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A Cross-Sectional Study of Mental Health and Wellbeing on the Bearing Transition of Students' Academic-life after COVID-19 Pandemic

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Abstract: The article reviewed the collective mental health and well-being of students' academic life in transition after two years of the COVID-19 outbreak. The article provided vibrant color for a cross-sectional study on mental health and well-being in academic life with COVID-19 restricted protocols of Education Teacher Training Faculty, which works on the teachers' candidates. The study employed a cross-sectional method that looped the three main students' knowledge awareness; personal health, environment, and new-normal adaptation. Overall, 105 students participated in the COVID-19 Pandemic Mental Health Questionnaire (CoPaQ), which projected regression analysis and overviewed to identify academic-life effects. The result projected multivariate test of distractions impact which is moderately stable on 44 percent, with F on 6, 216, with p over 0.01. Also, it marked gradually latent 44 percent of personal health awareness, 68 for environment knowledge, and 68 for the new normal adaptation. In addition, MANOVA projected 68 of the bearing transition, compared to 46 of growing risk on mental health and well-being. The trends were associated with the students' essential knowledge of Covid-19 transmission and its common symptoms, obey to official policy, adapting new-normal behaviors, figuring the support of family, and religious spiritually restored. Balanced mental health and well-being will bring a bright university life and training pathways as a teacher candidate.

INTRODUCTION

In terms of teacher personality competence, mental health and well-being are essential factors that determine capacity and characteristic building (Ianah et al., 2021; Vorkapić, 2019). These virtuous personalities upbringing a good moral act and initiate a healthy nature and nurture of education, which is critical for Education and Teacher Training faculty students as well, who are the teacher candidate (Andrade et al., 2021; Berkowitz, 2020). Considering these upbringings, the article analysis on the projection of the bearing transition of students' academic life after two years of the covid-19 pandemic at education faculty become essential to be conducted thoroughly.

Although the government of Indonesia has issued several policies related to countering the COVID-19 outbreak by restricting people form face to face contact, The regulation also suggests that classroom interaction be delivered through online classroom applications (Putri et al., 2020; Syafrida & Hartati, 2020). The policy intention is to

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control the direct physical contact in the public area; indeed, the university is a crowded environment which is suggested to obey the regulations (Brondino et al., 2020; Chen et al., 2021; Joyce et al., 2021). The closure of educational institutions is an immediately disrupted phenomenon in Indonesia (Putri et al., 2020; Sukesih et al., 2020; Syafrida & Hartati, 2020). The phenomena rapidly shifted from physical to digital learning, which is considered a possible alternative to conventional learning (Putri et al., 2020; Syafrida & Hartati, 2020). However, some educators, lecturers, and the supported facility are still not fully implemented (Costa et al., 2020; Syafrida & Hartati, 2020). From March 2020 to even the next year, April 2021, at the mid-end of the semester, the lectures were still on adapting and learning how to run an online meeting as classroom sections. Hitherto, the institution works to provide guidelines and recommendations to make the learning process continue even with the pandemic protocols.

For the practice in an educational institution, the policy minimizes physical contact. Restricting the students from face-to-face contact, which is the foremost an interaction in teaching-learning, disrupts and isolates them from social interaction (Churiyah et al., 2020; Putri et al., 2020). Indeed, it distracts the students' normal behavior and habit (Chen et al., 2021; Churiyah et al., 2020; Kahn & Williams, 2021). The concern for students' mental health and well-being is the main objective to be preserved in the writer's home-based institution (Chaturvedi et al., 2021; Iqbal et al., 2020; Kahn & Williams, 2021; Ohliger et al., 2020). The issue of mental health and well-being comes up in mixed reactions for being burnt out as depression, pressures, and so on (Iqbal et al., 2020).

Moreover, the issue also gave the student a struggle to be resolved and have elevated personality as their work on resilience and reconcile to reaffirm the adaptation for their situation within the COVID-19 physical restriction policy (Cira & López, 2020; Putri et al., 2020). The pandemic might impact the students' personal and academic life distraction for gap analysis. Other students reported the distractions in academic work and growing concerned with COVID-19 and were more likely to leave a nightmare and anxiety about when it ended (Cira & López, 2020; Putri et al., 2020). Those who were self-quarantined felt an excess burnout and declining achievement. However, they claimed the support of family, friends, and religions spiritually restored and balanced their state to realize their university life and training as teacher candidates. The faculty must improve the students' well-being and consider the new normal of post-pandemic in academic life (Churiyah et al., 2020). It also changes their behaviors in daily routines, such as outdoor activity, disturbed sleeping patterns, and social distances (Andrade et al., 2021). Therefore, it disrupts the students to grow mature and prepare their personality at university as the step on working on their future employment.

Although the use of distance learning technology requires intensive training because the implementation of e-learning to acquire success depends on attitude and style of teaching, as well as related student experiences and attitudes toward technology, somehow it reduces social contacts (Berkowitz, 2020; Pathak, 2022). During the implementation of learning from home, many problems arose. Some of these are children who are lazy to follow scheduled school lessons, have difficulty understanding lessons, and complain about too many learning assignments, so children become burdened and tend to delay doing assignments and leads to academic stress (Ariebowo, 2021; Cira & López, 2020; Jayewardene et al., 2017). Physical distance due to the pandemic, children are very at risk of experiencing symptoms of anxiety, irritability, laziness, boredom,

emotional and behavioral disorders, and academic stress (Chen et al., 2021; Churiyah et al., 2020; Syahputri et al., 2020). Though this condition has an impact in the short term, it can also have a long-term impact on the affected groups. For some students' families, the impact becomes felt when the school issues a policy related to distance learning (Chen et al., 2021; Joyce et al., 2021; Roberts et al., 2021). Many other triggering factors among parents during the pandemic became overprotective of their children, so many children became socially isolated (Abidah et al., 2020; Brondino et al., 2020; Chaturvedi et al., 2021; Vainikainen et al., 2020). This further adds to the series of negative psychological impacts on school-age children due to the pandemic.

Mental health and well-being are the foremost psychological aspects of a maturity constituent. These aspects simulate and shape personal characteristics and constitute moral compass behaviors in early responsible adulthood (Chaturvedi et al., 2021; Ohliger et al., 2020). Moreover, the students require these aspects to reach their potential, which reconciled them when they face academic and daily life problems (Chaturvedi et al., 2021; Kahn & Williams, 2021). Advisability in mental health and full well-being potential enhances the students' early maturity for being responsible for performing their tasks, have a clear goal, acquiring efficient work-learning habits, attain a controlling personal feeling, objectivity, and being open to criticism and suggestion (Chaturvedi et al., 2021; Iqbal & Afna, 2019). The stages also build students' realism about their status and situations and strengthen their will to reconcile in pressured moments. To overview students' mental health and well-being in university life, the writer employed a survey that focused on three main pieces of knowledge awareness; the students' health, environment, and new-normal adaptation, as a proposed educational psychologist (Avillafuerte & Mosquera, 2020; Iqbal & Afna, 2019; Iqbal et al., 2020).

Based on previous research, it was found that the impact of COVID-19 is the need for evaluation of teaching staff that affects academic performance in United States universities (Mickey et al., 2022). It creates pressure and stress for students (Dutta & Smita, 2020), and learning constraints, due to unpreparedness in dealing with the pandemic in Bangladesh (Abdulghani et al., 2020).

So, this article aimed to project the students' resilience with their mental health and well-being. In addition, the students' adaptation to reconcile with their academic life after two years of the pandemic, the new-normal setting, which is themed to treat the contributing factors which excess burnout and declining academic the students' achievements. This focus is also essential to build for teachers' inner capacity development. Eventually, it constructs the students' competence as teacher candidates.

Therefore, the article projected a study on mental health and well-being. The writers also collectively review the students' mental situations throughout an online questionnaire after two years of COVID-19 disruption.

METHOD

The writer employed a cross-sectional study that characterized the focus to loop collectively the students to describe the disruption which impacted their mental health and well-being after two years of academic life within COVID-19 Physical Distance protocols at IAIN Langsa, Kota Langsa, Aceh province, Indonesia. The study characterized the collective investigation of the students' academic life for a Teacher Training faculty.

The process encompassed; (1) Characterized the students' health knowledge, surrounding environment, and

adaptation to new normal, (2) Sharing the online questionnaire to the students via Google Forms, (3) Questionnaire analysis (4) Conducting a Forum Group Discussion with the beneficiaries (The Researchers, The Dean Commission of Faculty, and psychologists), and (5) The reflective report for research finding data. The processes of the diagram objectively observed the previous two-three following years, in 2020 and 2021, and characterized the students' mental status in recent 2022. The data are the previous relevant events, such as the time of pandemic exposure in 2020 and 2021 as the process to reconcile and recover, which determined the relative distraction on the students' behaviors contributing factors in adapting to new normal routines (Chen et al., 2021; Kahn & Williams, 2021). Therefore, it projected how the students commit to confronting the distraction and retentive their adaptation through the following years and immediate coming years ahead.

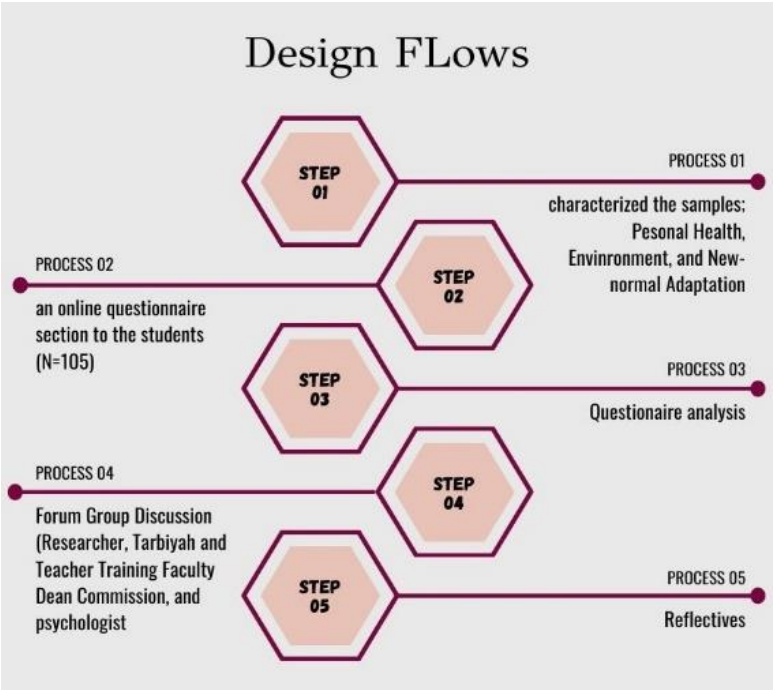

Figure 1. Study Design Flowcharts (Rek et al., 2021)

The layer of concern with mental health and well-being after two years of respondents' feelings about COVID-19 in their academic life was assessed by Brief Symptom Inventory, BSI-18 (Derogatis, 1993; Williams et al., 2020). The assessment measured self-reported the students' distractions in academic life after two years of the pandemic and their findings for a closure. In the BSI-18 scoring instructions, the raw scores were converted to T scores, which employed gender-specific community norms. The higher scores signify the distraction effects arising from students' perception of burnout and engagement in academic life and their pathways of a teacher candidate at teacher training faculty. BSI-18 is applied to measure a clinical case for likely cutting off, which has a positive predictive value in the participants (Williams et al., 2020). Furthermore, Cronbach's alpha for the overall scale was 0.94 (α = 0.89 for distraction effect subscales, respectively).

The respondents were the students of Tarbiyah and Teacher Training Faculty IAIN Langsa who were in the academic year of 2021/2022. The estimated sample size was obtained from the Raosoft sample size calculator (Raza et al., 2021; Saffan et al., 2021). For a total population

of 250 students (an average of 57 to 35 students per department), with a confidence level of 95 %, the sample size should be 105 students.

The inclusion criteria for respondents' selection, proposed as teacher candidates, were (a). an adult student who is over 18 years old; (b). level of third years of sixth and seventh-semester students; (c). living in neighboring regional town to Kota Langsa, such as Peureulak, Idi, and Kualasimpang (d), The students come from the six departments of faculty; Mathematics-Pendidikan Matematika (PMA), Islamic Studies -Pendidikan Agama Islam (PAI), Arabic -Pendidikan Bahasa Arab- (PBA), English Education - Tadris Bahasa Inggris (TBI), Islamic Primary Schools Teacher Training - Pendidikan Guru Madrasah Ibtida'iayah (PGMI), and pre-Schools Islamic Education -Pendidikan Islam Anak Usia Dini (PIAUD). The group of observant is selected from a longitudinal study that accesses the participant events in the students' exposure to the teaching-learning process and academic pressure, which is mediated at the faculty academic commission (Heller et al., 2008; McCoskey, 2018). The study featured a collective analysis of the students' responses which exposed their status of mental health and well-being (Demou et al., 2018; Howard et al., 2020; Pazderka et al., 2021). The independent variable of the study was the projection on the last survey in mid-January 2022 about the collective loop among the students to describe the disruption that impacted their mental health and well-being (Corbisiero & Monaco, 2021; Zureick et al., 2018). Additionally, the dependent variable was the retention reports from the April and June surveys of 2020 and the June survey of 2021.

To explore the disruption of students' academic life, the study employed COVID-19 Pandemic Mental Health Questionnaire (CoPaQ) and well-being Survey for students, which was ratified and designed by the World Health Organization (WHO) (Pan et al., 2021; Rek et al., 2021). The e-questionnaire was divided into the following sections.

The first section covered students' academic demographics, names, numbers, and departments. The second section covered students' health knowledge, which projected students' private circles and surroundings for pandemic exposure. There were 12 questions. Six questions were Yes/No or Did not Know forms. (e.g., "Are you currently suffering from COVID-19 symptoms?"). Two questions identified the following risk factors for a severe course of COVID-19 to the students and their family or close relative, 1 question identified students' current accommodation, 1 question for the students' experiment being carried out self-isolation if their environment was affected by SARS-CoV-19, the experienced duration of self-isolation, and their feeling when doing it. The third section covered the students' intention to learn about the state of the family and learning environment during the COVID-19 pandemic. The students were asked about the following health recommendations for personal care, academic life, and their following measures of the COVID-19 pandemic, their engagement in preventive behaviors, with a 4-point scale (0 = "not at all" to 4 "very terrible").

They were also asked about the personal visit which derives from commuting town between neighboring regions of Kota Langsa. The last section enclosed the resolution after two years of new normal handling and impaction of the pandemic. The students were asked to indicate their distractions from the COVID-19 pandemic and its protocols that impacted their academic life. *(i.e., "a nightmare that repeats part of the experience of the COVID-19 pandemic or is related to it" and "a developed strong image or memory that sometimes comes*

to my mind where I feel the experience of the COVID-19 pandemic is happening again in the here and now"). Furthermore, the last section also enclosed the students' resolutions which have been able to keep them away from stress/burden. Participants answered from 1 (lowest value) to 4 (highest value) by reflecting on two years as references. The instruments projected the section to reflect the students' feelings of agitation, anxiety, and sadness due to physical distance measures (staying at home and closing academic life). The participants answered on a four-point linkers scale ranging from 1 (never) to 4 (every day) (Kim et al., 2022; Nilashi et al., 2022).

Table 1. CoPaQ WHO Cues

Mental health and Well-being	
Variables	**Items**
Students' health knowledge	1-4
Level of agreement with social restriction	1-4
Respond to the following health recommendations.	1-4
Opinion for physical restriction in public	1-4
Understand about following measures	1-4
Changing behaviors	1-4
Changing experiences	1-4
Changing perceptions	1-4
Getting closures from distractions	1-4
Getting mature for discerning and expressing	1-4

The data were analyzed using SPSS version 27. The description of data analysis employed frequencies, percentages, and ranges. The group data were compared using independent samples t-test for unadjusted bivariate associations variables describing the students' mental health and well-being for facing distractions in their academic life. Moreover, the correlations take all bivariate which correlates to the achievement significance of less than 0.05 into multivariable linear regression models to evaluate which is predictive in nature of independent variables for distractions in their academic life while potentially cofounding effect another variable in models. The standardized β regression coefficient is 95 % of confidence intervals (CIs)m, and the p-values were reported with the test statistic for each of the three models. To confirm which covariates were not collinear, it was examined for the variance inflection factions for the variable, none of which were greater than two, which indicated a lower layer for collinearity.

RESULT AND DISCUSSION

The Sociodemographic of Research Participants

A total of 105 students, 87 (82.8 %) who are female, and 18 (17.1 %) who are male, participated in the study questionary. A full demographic and academic characteristics are presented in Table 2. 46 (43.8 %) students in the 2nd, 4th dan 6th semesters were categorized as active students for academic life. Moreover, fortunately, the most participants came from the 8th semester, 35 (33.3 %), and the 10th semester, 24 (22.8 %) students who are in undergraduate research, with (N = 105).

Table 2. The Participants Profile

Variables	n	%
Gender		
Male	18	17.1
Female	87	82.8
Semester		
2^{th}	15	14.2
4^{th}	13	12.3
6^{th}	18	17.1
8^{th}	35	33.3
10^{th}	24	22.8
Departments		
PMA	16	15.2
PAI	10	9.5
PBA	5	4.8
TBI	17	16.2
PGMI	9	8.6
PIAUD	48	45.7
Origin Regions		
Kota Langsa	42	40
Peureulak	17	16.1
Idi	12	11.4
Kualasimpang	34	32.3
Maintain Education-life		
Yes	105	100
No	0	0

The participants were generally aware that their health knowledge covered students' health knowledge, which projected their private circles and surroundings for pandemic exposure. The questionary result reported they were aware with 95 % of COVID-19 symptoms infection which possibly affecting to their self (Table 3), which regarding having fever, dry cough, shortness of breath, sore throat, loss of smell/taste, and headache or diarrhea. Two students (1.9 %) issued positive COVID-19 symptoms of infection due to their direct contact with virus cluster in their regions. Additionally, to a great extent, participants agree to obey the social distancing procedure currently instituted at IAIN Langsa from March 2020 to November 2020. Furthermore, it is disclaimed that IAIN Langsa relaxed the regulation. In Table 3, the students felt distracted (35.2 %). However, some were not worried (43.8 %) while doing self-isolation quarantine at their own house with their family.

Moreover, the condition would be different if the students were asked to do a self-isolation quarantine which was not in their house and without their families. They felt distressed about leaving their home and responded with very agree (31 %) and agree (46 %). The students' environment knowledge covered the students' intention to learn about the state of the family and learning environment during the COVID-19 pandemic, which projected the students' responses to the following health recommendations. Most students recommended adapting to maintaining a distance, covering coughing or sneezing into the crook of their arms or handkerchief, avoiding touching their mouth, eyes, or nose with bare hands, and growing awareness of washing their hands regularly. These recommendations projected are responded with highly appreciated (45 %) to (59 %) to the sums of students' answers. Table 3 was rated on a scale of 1 – 4 SCA (n=105).

Table 3. The Descriptive of Survey Result on CoPaC WHO at FTIK IAIN Langsa

Var.	Item Text	N (%)	W	M	SD
Personal Health					
Domain the identification of students' health knowledge					
01.	Not currently suffering from COVID-19 symptoms	100 (95.2)	4.55	2.65	1.58
02.	Never tested positive for COVID-19	102 (97.1)	4.75	2.45	1.21
03.	Never tested positive for Anti-SARS-CoV-2 19 antibodies	97 (92.4)	4.01	2.84	0.23
04.	None close to being infected with COVID-19	92 (87.6)	3.48	1.89	0.15
05.	None of the family members died with a positive diagnosis	81 (77.1)	2.24	1.25	0.12
06.	None of the people with direct contact exposed to the virus	80 (76.2)	2.25	1.22	0.01
07.	Indicate having not developed virus symptoms	99 (94.2)	3.25	2.86	0.28
08.	Indicate having developed cardiovascular disease	2 (1.9)	0.04	0.01	0.004
09.	Indicate having developed the respiratory system disease	4 (3.8)	0.08	0.02	0.009
10.	Indicate students' accommodation of own private house	59 (56.2)	0.78	0.45	0.23
Domain level of agreement with social restriction protocols					
11.	Having self-isolation quarantine due to social restriction	77 (73.3)	2.85	1.42	0.21
12.	The duration of self-isolation quarantine	30 (28.6)	1.43	0.22	0.012
13.	Feeling calm and relaxed when at my home	83 (79)	2.48	1.23	0.12
14.	Feeling worried about the risk of catching COVID-19	85 (80.9)	2.54	1.28	0.14
15.	Agree about the health concern of family members	87 (82.8)	2.14	1.52	0.21
16.	Agreed with feeling stressed from living house	82 (76.1)	2.35	1.24	0.12
Environment					
Domain the students' responses to the following health recommendations					
17.	Recommended maintaining a distance of 1.5 from people	95 (90.4)	3.52	1.21	0.15
18.	Recommended covering cough and sneeze from people	95 (90.4)	3.52	1.21	0.15
19.	Recommended not touching mouse, eyes, with bare hands	89 (84.7)	2.25	1.14	0.52
20.	Recommended regularly washing of hands	99 (94.2)	3.25	2.86	0.28
21.	Not recommended to wash hands extensively (at least 30s)	54 (51.4)	2.52	1.21	0.15

Var.	Item Text	N (%)	W	M	SD
22.	Recommended increased disinfection of hands and objects	90 (85.7)	2.24	1.12	0.51
23.	Recommended to use facial medical masks	98 (93.3)	3.66	1.33	0.33
Domain the students' response to physical restrictions in public places					
24.	Recommended to cancel private gatherings and family visit	57 (54.2)	2.21	1.15	0.52
25.	Recommended to cancel a trip to another city	75 (71.4)	2.52	1.21	0.15
26.	Not recommended to visit local restaurants or canteen	69 (65.7)	2.24	1.12	0.51
27.	Recommended to avoid human touching when meets	64 (60.9)	2.54	1.24	0.12
28.	Recommended to study online via the application	59 (56.1)	2.32	1.22	0.11
Domain the students' affirmation for following the certain measures of COVID-19 Protocols					
29.	Obey hygiene measures	104 (99)	3.45	1.22	0.11
30.	Obey to reduce social contacts	98 (93.3)	3.66	1.33	0.33
31.	Obey to follow the local curfews	96 (91.4)	3.52	1.25	0.12
New-Normal Adaptations					
The domain of changing behaviors					
32.	Have some repeat nightmares for a lone of the self-isolation	73 (69.5)	3.47	1.72	0.41
33.	Have a strong image that sometimes comes to mind	73 (69.5)	3.47	1.72	0.41
34.	Have avoided internal reminders of the experience	73 (69.5)	3.47	1.72	0.41
35.	Have avoided external reminders of the experience	74 (70.4)	3.50	1.25	0.12
36.	Have not been "super-alert," watchful, or on guard	64 (60.9)	3.04	1.05	0.02
37.	Have not been feeling jumpy or easily startled	74 (70.4)	3.52	1.21	0.15
38.	Have suffered from unforeseeable severe anxiety attacks	82 (78)	3.91	1.42	0.21
The domain of personal experiences					
39.	Have a terrible sleep at night when feeling anxiety	67 (63.8)	3.19	1.54	0.22
40.	Have terrible to have scary dreams or nightmare	64 (60.9)	3.04	1.52	0.21
41.	Have avoided visiting on canteen or restaurant	73 (69.5)	3.47	1.72	0.41
42.	Have not been behaving more easily offended, tantrums, etc.	83 (79)	2.48	1.23	0.12
Domain of perception					
43.	Having feeling distracted by the current state of pandemic	78 (74.2)	3.71	1.45	0.22
44.	Having feeling distracted by self-isolation quarantine	83 (79)	2.48	1.23	0.12
45.	Having feeling distracted by lots of college assignments	90 (85.7)	2.24	1.12	0.51
46.	Having feeling distracted by online class	88 (83.8)	4.19	1.24	0.12
47.	Having feeling worries about being able to have medical care	77 (73.3)	2.85	1.42	0.21
48.	Having feeling worried about being diagnosed with Covid-19 positive	75 (71.4)	2.52	1.21	0.15
49.	Having feeling worried about losing opportunities in education	83 (79)	2.48	1.23	0.12
The domain of getting closure for distractions					
50.	Influence family supports	77 (73.3)	2.85	1.42	0.21
51.	Having an influential from friends supports	76 (72.3)	3.61	1.35	0.12
52.	Influencing mental health therapists' support	55 (52.3)	2.61	1.35	0.12
53.	Influence enriching religious knowledge	80 (76.1)	3.80	1.90	0.45
54.	Influence focusing on self-investing	79 (75.2)	3.76	1.88	0.44
55.	Have not been trouble organizing students' routine	70 (66.6)	3.33	1.66	0.33
56.	Have enjoyed time with people close to the students	76 (72.3)	3.61	1.35	0.21
57.	Have not participated in student activities	69 (65.7)	3.28	1.64	0.32
58.	Have a developed feeling of hope for the end of the pandemic	70 (66.6)	3.33	1.66	0.33
59.	Have developed mental stability in religion	80 (76.1)	3.80	1.90	0.45
60.	Have a developed an inner strength and talent	73 (69.5)	3.47	1.72	0.41
61.	Have a changed attitude to become aware of personal value	75 (71.4)	3.57	1.78	0.44
62.	Have recognized to accept pandemics into endemic	70 (66.6)	3.33	1.66	0.33
The domain of getting mature for informational discerning and expressing					
63.	Able to discern Political leadership in handling pandemic	69 (65.7)	2.24	1.12	0.51
64.	Able to discern the regulation which makes life better	76 (72.3)	3.61	1.35	0.12
65.	Able to discern hoaxes news reports about the COVID-19	79 (75.2)	3.76	1.88	0.44
66.	Able to express virus variants that can infect anyone	78 (74.2)	3.71	1.85	0.42
67.	Able to express feeling that people infected with prejudices	78 (74.2)	3.71	1.85	0.42
68.	Able to express for not taking concurs on conspiration issue	66 (62.8)	3.14	1.57	0.24
69.	Able to express for not agree COVID-19 is only a dream	87 (82.8)	2.14	1.52	0.21
70.	Able to express rational thought of virus conspiracy	81(77.1)	2.24	1.25	0.12

The environment knowledge had changed the students' behaviors in response to the pandemic following measures of the COVID-19 pandemic over the past two weeks after there are in or not for self-isolation quarantine. The students follow hygiene measures, reduction of social contacts, and curfews. Moreover, the students have nightmares that repeat part of the experience of the COVID-19 pandemic or are related to it. However, they began to develop an enclosed personal resolution after two years of new normal handling and impaction of the pandemic. The data indicated that 47 students (44.7 %) have nightmares about COVID-19, and 35 students (33.3 %) have a strong revulsion image of the pandemic. In new-normal adaptation, in Table 3, it is projected how do the students get reworking for having changing behaviors, changing experiences, changing perceptions, getting closures from distractions, and getting mature for discerning and expressing. They have avoided external reminders of the experience 74 (70.4 %). However, they managed to have not been behaved more easily offended, tantrums, etc., 83 (79 %), yet, they grew a feeling worried about losing the opportunity in education 83 (79 %) because of pandemic pressures most on their parents, who are the main support to provide their accommodation. Nevertheless, influencing enriching religious knowledge 80 (76.1 %), the students believed it correlated to having developed mental stability in religion 80 (76.1 %). Eventually, the students get closure of their distraction by managing a logical explanation on not agreeing COVID-19 is only a dream 82 (78 %), and expressing rational thought of virus conspiracy 81 (77 %).

To define a cross-sectional of disruptions that impacted the mental health and well-being after two years of academic life within COVID-19 Physical Distance protocols, the writer described the Survey Result on CoPaC WHO at FTIK IAIN Langsa 2022 in Table 4 below with def. 1. 1122.

Table 4. The Cross-sectional Disruptions Impacted the Mental Health and Well-being

Variables	Range	M	SD	$n_{(105)}$	F	p	η^2
Students' health knowledge	1-4	3.53	1.04	3.42	8.15	0.04	0.01
Level of agreement with social restriction	1-4	3.63	1.26	3.64	0.03	0.80	0.00
Respond to the following health recommendations.	1-4	2.84	1.28	3.65	18.22	0.00	0.02
Opinion for physical restriction in public	1-4	4.05	1.24	3.94	5.18	0.02	0.00
Understand about following measures	1-4	3.98	1.24	4.02	2.48	0.12	0.00
Changing behaviors	1-4	6.22	0.61	5.99	38.75	0.00	0.00
Changing experiences	1-4	5.28	1.03	4.82	69.91	0.72	0.00
Changing perceptions	1-4	2.78	1.51	2.79	0.13	0.55	0.00
Getting closures from distractions	1-4	2.32	0.67	2.35	0.69	0.54	0.00
Getting mature for discerning and expressing	1-4	2.86	0.83	3.00	0.54	0.38	0.00

Respectively, Table 3 indicated the relation to variables that derived distraction in students' academic life, which is projected in Table 4. From the descriptive analysis, it carried out the students' health knowledge have a good level of psychological (M = 3.53; with DS =1.24) and emotional well-being (M = 3.63; with DS = 1.26), which indicated a good understanding of their perception to pace the pandemic challenges. Moreover, the Table 4 described students' mental health and wellbeing most frequently influenced with their respond which consistently changing the new normal adaptations indicators (behaviors,

experiences, perceptions, closures, and discerning-expressions), by value (MS = 3.43 vs. MF 3.60; F (1.112) = 8.15, with p < 0.004; _2 = 0.01, and in particular environment exposure (MS = 2.65 vs. MF = 2.96; F (1,1122) = 18.22, p < 0.000;_2 = 0.02, and COVID-19 pandemic protocols with particular social interaction (MS = 3.94 vs. MF = 4.12; F (1, 1122) 5.18, p <0.02;_2 = 0.00). Moreover, the perception of disruption risk, which projected zero-order cross-sections, somehow degraded because of the well-being support system applied in students' personal life. Eventually, Table 4 also indicated the elevated concerns about mental health and well-being of students, which happened for these two following years, particularly in the uncertainty information for COVID-19 situation, which influenced applied protocols on their campus.

Table 5. The Cross-sectional Variable Indicators

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
(1) Students' health knowledge	1									
(2) Level of agreement with social restriction	0.80**	1								
(3) Respond to the following health recommendations.	0.81**	0.50**	1							
(4) Opinion on physical restriction in public	0.90**	0.67**	0.54**	1						
(5) Understand about following measures	0.09**	-0.01	0.13**	0.08*	1					
(6) Changing behaviors	0.24**	0.17**	0.20**	0.24**	-0.05	1				
(7) Changing experiences	0.14**	0.06*	0.15**	0.13	0.20**	0.00	1			
(8) Changing perceptions	0.07**	-0.04	0.14**	0.05	0.27**	-0.02	0.50**	1		
(9) Getting closures from distractions	-0.13**	-0.21**	-0.17**	-0.32**	-0.01	-0.10**	-0.02	0.02	1	
(10) Getting mature for discerning and expressing	-0.22**	-0.38**	-0.02	-0.17**	-0.013	-0.03	-0.02	-0.02	0.75**	1

The CoPaC Questionnaire indicated distractions for Covid-19 physical distancing protocols. It projected the regression which considered how the scores of distractions influenced students' mental health and well-being in Table 5 with **p < 0.001: *p <0.05. As described form Table 4, there is an association between variables to students' mental health and well-being with r = 0.80, p < 0.001.

Table 6. Regression Analyses of Predictive Variables

Phase	Predictive Variable	B	B	R	R2
1	Personal Health	-0.081*	-0.066	0.066	0.044
2	Environment	-0.092	-0.075	0.068	0.046
	New-Normal Adapt.	-0.020	-0.014		

Table 7. The Result of the MANOVA Test

Resources	Multivariate	Univariate		
	F	Mental health	Well-being	Distraction
Personal Health	0.044	0.736	0.375	0.001
Environment	0.068	0.545	0.225	0.001
New-Normal Adapt.	0.068	0.544	0.225	0.001

Table 6 projects the regression equations between two phases. The predictive variables indicated 0.044 of the variance scores for students' mental health and well-being. The variables were equated to define distractions as its bearing transition, with the explanation coefficient is reached to 0.046 by adding

this variable, that is, 0,02, which added to the explanation coefficient. Generally, personal health, environment, and new-normal adaptation explained (R2) 0,046 for the scores' variances. Multivariate variance analysis (MANOVA) was employed to compare the score for the predictive variable, the distractions, to the students' mental health and well-being. The mean (M) and standard deviation (SD) of the research variable by separating phases are in Table 6. The result of the MANOVA test is projected to compare these variables' total scores, with *$p < 0.01$.

Table 7 indicated the distraction did not have a significant on a linear combination of Personal health variables [$F (6, 216) = 0.044$, with $p < 0.01$]. The result of MANOVA projected the effect of another two, environment. New-normal adaptation is significant on the scores of mental health and well-being [$F (1, 221) = 0.068$, $P < 0.01$] are in the way that distraction of COVID-19 did not impact students' mental health and well-being in Table 7, with $p < 0.001$**. Eventually, the distractions did not impact the students' mental health and well-being after two years of impacts of the bearing transition in academic life.

The study's objective is to identify students' mental health and well-being after two years of impacts COVID-19 weather have distractions to academic life as teacher candidates in teacher training faculty. The finding indicated that there is an impact of distractions after two years. However, it heals through family, religion, and self-awareness, which mostly promotes students' framework for describing life's experiences. The psychologist defined these attributes as a sense of integrity and existential connection (Chaturvedi et al., 2021; Wang & Chen, 2022). Moreover, the attribute of students feeling shared communications and family support were impacted to initiate self-conscious as other steps in maturity and flourishing adulthood. Educational psychologists strongly maintain these attributes of teacher candidates for personal competence (Iqbal & Afna, 2019; Iqbal et al., 2020). The pandemic might influence students to develop self-insecurity, anxiety, burnout, and lower engagement in their academic life. Their academic life is also a dynamic transition of growth which is natural. However, they get exposed to a disrupting era of technology and pandemic outbreak globally.

Correspondingly, educational psychologists define growth as rapid, inter-related changes and social relations, which should be happened to every human being in nurtures process (Howard et al., 2020). The impacts after two years of pandemic outbreak emerged measure protocols which obliged to be followed, such as lockdown, self-isolation, confined to stay at home, and somehow having experience in isolation for fourteen days, also impact the students' behaviors (Derogatis, 1993; Heller et al., 2008; Kahn & Williams, 2021). The result defined the impacts as the unprecedented event which led to global phenomena, defined as alienated and isolation (Alfiah et al., 2020; Kahn & Williams, 2021). The phenomena happened worldwide, however, assessing mental health and well-being should maintain by an educational institution to preserve the candidate, a teacher, in the immediate future. It is not easy. However, with the correct support, it should be treated and healed throughout time (Alfiah et al., 2020; Kahn & Williams, 2021) whoin the immediate future.

The study finding supported the hypothesis that the Covid-19 pandemic has not been associated with significant psychological pressure in academic life. It implicated the students' capability to build as teacher candidates at the faculty. The level of mental health and well-being appeared in line with the development of

the growth process, which is a disruption challenge for the students who studied in nowadays academic life (Rek et al., 2021). Based on the cross-sectional result, the healing process should transpire from a support system, such as family, relatives, and self-awareness. The educational psychologist identified the support systems as the main framework of adultness (Chung & Seomun, 2021; Churiyah et al., 2020). By suggesting a fostering environment, the academic life shall recover in a new-normal behavior adaptation (Chung & Seomun, 2021; Churiyah et al., 2020). Given these essential factors of personal competence, it is human psychological and behavioral factors that will maintain the students themselves respond to the nowadays phenomena (Bastarianto et al., 2019; Muslimin & Harintama, 2020; Rek et al., 2021). Overall, the study suggests a promising line of two years impact of the pandemic on the students' academic life. It considers a promising line to prevent disruptions by having characterized support systems. The finding suggests the intervention of protocol disrupts the way of study, not the students by themselves.

CONCLUSION

The present research focuses on the positive output of changing behaviors, changing experiences, changing perceptions, getting closure from distractions, and becoming mature for discerning and expressing after two years of living in COVID-19. The estimated cross-sectional study indicates the trend of distraction in maintaining the learning focus of academic life. The academic difficulties, such as the ability to focus on the academic environment, associated with distractions, anxiety, burnout, and learning engagement, were not attributed to the students' learning distractions. The study also estimated the prevalence of students flourishing life stages which are academic variables, such as personal health, environment, and adaptation to new-normal life.

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