. 591). Qualitative meta-syntheses enable researchers to identify patterns across primary studies and catalogue sets of findings (Levitt, 2018).

Context

Thirteen occupational therapy student researchers at a university in the Western Cape (South Africa) conducted individual studies of young

adults' experiences of the COVID-19 lockdown during April and May 2020. The student researchers used a qualitative, exploratory-descriptive design supervised by the first author. They were invited to voluntarily make their research reports available for the current study. According to the approach proposed by Timulak (2009), the authors appraised the primary studies for quality and included them based on their focus, which related to the research question of the current study.

Participant selection and recruitment

Original participants were selected using non-probability, purposive, and convenience sampling. Inclusion criteria were that participants were aged 18 to 34 years and resided in Southern Africa. Convenience sampling was employed by using networks of friends and family to identify and recruit potential participants for the study, providing a total sample of 65 participants.

Data collection

For the primary studies, the student researchers conducted semi-structured interviews with questions focusing on participants' experiences of leisure engagement during the COVID-19 lockdown, adaptations made, and the influence on health and well-being. All interviews were conducted in English. Participants were interviewed online using Google Meet, Zoom, or WhatsApp, or submitted written responses to the open-ended questions in their own time. The interviews were recorded and transcribed verbatim.

Data analysis

The student researchers used Braun and Clarke's (2006) method of thematic analysis to analyse the transcribed interviews and written responses. They identified codes that related to the research aim, then grouped similar codes into categories, and finally into themes, which were presented in their research reports. The research reports were written in English and became the primary studies reviewed for the current study. Relevant information from the primary studies relating to participants and their leisure engagement,

health, and well-being was summarized and mapped onto a data extraction summary sheet, and included participant demographics, research settings, data collection, findings, discussion, recommendations, and theoretical frameworks. The data extraction summary sheet was analyzed using the qualitative meta-synthesis method described by Levitt (2018). The research team worked individually to identify meaning units from the primary studies and group similar units into categories. The team developed an analysis framework by discussing the preliminary units and categories to obtain consensus. Finally, the team grouped categories into themes according to similarities and patterns within the data.

Trustworthiness

In line with Timulak's (2009) suggestions, several credibility checks were used. One author acted as auditor, monitoring procedures in all steps of the meta-synthesis and maintaining distance from the analysis process in order to check for biases on the part of the other researchers. Researchers conducted independent analysis of the data by working on their own and then meeting to develop consensus at each stage of the process; this constitutes a form of triangulation. Finally, a researcher from one of the primary studies commented on the credibility of the meta-analysis, thus validating the findings (Timulak, 2009).

Ethics procedure

The study received ethics approval from the University of the Western Cape (South Africa) Biomedical Research Ethics Committee (BM20/9/3). To be included in the current study, primary studies needed to have followed ethics principles and procedures described by the South African Department of Health (2015). Participants' identities were kept confidential, and anonymity was ensured by numbering participants.

Findings

The majority of the sample of 65 participants were female (n = 42; 64.6%), with gender unknown for six participants (9.2%). Participants' ages ranged from 18 to 32 years, with the majority (n = 40; 61.5%) aged 21 to 23 years (mean age: 22.2 years). All of the participants were South Africans except one who was Namibian. The majority of the participants lived in the Western Cape (n = 47, 72.3%), four in the Free State (6.2%), two in Gauteng (3.1%) and one in the Eastern Cape (1.5%). Area of residence was unknown for 11 participants (16.9%). Two participants were postgraduate students (3.1%), 39 (60.0%) were undergraduate students of which 12 (18.5%) were occupational therapy students. Seven (10.8%) were employed, two (3.1%) were unemployed, and occupation was unknown for 15 (23.1%) participants. Four themes emerged from the meta-synthesis: 1) disruption, 2) time, 3) adaptations to change, and 4) leisure benefits.

Disruption "Feeling shell shocked"

The first theme *Disruption* "*Feeling shell shocked*" focused on the participants' experiences of, and responses to, the disruption caused by the lockdown. Additionally, this theme captured the participants' experiences of how their engagement in leisure outside of their home was hindered due to the lockdown regulations and highlighted the barriers to leisure engagement. One participant summed it up well, "*This pandemic has changed our daily living.*"

Participants spoke at length about the sudden change that occurred in lockdown, which hindered their participation in leisure occupations. Many experienced this as a loss of freedom: "*I feel my right to freedom has been affected. Not being able to go out with friends and walk around has greatly impacted me.*" As participants were confined to their houses, they were unable to experience the enjoyable leisure occupations that occurred outside of their homes and with friends: "*I miss social and physical activities that used to be an easy task.*" Being prohibited from engaging in these previously enjoyed occupations affected participants negatively.

> *Lockdown has negatively influenced my ability to participate in leisure by not being able to hike, see friends, spend time*

with the entire family, and go to the beach. The fact that we have to stay at home and cannot go anywhere negatively influences my ability to participate in leisure.

Some participants experienced barriers such as lack of space that physically prevented them from engaging in leisure occupations at home: "*The property that I am currently on does not have the physical room for me to get the desired level of exercise that I am used to.*"

The disruption and new way of living during the pandemic was unsettling for many participants. Common negative feelings shared by many participants were frustration, sadness, and desperation: "*Not being able to do what I love makes me frustrated and sad. I have had lots of ups and downs.*" Many participants noted how lockdown prevented their social participation and the social interaction that transpired outside of their home environment: "*I miss socializing with my friends and being able to spend time with people and getting to know others.*" This resulted in negative feelings: "*For many of us, who are used to being busy, being home-bound has resulted in feeling unproductive, unmotivated, bored and dissatisfied.*" A very common feeling was isolation, which emerged in many of the participants' responses: "*Social participation is important to me. When I am unable to see my friends, I feel isolated and like I am missing out on something or something is missing in my life.*"

Not being able to see one's significant other during the lockdown restrictions meant that relationships became long distance: "*Being in a long-distance relationship makes not seeing your significant other a huge impact on meaningful engagement.*" Nearly all of the participants expressed that the prohibition of social gatherings, and therefore not being able to see loved ones, influenced their mental health as they missed the physical engagement. Some participants also mentioned how their spirituality had been negatively affected.

> *To be cut off from friends and family is no joke and it made me feel so alone. My mental health definitely took a downward dive. I could also not attend church, and this had a huge impact on my mental health.*

Time "So much free time"

Participants realized that because the stringent lockdown restrictions prevented them from engaging in leisure, social, and other occupations outside their home, they had more time available. The extra time had both negative and positive consequences. At first, participants experienced boredom and uncertainty with how to use their free time: "*I have so much more free time that I don't know what to do with it.*" Participants expressed how they resorted to engaging in occupations that were not very stimulating as they were struggling to fill up the extra time in their day:

> *So much free time made me incredibly lazy and I got bored. Since I could not do the stimulating leisure activities that I was used to, I resorted to sitting on the couch all day and watched movies and series, which made me depressed after a while.*

Some participants began eating more, which they perceived as being due to boredom: "*I started eating more because I am at home, sometimes you feel bored … it has definitely impacted me negatively because I am picking up weight.*"

Although the additional time provided opportunities to engage in previously enjoyed leisure occupations, due to the monotony of the continued repetition, this resulted in boredom: "*You know, I get bored, because I have been doing the same activity for the past week already.*" However, participants realized that they had more time to participate in certain occupations than prior to lockdown: "*I have noticed that during lockdown I have time for other stuff as well, like I cut down on traveling time and traffic, all of that stuff so I have more time.*"

Participants began changing their routines to deal with the additional free time, thus being able to incorporate more leisure occupations in their daily lives: "*I have had to alter my routine slightly, but because I have more time, I am able to incorporate more leisure activities into my day, such as doing my makeup, sewing, and reading.*" Some participants occupied themselves with previously enjoyed home occupations such as digital engagement: "*As a young*

individual I've been keeping myself occupied with video games, video streaming, home workouts." It was very clear that the participants really enjoyed the additional free time to engage in leisure occupations: "*Wow, I engage in way more leisure activities than before the lockdown, especially on weekends!*"

Adaptations to change "Doing things differently"

This theme describes how participants adapted to change, made new routines and altered how they engaged in occupations. It was evident that the participants began accepting the reality of lockdown; "*I had to adopt a whole new routine and way of living.*" Participants reported that due to having more time during lockdown, they realized the need to structure their time and develop new routines: "*I made a to-do list*" and "*We've set a time to wake up and certain work hours with structured free time.*" Furthermore, participants made adaptations to their environments and the way they engaged in occupations in order to continue to participate. "*I had to make a plan to do gym at home. I found various home workouts and used household items like wine bottles as my equipment. I also run around the house to incorporate my running.*" Participants also highlighted how they had adapted social interactions using social media. Virtual communication helped them to stay in contact with friends and family; however, many participants mentioned that virtual communication did not adequately meet their needs as they required physical interaction and affirmation while socializing.

> *The only social interaction I've had was over the phone via the 'House party' application. We have had multiple quiz evenings via 'Zoom'. But this is not a sufficient or sustainable social life for me. I need physical interaction, and I miss my friends and my boyfriend.*

Use of social media restricted physical social interaction and was "*less authentic and awkward*" in some ways: "*It doesn't feel quite as satisfying as socializing with friends in real life.*" Being able to make adaptations enabled

participants to cope and contributed to them feeling more stable: "*You have to adapt to the new situation and find a way to make yourself organized so that the stress does not affect you negatively*".

The opportunity for leisure exploration resulted in participants acquiring new skills as they began engaging in more creative occupations. "*I've been able to do a lot more 'arty' things, not just physical art but digital art too. I started trying to do things on Photoshop like graphic design stuff in my free time, also painting and sketching.*" Other participants developed skills relating to cooking and gardening: "*I began doing gardening and because I had free time, I would cook for the family, and this expanded my cooking skills. I really began to enjoy cooking.*" These creative occupations proved to be beneficial to the participants: "*I partake in stress-relieving activities such as journaling, reading, colouring, painting, yoga.*"

Many participants expressed that having more free time gave them more opportunities to engage in religious practices: "*In the pandemic, I had even more time to focus on my religion, so I started reciting the Holy book, the Quráan more frequently.*" In addition to keeping themselves occupied, they also began to engage in intrapersonal reflection. While the participants' freedom to engage with the outside world was limited, they had the freedom and extra time to explore and question what they really enjoyed doing, and how their lives were influenced by the occupations in which they engaged.

> *This lockdown has given me an opportunity to reflect on myself and get to know myself in a deeper sense, what I'm actually able to live without, and small things I've never noticed about myself were revealed during this pandemic.*

Participants reported becoming more self-aware as they had time to reflect; thus, they were engaging in occupations that brought them meaning and which had personal value.

> *There are many ways to keep busy and mentally motivated, but what helps for me is to have healthy meals, also meditation and using this time to learn new*

things, read books, and explore yourself and figure out what makes you happy.

Participants expressed feelings of appreciation as they realized how important specific occupations were to them: "*There's just more appreciation in the things that I previously took for granted.*" Additionally, participants explained that they began to miss specific occupations that they did not enjoy before the lockdown: "*This whole pandemic has made me more grateful for things that I found annoying in the past, like going to campus or being dragged to family functions.*" Lastly, one participant summed up a general sentiment described by most participants and expressed the importance of living in the moment and finding a new perspective on life.

> *The pandemic brought perspective to the meaning of everything we do. For once in our lives, we cannot look more than a day into the future. This has put a focus on living for each day and appreciating the things that we have in our lives.*

Leisure benefits "I get my energy and revitalization from my leisure activities"

This theme highlights the positive aspects that came from participants adapting their routines and environment and realizing the benefits of leisure and the positive influence on their health and well-being. Participants understood the advantages of engaging in leisure occupations during the pandemic: "*It is extremely important to keep on participating in all leisure activities during lockdown, just for the sake of not going mad.*" Many participants identified how important physical occupation was: "*Exercise is a big distraction and takes my mind elsewhere, other than thinking about the depressing present situation.*"

Leisure occupations gave "*a sense of normality and something to look forward to.*" Furthermore, leisure allowed the participants to cope with their current circumstances and assisted them to relax; "*I enjoy participating in leisure activities and it is important to me as these activities allow me to relax while doing something I enjoy.*" Some participants commented on how engaging in creative occupations had a positive effect on mental health: "*I allowed myself more creative outlets, which helps me cope in my life generally.*" Participants mentioned objects that were easily accessible and acted as enablers to engagement in leisure occupations, such as musical instruments: "*It is pretty much always there*" and computers: "*Having a computer is a big enabler because it allows me to edit my videos and photographs.*"

Looking for the positive in the current situation allowed enjoyment of the benefits of occupations to replenish energy: "*Despite the negative aspects, the lockdown has given me time to partake in activities that help me unwind and replenish my energy reserves after burnout.*" Another benefit of engaging in leisure occupations was that it reduced stress and anxiety among some participants: "*Participating in leisure is important because it helps release stress and anxiety and also brings me happiness.*" Participants recognized how engagement in adapted leisure improved their mental health: "*Due to the fact that I have found alternate ways to engage in my occupation, it has given me peace and mental stability during lockdown.*"

Many participants found that owning pets motivated them to be active and take a break from engaging in their work online: "*My dog's high need for exercise and stimulation forces me to get up from my desk and take a healthy break from a long day of studying or attending online classes.*" The physical occupation benefited the participants' mental health: "*Having my dog who is super playful and energetic helps my physical health quite a bit. And this in all honesty makes me feel so much better about myself, and links up with my mental health.*" Additionally, just being around their pets improved their emotional well-being: "*Having my dog makes me happy, which essentially helps me to do a better job at my daily routine.*" Being around their pets diverted the participants' focus rather than worrying about what was going on in the world: "*It improved my emotional health as being with him [participant's horse] makes me forget about what's going on in the world and all my focus goes to him.*"

While some participants preferred the company of their pets, others enjoyed the positive

feelings that were elicited from engaging in social participation.

> It is very important to me. I enjoy social participation as it helps me to keep in touch with my friends and it makes me feel good. It evokes emotions such as happiness and love and it acts as one of my support systems.

Overall, participants highlighted that even though they originally had negative feelings around having so much time, being able to engage in leisure, albeit adapted forms of leisure, positively influenced their health and well-being. One participant summed this sentiment up well.

> Not being able to attend gym classes with friends or go to the beach, hike, go to restaurants, and instead being cooped up in the same house day in and day out definitely affects a person's mental health negatively. However, in terms of leisure, I had more time to learn new skills, and this outweighed the negative mental effect. So, overall I would say that leisure had a positive effect on my mental health.

Discussion

The COVID-19 pandemic is an unprecedented global phenomenon that has influenced most aspects of people's lives. The resulting restrictions on occupational engagement will, in all likelihood, be an ongoing challenge particularly in developing countries like South Africa where there are vaccination challenges such as limited supply, slow rollout, and vaccine hesitancy. Therefore, it is important to understand individuals' experiences of the pandemic and reflect on strategies to alleviate challenges. The current study provided valuable insight into how young adults experienced leisure engagement amid the COVID-19 lockdown, how they made adaptations, and how this influenced their health and well-being.

Participants were shocked to experience the disruption to their engagement in leisure and social occupations during lockdown. According to Hammell (2004), engagement in personally meaningful occupations contributes to quality of life; thus, participants reacted with disbelief when they realized that they could not engage in the important occupations of leisure and social participation. It was evident that due to lockdown the participants experienced occupational injustices. Being in social isolation resulted in the participants losing their occupational right of autonomy as they no longer had the choice to leave their homes to participate in leisure occupations and physically socialise with friends and family. Not being able to exert autonomy through having a choice in occupation resulted in the experience of occupational injustice in the forms of occupational deprivation and occupational alienation (Wilcock & Townsend, 2000). The result of young adults being unsuccessful during Erikson's psychosocial stages of intimacy versus isolation is feelings of isolation and loneliness (Rosenthal et al., 1981), and this was evident in the participants, particularly at the start of the lockdown.

According to Bar and Jarus (2015), anything which impedes individuals' ability to participate in an occupation has the capacity to negatively influence their health and well-being and can additionally increase stress and result in depression. It is obvious that the social isolation that the participants faced due to lockdown impeded their engagement in certain leisure and physical social occupations. Being prevented from participating physically in socialization occupations was detrimental to their mental health. This led them to experience feelings of missing out on life, loneliness, vulnerability, isolation, frustration, desperation, and demotivation. Some also found virtual communication difficult and anxiety-provoking. This negatively influenced their social interactions, feelings of connectedness, and interpersonal relationships, thus affecting their sense of belonging.

Participants' experiences of having much more free time during the lockdown led to experiences of occupational imbalance at the start of the lockdown, where they felt unsure about what to do with additional time each day. The findings suggest that the participants were left feeling unoccupied, as they had few opportunities to participate in occupations

where they could derive meaning as their right to benefit from fair privileges for diverse participation in occupations was violated (Townsend & Wilcock, 2004). Lockdown did provide the participants with more time to partake in leisure at home. This encouraged them to explore and participate in new leisure occupations, contributing to them growing as individuals and acquiring new skills. Similarly, a recent study that explored the experiences of individuals living with chronic disease during the COVID-19 pandemic reported that the participants' expertise in newly developed skills allowed them to focus on themselves and evoked positive emotions as learning new things made them feel fulfilled, proud, and happy (Luck et al., 2021). As Hammell (2004) explained, when individuals have time to discover themselves, reflect, and simply exist, it contributes to 'being and becoming'.

Unexpected change and adjustment can be mentally straining but, as time progressed, the participants realized that having a balanced lifestyle was important to help them to cope. To maintain mental health, they made adaptations to how they used their time and how they participated in leisure and social occupations. New ways of doing leisure were incorporated, as well as having more time to explore new leisure pursuits. Hammell (2004) stated that when individuals participate in occupations for an extended period, habits and routines are formed which help them better manage their time and find structure during their day, supporting mental health. This view is backed up by a previous study where occupation was used as a means to manage stress, promote the health and well-being of individuals, as well as build routine in order for them to adapt to the given circumstances of the pandemic (Luck et al., 2021).

COVID-19 and the lockdown disrupted the participants' routines in many ways and resulted in them having to make unexpected changes to some of their habits, and to the way they went about participating in leisure and socialising. This demonstrates some degree of occupational resilience. Resilience at an individual level comprises the capacity to be "absorptive, adaptive, anticipatory, and transformative" (Ziglio et al., 2017, p. 789). Ziglio and colleagues defined adaptive capacity as the ability to adjust to disturbances, trauma, misfortune, and shocks. Absorptive capacity is the ability to absorb, manage, and cope using available skills, assets, and resources, and anticipatory capacity is "the ability to predict and reduce disturbances and risks by means of proactive action to minimize vulnerability" (Ziglio et al., 2017, p. 789). In the current study, the participants demonstrated varying levels of resilience through their ability to adapt to the adverse circumstances created by the COVID-19 lockdown, adapt their leisure engagement, and thus cope with the challenges. Similarly, Luck et al. (2021) found that participants adapted to occupational challenges brought on by the COVID-19 pandemic through adjusting, re-establishing connections, re-prioritizing, modifying, and finding alternative occupations to address the things they did not have access to or were unable to do.

Leisure helped participants to deal with stress and anxiety and feel energized. Even though certain leisure occupations such as going for walks in nature were hindered, being able to reconnect with previous, and explore new, leisure occupations evoked positive emotions, helped them cope, and maintained their mental health. Wilcock (2006, as cited by Luck et al., 2021) suggested that "occupation not only provides a mechanism to meet human needs and adapt to environmental demands but is also needed to maintain health and well-being" (p. 12). Luck et al. (2021) described leisure as a tool that contributed positively to individuals' well-being. Leisure relieved stress and anxiety by affording opportunities for relaxation and revitalization, and enabled individuals to learn more about themselves by building on new and existing relationships. The findings of the current study showed that engaging in leisure occupations enabled the participants to be resilient. These findings support Thibeault's (2011) work on 'occupational gifts', which are meaningful occupations that foster resilience in challenging situations. Continuing to engage in leisure occupations by being proactive lessened the participants' vulnerability as they developed practices and routines to deal with the insecurity and volatility of the COVID lockdown, which is anticipatory and transformative resilience (Ziglio et al., 2017).

Implications for Knowledge and Research

Study insights contribute to understanding the influence of the COVID-19 confinement, a human ecosystem disruption, on young adults' leisure engagement, health, and well-being. Clearly, the study highlighted how meaningful leisure was used as a way to cope in the face of occupational injustices and enabled the young adults to display occupational resilience. The meaning derived from leisure engagement enabled young adults to continue to do, be, become, and belong, despite the confinement. Young adults develop occupational resilience by being able to adapt to adverse circumstances to continue engaging in meaningful occupations such as leisure.

Program planners should consider how leisure can be utilized as a means to develop occupational resilience, thus promoting health and well-being among young adults during periods of confinement. The four components of resilience, adapt, absorb, anticipate, and transform (Ziglio et al., 2017), are crucial in developing occupational resilience. These components can be used as core strategies around which to develop relevant programs for young adults in adverse circumstances, who experience any form of confinement, such as future pandemic lockdowns, incarceration in prisons, places of safety, or immigration camps. Additionally, insights from the study inform interventions with young adults who face occupational injustices and barriers to occupational engagement such as residing in under-resourced socio-economic contexts or being homeless. Further research is needed to explore how vulnerable youth, for example youth living in rural areas and low socio-economic contexts, experienced the COVID-19 pandemic. In addition, further research should investigate occupational resilience during human ecosystem disruptions.

Limitations

The main limitation of the study was that the participants were mostly university students or employed, thus reflecting a specific group of young adults who comprise a minority of South Africans. They possibly had better access to resources, for example, computers and internet, which may have assisted them to cope, and thus influenced their experiences of the COVID-19 lockdown. Furthermore, there was a gender imbalance in the sample. As the participants did not reflect most young adults in South Africa, the findings are not transferable to the broader population of young adults in South Africa; however, this is the nature of qualitative research and findings need to be considered in terms of the particular study context.

Conclusion

This study highlighted young adults' leisure experiences during COVID-19 lockdown restrictions in South Africa. Initially the lockdown was experienced as an occupational disruption to engagement in everyday living. The disruption had a negative influence on mental health and well-being as the young adults felt stressed, depressed, lonely, anxious, and bored. The young adults dealt with the occupational injustices of confinement through adapting their leisure and social engagement, thus displaying resilience, which positively influenced their mental health and well-being.

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References

Babicka-Wirkus, A., Wirkus, L., Stasiak, K., & Kozłowski, P. (2021). University students' strategies

of coping with stress during the coronavirus pandemic: Data from Poland. *PLOS ONE*, *16*(7), Article e0255041. https://doi.org/10.1371/journal.pone.0255041

Bar, M. A., & Jarus, T. (2015). The effect of engagement in everyday occupations, role overload and social support on health and life satisfaction among mothers. *International Journal of Environmental Research and Public Health*, *12*(6), 6045-6065. https://doi.org/10.3390/ijerph120606045

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77-101. https://doi.org/10.1191/1478088706qp063oa

Browning, M. H. E. M., Larson, L. R., Sharaievska, I., Rigolon, A., McAnirlin, O., Mullenbach, L., Cloutier, S., Vu, T. M., Thomsen, J., Reigner, N., Metcalf, E. C., D'Antonio, A., Helbich, M., Bratman, G. N., & Alvarez, H. O. (2021). Psychological impacts from COVID-19 among university students: Risk factors across seven states in the United States. *PLOS ONE*, *16*(1), Article e0245327. https://doi.org/10.1371/journal.pone.0245327

Caldwell, L. L. (2015). Youth and leisure. In G. Walker, D. Scott, & M. Stodolska (Eds.), *Leisure matters* (pp. 181-190). Venture Publishing.

Cattan, M., Kime, N., & Bagnall, A. M. (2011). The use of telephone befriending in low level support for socially isolated older people – an evaluation. *Health & Social Care in the Community*, *19*(2), 198-206. https://doi.org/10.1111/j.1365-2524.2010.00967.x

Cruyt, E., De Vriendt, P., De Letter, M., Vlerick, P., Calders, P., De Pauw, R., Oostra, K., Rodriguez-Bailón, M., Szmalec, A., Merchán-Baeza, J. A., Fernández-Solano, A. J., Vidaña-Moya, L., & Van de Velde, D. (2021). Meaningful occupations during COVID-19 lockdown and association with mental health in Belgian adults. *BMC Public Health*, *21*(1). Article 622. https://doi.org/10.1186/s12889-021-10673-4

Department of Health Republic of South Africa. (2015). *Ethics in health research: Principles, processes and structures* (2nd ed.). https://www.ul.ac.za/research/application/downloads/DoH%202015%20Ethics%20in%20Health%20Research%20Guidelines.pdf

Hammell, K. W. (2004). Dimensions of meaning in the occupations of daily life. *Canadian Journal of Occupational Therapy*, *71*(5), 296-305. https://doi.org/10.1177/000841740407100509

Hocking, C., Townsend, E., & Mace, J. (2019). *WFOT Position statement: Occupational therapy and human rights*. World Federation of Occupational Therapists. https://www.wfot.org/resources/occupational-therapy-and-human-rights

Hopper, T. D., & Iwasaki, Y. (2017). Engagement of 'at-risk' youth through meaningful leisure. *Journal of Park and Recreational Administration, 35*(1), 20-33. https://doi.org/10.18666/JPRA-2017-V35-I1-7289

Iwasaki, Y., Coyle, C. P., & Shank, J. W. (2010). Leisure as a context for active living, recovery, health and life quality for persons with mental illness in a global context. *Health Promotion International*, *25*(4), 483-494. https://doi.org/10.1093/heapro/daq037

Kharma, M. (2010, March 20). *The dynamics and consequences of occupational deprivation on displaced individuals* (ED509025). ERIC. https://eric.ed.gov/?id=ED509025

Levitt, H. M. (2018). How to conduct a qualitative meta-analysis: Tailoring methods to enhance methodological integrity. *Psychotherapy Research*, *28*(3), 367-378. https://doi.org/10.1080/10503307.2018.1447708

Luck, K. E., Doucet, S., & Luke, A. (2021). Occupational disruption during a pandemic: Exploring the experiences of individuals living with a chronic disease. *Journal of Occupational Science*. Advance online publication. https://doi.org/10.1080/14427591.2020.1871401

Nizzero, A., Cote, P., & Cramm, H. (2017). Occupational disruption: A scoping review. *Journal of Occupational Science*, *24*(2), 114-127. https://doi.org/10.1080/14427591.2017.1306791

Orkin, M., Roberts, B., Bohler-Muller, N., & Alexander, K. (2020, May 13). The hidden struggle: The mental health effects of the COVID-19 lockdown in South Africa. *Daily Maverick*. https://www.dailymaverick.co.za/article/2020-05-13-the-hidden-struggle-the-mental-health-effects-of-the-covid-19-lockdown-in-south-africa/

Rosenthal, D. A., Gurney, R. M., & Moore, S. M. (1981). From trust on intimacy: A new inventory for examining Erikson's stages of psychosocial development. *Journal of Youth Adolescence, 10*(6), 525-537. https://doi.org/10.1007/BF02087944

Schröder, M., Bossert, A., Kersting, M., Aeffner, S., Coetzee, J., Timme, M., & Schlüter, J. (2021). COVID-19 in South Africa: Outbreak despite interventions. *Scientific Reports*, *11*(1), Article 4956. https://doi.org/10.1038/s41598-021-84487-0

Sima, L., Thomas, Y., & Lowrie, D. (2017). Occupational disruption and natural disaster: Finding a 'new normal' in a changed context. *Journal of Occupational Science*, *24*(2), 128-139. https://doi.org/10.1080/14427591.2017.1306790

South African Society of Psychiatrists. (2020). *Mental health care is vital during lockdown*. https://www.sasop.co.za/lockdown-mental-health

South African Government. (2022). *COVID-19/novel coronavirus. About alert system*. https://www.gov.za/COVID-19/about/about-alert-system

Statistics South Africa. (2016). *South African Community Survey 2016. Indicators derived from the full population Community Survey*. https://youthexplorer.org.za/profiles/country-ZA-south-africa/

Statistics South Africa. (2020). *Vulnerability of youth in the South African labour market*. http://www.statssa.gov.za/?p=13379

Statistics South Africa. (2021a). *Mid-year population estimates*. http://www.statssa.gov.za/publications/P0302/P03022021.pdf

Statistics South Africa. (2021b). *Education*. http://www.statssa.gov.za/?page_id=737&id=4=4

Thibeault, R. (2011). Occupational gifts. In M. A. McColl (Ed.), *Spirituality and occupational therapy* (2nd ed., pp. 111-119). CAOT Publications ACE.

Timulak, L. (2009). Meta-analysis of qualitative studies: A tool for reviewing qualitative research findings in psychotherapy. *Psychotherapy Research*, *19*(4-5), 591-600. https://doi.org/10.1080/10503300802477989

Toepoel, V. (2013). Ageing, leisure, and social connectedness: How could leisure help reduce social isolation of older people? *Social Indicators Research*, *113*(1), 355-372. https://doi.org/10.1007/s11205-012-0097-6

Townsend, E., & Wilcock, A. (2004). Occupational justice and client-centred practice: A dialogue in progress. *Canadian Journal of Occupational Therapy*, *71*(2), 75-87. https://doi.org/10.1177/000841740407100203

Wegner, L. (2011). Through the lens of a peer: Understanding leisure boredom and risk behaviour in adolescence. *South African Journal of Occupational Therapy*, *41*(1), 18-24. http://www.scielo.org.za/pdf/sajot/v41n1/06.pdf

Wilcock, A., & Townsend, E. (2000). Occupational terminology interactive dialogue. *Journal of Occupational Science, 7*(2), 84-86. https://doi.org/10.1080/14427591.2000.9686470

World Health Organization. (2020). *WHO Director-General's opening remarks at the media briefing on COVID-19 11 March 2020*. https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19—11-march-2020

Ziglio, E., Azzopardi-Muscat, N., & Briguglio, L. (2017). Resilience and 21st century public health. *European Journal of Public Health*, *27*(5), 789-790. https://doi.org/10.1093/eurpub/ckx116