The Health Risk Behaviors Experienced by traditional University Students during the Implementation of Restrictive Measures of COVID-19 in Zimbabwe

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Abstracts: Globally, academic zeal had been put on hold by the outbreak of COVID-19 pandemic. The coronavirus lockdown which lead to the closure of all learning institutions in Zimbabwe has caused traditional university students to indulge in health risk behaviours. The research findings revealed that some of the health risk behaviour have short term or long term effects. The lockdown led university students to sexual abuse, alcohol abuse, reluctant at home, social media addiction, drug abuse, excessive sleeping and eating habits. These health risk behaviour causes physical and psychological effects to traditional university students. This study is conducted with an aim of exploring the health risk behaviours experienced by traditional university students during the implementation of COVID-19 restrictive measures in Matabeleland Province. The phenomenological research design was used to study individuals in their natural setting and the population in the study was traditional students from National University of Science (NUST) and Technology, Zimbabwe Open University (ZOU) and Lupane State University of Matabeleland region. The convenience and purposive sampling was used to select the participants and data was analyzed using thematic content analysis. Data was collected through an open ended interview question on social media platforms. The COVID-19 lockdown have caused more harm to traditional university students as they were cornered to behave in unexpected behaviours which threatens their future.

Keywords: Traditional students, risk behaviour, health, COVID-19, lockdown

INTRODUCTION

The world is rightly focusing on measures to mitigate the transmission and find remedies of the novel coronavirus (COVID-19) pandemic. Worldwide, the pandemic has halted the academic appetite of traditional university students due to the restrictive measures which were recommended by the World Health Organisation (WHO) (2020b). The uncertainty of the novel coronavirus had cornered traditional university students to indulge in behaviours that can threaten their well-being.

The university life can result in stressful events and can lead to the acquisition of behaviour patterns that can cause negative aspects in life span. Knowledge is acquired at the university but that learning environment is a source of health risk behaviour to students. According to Oliveira et al., (2018) student’s health is a current issue that needs to be understood based on the interaction between the academic demands, the social, economic and personal factors of university students. Traditional university students are associated with alcohol and drug abuse, risk sexual experimental behaviours, oversleeping and overeating.

This study focuses on exploring the health risk behaviours which emanated as a result of sudden cessation of learning activities due to COVID-19 restrictive measures of social distance, travel restrictions, closure of all gatherings such as churches, pubs, learning institutions and closure of informal trading. The COVID-19 lockdown measures provide with the most hostile environment to the general populace and university students are not spared.

BACKGROUND OF THE STUDY

University life occurs during the transition period from adolescence to adulthood and it is mainly associated with taking experiments and is associated with changes in behavior, including risk behaviors (Boyd, McCabe, & Morales, 2005 in Ahmed, Abu-Ras, & Arfken, 2014). According to Cooper (2002) sexual experience during university life tend to be sporadic, furtive and poorly managed. Worldwide, health risky behaviours contribute to the leading causes of death and disability among adults and youths, and also contribute to academically and social problems (Centers for Disease Control and Prevention, 2009).
During the university life, students need to be worried of risky behaviour which can drive them into health problems. High risk behaviours includes smoking of cigarettes, indulging with unprotected sex and drinking of alcohol. In countries like South Africa these risk behaviors of smoking and drinking have been linked to road accidents, and homicides as well as depression, low self-esteem, or poor general health among the adult population (Fernander et al., 2006).

The ongoing coronavirus pandemic, has put the globe in the midst of an unprecedented crisis. The coronavirus pandemic has affected all walks of life and fear is dominant since the novel coronavirus is believed to be levelers. The disruption of university programs has marred the future and hope of traditional students, this has caused some erratic behaviours which threaten their life. Although the COVID-19 has short and long term impact, some of the notable behaviours had already been noted among the university students. Fenway Health Institution (2020) explains that the epidemic has been called the “coronavirus” in the lay press, since this new virus belongs to that virus family, but the scientific name for the virus is SARS-CoV-2. The disease that the virus causes has been named “coronavirus disease 2019” (abbreviated “COVID-19”). SARS-CoV-2, was first discovered in December 2019 around Wuhan, Hubei, China and is accelerating with an unexpected speed to all parts of the world. As of writing, COVID-19 (SARS-COV-2) is believed to have infected over 7 million people globally and the updates of the disease is being arrayed daily which could cause panic and fear (World Health Organization, 2020). The entire world was placed on lockdown as a way to mitigate the spread the coronavirus (Dzingirai, Musiringofa and Maunganidze, 2020). The coronavirus has put everything into a halt such as social restriction and national transport links, market or business transaction, school and organization activities, and all related social and religious gathering. Therefore, school closure has caused students to engage in health risk behaviours.

There is no universal definition of health risk behaviours since it can vary across culture. Health-risk behaviors can be defined as any activity undertaken by person with a frequency or intensity that increases risk of disease or injury (Oraby, Abdelsalam and Ali, 2016). Health risk conditions may be increased by inequalities, which are intensified in socioeconomically weak environments. Noll et al., (2020) refer health risk behaviours as any responses which negatively affect health, such as substance use, unsafe sexual behavior for example in regard to condom use and number of sexual partners, eating disorders, and antisocial, violent, or suicidal behaviors, among others. The risk behaviours had a dust influence to individual cognitions, emotions, and the overall quality of life. Oraby, Abdelsalam, Ali (2016) university students are at high risk of health-risky behaviors that could lead to serious physical complications, social dysfunction, and psychological disturbances which require different treatment approaches. Traditional students are a category of university students who enroll directly from high school and are less than 25 years old. Behaviours such as risk sexual behaviours, smoking cigarettes, abusing alcohol substances and illicit drugs mainly associated by traditional university students. Adolescence traditional university students are more vulnerable to these health risks behaviour due their level of development. Peer influence and experiments cause the traditional students to engage in unhealthy behaviours.

Baltazar et al., (2013) explain that traditional university students once in their dormitories they form their own identity, becoming independent, establishing intimate friendships and relationships, and eventually starting a career and even a family. During this time, they can experience difficulties adjusting to these changes and would end up engaging in behavioral choices that are dangerous and even life destroying. According to WHO (2020) adolescents consider risk-taking as normal. However, some risks such as excessive alcohol consumption and sexual promiscuity can lead to social problems, severe health risks and even death. These behaviours can also have a negative consequences to the family and the university community. Therefore the health risk behaviours can also jeopardise the safety of other students. Pettay (2008) stresses that college student do not only faces academic challenges, but also encounter challenges of maintaining healthy behaviors. University students face an array of challenges that affect health, including diet behaviors, alcohol-use, stress, sleep issues, weight gain, and changes in exercise behavior.

Research has also found that health risk behaviours are interweaving which can lead to physical abuse, sexual abuse, and rape which exposes students to HIV transmission (Cunningham, Stiffman, Dore, & Earls 1994). Adolescents and young adults constitutes most traditional university students. International it is believed that there are about 1.8 billion adolescents who are school going age. According to Buhi, Marhefka, and Hoban (2010) most university students shun to use condoms when having an act of sexual activities and this put them at risk. The prevalence of health risk behaviours vary according to the type of the behaviour. For instance the South Africa Demographic and Health Survey of 2016 showed that 20.9% and 49.3% of women and men, respectively, who are aged 15–24 years drank alcohol 12 months prior to the survey while 6% of women and 30% men smoke cigarettes daily (StatSA, 2017). A report by the World Health Organization (WHO) indicated that worldwide, South Africa is ranked number one on alcohol consumption (Parry, 2005; Rehm et al., 2003). However, there are different factors causes high risk behaviors among the university students which includes individual
demographic characteristics, socioeconomic status of households, parental involvement and attitudes toward alcohol drinking, self-rated physical health and mental health status (Ajao, et al., 2018). People in Matebeland tend to take the South African lifestyle which includes the dressing, kind of food, the behavior of consuming beer and even the culture.

The study concentrated on the three state universities in Matabeleland campuses which are National University of Science and Technology (NUST), Lupane State University and Zimbabwe Open University (ZOU). According to Dzingirayi, Musiringofa and Maunganidze, (2020) Matabeleland is a drought prone area and most people rely on informal trading. Therefore, the coronavirus lockdown had threatened the livelihoods of people in Matabeleland. University students in the region were not spared, the closure of all schools as a way of mitigating the spread of the pandemic had caused them to indulge in all sort of behaviours. This means that the lockdown has forced individuals to behave differently as they were spending more time indoors. This study intends to explore the health risk behaviours experienced by traditional students during the lockdown. The recommendations of this study would help the traditional students to control their behaviour. Therefore disruption of learning in universities had caused a vacuum which led to health risk behaviours among students. Little is known about the health risk behaviours encountered by university students during pandemic lockdown in Zimbabwe. This then motivated this study to explore the health risk behaviours faced by traditional university students.

**LITERATURE REVIEW**

University students are at a developmental level where they have increased autonomy, form new relationships, and begin to make an independent identity (Newton, Kim, & Newton, 2006). The first year university students hold potential pitfalls which includes excessive alcohol consumption (Wescshler, Lee, Kuo, & Lee, 2000), increased stress (ACHA, 2003), sleep-behavior problems (Trockel, Barnes, & Egget, 2000), weight gain (Anderson, Shapiro, & Lundgren, 2003), and change in exercise behavior (Bray & Born, 2004) and gambling among others.

**Sexual Behaviors**

Cooper (2002) argues that high-risk sexual behavior is any behavior that increases the probability of negative consequences associated with sexual contact, including AIDS or other sexually transmitted diseases (STDs) and unplanned pregnancy. These behaviors are considered in two broad categories: (1) indiscriminate behaviors, including having multiple partners; having risky, casual or unknown partners; and failure to discuss risk topics prior to intercourse and (2) failure to take protective actions, such as use of condoms and birth control. Alcohol effects can be viewed as the ultimate root cause of sexual risk taking.

Baltazar (2013) predicts that majority of young people currently indulge in premartial sex, as a result of the modern trend of postponing marriage due to economic or educational reasons. For example research in the United States proclaim that, 70 percent of youth have had sex by their 19th birthday (ibid). Similar sexual- activity rates occur in European cultures. In fact, the World Health Organization (WHO) (2020) has estimated that the majority of the world’s youth are sexually active in middle adolescence. Baltazar (2013) states that majority of unmarried U.S. college-age students are sexually active, with about 71 percent saying they had sex in the 12 months prior to the survey, which was conducted in 2012. Therefore the gap between first sexual intercourse and marriage means that young people have multiple sexual partners. This results in risky sexual behaviors which includes unprotected sex, having sex while under the influence of alcohol or drugs. That kind of behaviour will cause the student to have unintended pregnancy leading to unsafe abortions methods and the spread of a variety of sexually transmitted diseases. On a global basis, the issue of teen pregnancy is complex because of cultural values and early marriage. However, WHO (2020) notes that teen mothers are four times more likely to die than women in their 20s, and the death rate for newborn babies of teen mothers is five times that for women in their 20s. Even with the abundance of teen pregnancy prevention strategies and programs implemented in many countries worldwide, there appears to be little evidence of widespread success. Teen sex also increases the risk of contracting a variety of diseases. More than 19 million new cases of Sexually Transmitted Infections (STI), apart from HIV, occur each year in the United States, with 48 percent of victims being between the ages of 15 and 24. On a global basis, almost 300 million new STI infections (apart from HIV) are diagnosed each year, with 15- to 19-year olds being the second-highest incidence group. Although the U.S. Centers for Disease Control reported that the total number of new HIV cases decreased in 2005 compared with the figures for 2001, new cases for 15- to 24-year-olds have shown an increase (Ahmed, Abu-Ras & Arfken, 2014).

**Alcohol Consumption**

Worldwide, alcohol proves to be the leading public-health hazard among university students. Adolescent is mostly associated with eliciting in drugs and alcohol experiment. According to Baltazar (2013) many university students believe heavy drinking is a part of college culture. According to WHO (2020), youth alcohol use is a primary cause of violence from assault to rape to murder as well as a wide variety of other problems ranging from STI to fetal alcohol syndrome, accidents, and suicide attempts. These behaviors do not occur in isolation; there is a connection between sexual behavior and alcohol use. Alcohol use decreases inhibition and increases sexual
risk taking. Youth under the influence of alcohol are more likely to take sexual risks than those who are sober. Noll et al., (2020) reported that illicit drug use is a key public-health problem with deep psychological and social consequences, especially for children and adolescents.

**Tobacco**

Several studies among youth found relatively high awareness that smoking tobacco causes serious illness. Among South African university students, awareness of the link between smoking and lung cancer was high (93%), but awareness of the role of smoking in heart disease was low (16%) (Peltzer, 2001). In Nigeria 67.6% of a sample of university students believed that smoking cause no harm to an individual. Research conducted in low middle income countries indicates that overall 13.3% of the university students were current tobacco users, 22.4% for men and 6.6% for women, ranging from 3.8% in Singapore to 32.5% in Cameroon (Peltzer & Pengpid, 2014).

**Excessive and sleep deprivation**

Sleeping is a primitive behavior intrinsic to life, essential for growth and proper functioning (O’Brien & Mindell, 2005). Sleep plays a crucial role to an individual’s mental health during developmental stages such as adolescents. There is a correlation between sleep patterns and academic performance among the university students. Alfonsi et al., (2020) posits that worldwide sleep is an alarming health issue among adolescents and young adults which have the negative impact to their academic performance. Deursen (2017) urges that sleep deprivation among university students lead to metabolic dysregulation and cardiovascular morbidity. For instance, can cause an increase in body weight, a higher risk of obesity, and a reduced physical activity, blood pressure and high cardiometabolic risk. Poor sleep in adolescents is also positively associated with other somatic outcomes, such as headache, persistent fatigue, and lower back, neck, and abdominal pain (Alfonsi et al., 2020). Sleeping more than 9 to 10 hours per night can increase risk of cancer mortality by up to 11%, and risk of colorectal cancer by up to 29%, whereas it decreases the risk of prostate and ovarian cancer with 64% and 12% respectively (Lu et al., 2013; Ma et al., 2016; Noguti et al., 2013; Zhao et al., 2013) in (Alfonsi, 2020). Research has noted that most vehicle accidents are as a result of excessive sleepiness due to sleep restriction. Deursen (2017) expresses that sleep is bidirectional which means it can cause positive and negative impact to learners. The time taken by an individual sleeping has a great impact on human health which can lead to adverse health outcomes in both the short and the long term in the human body. Therefore, during the coronavirus most university students spent most of their time sleeping because of the travel restrictions which attracted high legal sanction.

**Social media addiction**

The use of social media network setting such as Facebook, Twitter, WhatsApp and many more leads to uncontrolled behavior especially when an individual is idle. Khalil et al., (2016) indicated that young adults spent more time on the internet. Worldwide, internet addiction has been noted as a serious public health to adolescents and young adults. The prevalence of internet varies across nations. Series of studies show that USA reported a prevalence of 1.0%, Europe 9.0% and Asia 2.0% to18.0% (Ko et al., 2007 in Khalil, 2016). Social media addiction lead to negative social and health consequences, such as poor academic performance, poor personality relationship, anxiety, depression (Jie et al., 2014) and other behavioral problems (Li et al., 2010, Lin et al., 2015). The global community was enlightened by the invention of the Internet as it enables people to research, do business, see films, do meeting and many more easily. High risk behavior emanate as a result of overuse of internet especially during the COVID-19 lockdown. Many research studies reveal that, internet overuse disrupts family relationships and destroys socialization in the community (Young and Rogers 1998, Ko et al., 2007, Christakis et al., 2011 in Khalil, 2016). Jie et al., (2014) reported that the internet addicts scored higher on the stressful life events, depression symptom and anxiety symptoms than the non-addicts. There during the coronavirus lockdown most individuals spent most of their time on the internet checking for the global updates of spread of COVID-19.

**AIM OF THE STUDY**

To explore the health risk behaviors experienced by university students during the implementation of COVID-19 restrictive measures in Matabeleland Province.

**METHODOLOGY**

**Research Design**

A phenomenology research design which was lopsided to qualitative was used in this study. A research design is the beacon and plan for the research procedures (Nestor & Schutt, 2012). The phenomenology research is interested in understanding, experiences, and how people make sense of their surrounding environment (Merriam, 2009; Bawalan, 2012). This qualitative approach was very useful in getting an in-depth understanding of all the health risk behaviors faced by university students during lockdown pandemics.

**Population and Setting**

This study involves university students from National University of Science and Technology (NUST), Zimbabwe Open University (ZOU) and Lupane State University situated in Matabeleland Province. The sampling techniques for the study was the convenience and purposive sampling, an equal
representation of gender was observed during data collection process.

**Data Collection**

Data was captured through the use of an open-ended interview questionnaire. The COVID-19 restrictive measures forced the researchers to use the social network setting such as the Skype, whatsapp, Facebook, texts and mobile phone audios. Participants who indicated to participate in the study would send an acknowledgement text to the researcher as a consent agreement. All the responses were recorded and documented.

**Data Analysis**

This study used thematic content analysis in analyzing its findings. It is a method of identifying, analyzing and reporting patterns or themes within data (Vaismoradi, Turunen, Bondas, 2013). The process involved familiarizing with data (reading and re-reading the data noting initial ideas), searching for themes, reviewing themes (checking on whether themes work in relation to the coded extracts), generating a thematic map, defining and naming themes (involves generating clear definition and names for each theme) and finally producing a report with vivid compelling extracts after a final analysis of the selected extracts relating back to the research aim and literature (Braun & Clarke, 2006). In identifying key themes, the researcher adopted the tactile approach using pawing. Pawing is a theme identification technique that involves proof reading the whole text more than once underlining key phrases that made sense to the researcher. Handling the data multiple times helped the researcher get the feel of the text which then enabled themes to be identified.

**Ethical Consideration**

The ethical consideration of informed consent, protection from harm, confidentiality and competency was respected during the study. All the principal ethics which are sensitive to the rights and integrity of respondents were fully observed. The researcher respected all protocols of seeking permission.

**Results and Discussion**

The current study investigated the health risk behaviours faced by traditional university students during the COVID-19 lockdown. The findings creamed out different themes which are reluctant at home, social media addiction, drug abuse, sexual behaviours, excessive sleeping and eating habits. These findings prove to cause harm to the life of university students in the short and long term.

**Theme 1: Reluctant at home**

The majority of the participants when they were asked on how they spent their time during Covid-19 national lockdown. They indicated that they spent their time relaxing at home, sleeping, washing dishes, cooking, watching television (TV). This was shown by their verbatim statements below:

- **Participant 1** highlighted that, “I spent most of my time at home relaxing with my family and sometimes helping my mom on a piece of garden she has”.
- **Participant 2** noted that “During the Covid-19 national lockdown I spent a lot of time self-evaluating, spending some pure time alone allowed me to develop new habits, ideas and improve on my hobbies like sewing.
- **Participant 3** alluded that, “during the lockdown I was studying, eating and watching movies”.
- **Participant 4** revealed that, “I have been home spending quality time with my family”.
- **Participant 5** had this to say, “I spent most of the time watching television, doing my school report, exercising and also tried doing things that I hate like reading novels and sleeping during the day”.
- **Participant 6** highlighted that, “Lockdown was too much for me, hectic to the extent of taking alcohol and smoking extremely to relax my mind.”

The above sentiments revealed that the majority of the participants during the Covid-19 national lockdown they spent their time relaxed at home. Spending time watching television is a health risk behavior as it can lead in the development of eyesight problems. This was supported by Jie et al., (2014) who postulate that the internet addicts scored higher on the stressful life events, depression symptom and anxiety symptoms. Therefore, being addicted to social media platforms such as watching films on mobile phones can cause negative effects to the health of an individual. The above verbatim statements show that being reluctant for a long time in doors among the university students can cause a lot of problems such as to indulge in sexual behaviors which can risk their future. This resonates with Newton, Kim, & Newton, (2006) who indicated that university life is a transitional period from adolescents to adulthood which is associated with hyperactivity. Therefore, if students spend a lot of time locked in doors can result in risk behaviors such as sexual abuse leading to incest, unplanned pregnancy and infected with sexual transmission diseases. This is in agreement with Cooper (2018) who had shared the same sentiments. Sexual behaviors might be triggered by spending more time viewing pornographic films which can arouse the sexual motive among the university students resulting in sexual criminal cases.

**Theme 2: No access to e-learning resources**

The findings revealed that when participants were asked on how COVID-19 pandemic impacted their studies they mentioned that it impacted them to a great extent as they had no time for group work, their
industrial attachment has been reduced, total halt no communication from lecturers, no access to internet hindered tutorials and students left out due to lack of data. This was evidenced by their verbatim statements below;

Participant 2 mentioned that, “The Corona Virus had a negative impact on our studies not everyone is privileged with data e-learning is costly and most lecturers don’t respond to learner’s questions.

Participant 3 had this to say,” The Corona Virus has negative impact on our studies because right now we are studying online of which many students are being left out due to lack of data for the e-Learning”.

Participant 4, had this to say, “It has greatly impacted my studies because in most of my current courses there’s been a total halt with no communication whatsoever from the lecturers and despite that the institution has hinted that plans to have exams are still underway. So we are basically expected to revise things we did not even learn”.

Participant 5 stated that, “there is no time for group work, for some as front line workers time to get to the books becomes limited. Studies normally if you start a certain stage or level you will need to finish as per curriculum extension of semesters makes students relax.”

Participant 6 highlighted that, “The pandemic affected my studies negatively because they hindered the monthly tutorials which helps us to understand more on the courses we are doing and we are unable to do some researches since some of us do not have access to the internet.”

Participant 7 alluded that, ”the pandemic has impacted my studies in a negative manner considering the fact that I don’t have access to certain resources such as the internet when I need it, also there a number of destructions at home that disturb my study routine.”

Participant 8 reported that,” the epidemic it has set me back on my reading plans from the way I had structured my timetable.”

Participant 9 highlighted that, “it has affected my industrial attachment was supposed to be 9-12 months but now it’s reduced.”

The above utterances revealed that this pandemic has negatively affected student’s studies as the majority of the participants alluded that they don’t have access to e-learning resources due to expensive data bundles. The above responses show that most university had turned to what they call e- learning yet its telephone learning. Most students indicated that the telephone learning is not compatible since not every student was locked in areas where network is accessible. This triggered some students to partake in risk behaviours as they felt that they had been left out and are prone to fail their studies after the coronavirus lockdown. The risk health behaviour was used as a cover up behaviour of the challenges faced by the students. Some of the other students who were on industrial attachment left depressed with the lockdown since they were unable to continue with their attachment due to the novel coronavirus lockdown. The findings from other participants contradicted with the works of Khali et al., (2016) who alluded that social media is a health risk behavior experienced by university students. The university students in Zimbabwe due to the Covid-19 lockdown which had closed all the source of income to the general populace. Poverty had thwarted all chances for students to be able to buy social media data.

Theme 3: Health risks behaviors faced by students.

The participants indicated that the health risks behaviors faced by students are sleeping too much, abnormal eating habits, substance abuse, and sexual abuse leading to stress, fear and depression. This is evidenced by their verbatim statements below:

Sub theme 1: Fear of infected by the coronavirus among frontline workers.

The findings indicated that students were living in fear of their life since some of their relatives are essential staff on COVID-19. The participants noted that they are stressed of the safety. Some responses showed that they are not sure if the coronavirus lockdown could end. The uncertainty of students’ future caused depression and anxiety.

Participant 1 highlighted that,” Am stressed due to lecturers barely teaching and schools do not update students on what will take place.”

Participant 2 had this to say, “Parents returning to work posed some risk as they are a possibility of them getting in contact with people infected with COVID-19 especially in public transport since ZUPCO are not adequately following social distancing rules within the customers, thus parents bring Covid-19 home.”

Participant 3,” alluded that,” Due to the current economic situation some fail to get the protective wear such as masks, leading to some individuals sharing the masks hence risking the spread of the virus.”

Participant 4 noted that,” The risky of passing the disease to each other as us tertiary students at times act like young children when we don’t have parent guidance nearby hence ignorance of protective measure would be experienced.”

Participant 7 noted that, “the restrictions did pose a lot of mental health issues. I personally experienced a lot of anxiety due to these
measures developed claustrophobia and the continued uncertainty regarding the duration of these measures being in place means that these problems are yet to be solved.”

**Sub theme 4: Sexual abuse**

The coronavirus lockdown has caused sexual exploitation especially to female students. Poverty caused by the lockdown has pressed female students to resort to transactional sex so as to meet the basic needs. Adolescent girls are at an increased risk of sexual abuse as they are locked down with ‘would be perpetrators’ daily. The other participants indicated that some of the lectures are being done in private rooms with male lecturers which risk them to sexual abuse as thight for pass. That kind of behaviour will cause the student to have unintended pregnancy leading to unsafe abortions methods and the spread of a variety of sexually transmitted diseases such as HIV. From the findings of sexual abuse, the results are long term effects.

*Participant 2 highlighted that,* "Sexual abuse and expensive back door lessons some tutors now teach in their houses and they demand so much money and the students do not have choice since they are preparing for the examinations.”

**Sub theme 5: Substance abuse**

The findings noted that traditional university students had a risk of substance abuse. Spending time without doing anything caused students to participate in high up take of elicit substance drugs such as marijuana, bronchi line, and more. This compliments with Baltazar (2013) who posits that many university students believe heavy drinking is a part of college culture. Though the lockdown had emphasized on social distance but this restrictive measure was not effective among the university students since they make use to communicate online using video chats. Therefore, the social media conversations acted as peer influence to participate in substance abuse. This resonates with Noll et al., (2020) who show that delayed sleep has a key public-health problem with deep psychological and social consequences. The study results further confirmed the strong association between tobacco use and beliefs in the importance of not smoking for health that was found in previous studies (Peltzer, 2001; Steptoe et al., 2002). This association with health beliefs can be utilized in tobacco use prevention or cessation programmes. In contrast, to the above findings Lang (2014) in Cooper (2018) posits that an individual’s behavior after drinking is driven by preexisting beliefs about alcohol’s effects on behavior, in the manner of a self-fulfilling prophecy. This means students who believe that alcohol promotes risky sexual behavior are more likely to engage in risky behaviors when they drink than those who do not hold these beliefs. Abusing illicit drugs caused a lot of physical problems such as accidents, cancer, and disability and can lead to death.

*Participant 5 reported that,* “I feel like students might be exposed to this pandemic considering that we don’t know who is infected or not. So it becomes a danger to everyone when I think about all this I take alcohol and smoke to forget about this pandemic, I wish it could end soon because it has affected my studies and my life.”

**Sub theme 6: Sleeping and eating habits.**

The participants highlighted that the lockdown had caused them to spend more time sleeping and they had uncontrollable eating habits. Moving outside was regarded as criminal offences which could attract serious criminal charges. Therefore, some students and excessive sleeping and these had delayed sleeping as they could spend more time preparing for academic assignments. These findings are in line with Cooper (2018) who alluded that there is a correlation between sleep patterns and academic performance among the university students. Deprived sleeping has a negative impact to the health of the students. This is in line with Alfonsi et al., (2020) who show that delayed sleep has an impact to somatic outcomes, such as headache, persistent fatigue, and lower back, neck, and abdominal pain. Over eating can result in obesity and can cause food shortages and excessive sleeping can lead to accidents. Therefore, sleeping and eating habits have negative effect to the health of university students.

*Participant 5 had this to say,* “I tried doing things that I hate like eating too much and sleeping during the day.”

**Theme 7: Feeling disengaged from the studies during Covid-19 national lockdown**

The findings revealed that the majority of the participants stated that they felt disengaged from the studies. They indicated that lack of discussion, difficult to do research and no data for electronic learning. No internet services. This was shown by their verbatim below.

*Participant 1 noted that,* “Yes, most modules are learnt better when discussing and asking others but with e-Learning it’s difficult to do so due to high cost of internet charges.”

*Participant 8 mentioned that,* “Some final year students having to work on their projects may need practical findings requiring them to leave home and collect data but due to Covid-19 they are just stuck.”

The above utterances revealed that due to this pandemic national lockdown the majority of the students felt disengaged from their studies.

**Theme 8: Strategies to curb healthy risks behaviors among university students**

The majority of the participants indicated that the universities must provide data bundles to the students, provision of free Wi-Fi, use of Zoom and
Moodle, sanitizing and practicing social distancing, use of masks. This is evidenced by their excerpts below.

Participant 1 had this to say, “Provision of free Wi-Fi to the university students so that they can have access to the online tutorials.”

Participant 2 mentioned that, “Universities must use Zoom or Moodle to conduct their lessons.”

Participant 3 highlighted that, “Provide free data for university students so that we limit our movement looking for free Wi-Fi where there will be crowd, offer free face masks and gloves so that students who meet for discussions will be safe with the help of limited numbers by the government.

Participant 6 alluded that," The universities must have seminars to nurture students in their aspects other than academically for example entrepreneurial workshops and business etiquette and ethics, on how we can progress after lockdown or similar things that might be of use to students and these don’t have to be arranged by the institution itself but they can even ask students to organize these seminars themselves for example emancipatory education within themselves.”

Such utterances may suggest that there is need to employ the above strategies so as to reduce the health risks measures faced by university students. The above utterances can lead students to be highly addicted to social media which can have negative challenges to eyesight.

**The Recommendations**

The study recommends parents and guidance to make a close monitoring on the behaviour of university students. Community awareness campaigns and education should be given during pandemic lockdown over the health risk behaviour that can be encountered. There is need to involve guidance mentorship to the students once enrolled at the university. It should be mandatory for each learning institution to have programs that provide opportunities for improved health behaviors among first year university students. The next research should separate the risk behaviour faced by female students since women are more vulnerable during lockdown environments.

**Conclusion**

The study found that the COVID-19 lockdown had caused negative health risk behaviours among of university students which can affect their wellbeing. Various health risk behaviours such as sexual risk behaviour, alcohol and drug abuse, social media addiction, dietary, physical inactivity, substance use, sleep problem, and depression symptoms were identified. These health can lead to long term challenges which may affect the academic performance of university students.

**References**


