What about after the covid-19 pandemic?  
Adolescents’ voices on this period in their lives

¿Qué pasa después de la pandemia de covid-19?  
Las voces de los adolescentes sobre este período de su vida

Cátia Branquinho  
Institute of Environmental Health (ISAMB)/Faculty of Medicine, Universidade de Lisboa, Portugal

Margarida Gaspar de Matos  
Institute of Environmental Health (ISAMB)/Faculty of Medicine, Universidade de Lisboa, Portugal  
Ispa APPSYci, Portugal

Resumen
Objetivo: Describir lo que los jóvenes encontraron más difícil durante COVID-19, sus estrategias de afrontamiento y expectativas con respecto al futuro. Método: Se siguió un diseño multimétodo con 318 participantes (16-24 años; M = 19.07, DT = 2.66), en su mayoría chicas (69.5%), estudiantes (78.5%) de secundaria o equivalente (52.8%) o superior (41.7%). Resultados: En general, se señaló una situación negativa de la salud mental y social, la actividad física y el ocio, el tiempo de pantalla y la escuela/universidad. Al analizar las diferencias entre niveles educativos, destacan los estudiantes de la educación secundaria con más impacto negativo en la salud mental y social; igualmente, los estudiantes de educación secundaria sobresalen en conductas temerarias y en consumo de alcohol, así como en un menor gusto por la escuela; los universitarios señalan más el impacto sobre rendimiento escolar, estrés académico, relaciones con profesores y compañeros. Los participantes identificaron como áreas más complicadas la de salud mental, estar lejos de familiares y amigos, la pérdida de libertad, las clases en línea y la pérdida de eventos sociales. La familia, los amigos, la tecnología, el ejercicio, el ocio y el voluntariado fueron recursos que emplearon para sobrellevar la pandemia. Entre las consecuencias indicadas sobre las perspectivas de futuro, aunque positivas, los participantes revelaron posibles efectos sobre la salud mental y las perspectivas laborales. A largo plazo anticipan problemas en la economía, la digitalización en el trabajo y un planeta más saludable. Conclusiones: Se espera que estos resultados generen conciencia sobre la importancia del apoyo psicológico y la disponibilidad de recursos durante y después de la pandemia.

Palabras Clave
Portugal, Pandemia, COVID-19, Impactos, Expectativas, Participación juvenil.

Abstract
Objective: what youth found most difficult during COVID-19, their coping strategies and expectations regarding the future. Method: multi-method with 318 participants (16-24 years; M = 19.07, SD = 2.66), mostly girls (69.5%), students (78.5%) in secondary school or equivalent (52.8%) or higher (41.7%). Results: Overall, a negative perspective was highlighted in mental health, social, physical activity and leisure, screen time and school/university. When analysing the statistically significant differences between levels of education, secondary education stands out with the report of more negative impacts on mental and social health; secondary education on drinking and reckless driving behaviours; university education on school performance, academic stress, relationships with teachers and classmates; and secondary education on liking school. They identify as most difficult the area of mental health, being away from family and friends, loss of freedom, online classes and loss of social events. Family, friends, technology, exercise, leisure and volunteering were resources for coping with the pandemic. In the consequences on future prospects, although positive, both groups reveal the effects on mental health, and employment issues. In the long term they anticipate problems in the economy, digitalisation at work and a healthier planet. Conclusions: these results are expected to raise awareness of the importance of psychological support, and resource availability during and after the pandemic.

Keywords
Portugal, Pandemic, COVID-19, Impacts, Expectations, Youth participation.
Introduction

With strong impacts on the overall health of the population, the COVID-19 disease has been responsible for over one million cases to date, and thousands of deaths in Portugal (DGH, 2021). Declared a pandemic on 8 March 2020, COVID-19, along with the impacts of the measures implemented to control the spread of the virus, have been the subject of numerous studies.

After two periods of general confinement, in which learning and friendships were lived at a distance, but stress and inability to adopt effective coping strategies were a present reality, several studies (Almeida et al., 2020; Kecojevic et al., 2020; Singh et al, 2020) revealed negative consequences of the pandemic in young people's lives, in the academic areas, with impacts on learning and performance (Dias & Pinto, 2020); social, with interference in peer relationships (Branquinho et al., 2020; Rogers, Ha, Ockeya, 2021); family, with increased conflicts (Branquinho et al., 2020); as well as physical and psychological health. In a recent literature review (Loads et al., 2020), the impact of the pandemic on the mental health of this generation was reinforced, as well as the association with depressive and anxious symptomatology (Nearchou et al., 2020; Oosterhoff et al., 2020; Zhou et al., 2020).

According to the authors Son et al. (2020), there are several stress factors that may increase the levels of stress, anxiety and depressive thoughts in students, namely concern and fear for their own health and that of their loved ones, concentration difficulties, changes in sleep patterns, decreased interpersonal relationships, and concerns about academic performance.

Although responses in the area of mental health, through the dissemination of coping strategies (e.g. establishment of routines and habits) and the provision of support services, have supported a better psychological health status (Almeida et al., 2020; Deslandes & Coutinho, 2020) and consequent subjective well-being (Pigaiani et al, 2020), decreased health behaviours and adoption of risk behaviours, such as higher food intake, poorer sleep quality (Abbas et al., 2020), decreased physical activity (Abbas et al., 2020; Schmidt et al., 2020) and increased screen time (Schmidt et al., 2020; Xiang et al., 2020) have been associated with the pandemic period.

Even tough the impacts on young people's lives and on their health and well-being have been studied, more studies focusing on university students (e.g. Allen et al. 2022; Kohls et al., 2021; Weber et al., 2022) reveal high rates of anxiety and depression during the pandemic in this group (Chen & Lucock, 2022), along with more negative impacts on relationships, including teachers and peers, leisure activities, sleep patterns and eating (Branquinho et al., 2021b). According to Hayes et al. (2012) and Matos (2020a; 2020b; 2021 in press), and recognizing that the pandemic transformed the way young people experience different life transitions, the promotion of their psychological flexibility, through the creation of a new vision about the changes, transforming them into opportunities, may be a safe and effective path to a more positive development.

This study aims to present the voice of young people regarding the impacts of the COVID-19 pandemic on their lives, what they experienced as most difficult, the coping strategies adopted, and their expectations for the future (which are not known to be explored in the literature).
Method

This work is included in the study Dream Teens: The Youth Voice in direct speech approved by the Ethics Committee of the Lisbon Academic Medicine Centre (Matos, 2015).

Data collection included an informed consent for adults and parental consent for under-18s, with mandatory acceptance for study response. The research team’s contact was included for possible clarification of doubts.

Design and Participants

Designed and conducted exclusively online, this study was disseminated by the research team, institutions and entities linked to youth work. Data collection was conducted in the period 22 July to 20 August 2021. Of the total 320 responses collected, 311 were considered valid after reviewing duplicate or incomplete entries.

Participants had a mean age of 19.07 years ($SD = 2.656$ years; $Min = 16$ and $Max = 24$); were mostly female (69.5%), students (78.5%) and residents in Lisbon district (76.2%). The respondents were attending or had completed secondary education or equivalent (52.8%), higher education (41.7%) or 3rd cycle (5.5%).

Instrument

The instrument was developed for adolescents and young adults aged between 16 and 24 years. The online questionnaire created in the Google Forms platform had an average response time of 7-10 minutes, and included:

- 29 closed-ended questions (answer options: no impact, positive, negative, not applicable), related to the impact of the 3 waves of the pandemic on their health and well-being (physical, psychological and social), relationships (family, friends, love, colleagues, social), health and risk behaviours (leisure, sleep, physical activity, nutrition, tobacco, alcohol, drugs, violence, early, unprotected sexual intercourse, screen time and reckless driving), at academic level (performance, stress, relationships with teachers, peers and liking school);
- 2 open-ended questions regarding what was most difficult and coping strategies;
- and 3 open-ended questions regarding expectations for the future in the short (1 year), medium (5 years) and long term (10 years).

Data Analysis

In this work a multi-method methodology was used, based on the nature of the data. Quantitative data were transported and analysed using SPSS v. 26 software and a Chi-square test allowed the analysis of the variables by level of education (secondary and university, due to the small number of participants from the 3rd cycle).

The qualitative data were transferred to the MAXQDA 2020 software and studied through a first content analysis, based on the rule-of-thumb principle (line-by-line). Categories (C) were created for the qualitative data of the study: (C1) health and well-being; (C2) relationships; (C3) behaviours; (C4) school/university; (C5) most negative of the pandemic; (C6) coping strategies; (C7) short-term future expecta-
tions; (C8) medium-term future expectations; (C9) long-term future expectations.

Results

Quantitative Study

In the descriptive study of the data, a negative view of the impacts of the pandemic COVID-19 on mental health (65%) and social level (57.9%) stood out, as well as the absence of impacts on physical health (76.8%).

In terms of relationships, in general young people referred neutral impacts on family (44.7%), friends (43.4%), love (34.7% alongside 31.8% negative) and with peers (51.4%), stressing the negative consequences on social relationships (52.1%).

In health behaviours, negative effects were essentially referred in leisure (48.6%) and physical activities (48.6%), and an absence or negative impacts on sleep (39.5% neutral and 32.8% negative) and nutrition (37.9% neutral and 35% negative). On the other hand, in terms of risk behaviours, it was found that a large number of young people did not practise most of these behaviours, such as the use/consumption of tobacco (53.7%), alcohol (45.7%) and drugs (60.1%); were not involved in acts of violence (55%); had not practised early sexual intercourse (55.3%) or unprotected sex (56.6%); and reckless driving (58.2%). With regard to screen time, 72% of young people mentioned that the pandemic had had negative effects on this behaviour.

Finally, in the academic field, young people highlighted negative consequences on performance (38.3% and 27% neutral) and stress (59.8%), and an absence of consequences on relations with teachers (41.5%) and colleagues (41.5%), as well as on the liking school/university (41.2%).

In the analysis of differences in the educational level (secondary and university), statistically significant differences were verified in the impacts on physical health and well-being, $\chi^2(2) = 9.894, p < 0.01; N = 292$, with both levels revealing more neutral impacts (S = 70.6%; U = 86%), but a superiority of positive impacts (S = 23.3%; U = 10.9%), as well as negative impacts (S = 6.1%; U = 3.1%) on the part of secondary school young people; mental, $\chi^2 (3) = 13.561, p < 0.01; N = 292$, with both levels reporting negative effects (S = 57.7%; U = 77.5%), mainly the older ones, and positive ones by the younger ones (S = 11%; U = 3.9%); social, $\chi^2 (3) = 8.101, p < 0.05; N = 292$, with a similar pattern as above, with higher reporting of negative consequences from university level (S = 55.2%; U = 63.6%) and positive from secondary school (S = 16%; U = 5.4%).

In relationships (family, friendship, love and with peers), no dependence on the educational level was observed, with the exception of social relationships, $\chi^2 (3) = 8.750, p < 0.05; N = 292$, in which a superiority of negative impacts was observed in both groups (S = 50.3%; U = 55%), and in the positive ones the youngest stood out (S = 15.3%; U = 4.7%).

In behaviours, statistically significant differences were observed in alcohol consumption, $\chi^2 (3) = 7.888, p < 0.05; N = 292$, and although both reported that this behaviour did not apply (S = 45.4%; U = 45%), secondary school youth stood out in the higher reporting of negative effects (S = 45.4%; U = 45%), secondary school youth stood out in the higher reporting of negative effects (S = 17.2%; U = 7%). Reckless driving, $\chi^2 (3) = 9.077, p < 0.05; N = 292$, showed a similar pattern to the previous behaviour (not applicable - S = 63.2%; U = 50.4%; negative - S = 9.8%; U = 7%). A relationship of independence was observed between the behaviours:
leisure activities, sleep, physical activity, nutrition, tobacco use, drugs, violence, early and unprotected sexual intercourse, screen time and educational level.

At the academic level, statistically significant differences were identified in performance, $X^2 (3) = 13.326, p = < 0.01; N = 292$, with both groups reporting more negative impacts, especially for older young people ($S = 37.4\%; U = 40.3\%). Positive effects were more frequently felt by the younger ($S = 31.3\%; U = 16.3\%$); in academic stress, $X^2 (3) = 5.585, p = < 0.05; N =$
292, also with greater prominence of negative impacts in both groups (S = 57.7%; U = 62%), and higher in positive effects by secondary level youth (S = 16%; U = 9.3%); relationship with teachers, $X^2 (3) = 23.519$, $p < 0.001$; $N = 292$, with no impacts in both groups (S = 42.3%; U = 42.6%), but more negative by university level (S = 22.1%; U = 33.3%) and positive from secondary school (S = 28.8%; U = 8.5%); relationship with peers, $X^2 (3) = 21.820$, $p < 0.001$; $N = 292$, with highlighting more neutral impacts from younger (S = 49.7%; U = 32.6%) and negative from older (S = 25.8%; U = 41.9%); and liking school/university, $X^2 (3) = 14.611$, $p < 0.01$; $N = 292$, in which both groups responded no impacts (S = 41.1%; U = 42.6%), but also negative impacts (S = 37.4%; U = 31.8%), especially secondary school youth.

**Qualitative Study**

In the complementary descriptive study of impacts on health and well-being, mainly negative reports stood out, focusing on increased sedentary lifestyles and changes in nutrition patterns, leading to weight gain - physical; more feelings of anxiety, depression, distress, stress, demotivation and loneliness - mental; and decreased socialisation and contacts - social. Reports were congruent across groups.

### Table 2

**Impact on living areas**

<table>
<thead>
<tr>
<th>Variables</th>
<th>No impacts</th>
<th>Positive</th>
<th>Negative</th>
<th>Non applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health and well-being</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td>76.8</td>
<td>17.7</td>
<td>5.5</td>
<td>0</td>
</tr>
<tr>
<td>Mental</td>
<td>24.4</td>
<td>8.4</td>
<td>65</td>
<td>2.3</td>
</tr>
<tr>
<td>Social</td>
<td>28.3</td>
<td>11.3</td>
<td>57.9</td>
<td>2.6</td>
</tr>
<tr>
<td><strong>Relationships</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td>44.7</td>
<td>26.7</td>
<td>24.4</td>
<td>4.2</td>
</tr>
<tr>
<td>Friends</td>
<td>43.4</td>
<td>17</td>
<td>37</td>
<td>2.6</td>
</tr>
<tr>
<td>Love</td>
<td>34.7</td>
<td>15.8</td>
<td>31.8</td>
<td>17.7</td>
</tr>
<tr>
<td>Colleagues</td>
<td>51.4</td>
<td>11.9</td>
<td>31.5</td>
<td>5.1</td>
</tr>
<tr>
<td>Social</td>
<td>35.4</td>
<td>10.6</td>
<td>52.1</td>
<td>1.9</td>
</tr>
<tr>
<td><strong>Behaviours</strong></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leisure</td>
<td>28</td>
<td>19</td>
<td>48.6</td>
<td>4.5</td>
</tr>
<tr>
<td>Sleep</td>
<td>39.5</td>
<td>22.2</td>
<td>32.8</td>
<td>5.5</td>
</tr>
<tr>
<td>Physical activity</td>
<td>27.3</td>
<td>20.3</td>
<td>48.6</td>
<td>3.9</td>
</tr>
<tr>
<td>Nutrition</td>
<td>37.9</td>
<td>22.8</td>
<td>35</td>
<td>4.2</td>
</tr>
<tr>
<td>Tobacco</td>
<td>24.4</td>
<td>7.1</td>
<td>14.8</td>
<td>53.7</td>
</tr>
<tr>
<td>Alcohol</td>
<td>33.4</td>
<td>7.4</td>
<td>13.5</td>
<td>45.7</td>
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<tr>
<td>Drugs</td>
<td>24.8</td>
<td>5.1</td>
<td>10</td>
<td>60.1</td>
</tr>
<tr>
<td>Violence</td>
<td>30.5</td>
<td>3.2</td>
<td>11.3</td>
<td>55</td>
</tr>
<tr>
<td>Early sexual intercourse</td>
<td>29.6</td>
<td>4.8</td>
<td>10.3</td>
<td>55.3</td>
</tr>
<tr>
<td>Unprotected sexual intercourse</td>
<td>28.6</td>
<td>6.1</td>
<td>8.7</td>
<td>56.6</td>
</tr>
<tr>
<td>Screen time</td>
<td>14.8</td>
<td>10.6</td>
<td>72</td>
<td>26</td>
</tr>
<tr>
<td>Imprudent driving</td>
<td>30.2</td>
<td>2.6</td>
<td>9</td>
<td>58.2</td>
</tr>
<tr>
<td><strong>School/university</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performance</td>
<td>27</td>
<td>24.1</td>
<td>38.3</td>
<td>10.6</td>
</tr>
<tr>
<td>Stress</td>
<td>14.8</td>
<td>12.9</td>
<td>59.8</td>
<td>12.5</td>
</tr>
<tr>
<td>Relations with teachers</td>
<td>41.5</td>
<td>20.3</td>
<td>27</td>
<td>11.3</td>
</tr>
<tr>
<td>Relations with colleagues</td>
<td>41.5</td>
<td>15.4</td>
<td>31.8</td>
<td>11.3</td>
</tr>
<tr>
<td>Liking school/university</td>
<td>41.2</td>
<td>13.8</td>
<td>34.4</td>
<td>10.6</td>
</tr>
</tbody>
</table>

Note: bold higher percentages
Equally focused on reporting negative effects, young people at secondary level focused essentially on family relationships and with friends. In these, they referred to: the loss of important events and dates, of loved ones, and the excessive time with the family, reporting more conflicts - family; loss of contacts and difficulty in making new friendships, also advocated by young people at university level - social. For young people in university education, the highlight was given to love relationships, with the difficulty in maintaining relationships or meeting new people, and with colleagues, whom some had never seen in person or managed to establish a relationship.

With similar speeches between groups, there was a preference for reporting the negative impacts on screen time, being congruent that screen time suffered a great increase with the accumulation of classes, school work, communication with friends and family, and leisure; physical activity, with reports of increased sedentariness and difficulty in training by federated athletes; nutrition, with changes in pattern and increased food intake; sleep, which became irregular with more hours of sleep and episodes of insomnia; experimentation (secondary) or increased consumption (university) of substances such as tobacco, alcohol and cannabis.

Although with a higher report of negative testimonies, positive effects of the pandemic were also revealed by secondary level (e.g. more time to study, easier tests). Agreeing on feelings of demotivation and concentration problems in online classes, which were not seen as positive, the issues affecting both groups differed. If on the one hand the young people in secondary level revealed that teachers gave them a greater load of work, that they did not know them, and that school was not the same with the virus containment measures; the youth in university level revealed a decrease in academic performance, difficulty in practical classes and with bureaucratic issues.

When questioned about what was most difficult, although both groups cited the fact that their mental health was weakened, being far from family and friends, the loss of freedom, distance learning, and the cancellation of social events, the young people at university level also highlighted teleworking and love relationships.

As coping strategies, they were unanimous in the support from family and friends, technology, physical exercise, contact with nature and leisure activities (watching movies, reading, drawing, listening to music, writing) or volunteering.

With regard to their short-term expectations (1 year), the young people focused mainly on the pandemic scenario, with a more positive outlook evident among young people at secondary level, confident that the pandemic would end with the full vaccination of the entire population, and that society could socialise again. However, some young people, including those at university level, believed that there would still be pandemic reflexes and worse mental health. Older ones also stressed the problems linked to employment.

In the medium term (5 years), both showed some difficulty in envisaging the future, but shifted the focus from the pandemic to their lives, continuing to foresee issues related to worse mental health, but finishing school (secondary) and entering the labour market or starting a family (university).
Finally, despite again revealing difficulties in anticipating the long-term future (10 years), they were in agreement that the mental health of the population would continue to be a concern, that the problems of the economy would persist, affecting employment and causing the search for work abroad, but that they anticipated that COVID-19 would be a memory, that teleworking would be an even more common reality, and that the planet would be healthier.

**Discussion and Conclusions**

This work aimed to understand the impact of the COVID-19 pandemic on the lives of young Portuguese, what they found most difficult, their coping strategies, and expectations regarding the future.

In the overall study, the picture is similar to previous studies conducted during the pandemic with this population. Outstanding a negative view of the impacts of the pandemic on mental health (e.g. Loads et al., 2020; Nearchou et al., 2020; Oosterhoff et al., 2020; Zhou et al., 2020) and social (e.g. Branquinho et al., 2020; Rogers, Ha, Ockeya, 2021), physical activity (e.g. Abbas et al, 2020; Schmidt et al., 2020) and leisure (e.g. Moore et al., 2020; Panarese & Azzarita, 2021), screen time (e.g. Schmidt et al., 2020; Xiang et al., 2020) and school (e.g. Dias & Pinto, 2020), at the level of academic performance and stress.

When analysing the differences between secondary school and university levels of education, a contrast was observed in the impacts on physical health and well-being, and although neutral impacts were more frequently reported, young people at secondary school level also showed more negative impacts (increase in sedentariness, changes in eating patterns with weight gain). At the mental level (more feelings of anxiety, depression, anguish, stress, demotivation and loneliness) and social level (reduced socialisation and contacts), the negative effects stood out in a higher percentage on the part of the university level.

In social relationships, a similar pattern of greater reporting of negative impacts was maintained, with superiority on the part of the university level, stressing the difficulty of meeting new people.

Previous studies conducted in the country with the same population and focusing on the impacts of COVID-19, showed results along the same lines as the previous ones (Branquinho et al., 2020a; Branquinho, 2020b; Branquinho, 2021a; Branquinho, 2021b).

Regarding behaviours, although most of them reported not consuming alcohol or driving recklessly, secondary school students reported more negative effects. In the reports, behaviours related to experimentation with substances such as tobacco, alcohol and cannabis were cited by this group. Although consumption cannot be compared to the pre-pandemic, it is common to see a change in the pattern of substance use and consumption, essentially as a coping strategy to deal with the effects of the pandemic (Benschop, van Bakkum, & Noijen, 2021).

Although screen time did not reveal differences, the negative impacts of this behaviour were the most expressed, with young people of both levels explaining that the increased screen time was related to classes, work, communication and leisure. Schmidt et al. (2020) and Xiang et al. (2020) supported these findings with their research, with Hamilton et al. (2020) arguing that social media use during
### Table 3: Excerpts from the descriptions

<table>
<thead>
<tr>
<th>Health impact and well-being</th>
<th>“It increased the sedentary lifestyle that I was already prone to and completely broke my mental health.” (S, age 16) “I lost social practice and so sometimes it’s hard to interact with other people.” (U, age 18)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>“Anxiety has increased a lot, fear of sharing common spaces, fear that I might get infected and harm others (especially older people), fear of the unknown of what the virus might cause, fear of the state of the economy for the advances and setbacks that have taken place.” (U, age 22)</td>
</tr>
<tr>
<td>Relationships impacts</td>
<td>“Not being able to be with the whole family at parties, Christmas or Easter is very sad and painful. Always having to be careful around friends makes interactions less affectionate and colder.” (S, age 18) “Not being able to hang out with my friends like we did before the pandemic meant we talked to each other a lot less and when we did talk it was on video call (which will never be the same as being face to face).” (S, age 17) “Love relationships don’t happen as there is a fear of meeting new people, of whom we don’t know the care for covid.” (U, age 24)</td>
</tr>
<tr>
<td>Behavioural impacts</td>
<td>“I got into the drug world, but light, and just for the fun of it, I got addicted to tobacco and spent my life drinking.” (S, age 16) “My screen time increased immensely as I used to use it for studying, for leisure activities, to talk to friends, etc. In relation to food, as I was always at home, I always felt like eating and I was out of control. I didn’t create a limit or a balance, which was terrible. I thought I’d have lunch and after a short time I was already having a snack.” (S, age 18) “I spend a lot of time on my mobile phone, no motivation to do basic tasks.” (U, age 21)</td>
</tr>
<tr>
<td>School/university impacts</td>
<td>“Online classes have been very detrimental to both me and others. It is harder to catch up with the subject and study it, causing stress over grades.” (S, age 16) “Home learning was negative as the workload and level of learning was not good due to lack of interest or the content itself was not well applied by teachers. There was no consideration in pupils’ interests or needs.” (S, age 17) “I was in the last year of my master’s degree (internship + dissertation) and I had to leave everything suspended for 2/3 months because nobody knew how to give answers and I had to change everything and postpone all my goals.” (U, age 24)</td>
</tr>
<tr>
<td>More difficult</td>
<td>“The distance learning.” (S, age 16) “Stopping being with the ones I like the most.” (U, age 21) “The telework, the non-existence of division between professional and personal space.” (U, age 24)</td>
</tr>
<tr>
<td>Coping strategies</td>
<td>“My family.” (S, age 17) “Nature walks.” (U, age 18) “I discovered that I like to draw and took up the habit of writing again.” (U, age 24)</td>
</tr>
<tr>
<td>Short-term expectations</td>
<td>“Badly... I think we’re all going to accuse the pressure we’re feeling, I’m not sure.” (S, age 17) “My generation are going to start doing a lot of parties and events to make up for the lost year.” (U, age 20) “Affected psychologically by anxiety.” (U, age 24)</td>
</tr>
<tr>
<td>Medium term expectations</td>
<td>“People who are more hygienic and concerned about the planet.” (S, age 1) “To start working, maybe with more telecommuting jobs since since since this pandemic started many companies have opted for this way of working and are not thinking of going back to how they did it before.” (S, age 18) “Full of economic and social adversity.” (U, age 23)</td>
</tr>
<tr>
<td>Long-term expectations</td>
<td>“A lot of emigration and unemployment, many still living with their parents, no home of their own.” (S, age 16) “I believe we are going to be quite a nialistic generation, with an absence of truth, life, and feeling integrated and needed by others, as I also believe there is more and more distance between the sexes which leads me to believe that fewer people will want to get together to start a family. Many of us will not have the mental health with dopamine levels regulated to be productive in what we would like to do and we will undoubtedly have a culture of narcissism and depression promoted by social media.” (U, age 20) “I imagine an uninformed generation, dealing with the economic and environmental consequences of the pandemic, lacking the economic power to start adulthood on time (23-28) and holding precarious jobs much of their lives. However, always in a good mood :)” (U, age 22)</td>
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the pandemic was related to searching for resources, exploring their autonomy and identity, and maintaining social connectedness.

Physical activity was also reported as having been compromised, as well as leisure time, which only allows activities indoors. Other studies focused on the impacts of the pandemic on this population, reported a decrease in health behaviours such as physical activity (Abbas et al., 2020; Schmidt et al., 2020).

In turn, in the academic field, young people at university level more often reported negative consequences of the pandemic on academic performance, a fact corroborated in the research of Dias and Pinto (2020), and stress; absence of impacts on the relationship with teachers, but more negative effects on the part of older young people; as well as on the relationship with peers. Both groups associated the difficulties in academic performance with online classes, the demotivation and lack of concentration they cause, and the stress to the increased workload (secondary) (Branquinho et al., 2021a). The authors Raj and Fatima (2020) revealed that due to the confinement, 50% of the students were not comfortable with online classes, felt stress and were worried about their studies. Young people at university level stressed the difficulty in practical classes and bureaucratic issues linked to institutions. In terms of liking school, although there was an absence of impacts, the negative impacts were greater at secondary level, who did not experience a very different school reality on their return to classroom education.

In terms of what was most difficult, mental health was the most important, although being away from family and friends, loss of freedom, online classes and cancellation of social events were also mentioned by both groups. They believed that family, friends, technology, exercise, nature, and leisure activities and volunteering had supported them in coping with the pandemic. After three waves of the pandemic, it is found that what they experienced as most difficult and the coping strategies adopted were maintained throughout the various waves of the pandemic (Branquinho et al., 2020a; Branquinho et al., 2020b; Branquinho et al., 2021a; Branquinho et al., 2021b). Planning daily routines, practicing structured activities and developing new interests may prove to be effective adaptive strategies (Pigaini et al., 2020).

Regarding future expectations, there are no known studies on the medium and long term, but in the short term, the positive outlook of young people at secondary level seem to be in line with the results of Commodari and La Rosa (2020), revealing that young people look to the future with the hope of returning to normality, whatever it may be.

Although positive, both groups emphasised the effects on mental health and university students were still concerned about employment issues. In the medium term, they continued to raise the issue of mental health (which persists in the long-term plan), but managed to focus on a post-pandemic scenario, in which secondary students would be finishing their studies and those at university level would be joining the labour market or starting a family. In a study by Matos & Wainwright (2021), the fact that it is unknown how well and how long it will take the young population to recover is highlighted, warning of the need to analyse psychosocial scenarios separately for: (i) presence of previous mental illness and suspen-
sion of support from health services; (ii) first episode of mental illness during confinement and no support; (iii) existence of psychosocial vulnerabilities and absence of resources; (iv) drastic changes in routines, increasing a pessimistic outlook.

Finally, in the long term, only with COVID-19 as a reminder, they predicted problems in the economy, which will lead to the search for employment abroad, more digital (with teleworking) and a healthier planet. In the medium and long term, the difficulty in presenting future prospects was evident.

**Strengths and Limitations**

Focusing on the impacts of the COVID-19 pandemic and future expectations, this multi-method study allowed us to get to know the feelings, fears and opinions related to several areas of the lives of Portuguese adolescents and young adults, through their own voice. Carried out 16 months after the start of the pandemic, after 3 waves of the disease, approval of anti-COVID-19 vaccination in this population, and the raising of some measures to contain the virus, this study comes at a time when it is possible to have a more conscious look at the impacts of the pandemic, and according to health authorities, start planning a future of return to normality.

Despite the strong points presented, some limitations are identified. The first, and common to previous studies within the scope of the impacts of the pandemic on this population (Branquinho et al., 2020a; Branquinho et al., 2020b; Branquinho et al., 2021a; Branquinho et al., 2021b), data collection was carried out through an open questionnaire, disseminated through social network, email and instant messaging applications, not allowing a further exploration of the questions. The second, the limited number of responses. Coinciding with the school holiday period, it did not facilitate the response to the instrument.

Finally, the large majority of participants belong to the female gender, a reality common to other studies conducted in the country.

**Key-messages:**

- Overall, the reported impacts on mental and social health, social relationships, behaviours such as physical activity and leisure, screen time, and in the academic field, at academic and stress level, are in line with previous studies conducted by the research team (Branquinho et al., 2020; Branquinho et al., 2021a; Branquinho et al., 2021b);
- Although there are some differences in the speeches, depending on the stage of life, young people in secondary school and university have coinciding perspectives on the impacts of the pandemic, highlighting the consequences on mental health, the distance from those they love most, the loss of freedom, online classes and cancellation of social events. Family and friends, and physical exercise are the most frequent coping strategies;
- With difficulties in envisioning the future, especially in the medium and long term, younger people are more positive about the end of the pandemic, and older people are more concerned about the effects of the pandemic on the economy and its consequences. Mental health emerges as a current, medium and long-term issue. A more
digital world and a healthier planet is part of their long-term plans;
• The need to strengthen measures and resources at the level of health promotion in the areas of health and education, with greater emphasis on mental health, not only in the short term, but also in the medium and long term, is highlighted, results in line with previous work conducted by the research team (Matos, 2020a; Matos, 2020b; Matos, 2021 in press).

References


