

Mental Health in Times of COVID-19

Erasmus University Rotterdam

Erasmus School of Social and Behavioural Sciences

MSc Engaging Public Issues

Supervisor: Dr. Willem Schinkel

Name: Renée Mötter

Student Number: 490708

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Abstract

Over the course of the COVID-19 pandemic, the concept of health has been continuously made public from many different perspectives in the Netherlands. Health has been conceptualised and articulated both as public and individual and both as physical and mental. This research focuses mainly on the mental health of young adults, and the ways in which this is addressed separately and in relation to each other by two opposing actors, namely the Dutch government and organisations representing young adults.

In this research, the theoretical framework explores relevant concepts by drawing on academic research on the notion of health and the essence of government communication in relation to COVID-19. A wide range of data was gathered for this research, including official transcripts from press conferences during the pandemic by the Dutch government, as well as publications on mental health from organisations that represent young adults. A discourse analysis ensured a largely contextual research process, where data was analysed against the theory as well as against the situational contexts of the pandemic.

This research found large differences in the ways that the Dutch government and civil society articulated mental health of young adults in the Netherlands during the pandemic. The accessibility of data already showcased a large power asymmetry in the agency possessed by both parties to publicize data. The conceptions of health also showed large differences, revealing prioritization of one interpretation of health over the other. The narrative used in the communication demonstrated not only differences for both parties, but also exposes underlying motivations of the communication practice. Lastly, young adults as a demographic group were unequally addressed and considered too, mainly as a consequence of the aforementioned factors. Hence, this research on the articulation of mental health among young adults in the Netherlands explores how the Dutch government is communicating with the intention to govern the society, whereas civil society is making public what is missing in this articulation of the issue.

Keywords: mental health, public health, young adults, government communication, civil society, COVID-19

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1. Introduction

1.1 Topic and focus

During the last two years, also due to the introduction and development of COVID-19, the public understanding of the notion of health has been actively (re)conceptualised in the articulation by many different actors in the Dutch society. Many organizations, institutions and individuals have been making the notion of health public according to their own perspectives, leading to a large variation of perceptions and opinions. The Dutch government was one of the most prominent actors to articulate their understanding of health during the pandemic. This is because they possess the necessary power to implement policies on a national scale, based on their own perception and perspective. These policies, meant to protect the public health, are based purely on knowledge produced by scientific research institutions, resulting in generalized rules and restrictions (Van Overbeke & Stadig, 2020). Another important actor consists of a collection of organizations that specifically represent young adults in the Netherlands (people aged approximately between 18 and 26), or in other words, civil society. These organisations are continuously interested and aware of the state of being of individuals in their own particular target group. In addition, they have direct agency to produce and distribute knowledge to a broader and more diverse audience than young adults as individuals do.

Moreover, from the beginning of the COVID-19 pandemic, extensive studies have been conducted on the topic of health and more specifically on mental health, in various contexts including young adults and teenagers. In essence, O'Sullivan et al. (2021) found that young adults form the demographic group that is least likely to become physically ill from COVID-19. Nevertheless, multiple studies suggest that young adults are mentally disproportionately affected by the measures implemented as a consequence of the coronavirus (Magson et al., 2020; O'Sullivan et al., 2021; Rahman et al., 2021). This is most importantly because young adults are supposed to be personally, socially and even professionally developing vastly at their age, which was now physically restricted (O'Sullivan et al., 2021). This means that young adults in the Netherlands are actually suffering profusely from the measures installed by the Dutch government with the intention to protect them from the virus. Because of the large health impacts for developing young adults, in this research, the main focus will lie on the articulation of the mental health of young adults in the Netherlands by the aforementioned actors, based on and guided by a theoretical base of relevant concepts.

Hence, this research is about the conceptualisation and articulation of mental health of young adults in the Netherlands in the public sphere, by the Dutch government and civil society. In order to investigate this, official transcripts from the press conferences by the Dutch government as well as articles, reports or other publications from organizations representing young adults and their wellbeing have been thoroughly analysed. These organizations are more specifically, Het Nederlands Jeugdinstituut (NJI), MIND young, het Trimbos-Instituut and Caring Universities (CU). In the gathered documents, information was found regarding the corona virus and the impact that the virus and its implications have or have had on the mental health of young adults, as communicated by the respective actors. More concretely, discourses as presented by the Dutch government and organisations that represent young adults suffering from mental illbeing have been analysed and applied to theoretical academic findings.

To ensure an effective and concrete investigation of these topics, the following research question and supporting sub questions have been formulated to lead this research:

How is the notion of mental health among young adults articulated, both by the Dutch government and organizations representing young adults, in communication about COVID-19?

- a. How does the Dutch government communicate the (importance of the) physical restrictions imposed on the population because of COVID-19?*
- b. How does the Dutch government address (the impacts of) their own policies on the mental health of the young adults in the Dutch population?*
- c. How do organizations representing or focusing on young adults in the Netherlands address the imposed regulations, in relation to the consequences for mental health?*

The main research question is designed to research how both the Dutch government and civil society address the physical restrictions and limitations in the imposed policies, in relation to the mental health of young adults in the Netherlands. The ways in which the Dutch government communicates these regulations largely reveals their true priorities, as the COVID-19 measurements are focused on physical health of the population, rather than any other type of population wellbeing (Van den Broek-Altburg & Atherly, 2021). Also, analysing the ways in which other organizations address the issues and focus on the mental

aspects too, will provide insights into the main differences or similarities in priorities of the government and civil society. The sub questions are essentially designed to build a basis to answer the main question. The comparison of communication by the Dutch government and civil society will thus provide new knowledge on mental health in relation to physical restrictions in times of COVID-19.

1.2 Public relevance

The notion of mental health of young adults in the Netherlands in relation to physical implications of the policies implemented by the Dutch government, is a topic that is still developing and made public in the Netherlands in various ways. This is particularly because the pandemic in which the issues surrounding physical and mental health arose, though less prevalingly present, is currently still existent. Therefore, the research is relevant to the Dutch society, as it investigates the ways in which mental health is articulated by different groups in the Netherlands. Essentially, mental health specifically as gained more awareness throughout the course of the pandemic (Van den Broek-Altenburg & Atherly, 2021).

Moreover, this research provides more insights into the ways in which young adults experience the physically imposed measures to prevent the spread of COVID-19, in relation to their mental wellbeing. This is because public knowledge provided by representative organisations will be analysed, which is based on perspectives of young adults, as the messages are published on their behalf. Hence, this research could provide the government with innovative insights on the ways in which their policies affect multiple aspects of young individuals' lives. Yet, at the same time, it could provide individual young adults as well as organisations that represent them with an increasingly nuanced understanding of the perhaps underlying motivations of the Dutch government to implement these restrictions in the first place.

Lastly, by analysing communication efforts from these two particular positions, this thesis creates more understanding amongst both the Dutch government and young adults in the Netherlands. The concept of mental health can also be studied in-depth by researching its place in existing discourses, which could be a beacon for the creation of more awareness surrounding the effects that physical restrictions can have on mental wellbeing of young adults.

1.3 Scientific relevance

This research provides a basis for further research. Since the pandemic still exists and the aftermath may proceed for an unknown period of time, new relevant data is created every day, meaning that this research topic could currently never be investigated to its full extent. Potential consequences to health either physical or mental that we don't realise now, can become public in weeks, months or years. Especially, long-term consequences of this pandemic cannot be predicted and will therefore be discovered and explored over time. This thesis can thus be a framework of information for future research on COVID-19, even in relation to mental health.

2. Theoretical Framework

In order to answer the research questions as presented before, this thesis contains a conceptual theoretical framework. To begin with, the notion of health is explored, first through the notion of public health, to be further expanded into physical health and mental health. Second, the concept of government position is explored with the topic of government communication, where after an elaboration is presented on trust in the government, as this is related to the level of compliance with rules and restrictions by citizens (Van den Broek-Altenburg & Atherly, 2021). This section especially provides a framework on the relation between government communication practices and the trust that citizens have in their government. This is of essence when analysing the way that the Dutch government chose to communicate about the virus and the way in which organizations representing young adults respond to this in their own articulations of mental health. Third, the perception of COVID-19 in the Netherlands is theorized and discussed, as this provides a framework upon which to analyse the discourses by government and civil society. This topic addresses the impacts that the COVID-19 crisis had on the Dutch society, as well as the way in which the government and civil society perceived and treated the virus. Last, this research includes theory on COVID-19 in relation to mental health, especially with the focus upon young adults. This is because the young adults form the demographic group least likely to be physically ill from the virus, yet most likely to be struggling mentally due to the government-implemented restrictions (Magson et al., 2020; O'Sullivan et al., 2021).

2.1 Public Health

Health is a concept that seems to be quite straightforward in its meaning. Nevertheless, Larson (1999) explains that health is actually an extremely complicated concept, as many professional and academic sources define it differently, depending on research purpose. It is also recognised by Arcaya et al. (2015) that health is a dynamic concept, whereof its understanding and societal importance change over time, because the notion of health varies amongst cultures, subcultures, social groups and even individuals. Mechanic (1972) also argues that an individual's ability to maintain or improve their own mental health, is dependent on the social situation in which they exist, and whether they live in a community with shared goals and values. Furthermore, the World Health Organization (2018) has published books on the conditions for a person's wellbeing, addressing the fact that both physical ability and mental stability are essential to function well within a society, resulting in a focus on public health rather than that of the individual. Suchman (1963) states that public health explains a community's desires to protect their members, meaning that societal transitions or development can thus affect the public health as existed before.

Hence, as argued by Larson (1999) and Mechanic (1994), public health is a concept not focused on the individual, but rather on the larger society. Essentially, public health concerns the governance of a population according to Larson (1999), resulting in the fact that generalized policies will be implemented in crises which are focused only on certain aspects of society with less or no regards for others. Evidently, public health is extremely important in research on how mental health and physical health potentially relate to each other and are understood and exist in the general health of the population. This is because the notion of public health is often, though comprising both, often focused on the physical aspects of health rather than on mental health, due to its visibility and regulatability (Mechanic, 1972).

According to Kruse et al. (2020), COVID-19 had developed into a global health disaster, where individuals would eventually be affected due to the social structures in which they existed, in relation to the crisis management strategies adopted by their governments both long-term and short-term. During the COVID-19 pandemic, as found by Dong & Bouey (2021), the implemented policies were initially intended and designed to protect individuals, but in reality, the policies were impactful cross-sectoral, where entire demographics, social classes or labour sectors were negatively affected. This also becomes

clear in the work by Schinkel (2021), who argues that the measures implemented in the Netherlands by the Dutch government during the pandemic were ultimately designed upon individual responsibility, thus ignoring the larger public wellbeing. Also, Schinkel (2021) argues, the herd immunity strategy as imposed by the Dutch government prioritized certain demographic groups over others resulting in long-term negative effects for the latter.

Public health is a dynamic concept and it is explanatory of as well as related to physical and mental health of society and the individual. In this thesis, public health is understood as the general wellbeing of a society, including its members. Physical health and mental health here are two concepts encompassed in and crucial to public health.

2.1.1 Physical Health

The concept of physical health has been explored extensively in relation to individual's general health and societal context in which they exist. Larson (1999) has conceptualized physical health, defining it as the essence of adopting an active lifestyle in terms of bodily wellbeing. Also, Aarts et al. (1997) stress the cruciality of active behaviour for personal wellbeing, though they place it in a more academic light with research the place of physical exercise within society.

Active behaviour by individuals is often mentioned in academic literature as the initial definition of physical health (Oakman et al., 2020). Hereafter, physical health is often connected to general individual health including both physique and mind, or even to the larger public health. In addition, Malm et al. (2019) found that the secondary effects of physical activity are often measured in terms of the health of individuals rather than groups or societies. In essence, Malm et al. (2019) argue that good personal physical health stands in relation to a better mental health, as physical activity stimulates mental wellbeing because of the opportunities to improve self-confidence and to maintain social relationships with other individuals. Furthermore, Oakman et al. (2020) state that physical health has previously been more often researched in studies about individuals' wellbeing than was mental health, indicating dominance of the physical aspect within the general definition of health. In support of this idea, Ács et al. (2020) mention that it is actually essential to research the effects of physical activity for individuals' health, also before further expanding or connecting it public health.

Physical health of individuals was largely compromised during the COVID-19 pandemic (Cheval et al., 2020). This was not only due to the virus itself, but also due to the implications that the government policies introduced. It was found by Maugeri et al. (2020) that the amount and degree of physical activity that individuals normally engaged in decreased drastically during the course of the pandemic due to imposed restrictions such as lockdowns, continuously working and living at home as a consequence. Also, Cheval et al. (2020) argue that the sedentary state of living as imposed upon individuals during the corona crisis, had detrimental impacts on the physical fitness and health of people. The studies by Cheval et al. (2020) and Maugeri et al. (2020) concluded that the decrease of the physical state of individuals was related to their worsening psychological state. This was confirmed by Violant-Holz et al. (2020), who found a direct relationship between physical restrictions, diminishing physical activity and physical health, and the psychological state of individuals. From this, it can be concluded that physical activity and the possibility to practice this, is not only crucial for individuals' physical health, but also for their mental health.

2.1.2 Mental Health

Mental health has been increasingly researched in relation to physical or general wellbeing. Also, the awareness surrounding mental health has noticeably expanded in the last years both in the academic field and in the Dutch society, as becomes clear from reports published by Trimbos Instituut, R.I.V.M., & GGD GHOR Nederland (2021). However, in comparison to physical health, mental health is a concept even harder to define and operationalise, since illnesses or deviations in health are not directly visible from one's appearance (Larson, 1999).

During the COVID-19 pandemic, many people were affected in their mental health, as the fear of the coronavirus itself, getting physically ill, and the uncertainty of the safety of close relations all lead to an increase in anxiety and depression (Tsamakis et al., 2021). Yet, it was not only the fear of the virus itself that had an effect on mental health, also the imposed restrictions were found to increase levels of stress for individuals, as suggested by Tsamakis et al. (2021). It was concluded by Dishman in 1995 that a person's mental health is dependent on their ability to practice an active lifestyle in their community, which was barely possible during the pandemic (Cindrich et al., 2021). Hence, the restrictive policies in

the Dutch society and the sedentary lifestyle as a consequence, had detrimental effects on people's mental wellbeing as a result of the physical limitations, as argued by Cheval et al. (2020).

To note, mental health does not only exist on an individual level. It was found by Kobau et al. (2011) that positive mental health can also be achieved through community and other social circumstances, so in the public sphere. It was recognised by Dong & Bouey (2020) that mental health and physical health are interrelated on a social and societal level. This means that mental health should ideally also be addressed and considered on a societal scale, as the government should bring it into the public sphere through their policies (Dong & Bouey, 2020). Therefore, also in order to not let mental health deteriorate at the expense of physical health in national policies, Dong & Bouey (2020) argue that mental healthcare should be treated with the same urgency and essence as is physical healthcare.

Nevertheless, the relationship between physical health and mental health was not considered in the policymaking by the Dutch government, during the COVID-19 pandemic in the Netherlands. This becomes clear from the fact that physical limitations on an individual level as well as on a societal level, were the most prominent measures taken and imposed throughout the pandemic (Schinkel, 2021). Therefore, this research focuses on the way in which the Dutch government conceptualised mental health, especially in relation to physical health, as to investigate the place of mental health in the public sphere, and to also explore its relation to public health.

2.2 Government Position

In order to create an understanding of the government communication by the Dutch government and compliance by citizens, it is relevant and important to research these concepts in relation to the (importance of) trust from citizens. The way in which governments can communicate to publics has vastly changed over time (van den Broek-Altenburg & Atherly, 2021; Lee, 2019). This has consequences for the extent in which individuals rely on government information, as well as for the trust that publics have in the government. Heise (1985) suggests that transparency and openness to feedback are absolutely crucial for government communication, as these concepts ensure the quality of the information. Additionally, Howlett (2009) recognizes that government communication of higher quality is considered more trust-worthy, and citizens feel more motivated or even

obliged to follow and abide to policies as a consequence.

2.2.1 Government information and citizen trust

Government communication has to comply with several requirements in order to be considered successful in terms of effectiveness and quality, and to lead to publics following and respecting implemented policies as a result (Heise, 1985). However, Lee (2019) found that individuals are becoming decreasingly reliant on information provision by the government, because new media has given people the limitless agency to obtain knowledge and to be informed on any possible subject at any possible time. This means that the opportunity for immediate discussions on, for example, social media is undermining the authority of the government, resulting in less citizen trust and compliance. Consequently, this also means that publics are less easily influenced by government communication as before (Lee, 2019). Hence, as Song & Lee (2015) argue, the increase of social media use has a remarkable impact on the relationship that publics experience with their governments, essentially because of the wide array of other perspectives that people are constantly exposed to (Song & Lee, 2015). Hence, the increased agency of individuals to publicize their personal opinions and gather information from inexhaustible sources, results in less trust in government information and communication, and even leads to more active opposition (Song & Lee, 2015).

According to Howlett (2009), government communication is often intended to influence the public and it even relies on the idea of community and nation for effective persuasion. Consequently, Howlett (2009) explains, trust that citizens have in governing entities decreases when information is poorly conveyed and does not include factual information, or more concretely, lacks justification of policy implementations. In addition, according to Fairbanks et al. (2007), the general level of trust in government implemented policies is easily negatively affected when people or groups of people experience discomfort. Also, Fairbanks et al. (2007) argue that even minor mistakes in general government could have long-term influence on citizens' perception of the ruling politics, with the government being considered a less credible and trustworthy source of information as a result.

During the pandemic, Van den Broek-Altenburg & Atherly (2021) have conducted a study of government communication effectiveness and citizen perception in the Netherlands. They found that people in the Netherlands were more unlikely to adhere to

implemented policies to protect family members throughout the COVID-19 crisis, than to protect themselves. This is relatable to the idea that the implemented policies were focused much more on the individual responsibility of Dutch citizens, than it was on collective agency (Schinkel, 2021). Van den Broek-Altenburg & Atherly (2021) also indicate people in the Netherlands did not actively or appropriately respond to government communication during the pandemic, and they even argue that the government communication strategy in the Netherlands has had negative impacts on the trust that citizens have in public institutions and public service. This is because the policies were largely generalized and not adjustable or applicable to individuals' needs, which raised scepticism and discontent (Van den Broek-Altenburg & Atherly, 2021).

2.3 COVID-19 in the Netherlands

As known on a global level, the coronavirus has had major consequences for every sector, discipline, society and individual. Nevertheless, policies largely differ between countries, provinces, regions and even individuals when they deviate from the considered norm (Van Overbeke & Stadig, 2020). In the Netherlands as well, COVID-19 has had consequences for every possible economic sector, societal institution and cultural discipline (Rijksoverheid, 2022). In their research, Kruse et al. (2020) have found that the implemented short-term strategies to prevent the spread of COVID-19 in the Netherlands were imposed at the expense of any long-term strategic possibilities. This means that direct action was often given priority over longitudinal strategies, neglecting the public health. One of these consequences of this decision mentioned by Kruse et al. (2020), was deterioration of mental health due to the lack of focus and attention. This is a result of the fact that COVID-19 evolved quickly into the 'corona crisis' in the Netherlands, where the implication of a 'crisis' indicated an immediate state of emergency and catastrophe, requiring instant collective response and action to overcome this (Kruse et al., 2020).

In the study by Antonides & Van Leeuwen (2020), an overview is provided of the measures installed by the Dutch government to prevent the spread of COVID-19. Here, they state that the perception of Dutch citizens of the implemented policies was damaged due to the slow pace in decision-making. Moreover, the initial strategy of the government was to create herd immunity, which was very poorly received in the Dutch society because it was generally badly understood (Antonides & Van Leeuwen, 2020; Schinkel, 2021). This relates to

information provision and trust as well, as the information conveyance was apparently lacking credibility, resulting in distrust and indifference. As a consequence, as explained by Antonides & Van Leeuwen (2020), the Dutch government installed the so-called intelligent lockdowns, with the intention to protect weaker members of society while still actively battling COVID-19. This strategy, or compromise, was appreciated more amongst citizens due to the increased level of independence and understanding. Nonetheless, new issues arose. It was found by Cindrich et al. (2021) that going outdoors is a necessity when talking about personal physical and mental health, which was now jeopardized, again. Also, societal disagreements emerged about individual (involuntary) testing for COVID-19, especially in the workplace and for other large or small gatherings (Antonides & Van Leeuwen, 2020). This shows that there were many aspects of the implemented policies around which disagreements developed, where citizens were discontent and not understanding the intentions and purposes of the new measures. This is related to, if not a result from, government information and citizen trust, and it will also have longitudinal consequences for mental health.

2.3.1 COVID-19 and mental health

A thorough understanding of the way in which COVID-19 was understood and made public by the Dutch government as well as by organizations representing young adults in the Netherlands allows for a strong comprehension of its relations to mental health. Previously discussed in the theoretical framework are public, physical and mental health and the (perception of the) corona virus including its implications. Health as a concept, as mentioned before, is extremely complex (Larson, 1999). Nevertheless, in the last two years, also partly due to the implications of COVID-19, mental health has increasingly been researched in academics in relation to both physical and public health (Oakman et al., 2020). Essentially, as written by Cindrich et al. (2021), it became clear that imposing physical restrictions on a society in order to eradicate a virus, has major consequences for the mental wellbeing of individuals. Found by Cindrich et al. (2021), was even a reciprocity in COVID-19 policies and individuals' health. Essentially, physical restrictions lead to a decline in mental health, and this decline led to people staying inside more often and stop exercising, again negatively affecting mental health. This indicates that the decline in mental health is an indirect consequence of various government policies. Given that this was never considered in the

measures implemented by the Dutch government, the public health in the Netherlands was compromised to large extents. This results in the fact that many people, especially young adults, are still and will long be struggling with symptoms of anxiety and even depression as a result of legal physical limitations.

Essentially, Rahman et al. (2021) found that the lockdown conditions and other physical restrictions that were imposed on societies, create immense barriers for people in their social life, resulting in a poor mental state and mental instability. Magson et al. (2020) even conducted a longitudinal study on the effects of physical government restrictions in relation to mental health of young adults especially, and they found that these restrictions are the main cause of deterioration of mental health, due to increased anxiety, distress and depression. Magson et al. (2020) therefore conclude that the physical restrictions were more harmful to young adults, than would the virus be to them. This means that although the physical restrictions were implemented nation-wide, young adults were arguably affected relatively worse than some, otherwise prioritized, demographical groups.

3. Methodology

This research will analyse the way in which the Dutch government as well as organizations representing young adults in the Netherlands conceptualize and treat the notion of mental health, in relation to implemented restrictions to prevent the physical spread of COVID-19. In order to answer the research questions central to this thesis, a critical discourse analysis was conducted, looking at the ways in which different actors communicate about mental health in times of COVID-19. Hodges et al. (2008) argue that critical discourse analysis in sociology is analysing text in context, but also about “the study of the ways in which the very existence of specific institutions and of roles for individuals to play are made possible by ways of thinking and speaking.” (p. 570).

As also discussed by Taylor (2013), discourse analysis allows researchers to analyse a situation according to the larger societal or cultural context in which this case exists. It is therefore especially suitable for research on how people or institutions communicate about certain topics or concepts. Hodges et al. (2008) mention that reading ‘between the lines’ is also a helpful approach to analyse how a concept is addressed and made public. According to Janks (1997), this means that concepts will be considered not as a word on its own, but

rather in relation to the sentences, the situation, the author and the time period.

3.1 Analysis

In order to conduct a critical discourse analysis, an analysis has been done with written, transcribed and otherwise published texts. This allows for an in-depth analysis of the data, because societal and cultural context will provide richer insights into the texts and thus also into the conceptualisation and treatment of the notion of mental health by the Dutch government and young adults in the Netherlands.

For this thesis, the critical discourse analysis that was conducted, is based on the approach as proposed by Fairclough (1989; 1995). This method considers three dimensions to the analysis, namely text analysis, processing analysis, social analysis (Janks, 1997). A more specific approach for Fairclough's textual analysis was proposed by Han (2015). Within the text analysis, lexicalization was investigated. This means that words were analysed in terms of connotation, emphasis and absence, resulting in an overview of what words were used with what intentions and how they fit into the sentences and paragraphs (Han, 2015). The processing analysis consisted of interpretation, where the findings of the textual analysis were used to review the discourses within the specific existing contexts (Janks, 1997). In essence, this refers to the intention with which the text was produced and in what way and by whom this was received. The last stage, the social analysis, concerns elaboration on both the processing analysis and the textual analysis. Within the social analysis, the intentions and (societal) positions of the authors or creators of the texts were analyzed and concluded (Janks, 1997). With these three stages of research, the critical discourse analysis was conducted and finalized. This led to a detailed conclusion and answer to the research question and sub questions.

Furthermore, the programme Atlas.ti was used to electronically give codes to the words, and to write notes and memos within the texts. This program provided a clear overview for the researcher, and it is very easy to add or remove thoughts and notes to the texts. In addition, Atlas.ti offers researchers the possibility to easily explore and discover similarities, differences or even connections between (parts of) texts, especially through creating codebooks and code webs. Hence, Atlas.ti possesses features with which the researcher can easily recognise and indicate potentially relevant patterns throughout the

data, which allows for a convenient way to investigate the data and come to relevant and pertinent conclusions.

3.2 Data

The data upon which this research is based, consists of two main sources. First, the official transcripts were analysed of the press conferences that were organized by the Dutch government during the pandemic, and that were intended to inform the Dutch society of new policies, intentions and regulations surrounding COVID-19. These texts were all found on the official government website (Rijksoverheid, 2022). Due to the large number of press conferences and transcripts by the pandemic lasting more than two years, there has been made a random selection of the data. To ensure consistency in relevance for this thesis, only transcripts were considered where both the prime minister as well as the minister of health were present, representative of new policies and available to answer journalists' questions. The transcripts consist both of press conferences introducing new policies, as well as intermediate updates and predictions. In total 19 transcripts from between March 6th 2020 to March 15th 2022 have been gathered and analysed.

Also, documents and published texts by organizations that represent or focus on the wellbeing of young adults were analysed. In essence, Het Nederlands Jeugdinstituut and Caring Universities have been collecting quantitative data and publishing findings on the mental well-being of youth during COVID-19. MIND young has also been collecting data, by actively asking for young adults to share their personal experiences, and sharing the results on their public accounts on social media platforms. Also, the RIVM (2021) and the Trimbos-Instituut (2021) have published statements including data throughout the entire pandemic, leading to insights into potential changes in mental health amongst young adults on a more scientific level. In total, 19 publications were gathered and analysed in this thesis.

4. Results

4.1 Accessibility of data

For this thesis, documents were gathered from various sources that are relevant to the research questions, as stated before. In the process of data gathering, it already became clear that there was a remarkable difference in the access to the data from the different

institutions. Documents from the Dutch government were quite easily findable and accessible, through the official government website. For this thesis, only transcripts from press conferences were selected, which were on average around 15 to 20 pages. It did take more effort to filter the relevant data through the number of sources that were displayed, as all press conferences together with other forms of documents were published under the topic of “corona”. However, once a relevant selection of sources was made, it was uncomplicated to randomly select the documents for this thesis considering government communication. In contrast, finding sources of communication about mental health in COVID-19 from organisations representing young adults proved more challenging. Four institutions were selected based on relevance to the target demographic and the active aim of the organisation. Documents were not limited to one type, as this would not reach a satisfactory data set. Thus, the sources gathered from the organisations exist of, among others, scientific articles, media posts, transcripts of videos and published columns. More effort was needed to access these documents, as transcripts had to be made of the videos and media posts were actively searched from with a research perspective. Also, scientific articles are generally not accessible for or even aimed at all demographics. The sources that were found were ranging from half a page to around 30 pages, depending on the source and the aim of the text. Hence, a clear difference was found between the findability and accessibility of documents on mental health of young adults.

Given the differences in findability and accessibility of published documents on mental health of young adults, it can be concluded that the Dutch government has more agency in making this issue public, especially to a broader audience, as their press conferences are broadcasted nationally and transcripts are published officially as well. Organisations representing young adults have more considerations to make, when making issues public, as they would have to make more effort to reach large audiences and speak and appeal to their target demographics. This indicates that, or can be attributed to the power asymmetry between the government and civil society.

4.2 Conceptions of health

The power asymmetry between the government and civil society does not only exist in the ability to publicly address issues, but also translates into differences in the ways that health is conceptualised and operationalised. The government has a strong focus on public

health in their communication, where individuals are addressed with the urgent necessity to adhere to policies and restrictions to prevent the spread of COVID-19. Their communication is intended to regulate individuals in their physical activities, in order to maintain and protect public health. One quote that especially illustrates this, is

And if you gather with a lot of people in your home and risk infection with COVID-19, that has enormous impacts on our public health, and also health of people you receive at home. You take grand risks.¹

This sentence accurately showcases that the government strategizes to justify their generalized policies grounded in physical restrictions based on individuated responsibilities, with the idea to protect public health. In other words, the government has the power to impose individuals with a sense of duty to society through established individual responsibility to follow policies and temporal measures, by actively calling upon the individual accountability disguised as a collective endeavour to protect general public health. Hence, public health is considered here as regulatable through the health of individuals. This strategy is contrasting to sociological academic literature by Schinkel (2021), who argues that the invocation of individual responsibility was actually ignorant of the Dutch public health. This is because the generalised policies proved to prioritize and privilege certain demographics and other societal groups over others.

Individual health of the individual is more prominent in the communication by civil society. Here, health is addressed often in terms of personal wellbeing, referring both to physical and mental health. Public health is never mentioned by organisations representing young adults with the same importance or urgency that the Dutch government uses. In individual health, however, civil society often addresses the social contexts in which individuals find themselves, as they recognise that this is of essence to one's personal wellbeing. For example, the Nederlands Jeugdinstituut (2021) writes:

Because of the fact that mental issues of children and young adults are often considered and treated as individual health problems, they will implicitly receive the

¹ *En dat als jij achter de voordeur met te veel mensen bij elkaar komt en het risico loopt op besmetting, dat dat natuurlijk enorme effecten heeft op de volksgezondheid, ook van de mensen die je dan thuis ontvangt. Je neemt grote risico's.*

message that they are not OK. The societal emphasis lies on the pursuit of happiness, the idea that unhappiness is unacceptable or should not be visible...²

This quote showcases that mental health is often considered invisible and therefore, issues with psychological wellbeing is considered abnormal in dominant discourses. Organisations representing young adults however recognise that the issues are embedded in society and are harmful implicitly yet directly. Hence, civil society conceptualises what is missing in the government discourse and what ought to be made public. Therefore, they articulate health more as personal with a larger focus on the mind, especially of more vulnerable generations such as young adults.

4.2.2. Physical and mental health

Besides the conceptualisation of health either public or individual, there are also differences between conceptualisations of health, either physical and mental. The government, as previously mentioned, has a large focus upon physical health of individuals, resulting in physical restrictions in order to protect public health. This reflects academic findings by Oakman et al. (2021) and Malm et al. (2019) that physical health is often seen as the main priority for individuals and society. Nevertheless, the priority that is given to physical health in government communication has consequences for the way in which mental health is conveyed as well. Noticeable is that the government has barely addressed psychological wellbeing of young adults, or any other generational group, on their own initiative, and if they did, it was always discussed by the government in the context of the virus and the physical restrictions. More often, mental health was addressed when a journalist asked a question and government representatives were obliged to answer. In one press conference, it was noted

that loneliness, the psychological pressure that so many people feel, the increasing tensions in many families: that too are dreadful consequences of corona that we must keep seeing and considering. [...] Today we bring to you new, strict measures.

Factually, we are going partly into a lockdown. To contain the virus again, the number

² Door mentale klachten van kinderen en jongeren vooral als individuele geestelijke gezondheidsproblemen op te vatten en te behandelen, krijgen zij impliciet de boodschap dat zij niet oké zijn. De maatschappelijke nadruk op het najagen van geluk, het gevoel dat je niet ongelukkig mag zijn of dat ongeluk minder zichtbaar hoort te zijn...

of social contacts and travel movements must decrease steadily. It is a harsh message, but it is the only way.³

This quote shows that the government addresses mental health, but merely even that. It is clearly not treated with any urgency or importance, and mental wellbeing is seen as an afterthought to physical health. It is said that mental illbeing is a “dreadful consequences of corona”, instead of giving recognition for the role that the government policies occupies in this matter. Moreover, this quote includes an emotional mention of mental health issues, but the immediately conversion to new measures completely undermines any form of sincerity or credibility, and physical health is implicitly prioritized. It is even stated that these restrictions are the only way to navigate the pandemic. The approach by the government in articulating mental health here, is controversial to literature on mental health that states that mental health is directly and indirectly related to physical activity and can be achieved both on individual and collective levels (Kobau et al., 2011; Tsamakidis et al., 2021).

Nevertheless, physical health is given priority over mental health, since the virus is seen as the enemy that needs to be battled. Also, vaccination to the virus, a controversial topic in the Dutch society, is presented as a solution to negative effects of COVID-19. When a journalist asked about consequences for the mental health of students, a representative of the government said:

Well, I think that those young adults will actually choose to be vaccinated. So I don't worry about that the most. [...] Psychologists are looking to help them, and we cannot prevent all the harm with that, but it will just have to wear out the coming time.⁴

The essence of this quote is in line with literature by Mechanic (1972) that states that public health intrinsically concerns the act of governing a population rather than guiding it. In other

³ *Die eenzaamheid, de psychische druk die veel mensen voelen, de oplopende spanningen in veel gezinnen: ook dat zijn de ontwrichtende gevolgen van corona en die moeten we blijven zien en die moeten we blijven meewegen. [...] We komen vandaag met nieuwe en stevige maatregelen. Feitelijk gaan we naar een gedeeltelijke lockdown. Om het virus er weer onder te krijgen, moet het aantal sociale contacten en reisbewegingen drastisch verminderen. Dat is een harde boodschap en de maatregelen gaan ook pijn doen, maar het is de enige manier.*

⁴ *Nou, ik denk dat die jongeren weldegelijk zullen kiezen voor vaccinatie. Dus daar maak ik me niet het meeste zorgen over. Wat de psychiatrie volop doet is kijken hoe ze daarbij kunnen helpen en ja daarmee kunnen we natuurlijk niet alle schade voorkomen, daar moeten we ook gewoon eerlijk in zijn en een deel zal ook gewoon moeten slijten de komende tijd.*

words, claiming public health as final goal means to justify the practice to physically restrict an entire society.

Organizations representing young adults do recognize more that mental health is indeed related to physical activity and ability, as is also known in academic literature (Cindrich et al., 2021; Dishman, 1995). Civil society addresses the impact of the COVID-19 measures that were imposed on society by the government, on mental wellbeing of individuals rather than the dangers of the virus itself. They advocate for social contact and use physical activity as a means to maintain a good mental health. Moreover, civil society recognizes clearly that mental health is also of essence to an individual's personal wellbeing. To add, organizations representing young adults are focused on social context in which young adults could find themselves, that potentially reinforce mental health issues when in a public health crisis. In essence, organizations such as MIND Young and Het Nederlands Jeugdinstituut (NJI) consider other factors that might contribute to poor mental health. This includes education with the correlating pressure to achieve and succeed, but also social-economical situations resulting in financial depth of their family or even poverty leading to stress within their household. Then, the lack of activity is also mentioned as a cause for mental illbeing, because being less active leads to an unhealthier body, potentially resulting in dissatisfaction and in the worst case this could even be a trigger for depression. Hence, civil society articulates mental health as a crucial aspect to personal health and stress the relationship to physical health, as well as the social environments people exist within. The Nederlands Jeugdinstituut (2021) states:

The forced isolation makes it more difficult to compensate for insecurities or negative feelings through trusted social contacts and activities at school, [or other social contexts].⁵

This quote illustrates the articulation of civil society of mental health in relation to the COVID-19 restrictions. The "forced isolation" is a strong-worded reference to the policies and its consequences. Just as argued by Dishman (1995), physical activity is essential for a person's general health, and civil society recognizes that this is missing. Organizations

⁵ *Het gedwongen fysieke isolement maakt het moeilijker om onzekerheid of negatieve gevoelens te compenseren via vertrouwde sociale contacten en activiteiten op school, buitenschoolse opvang, buurt- of clubhuis, sportschool, in bijbaantjes of in het uitgaans- of verenigingsleven.*

representing young adults continuously address this as well, in their endeavors to make mental health public in times of COVID-19. The social context is also clearly visible in this fragment, as a compensation is said to be normally needed for negative feelings in regular daily life, and the new policies prevent this. Hence, this quote exhibits how the NJI makes public what they believe to be missing in government communication.

4.3 Narrative

The way in which the Dutch government and civil society make mental health of young adults in the pandemic public, shares similarities considering the narrative. The Dutch government is very concerned with encouraging people to adhere to the implemented policies, and tries to achieve this by invoking people's emotions and compassion. For example, a representative of the government states during a press conference:

I think that many people have had the same experience as I had the last couple of weeks. How the coronavirus could suddenly come so close and that you think: this is what we are talking about. Stories of people close to you who are very sick due to corona, other people in your surroundings who are scared to receive a phone call that their heart- or cancer surgery is postponed.⁶

This quote illustrates that the Dutch government has adopted a strategic communication approach including feelings of community and unison. Referring to personal experience appears relatable and recognisable. However, this soon turns into a reference to COVID-19, and how scary it is if encountered. Also, words such as "suddenly" indicate a virus as if it emerged unexpectedly, suggesting a state of crisis and panic (Kruse et al., 2020). Mentioned illnesses besides COVID-19 is also a strategy based on emotion and family. This strategy is contrasting to what academic literature says about trustworthy government communication, which should be objective and transparency (Heise, 1995). Nevertheless, Howlett (2009) argues that government communication is often persuasive and relies on a community narrative, which this is extremely exemplary of. Hence, considering these theories, this communication cannot be considered trustworthy, though it can be considered effectively persuasive.

⁶ *Ik denk dat veel mensen de laatste weken dezelfde type ervaring hebben gehad als ikzelf. Hoe het coronavirus plotseling heel dichtbij kan komen en je ineens denkt: hier hebben we het dus over. Verhalen van mensen in de vriendenkring die heel ziek zijn van corona, andere mensen in je omgeving die bang zijn voor het telefoontje dat hun hartoperatie of kankeroperatie moet worden uitgesteld.*

The narrative in texts published by organisations representing young adults is focused a lot on personal experience. When addressing mental health in times of COVID-19, organisations representing young adults often rely on the voice of actual young adults to share their feelings and experiences, likely to appeal to their target group and to create relatable content.

Also, I intend to, for the idea, dress well every day, to do my hair and wear some perfume. Yet there are days that I have trouble getting up, and sit at the table in front of my bed in my pyjamas to open my laptop.⁷ (MIND Young, 2021).

This quote exemplifies the personal approach adopted by civil society. The first-person narrative reinforces the emotional message, and the illustration of the daily-life activities create relatable content. As mentioned previously, civil society also blames government installed restrictions as the cause of deteriorating mental health, which this quote illustrates with its reference to the lockdowns and negative effects. This indicates that civil society makes use of the fact that trust in the government and public institutions has decreased during the pandemic, as written by Van Overbeke & Stadig (2020). By drawing on personal experience, civil society showcases ‘real’ consequences of government policies, rather than potential scenarios that form the foundation for government communication.

4.4 Young adults

In their communication practices to make mental health in times of COVID-19 public, the Dutch government and civil society had different strategies in view of addressing young adults. The Dutch government has barely addressed young adults in their communication, besides urging them to adhere to policies. The government has applied tactics with appeal to community, as mentioned before, to their communication towards young adults, to indirectly promote adherence to measures. More often, however, the Dutch government addresses the Dutch population in its entirety, especially when talking about public health. They deem it essential that everyone complies to the policies in order to protect each other against the virus. No explicit considerations were made concerning mental health young

⁷ *Ook neem ik me voor om, voor het idee, me iedere dag goed aan te kleden, mijn haar te doen en een luchtje op te spuiten. Toch zijn er veel dagen dat ik na moeizaam op te zijn gestaan, in mijn pyjama een onverzorgde stap doe naar de tafel voor mijn bed en mijn laptop openklap.*

adults in particular, even though academic studies suggest that physical restrictions had detrimental effects especially on this demographic (Magson et al., 2020). Even when universities and schools were reopening, the main reason posed was the prevention of potential study delays instead of health.

These solutions, these perspectives are essential. Because we all want to go back to a life with color: going to concerts, in the stands at sports games, or out to dinner. [...] And we can all help to make that possible. And we do that by adhering to measures, and we see that that works.⁸

This quote showcases that the government uses recognition to indicate that they too want to return to life as normal, yet they relate this immediately to the collective necessity and individual duty to adhere to restrictions to prevent the spread of COVID-19. Also, the government describes the ideal situation as a strategy of persuasion, which is in line with theory by Howlett (2009) stating that persuasion is a main tactic in communication with the intention to govern societies. However, it is in contrast to theories on trustworthy government communication by Heise (1995) highlighting objectivity and transparency. The persuasive language here showcases clearly that health of young adults, especially mental health, is used as an incentive or as a reward in the promise to lift the regulations if measures are respected and complied to.

Civil society has often addressed young adults directly in their communication. Not only were organizations actually representing young adults in making mental issues public, they also addressed young adults while speaking about the pandemic, and providing them with a platform to pose their concerns and speak about their experiences. Also, civil society often considered other social or societal contexts negatively affecting the mental wellbeing of young adults, to which the pandemic contributed.

These young adults stated as origins of their complaints, for example, uncertainty about the end of the crisis, insecurity about their job or home, added pressure at work or relatively few social contacts.⁹ (NJI, 2021).

⁸ *Die oplossingen, die vooruitzichten, dat perspectief is hard nodig. Want we willen allemaal terug naar een leven met meer kleur: naar een concert, op de tribune of uit eten. [...] En we kunnen allemaal helpen om dat mogelijk te maken. En we doen dat nu door ons aan de maatregelen te houden, en we zien dat dat werkt.*

⁹ *Deze jongeren en jongvolwassenen gaven als oorzaken van hun klachten bijvoorbeeld moedeloosheid over het einde van de crisis, onzekerheid over baan of huis, extra werkdruk en relatief weinig sociaal contact.*

This quote exemplifies how social contexts are indeed considered and the situation surrounding COVID-19 is also evaluated in their articulation of the issue. It is not just the virus that is posed as a problem, but the fear, anxiety and nescience embedded in this unfamiliar and insecure circumstances consequential to this pandemic are also explained. This shows that civil society is aware of the fact that young adults are struggling with more than imposed regulations. The pandemic is an added factor to their developing minds and therefore, their mental health should receive attention and should be made public. This is in line with the theory by Rahman et (2021) who found that the lockdowns and other physical restriction were only an added factor of anxiety, not the sole reason. The negative effect for mental health were thus reinforced, rather than created. Also, civil society articulates mental health as existent in contexts, which was also found by Magson et al. (2020) in their study revealing that physical restrictions are a leading yet not exclusive cause of deterioration of mental health. Hence, government policies, as found by organisations representing young adults, should have been more inclusive and more considerate of social contexts rather than generalized with the intention to protect vulnerable generations' physical health.

5. Conclusion

This research was built around the investigation of how the notion of mental health among young adults was articulated, both by the Dutch government and organizations representing young adults, in their communication about COVID-19. Throughout this thesis, maximal efforts were made to provide a comprehensive overview of the research process and the formulation of the answers to this matter. During the research process, however, some investigative limitations came to light. First of all, since the pandemic is currently still existent and will be for long, the research was not and could not be done to the full extent considering long-term consequences. Therefore, it is suggested that mental health in times of COVID-19 should be extended to times after COVID-19 as well, in further academic research. Another limitation in this research was the scale upon which it was conducted. Due to the time frame, it was impossible to conduct an extensive enough research to do justice to this crucial and both academically and societally relevant topic. In future research, this topic should be investigated more in-depth through a longitudinal research approach, and it

should be done more extensively too, by obtaining larger data sets and researching broader target groups.

In order to provide a conclusion to this research as concrete as possible, the theoretical framework acted as a guideline for the analysis, used as a thread throughout the thesis to ensure consistency and clarity. Accordingly, the theory was a concrete base for the results, as previous academic work was explored and applied to conceptualise all necessary phenomena to this research. The analysis of the results was done with a critical discourse approach, allowing for a contextual and insightful evaluation of the research outcomes. Hence, theory and results reviewed in the analysis provide answers to the sub questions and main research question in a logical order.

The first research aim was to investigate how the Dutch government communicates the (importance of the) physical restrictions imposed on the population because of COVID-19. It was found in the analysis that the Dutch government uses the notion of community and other emotional appeals in order to communicate about the importance of physical restrictions imposed on the Dutch population because of COVID-19. They mention the impact of their own policies when they address the urgency of adherence to policies, especially when mentioning the potential that the physical restrictions have in preventing the spread of the coronavirus. This is in line with the theory presented before, that explains that government communication is essentially built on persuasive strategies consisting of the feeling of unity and emotion.

The second research objective involves investigating the way in which the Dutch government address (the impacts of) their own policies on the mental health of the young adults in the Dutch population. However, in this research it became clear that the impacts of the policies were barely addressed in negative contexts, especially mental consequences. It was shown that consequences were solely addressed when mentioning the effects on the number of COVID-19 infections in the Dutch population. Furthermore, the policies were always framed as essential and presented as the only possible solution to battle the coronavirus in the Netherlands.

The last sub aim concerned the way in which the other perspective was publicized, with the question on how organizations representing or focusing on young adults in the Netherlands address the imposed regulations, in relation to the consequences for mental health. This research showed that civil society was more concerned with the individual and

personal experience, rather than statistics and theories. Organizations often recognized the COVID-19 policies, instead of the virus itself, as threatening to one's mental as well as physical health. Also, contexts in which young adults exist were continuously considered when mental health was articulated, contrasting the generalized perspectives as presented by the government.

To address and to conclude the main research objective, it is important to note that the Dutch government and organizations representing young adults present contrasting strategies in articulating mental health of young adults in times of COVID-19. The Dutch government invokes the notion of public health to justify their prioritization of physical health over mental health. Their generalized policies result from the aim to protect public health, which is communicated by essentializing physical health of the population. Hence, in their perception, public health generally assumes one particular kind of health when translated into individual health, namely physical health. Organizations that represent young adults, however, are more focused on individual wellbeing both in physical and mental state. They also explicitly address the policies comprising physical regulations installed by the Dutch government as harmful to mental wellbeing, instead of COVID-19 in itself. From this, it can be concluded that the Dutch government is communicating with the intention to govern the society, whereas civil society is making public what is missing in this articulation of the issue.

6. Literature

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7. Appendix A – Data

GOVERNMENT COMMUNICATION

DATE	Link
March 23 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/03/23/persconferentie-minister-president-rutte-ministers-grapperhaus-de-jonge-en-van-rijn-over-aangescherpte-maatregelen-coronavirus
April 29 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/04/29/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-na-crisisberaad-kabinet-van-29-4-2020
May 27 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/05/27/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-na-afloop-van-crisisberaad-kabinet
June 24 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/06/24/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-na-afloop-van-crisisberaad-kabinet-24-6-2020
August 6 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/08/06/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-6-8-2020
September 1 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/09/01/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-1-9-2020

September 18 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/09/18/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-18-9-2020
October 13 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/10/13/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-13-10-2020
November 17 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/11/17/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-17-november-2020
December 8 2020	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2020/12/08/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-8-december-2020
February 2 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/02/02/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-2-februari-2021
March 23 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/03/23/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-23-maart-2021
May 11 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/05/11/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-11-mei-2021

June 18 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/06/18/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-18-juni-2021
July 12 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/07/12/letterlijke-tekst-persmoment-minister-president-rutte-en-minister-de-jonge-12-juli-2021
August 13 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/08/13/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-13-augustus-2021
November 2 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/11/02/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-2-november-2021
December 14 2021	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2021/12/14/letterlijke-tekst-persconferentie-coronavirus-minister-president-rutte-en-minister-de-jonge-14-december-2021
March 15 2022	https://www.rijksoverheid.nl/onderwerpen/coronavirus-covid-19/documenten/mediateksten/2022/03/15/letterlijke-tekst-persmoment-coronamaatregelen-minister-kuipers

COMMUNICATION BY CIVIL SOCIETY

ORGANISATION	TITLE	Link (if applicable)
MIND Young	Valerie: 'Honger naar de aanwezigheid van huden'	https://mindyoung.nl/blog/valerie-honger-naar-de-aanwezigheid-van-huiden-1
	Koningin Máxima bij start Week van de Prestatiedruk, over studeren en stress in coronatijd	https://www.youtube.com/watch?v=0b8uy77dpnQ
	Week van de Prestatiedruk - Dag 3	https://www.youtube.com/watch?v=bxEVFaFhMak
	Eenzaamheid is een groot probleem Do's and Don'ts #1 MYS	https://www.youtube.com/watch?v=ClrwFWaSEpA
Nederlands Jeugdinstituut	Effect van corona op jeugd, gezin en jeugdveld (<i>download</i>)	
	Naar gezamenlijke veerkracht en kansen voor iedereen (<i>download</i>)	
	Werken aan de gezamenlijke gezondheid van jongeren (<i>download</i>)	
	Lockdown vormt risico voor jongeren en kinderen	https://www.nji.nl/nieuws/lockdown-vormt-risico-voor-kinderen-en-jongeren
	KidsRights: Jeugd geen prioriteit in coronabeleid	https://www.nji.nl/nieuws/kidsrights-jeugd-geen-prioriteit-in-coronabeleid
	Jongeren willen meer gehoord worden	https://www.nji.nl/nieuws/jongeren-willen-meer-gehoord-worden

	Kabinet presenteert herstelpakket voor jongeren	https://www.nji.nl/nieuws/kabinet-presenteert-herstelagenda-voor-jongeren
	Psychische klachten student in corona	https://www.nji.nl/nieuws/psychische-klachten-student-tijdens-corona
	Jeugd ongezonder dan begin pandemie	https://www.nji.nl/nieuws/jeugd-ongezonder-tijdens-begin-pandemie
	Corona treft vooral jongvolwassenen mentaal	https://www.nji.nl/nieuws/corona-treft-vooral-jongvolwassene-mentaal
Caring Univeristies	De geestelijke gezondheid van studenten tijdens de COVID-19 pandemie (<i>download</i>)	
	De geestelijke gezondheid van studenten tijdens de COVID-19 pandemie II (<i>download</i>)	
	De geestelijke gezondheid van studenten tijdens de COVID-19 pandemie III (<i>download</i>)	
Trimbos-Instituut	Mentaal gezond door de coronacrisis door: zeven adviezen	https://www.trimbos.nl/kennis/corona/mentaal-gezond-door-de-crisis/
	Voortdurende coronacrisis leidt tot toename psychische klachten en behoefte aan perspectief	https://www.trimbos.nl/actueel/nieuws/voortdurende-coronacrisis-leidt-tot-toename-psychische-klachten-en-behoefte-aan-perspectief/