



## Research Article

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# Perceptions and Implications of Psychological and Economic Concerns during the COVID-19 Pandemic in Albania

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## Abstract

As COVID-19 hit worldwide and projected fear and insecurities, the situation became alarming regarding economic issues and psychological comfortability. This research is part of a longitudinal research project conducted by the authors on analysing the presence and implication of psychological and financial concerns in the Albanian population due to the pandemic. This research investigates the relationship between mental and health care in Albanian adults in 2023, mainly focusing on how they monitor their personal and economic well-being concerning their educational levels. The study's methodology consists of using an online survey followed by a crosstabulation analysis. Findings showed no difference in the perceptions of mental health care despite the levels of education; however, there is some significant relationship between the high school level of education and physical health care. When monitoring the economy, there is no significant difference concerning educational levels. There is a clear disposition that all adults, despite their level of education, provide the same importance to the economy. Our research findings highlight a high level of reaction regarding the economy rather than psychological care, which in most cases is stigmatised when mentioned.

**Keywords:** mental health; economy; psychological counselling; psychological reactions; COVID-19, Albania

## 1. Introduction

Since the Coronavirus disease (COVID-19) as an infectious disease caused by the SARS-CoV-2 virus (WHO) emerged in late 2019, the coronavirus has had adverse effects on human activities (Khalifa et al., 2021), including economy, education, physical and psychological effects. With thousands of people infected by the coronavirus, the COVID-19 breakthrough represented a worldwide emergency and strike of attention on the individual, inducing economic slowdown and adverse mental consequences worldwide considering the relationship between the two factors (Gong et al., 2021). Many researchers investigated the effects of the pandemic situation on the economy and mental health (Matsubayashi

et al.,2022).

Questions were raised regarding global poverty before and during the pandemic (Sumner et al.,2002). Research reports that the COVID-19 pandemic affected social and economic issues, including low-income, food-insecure households and the struggle to meet the individual's needs (Wolfson et al.,2020). A paper assessing the impact on household incomes 2020 in EU countries provided evidence that income poverty increased in all countries (Canto O.et al.,2022). Literature shows that severe economic and social consequences have provided evidence that the COVID-19 pandemic measures related to it "increase individual economic uncertainty and employment uncertainty, thereby triggering mental health problems and coping behaviours" (Lu, X and Lin, Z, 2021). In China, immediate psychological responses were identified in the initial stage of the pandemic, reporting that women, students, physical symptoms like dizziness and poor related health were associated with higher levels of stress, anxiety, and depression (Wang et al.,2020). Research suggests that the female population is more vulnerable to social-psychological and organisational stress. Other subgroups, including private working employees and employees residing in type 1 cities, manifest adverse psychological health due to the pandemic (Syed et al.,2021).

Thus, this article aimed to document the scenario across the Albanian adult population regarding the economy and mental health variations. The study's objectives are as follows:

- a. Examine health and psychological perceptions and their association with levels of education.
- b. Examine the risk perception related to the economy and its association with levels of education.

## 2. Literature Review and Hypothesis Development

### 2.1 *The relationship between well-being and levels of education*

The coronavirus leading to the COVID-19 pandemic worldwide hit populations shockingly, triggering stress and uncertainty. The transactional theory presented by Lazarus and Folkman, whose theory remains the cornerstone of psychological stress and coping, has documented how people cope with stress in disasters. Coping as a concept entered clinical description and evaluation as a theme in the 1940s and 1950s and is currently an essential dimension of many psychotherapies and educational programs (Lazarus & Folkman,1984). Folkman and Lazarus define coping "as constantly changing cognitive and behavioural efforts to manage specific external and internal demands that are appraised as taxing or exceeding the person's resources" (Lazarus & Folkman,1984).

Aiming to see the differences between the demographic factors and usage of coping strategies, all the studies show that there have been observed patterns between levels of education during the COVID-19 pandemic, showing that "people use different coping strategies depending on their levels of education they possess" (Jurado et al.,2021). Specifically, we observed differences in the high university study individuals who used strategies such as planning, rumination, positive reappraisal and using perspectives. On the other hand, a study conducted in Greece showed that demographic variables such as education and income were not qualified as significant predictors of peritraumatic distress. Due to the long-term exposure of the population to the financial crises, the levels of resilience were high, and this may be due even to other cultural factors.

In today's economy, the health benefits of education are related not only to better jobs and health insurance, higher earnings, and better resources for good health (Center on Society and Health). In this article, we hypothesise that there is a different explanation: the more educated can better manage situations of difficulty. Moreover, we expect that the more educated individuals are, the more they will acknowledge and communicate their health needs to providers. In addition, other studies show that "more schooling reduces the likelihood of following a poor health regimen" (Goldman & Smith, 2002). In a study exploring the influence of education on the mental health of retired people, results showed that "higher levels of distress were found in participants with higher

levels of education”, maybe suggesting that the higher the level of education, the better the perception of the ageing changes that are being expected in the individual (Belo et al., 2020). The same idea is supported in another longitudinal study with the German adult population in 2012-2013, highlighting that “Low education is also associated with a lack of sense of control and resilience” (Helen et al., 2019).

A study using empirical data from the OECD and the World Bank for 26 OECD countries from 1995-2015 showed an association between education and health indicators (Raghupathi & Raghupathi, 2020). The higher the educational level of countries, the better the national health conditions are. Differences are spotted among educational levels in adults, supporting that “tertiary education is the most critical indicator influencing healthcare in terms of infant mortality, life expectancy, child vaccination rates”. What education does to our health and care is cited even in the OECD reports suggesting that “Higher educated people are healthier and are therefore less likely to consume health care” (Groot & Brink, 2016). In every age group, the higher educated individuals represent a lower cost in terms of health care. Findings of other studies report that “increases in education have the potential to spill over on long-term health choices” (Fletcher & Frisvold, 2009), referring to schooling affecting health care preventive use. In addition, the more educated individuals are, the less likely they are to be unemployed, have high incomes, have low economic hardship, control their lives, and check their health (Ross & Chia-ling, 1995). A study conducted in China among medical students during the COVID-19 pandemic (undergraduates and junior college students) showed that referring to the perspective of education, college students at the undergraduate level report a low perceived level. Due to their skills in research and writing, people with a university level are more likely to use written books, magazines and internet resources and less likely to use television for health information than people with a high school diploma who rely on oral communication more than other sources. This leads us to the understanding that there is some relationship between health-seeking information and the educational levels of adults in health-seeking behaviours. Referring to these findings, we designed the following hypothesis:

Ho: Perceived physical and mental health care during the COVID-19 pandemic is not associated with levels of education.

H1: Perceived physical and mental health care during the COVID-19 pandemic is associated with levels of education.

## 2.2 *The relationship between perceived financial risk and levels of education*

The spike of the pandemic was worldwide and engaged many researchers and professionals to understand its impact on economic and mental health. As economists named COVID-19 a “Black Swan”, an event which is hard to predict, psychologists aim to respond to the COVID-19 challenges by assessing and promoting mental health and wellbeing (APA, August 2020). The pandemic exposed people to risk in many situations, including risk perception regarding their finances. A study conducted in a large-scale survey experiment with finance professionals and lay people in nine countries covering 50% of the world’s population showed that the perception of financial experts is like that of lay people (Holzmeister, Felix et al., 2019). Both groups perceive risk the same, leading us to reconsider whether their level of education affects their perceptions regarding risk in the economy. Study shows that “Low income or economic instability is associated with a higher rate of stress and anxiety” (Rodrigues et al., 2021). Cheung, F. (2016) supports the process of model inequality, stating that economic disparity affects subjective well-being since individuals compare themselves with others on economic potential. Being more educated was linked to greater involvement in protective and preventive behaviours but not to risk perception (Cipolletta et al., 2022). In a systematic review study to understand how risk awareness towards COVID-19 predicts individuals’ preventive behaviours and associated features, the report shows that people with a university or college degree predict increased COVID-19 perception. Respondents reported a high perceived risk related to the institutional economy and the lowest health likelihood. High education levels report a high

institutional-economy risk perception but a low health risk perception regarding concern and likelihood. The high education level is much more concerned and devastated by the economic and financial scenarios rather than health and psychological concerns (Lanciano et al., 2020). Risk perception is more related to social and cultural values and rights, including knowledge, personal experience, trust, and attitude, rather than individual factors (Lohiniva et al., 2022). As mentioned, the perception of risk related to economy and finance has been supported by socio-demographic factors, mainly education level, which originates more employment and knowledge. However, there are other cases when risk perception is related to individual and cultural factors. Therefore, we finally hypothesise:

- Ho: Perceived financial risk is not associated with levels of education
- H1: Perceived financial risk is associated with levels of education.

### 3. Methods

#### 3.1 Sample and Procedures

For the present research, an online-based quantitative survey was conducted. The instrument was launched and distributed online through the link towards different interest groups, including students, adult employees, etc., to reach perceptions from different individuals. Data collection was conducted by using Google Forms. Guidelines for ethical research conduct were carefully met, from the consent information introduced on top of the online instrument to the care for the volunteer participation of the participants to matters of data privacy and anonymity. All respondents were priorly informed and consented that the data would only be used for scientific research. The population of the study included adults residing in Albania during 2023. The instrument was designed by researchers based on highlighted events and stories identified in other times of crises and disasters. The instrument was distributed through a hyperlink on various media channels, emails, and social media groups, aiming to gather many participants with various characteristics over six weeks.

In this way, 281 participants took part in the online survey. The survey consisted of four sections: (a) Socio-demographic data. The questionnaire was self-administered and characterised by declarations ranging in a Likert Scale (ranging from 1-5: Strongly disagree = 1, to agree = 5 strongly), referring to a high level of agreement with each item. The instrument was first piloted on 30 respondents, the feedback of whom helped to better adapt to the requirements of the study; (b) Questions related to perceptions about the usage of coping strategies; (c) Questions monitoring mental health and personal care; (d) Questions related to monitoring economy.

The dataset was analysed using SPSS. Most respondents were females, representing 81.5% of the respondents, and 18.5% were male. The sample's age structure was divided as follows: 26.7% were in the age group 18-24 years old, 26.7% were in the age group 24-34 years old, 27% between 35-44 years old, 10.7% from 45-54 years old and 2.5% of them belonged to the age group 55-64 years old. Furthermore, the sample's level of education was divided as follows: 51.6% of respondents have a university level, 43.1% have a post-university level, and 5.3% have finished high school.

The analysis of the data was done through crosstabulation. Crosstabulation analysis was used because this study's variables are qualitative, and the authors are interested in studying the relationship between the variables. In future studies, authors will use factorial analysis for the interest groups.

**Table 1.** Socio-demographic data of the respondents (N=281).

Categorical variables		Frequency	Per cent
Gender	Female	229	81.5
	Male	52	18.5

Categorical variables		Frequency	Per cent
Age group	18-24	75	26.7
	25-34	93	33.1
	35-44	76	27
	45-54	30	10.7
	55-64	7	2.5
Education level	High School level	15	5.3
	Post-university level	121	43.1
	University level	145	51.6

#### 4. Results

##### 4.1 The relationship between monitoring physical and mental health care with individuals' education levels in 2023.

Referring to our first hypothesis, Ho: Perception of physical and mental health care is not associated with levels of education.

H1: Perception of physical and mental health care is associated with levels of education.

There is a significant difference between the care provided by adults and physical health care related to the educational level. As noticed in Table 2, adults with a high school level of education report they monitor their physical health in 53% of the cases, and 20% of them report they do not monitor their health after the COVID-19 pandemic. This category might not have job safety and more physical labour compared to the other categories. Adults with a high school qualification show more physical care about their general health than the post-university level, who monitor their physical health in 44.4% of the cases. In the university-level category, we see no habit of caring for physical health.

**Table 2.** Association between educational level and monitoring my health care by visiting the physician.

		Disagree	Neutral	Agree	Total
Educational level	High school level	20.00%	26.70%	53.30%	100%
	Post-university level	24.80%	30.80%	44.40%	100%
	University level	31.80%	34.80%	33.30%	100%
Total		28.00%	32.60%	39.40%	100%

##### 4.1.1 Perception of mental health care and its association with levels of education

Results show that all adults, despite their level of education, refuse to monitor their mental health by visiting a psychiatrist. We notice that with the rise of the education level, the refusal to do this monitoring is being raised. Study participants report not monitoring their mental health by visiting a psychiatrist. Subsequently, the high-level education category, even though slightly only in 7.1% of the cases, reports monitoring the mental health of the psychiatrist. This category shows a higher tendency for monitoring health in general. It is interesting to know whether the attitude towards mental health care comes from a lowered desire to seek help or other preventing factors such as lack of knowledge, fear of stigmatisation, lack of trust or lack of financial resources.

**Table 3.** Association between educational level and mental health monitoring: visit the psychiatrist.

					Total
		Disagree	Neutral	Agree	
Educational level	High school level	50.00%	42.90%	7.10%	100.00%
	Post-university level	70.80%	24.80%	4.40%	100.00%
	University level	67.70%	28.50%	3.80%	100.00%
Total		68.10%	27.60%	4.30%	100.00%

Crosstabulation analysis (as shown in Table 4 below) shows that with the rise of education, it is essential to monitor individuals' psychological health by visiting a psychologist/counsellor. Accordingly, 21.2% of the participants from the post-university level of education report monitoring psychological health. Meanwhile, the high school level of education seems less interested in monitoring psychological health; in contrast, they report monitoring general physical health more.

**Table 4:** Association between the education level and monitoring psychological health by visiting the counsellor/psychologist

Educational level		Disagree	Neutral	Agree	Total
	High school level		50.00%	42.90%	7.10%
Post-university level		53.10%	25.70%	21.20%	100.00%
Total	University level	53.40%	32.10%	14.50%	100.00%

Our data shows that physical health monitoring after the COVID-19 pandemic positively relates to individuals' education level: high school education is vulnerable to monitoring their physical health. Meanwhile, mental health monitoring refers to visiting a psychiatrist or a psychologist/counsellor after the pandemic completely lacking in our study population. Despite the level of education, adults do not monitor and take care of their mental health care.

#### 4.2 Association between risk economic perceptions and levels of education

Since the financial component is interdependent in providing self-care and health, it also affects finances. Therefore, we analysed the association between these two variables. Results show that in more than 50% of cases, all adults, despite their level of education, monitor their finances. All respondents pay attention to the economy. Again, we see the trend that post-university education participants focus more on their finances during these days in 72% of the cases (table 5).

**Table 5:** Crosstabulation between educational level and monitoring the finances during these days

Educational level		Disagree	Neutral	Agree	Total
	High school level		20.00%	26.70%	53.30%
Post-university level		5.10%	22.90%	72.00%	100.00%
University level		13.60%	21.40%	65.00%	100.00%
Total		10.30%	22.30%	67.40%	100.00%

Aiming to see whether the personal monthly revenues affect monitoring mental health and focus on monitoring the job and finances, the association between these two variables was investigated through the crosstabulation analysis. Referring to Table 6 below, the category reporting more economic problems has personal monthly revenues of 30,000-40,000 ALL. Our data shows that in more than 60% of the cases per all revenues, the economy is a big problem these days. The revenue category of 95.000-120.000 ALL report they have economic problems.

**Table 6:** Crosstabulation between personal monthly revenues and perception about having more economic problems during this period

		Disagree	Neutral	Agree	Total
Personal monthly revenues (approximately)	30.000-40.000 ALL	10.50%	15.80%	73.70%	100.00%
	40.100-50.000 ALL	2.90%	26.50%	70.60%	100.00%
	50.100-60.000 ALL	8.30%	22.90%	68.80%	100.00%
	60.100-95.000 ALL	20.00%	15.00%	65.00%	100.00%
	95.000-120.000 ALL	7.10%	21.40%	71.40%	100.00%
	until 30.000 ALL	7.00%	23.30%	69.80%	100.00%
	over 120.000 ALL	13.50%	27.00%	59.50%	100.00%
Total		10.80%	21.60%	67.70%	100.00%

**Table 7:** Crosstabulation between personal monthly revenues and perception about having more mental health problems during this period.

		Disagree	Neutral	Agree	Total
Personal monthly revenues (approximately)	30.000-40.000 ALL	16.70%	16.70%	66.70%	100.00%
	40.100-50.000 ALL	22.60%	25.80%	51.60%	100.00%
	50.100-60.000 ALL	21.70%	23.90%	54.30%	100.00%
	60.100-95.000 ALL	21.50%	26.20%	52.30%	100.00%
	95.000-120.000 ALL	14.30%	14.30%	71.40%	100.00%
	until 30.000 ALL	19.50%	14.60%	65.90%	100.00%
	over 120.000 ALL	27.00%	24.30%	48.60%	100.00%
Total		21.10%	21.80%	57.10%	100.00%

Referring to our data, the revenue category of 95.000-120.000 ALL, which represents the middle social class in Albania, perceives that there will be more mental health problems in 2023 compared to two years ago. The more the monthly revenues and the educational level increase, the more individuals perceive more economic and mental health problems today compared to two years ago. Related to the monitoring of psychological health, the more the level of education increases, the more the request increases to visit the psychologist/counsellor.

4.3 *Descriptive statistics on economic issues related to jobseekers and household expenses associated with the educational background.*

Since the economy remains the biggest challenge for Albanians due to the COVID-19 pandemic, an extended search in official databases reflecting the economy of the Albanian population over the last few years was part of our focus. Referring to Table 8 below, data shows the documented number of registered unemployed individuals according to their education level from 2016, a few years before the quarantine to 2021, two years after the quarantine. Data shows that through the years, we see a rise in unemployment. Data shows that individuals with a university degree have lost their jobs in 16.9% of the cases. Individuals with a university background have increased in number as job seekers from 2020 to 2021, another evidence supporting that having a higher degree education does not necessarily refer to less care about the economy.

**Table 8.** Registered jobseekers by education level 2016-2021

	2016	2017	2018	2019	2020	2021	% 2020 with 2021
Total	119710	89780	74686	70930	82921	87419	5.4
Up to 8/9 years of school	63900	50250	42676	39582	46420	48752	5.0
Secondary	47187	34260	27102	26062	29803	30834	3.5
University	8623	5270	4908	5286	6698	7833	16.9

**Source:** Albanian Employment Agency: [http://databaza.instat.gov.al/pxweb/en/DST/START\\_\\_TP\\_\\_AD\\_\\_ADY/ADY136/table/tableViewLayout1/](http://databaza.instat.gov.al/pxweb/en/DST/START__TP__AD__ADY/ADY136/table/tableViewLayout1/)

In the following table, the monthly expenditures refer to the levels of education. What is noticed in individuals with high levels of education is that family consumption is reduced by 6.3% compared with the pandemic period. Other levels have a slight improvement, however. This data shows us that individuals with a university education level have experienced the consequences of COVID-19, which is explained through their reflected fear of monthly expenditure. Their fears are related to the uncertainties about what would happen later.



**Table 9.** Monthly consumption expenditures by the education of the head of household

	2019	2020	2021	% 2020 with 2021
8/9 years school	70.537	71.515	75.109	5.0
Secondary general/Vocational	86.135	87.429	87.967	0.6
University/Post university	108.257	116.548	109.208	6.3
Total	82.235	83.475	84.548	1.3

**Source:** Household Budget Survey, INSTAT, 2022

## 5. Discussion

The study aimed to investigate whether there was any association between educational level and physical/mental/psychological care and economic care for the Albanian people in 2023 when the COVID-19 pandemic was about to end. Results show that despite the participants' educational background in the study, personal care plans referring to visiting the psychologist or the psychiatrist are minimal. In the meantime, there is quite a significant monitoring plan regarding physical care and control for all the high school-level respondents of the study.

Regarding the economic and financial perceptions, the educational background does not represent any significance for categorising groups much more sensitive to the economy and working plans. Results show that despite the level of education, everyone during the quarantine paid attention to the economic plans. The low personal monthly revenue category reports severe economic concerns, even in the middle social class. Referring to the INSTAT official data retrieved from the official databases on economic issues related to expenditures and job-seeking behaviour, our data is in line with the effects of the COVID-19 pandemic on household expenditure and loss of jobs, representing that the university level of education as the highest jobseekers in percentage in 2021.

Findings from other studies show that impacts of the COVID-19 pandemic on the social sphere have reported enormous psychological and emotional effects, among other effects such as “segregation and poverty, disruption in educational systems and formation of an information gap, as well as a declining trends of social capital among communities” (Alizadeh, H.,2023). Moreover, the report highlights that “symptoms of anxiety and depression among American adults in the early 2020s were three times higher than the corresponding period in 2019”, supporting our data about the presence of mental health issues. In this area, in addition to social welfare, the report indicates that the pandemic affected “the loss of millions of job opportunities and has negatively impacted the livelihood of families”. As for the relationship between mental health and economic issues, several serious mental health problems, including “higher depression, stress and anxiety levels were correlated with education level, spouse's support and job, marital life satisfaction, number of pregnancies, household income sufficiency” (Manchia et al.,2021). Education level has been identified as one of the essential socio-demographic components related to the experience of higher rates of depression, anxiety, and stress than general people and healthcare professionals (Hosen et al.,2021). In 2020 in France, a study was conducted with 32,581 individuals who responded to the Barometer COVID-19” (Joannes, C.et al.,2023). Results showed that lower-level education individuals have a higher risk of anxiety-depressive state. This study showed again that education level as a socio-demographic factor shows that psycho-social resources matter (Niemeyer et al.,2019).

### 5.1 Theoretical and Practical Implications

Our results indicated a relationship between educational background and physical care in the population after the COVID-19 pandemic. However, as reflected in our study population, we found no statistically significant relationship between psychological and economic care during COVID-19. Therefore, the authors have continued to study this relationship in the long term from 2020 and on,



aiming to see how this relationship lies in time in individuals.

Our study objectives aim to examine whether education is associated with the use of mental health services, psychotherapy, or psycho-drugs has been replicated in Finland through a cross-sectional in 2023, and the results did not find any match between them. However, the study reported a potential association between educational level and usage of mental health services (Halme et al., 2023). A study conducted in 2007 among individuals with a diagnosis of anxiety or affective disorder during the last year found an association between the educational level and the likelihood of reaching mental health services: with higher educational levels, the likelihood of using these services was higher. Therefore, the study recommended developing and evaluating programs that deliver mental health services to consumers who have not completed high school (Steele et al., 2007). Referring to our context of the study conducted in Albania, psychological services represent a relatively novel domain for the Albanian population. The first generation of psychologists were educated and graduated in 2000, and creating consumer outreach is quite tricky. Mental health services are reached in a desperate emergency, usually referring to abnormalities or children services. It remains doubtful when, after the pandemic, the psychologist and mental health service outreach will be more sensitive.

The association between the perception of economic risks and educational level during COVID-19 was examined, referring to the monthly personal revenue and education. A report (OECD, 2006) shows that education lowers the likelihood of unemployment and economic difficulties. It is expected that individuals with higher levels of education have higher incomes, which facilitates their access to health care services, helping them to avoid stress from financial uncertainties as well. Our research shows that the economic insecurities that the pandemic represents influence all individuals' perceptions of economic problems. Despite their educational background, the fear of losing jobs and their socio-economic status is reflected in everyone. In this regard, the higher educational levels are not saved from insecurities; on the contrary, their unemployment status seems to have increased, showing no financial stability or security.

The study's findings show that despite the educational level, everyone reports not paying attention to their mental and psychological health. Focusing on why Albanians perceive no need to address their mental health could help psychologists and public health policies build healthier communities. One potential reason could be the presence of social resilience in the Albanian population, who has quickly understood that protecting each other refers to keeping distance. Family relations are still influential in Albania, and they help individuals to reduce their tension, provide care and exchange advice and recommendations. In this area, the population has undergone many difficulties over the last two decades, including the economic crises, the Kosovo war, and the powerful earthquake in 2019, a few months before the COVID-19 pandemic, empowering individuals to run on their steps. Indeed, this is quite respectful, but looking at the psychological impact of the COVID-19 pandemic and the rise of many psychological disorders, we should carefully monitor individuals' mental health. Therefore, it needs to be considered in future prevention and public health interventions for revitalising mental health reforms in the Western Balkans, as recommended by the World Health Organization (WHO, 2022).

## 5.2 Limitations and recommendations for future research

The results of this study represent a trend considering the sample used to reach these results. Even though the instrument was launched in different networks in 2023, the population's refusal mode for reporting their psychological and economic issues is relatively high. Therefore, the findings of these reports may be generalised, referring to the situation when this study was conducted, but no generalisation to all people can be assumed. The data documents how Albanian adults perceive the situation and react to personal care and the economy. Researchers evaluate that the original study represents strength in terms of representing the trends and tendencies of adults in times of COVID-19 and that generalisation from the original research to other situations needs to be considered by having other complementary evidence. The current cross-sectional study's findings help shed light on

the perceptions about health, counselling care and risk perception of the economy. However, longitudinal studies could further investigate the causality. We assumed that the perceptions regarding personal and economical care are partly influenced by dimensions related to the level of education. In addition, the interaction between other socio-demographic factors needs to be analysed.

## 6. Conclusions

Results demonstrate that it is worthwhile to investigate the relationship between education levels and perceptions of people due to the pandemic related to their mental health and economic care. In conclusion, we might say that educational background is not significant in referring to psychological care but is significantly related to physical health care. To some extent, the more educated ones pay more attention to psychological care, but this is insignificant. Moreover, despite their educational background, all respondents care about the economy. The university and post-university background respondents in total level report to have the same level of worry about the economy. In this case, not only does a university background provide more comfort in the labour market, but on the contrary. Official INSTAT data report that the number of jobseekers with a university background has increased over the last years, from 2016-2021, compared to other educational levels. Their household expenses have increased, too, compared with other educational level categories, putting them at risk regarding their economy and finances. Despite our assumptions that the more educated individuals can manage situations better, we do not see any positivity to this fact. The higher education is as alarmed about the difficulties met during the quarantine as the other level of education consisting of high school level.

There were indeed some advantages in our study. However, with longitudinal studies reporting on the sensitivity of the economic factor implicating the individual, data will be elaborated in terms of consistency or inconsistency for this study population. However, this is a contribution to the understanding of how the situation has been screened in Albania. Issues such as lack of information, misfit information, financial resources or dispositions because of stigma must be further analysed. We contribute to a relevant research area related to the pandemic and how people cope with difficulties and perceive asking for help.

Findings will assist policymakers in designing and addressing appropriate policies considering the psychological and economic issues faced by the adult population of Albania during the COVID-19 pandemic. The most pressing need is to provide out-reached psychological and psycho-educational services to the population, aiming to raise awareness of these services to reduce the population's mental health problems. The economic impacts of the COVID-19 pandemic ask for an immediate and longer-term recovery and national policies addressing the close relationship between mental health and economic uncertainties in crises. We call on psychological scientists and researchers to collaborate with other scientists and stakeholders and develop innovative public health policies while maintaining professionalism and rigorous research standards.

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