



# Study on Experiences of Fitness Freaks during the Period of Lockdown Due to COVID-19

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**Abstract:** This fast-moving world has been stopped because of the COVID-19 epidemic. The effect of the pandemic is enormous, and societal differences are the only method to prevent the fast spread of the illness. The blockade, which resulted in the closure of commercial operations, public spaces, fitness and activity centres, and general social life, has hindered many areas of people's lives and has led to many psychological and physical problems. The author's goal in these papers was to study the unique fitness freak experiences during the lock-down time due to COVID-19. It also examined methods to cope with psychological problems and physical health effects, via alternative exercise and fitness in their homes. Semi-structured telephone interviews with 22 people who routinely worked before the epidemic in COVID-19, but remained at home while nationally locked. The research showed that the participants had a poor view of the situation during the first period of lockdown and a lack of desire for fitness. In using their spare time, they also demonstrated psychological health problems and social media over-reliance. But the good self image and desire to overcome their dependency on fitness equipment and gymnastics and to continue fitness activities in the house has gradually increased. Participants also played music as a means throughout their training. The frequent physical training at home throughout the lockdown enabled them to deal with psychological problems and fitness problems.

**Keywords:** fitness freaks, lockdown, COVID-19, pandemic, societal differences, closure of commercial operations, physical problems, psychological problems, alternative exercise, fitness, homes, semi-structured telephone interviews, view of the situation, lack of desire for fitness, psychological health problems, social media over-reliance, self image, dependency on fitness equipment, gymnastics, music, physical training

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## INTRODUCTION

The pandemic COVID-19 is a worldwide unparalleled moment. A comprehensive policy on social distinctions is being implemented globally, which restricts the everyday activities of individuals and calls on governments worldwide to be secure and at home. That implies, of course, that most (if not all) individuals spend a lot of their time at home.

These distances imply, in particular if activities like walking or cycling, like transit or a leisure activity (e.g. hiking, dog walking, going to the gym, etc.) are limited, individuals have much less chances to be physically active. In addition, these extreme actions also make sitting at home so much simpler for extended periods. In many sectors including the health and social care sector and the mental wellbeing of individuals across the world, the effect of this physical inactivity is likely to be observed.

While social distance measurements are essential and necessary today, we still require physical exercise and numerous advantages in our bodies and brains.

## THE IMPORTANCE OF PHYSICAL ACTIVITY DURING THE COVID-19 PANDEMIC

Given the present global scenario, the COVID-19 pandemic may be particularly relevant in some areas of physical activity. These benefits are:

- Physical exercise improves immune function and decreases inflammation, which may decrease infection severity.
- Physical exercise increases the risk of severe COvid-19 and the prevalent chronic diseases (i.e. Cardiovascular Disease, Diabetes).
- Physical exercise is an excellent strategy to reduce stress by decreasing anxiety and depression symptoms.
- Physical exercise helps to balance the amount of cortisol. Stress and anguish (as in the case of a pandemic) cause imbalances in cortisol levels which affect immunological function and inflammation.

## **PHYSICAL (IN) ACTIVITY DURING LOCKDOWN**

As we have previously said, we live and learn about the impact and consequences of this epidemic at unexpected moments. There is some evidence supporting physical activity and lock-up times or limited and controlled mobility, but it is still in its early phases and we will not completely grasp the consequences of lock-out for many months.

### **Anecdotal evidence**

Many nations in the globe are presently locked or limited in some way or other by social distance policy. Some nations have more stringent practise restrictions and allow individuals just to practise outside/out of their houses once a day or allow people to practise outside/out of their homes in a certain period of time or not to exercise away from home. These limits and limitations are nation-specific and relate to the scope of COVID-19 in that particular country. Media reports show that the different lock-in methods may have a beneficial impact on people's level of activity, as more individuals are reported to be outside, walking, cycling etc. We should be careful that this means that people are adjusting to a healthier, more active lifestyle. In many various ways, physical activity takes place throughout a 24-hour period. Sport/exercise organised or organised is just a tiny portion of physical activity. Most individuals get their "active minutes" by performing many different activities, including homework, dog walk, work walk / cycle, walk between tube and station, etc. This is part of everyday life of individuals and contributes to minutes of physical activity. Many of these activities are prohibited during lock-up times or do not even take place and when individuals have limited their daily movements, it is very difficult to build on these levels of activity.

### **Early Research Findings**

In the context of the Covid-19 epidemic, University College London conducted a sociological research on the psychological and social experience of individuals in Britain. The researchers examined the practise and social behaviours of more than 47 000 participants throughout the second week of the trial. This is self-reporting and app-based data. The results of this research at the early stage include:

- 1 in 4 individuals report that in the last 7 days they have not done any physical exercise or even soft

activities.

- 85% of the individuals stated that they had no moderate or exercises whatsoever.
- 40 percent of research participants said they did no moderate exercise, such as walking.
- Four out of five individuals say that they do not engage in moderate or high-intensity activities even among younger participants (18-30 years).
- The least physical activity is done by those with documented mental and physical illnesses.
- More mild, but less in exercise at home, moderate to demanding exercise, generally, is performed by older individuals.
- People who live by themselves are less involved in all forms of physical exercise.
- Low-income people engage less in physical exercise of all types.

These are early results and are likely to alter over time since lock-up actions are easy.

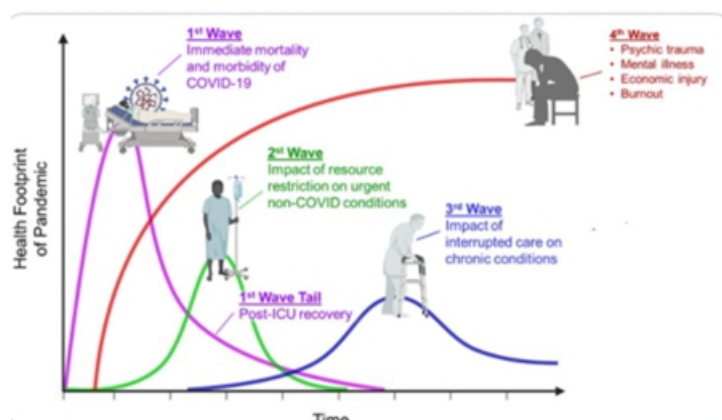
It is apparent from the different data sets, that individuals do not find methods to exercise, but it does not represent their accumulated 24-hour physical activity. Also, during lock-out measures many individuals do not participate in moderate or severe physical exercise; this has consequences only afterwards.

## IMPLICATIONS OF PHYSICAL INACTIVITY DURING COVID-19

### Health and Social Care

Some considerations have to be taken while examining the consequences on health and social care of physical inactivity of COVID-19:

- The results presently cannot be predicted
- We can at best attempt to make informed assumptions
- Global changes have to be taken into account, such as the time period for lockout and relaxing restrictions in nations, as well as disparities in health and social systems in countries.



**Figure 1: Health footprint of Pandemic**

### **First wave: Population of people who experience COVID-19**

This individual who live and recover from COVID-19 will still have continuing requirements. Their physical inactivity would have been imposed owing to the sickness. These individuals will have special requirements for rehabilitation. This is now the apparent group of individuals who get attention and attention.

### **Second wave: People with urgent non-COVID-19 conditions**

Even though we are now facing a pandemic, individuals across the globe still require medical treatment for existing physical and mental problems. This group will nonetheless have continuing requirements for self-management, especially during times of lockdown. It is crucial to help individuals self manage their illness in a situation when health services and systems are under stress and resources are limited. The physical exercise (and its advantages) is an essential method to help this group manage their illnesses to deal with symptoms such as pain, rigidity, tiredness and dyspnea in an appropriate manner. As kidney therapists, we may have a key role to play in helping patients remain active to be healthy enough to manage themselves throughout this period.

### **Third wave: Impact of interrupted care on chronic conditions**

Routine healthcare was held or suspended in several nations across the globe during lock-down times. Services including regular check-ups, diagnoses and elective operations were stopped. This will affect as many individuals as believed there were advances in the diagnosis or treatment of their illness on this group. It may still take time for services to clear up the backlog created by lock-down periods, even when this population resumes its health services. This may have far-reaching consequences. Once again, physiotherapists may influence this group by calling for physical exercise to manage their own illnesses.

### **Mental Well-Being**

The connection between mental and physical exercise is obvious. Physical exercise is a vital and essential method of managing mental health and it is important for individuals, regardless of their diagnosed mental health status, to encourage this work as physiotherapists. Studies have revealed that enforced sedentary behaviour in healthy individuals within seven days has linked to depressed emotions and poor mood. Taking into account the present global scenario with nations during times of forced lockdown and isolation, this may possibly have a widespread effect on the mental wellbeing of many individuals.

### **Musculoskeletal Deconditioning**

The probability of musculoskeletal deconditioning with reduced physical activity is present. During lock-down times when movements of many individuals are limited every day, the majority of people will likely have musculo-skeletal deconditioning. This will be less apparent for fit and healthy individuals, but musculoskeletal deconditioning is more evident for older persons, diagnosed health workers or those who have worked extremely near the functional threshold. This musculoskeletal deconditioning may affect these susceptible groups significantly and may possibly raise the risk of fall injuries such hip fractures. This will, in turn, have already stressed consequences for health and social services.

## **A CALL TO ACTION FOR PHYSIOTHERAPISTS**

In view of the potential effect of physical inactivity during lock-down, physical therapists may make a major difference in their patients' lives:

1. Clinicians should be aware of the emotional and physical well-being effects of lockouts for individuals. More than ever before, we have to emphasise the holistic elements of our evaluations, in particular the burden on the mental well-being of so many individuals. People under lockdown are unsure, concerned, frightened and isolated.
2. When evaluating their patients, clinicians must examine the elements of muscular strength and decomposition. Although this is "generally" included in evaluations, priority should be given to physiotherapists and how they can help their clients:
  - Regain muscle strength
  - Regain joint range
  - Optimise well-being
  - If areas of musculoskeletal deconditioning are not addressed it may affect a person's ageing trajectory and their overall well-being.
3. Physiotherapists as a worldwide workforce may be active and successful during lockdown by encouraging individuals to be physically active.

According to the retrospective observational study,

- People who are inactive consistently had a 2.26-fold increase in hospital admissions, a 1,73-fold increase of ICU admissions and a 2.49-fold higher chance of mortality.
- Being continuously inactive confers the greatest hospitalisation rates with COVID-19, except from age, pregnancy and the background of organ transplant.
- Participation in any quantity of physical exercise has an advantageous impact on bad results.
- Consulting should involve frequent physical exercise in all clinical contacts throughout the epidemic. This corresponds to the principles of MECC. During their clinical interaction with patients, physiotherapists should encourage physical exercise.

## **WAYS PHYSIOTHERAPISTS CAN PROMOTE PHYSICAL ACTIVITY DURING LOCKDOWN**

1. Encourage individuals to interrupt their inactive periods
2. Encourage individuals to undergo every day aerobic workouts - significant health advantages are documented even for relatively short durations of exercise.
3. Encourage individuals to practise strength and balance 2 to 3 times a week.
  - Focus on major functional muscle groups

- Think about how individuals may take these activities into account each week during lockdowns and thereafter.
  - There is the possibility to make a long-term change in the physical activity.
4. Physiotherapists must concentrate on effective lockdown messages. This may include good information on the advantages and problems of physical exercise in line with individuals during the lock-out and pandemic. These may be:
- During lockdown physical exercise may enhance mental health
  - During lock-down physical exercise may assist improve sleep habits.
  - Lockdown physical exercise assists you to remain healthy.
  - Physical lockdown activity helps to decrease health systems demand.

### **HOW TO STAY SAFE WHILE EXERCISING DURING COVID-19**

- Do not practise with a fever, tobacco or respiratory problems (symptoms of COVID-19).
- To exercise outside social distancing and to practise proper cleanliness of the hand before and after.
- If you are not accustomed to physical activity, start your walking or brief impact workouts gently and progressively build up over the course of time, with low intensity.
- Choose the appropriate activity for decreasing the risk of injury; the strength of the exercise should correspond to your fitness and condition.

### **CONCLUSION**

This research indicates that fitness fanatics could go into home workouts and were encouraged significantly by social media usage and music even though they had early fear and anxiety experiences and lack of desire to practise physical exercise home. One could argue that only fitness fanatics who find it difficult to detach from physical activities for long time were included in this research, and this is probably the cause for their transition to home workouts. There is nevertheless little question that the results of this research show that physical exercise may reduce the physical and psychological consequences of the COVID-19 epidemic provided it is done on a regular basis. The results of this research might therefore be extended to the public, so that they would participate in activities of physical fitness which would not only improve physical health but also improve psychological health and well-being. The findings from this study further strengthen researchers and organisations' recommendations to engage in home-based exercises (including aerobics, balances and flexible exercises and muscular strength and stabilisation training, but not limited to) for about 150-180 minutes per week. It is also mentioned that you should begin physical activity and alternatives gradually and stick to your fitness standards in order to choose the exercise's extent and intensity.

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