
The way employees from the healthcare and hospitality sectors perceive the impact of the COVID-19 crisis, as a potential career shock, with regard to their motivation at work



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Abstract

In the literature COVID-19 was identified as a potential career shock that might have a major impact on people's careers and motivation at work. However, literature on the impact of career shocks on work and career related outcomes is still sparse. Therefore this study aims to gain insight into whether and how employees from the healthcare and hospitality sectors perceive COVID-19 as a career shock and what impact it has on their motivation at work. After conducting twelve semi-structured interviews, this study found that COVID-19 can be a career shock as it changed employees thoughts about their careers or caused them to look for different jobs. However, for the majority, COVID-19 did not constitute a career shock which can be explained as COVID-19 can be perceived differently by each person depending on the interplay between work, home and personal factors. Furthermore, this study found that COVID-19 in general had a negative impact on the motivation at work. For employees from the healthcare sector because the work demands, which lead to a lower motivation, increased due to COVID-19 and for employees from the healthcare sector because the energy resources, which lead to a higher motivation, decreased due to COVID-19. This study also found that COVID-19 government policy had an impact on employees' motivation as the measures led to decreases in resources and increases in demands. Furthermore, this study found that governments pursue different COVID-19 policies, which cause differences in the degree of changes in employees' demands and resources and thereby their motivation.

Introduction

COVID-19 and the measures taken as a result of COVID-19 have an enormous impact on people's daily life, work, workplaces and careers (Akkermans, Richardson & Kraimer, 2020, Kniffin et al, 2021; Schwarz et al, 2020). The classical literature on careers assumes that career development is under individual and organisational control (Greenhaus, Callanan & Godshalk, 2000; King, 2004; De Vos, De Clippeleer, & Dewilde, 2009). However, several studies have shown that someone's individual career trajectory can also be affected by career shocks that lie outside the individual and organisational control (Forrier, Sels & Stynen, 2009; Akkermans, Seibert & Mol, 2018). Career shocks are disruptive and extraordinary events that are caused by factors beyond one's control that trigger a deliberate thought process concerning one's career and can take place in one's private life or at work (Akkermans et al., 2018, p. 4). Recently, Akkermans et al. (2020), theoretically applying the core characteristics of a career shock on the COVID-19 pandemic, identified COVID-19 as a career shock that affects all employees simultaneously and might have a major impact on people's work and careers. Most of the examples of career shocks mentioned in the literature are based on specific individual experiences, such as getting an unexpected promotion or the loss of a loved one (Akkermans et al., 2018). However, the study from Wordsworth and Nilakant (2021), that examined the earthquakes in New Zealand as a career shock, showed that career shocks can also be events that have a generic effect on whole populations.

As Akkermans et al. (2020) only theoretically identified COVID-19 as a career shock and several studies have shown that the impact of COVID-19 (Hite & McDonald, 2020) and career shocks (Burton, Holtom, Sablynski, Lee, & Mitchel, 2010; Akkermans et al., 2020) will be perceived differently by each person, it is unclear whether and in which way employees perceive COVID-19 as potential career shock, which might be relevant as career shocks can have a major impact on how someone's career develops (Akkermans et al., 2018; Betsworth & Hansen, 1996). In addition, scientific literature on career shocks and their impacts on careers is still sparse (Akkermans et al., 2018; Rummel, Akkermans, Blokker and Van Gelderen, 2019) and there is a need for empirical findings that can help the field forward (Akkermans et al., 2018, p. 8). As the COVID-19 pandemic is identified as a potential career shock that affects all employees simultaneously, there does not seem to be a better time to do further research in this field.

Besides that career shocks can substantially alter an employee's career path, career shocks can also change an employee's motivation (Pak, Kooij, de Lange, Meyers, & van Veldhoven, 2020). Several studies have shown that motivation leads to better individual and

organisational performance (Alexandru, 2019; Hee & Kamaludin, 2016; Meadows, Gable, Lohse & Miller, 2016) and that employees are considered as the most important asset of an organisation and crucial for achieving organisational goals (Burlea-Şchiopoiu & Ferhati, 2021). However, when employees are not motivated, they will ultimately reduce their efforts, cause conflicts and act against the organisation's interests (Alexandru, 2019). Some studies argue that during periods of crises, such as the COVID-19 crisis, interest in motivation becomes more important because it is directly related to the security needed by employees in such periods (Hitka, Zavadzka, Jelasic & Balazova, 2015). Hitka and Sirotiakova (2011) highlight the importance of good relations and a healthy workplace for employees during a crisis, while other studies suppose that educational efforts can contribute to motivation in the workplace during crises (Hitka and Balazova, 2015; Jelacic, 2011).

Looking at what factors have an impact on the motivation several studies have stated that excessive job demands have a negative impact on the motivation, while having plenty of job resources has a positive impact (Bakker, Hakanen, Demerouti & Xanthopoulou, 2007; Bakker, van Veldhoven & Xanthopoulou, 2010). The Work-Home Resources model (W-HR model) from Ten Brummelhuis and Bakker (2012) looks beyond only work resources and demands and assumes that also home resources and demands can influence the motivation. As COVID-19 has an impact on both the work situation (Vermeulen, 2020; Roest, 2020; Kniffin et al, 2021; Schwarz et al, 2020) and the home situation (Brooks et al, 2020) the W-HR model that includes both the work and home domain is very useful to identify potential factors in which employees may perceive barriers and opportunities with regard to their motivation at work during the COVID-19 crisis.

Although the above mentioned studies have focused on motivation and give some interesting insights, currently little is known with regard to the process through which career shocks, in this case COVID-19, relate to motivation (Akkermans et al., 2018). However, this might be very relevant as the factors identified in the W-HR model are under great pressure for certain groups of employees during the COVID-19 crisis (Vermeulen, 2020; Roest, 2020; Kniffin et al, 2021; Schwarz et al, 2020; Brooks et al, 2020).

Therefore the aim of this study is to gain insight into whether and how employees from the healthcare and hospitality sector have perceived COVID-19 as a potential career shock, how they have perceived the impact of COVID-19 with regard to their motivation at work and what opportunities and barriers they have perceived to remain motivated during the COVID-19 crisis. This has led to the following research question: *“How do employees from the healthcare sector and hospitality sector perceive the impact of the COVID-19 crisis, as a*

potential career shock, with regard to their motivation at work and which barriers and opportunities do they perceive in order to remain motivated?”

This study focuses explicitly on the healthcare and hospitality sectors as these two sectors have been affected by the COVID-19 crisis to an enormous amount and COVID-19 has caused a lot of uncertainty among employees in these sectors, but in two different ways. Healthcare workers wonder whether they can still work safely and are afraid of becoming infected with the COVID-19 virus at work (Roest, 2020). In contrast, hospitality workers see that their employers are under great financial pressure because of the closure of restaurants and bars and are uncertain whether they will be able to keep their jobs in the future (Mirck, 2020). Because of these different impacts employees from one sector can perceive COVID-19 as a career shock, while employees from another sector do not, which might be relevant to explore as career shocks can have a major impact on how careers develop (Akkermans et al., 2018). These different impacts can also lead to differences in the perceived barriers and opportunities with regard to the motivation, which might be relevant as it for example can require a different HR approach to keep employees motivated during COVID-19.

By answering the research question, this study tries to contribute to the need for more empirical research on career shocks and its impact (Akkermans et al., 2018, p. 8), by providing insight into whether and how employees from both sectors have perceived COVID-19 as a career shock. In addition, as little is known about motivation during a career shock (Akkermans et al., 2018), this study provides insight into the perceived impact of COVID-19 as a career shock on the motivation at work. Finally, as COVID-19 is a new phenomenon it cannot be assumed that employees also perceive barriers and opportunities in the home, work and personal factors identified in the W-HR model during COVID-19 and if these factors are the only factors. Therefore this study provides insight into what barriers and opportunities employees perceive during COVID-19 with regard to their motivation at work.

In a practical way this study has relevance for employers and managers by offering insight into the by employees perceived barriers and opportunities with regard to their motivation at work during COVID-19. With this insights employers and managers know what opportunities there are to respond, and what barriers should be limited in order to keep employees motivated. Based on this, they could, for example, adjust their HR policy or leadership style. It is important to keep employees motivated because that leads to both a better individual and organisational performance (Alexandru, 2019; Hee & Kamaludin, 2016; Meadows et al., 2016). In addition, also employees themselves can make use of this study as it provides insight into what opportunities and barriers there are to respond in order to remain

motivated during COVID-19. The insights this study provides about how employees have perceived COVID-19 as a career shock might be relevant on society level. For example, if COVID-19 is a career shock for many employees leading them to leave the sector, both sectors could face staff shortages. In the healthcare sector, there is already a shortage of personnel (Verenigde naties, 2021), which could increase as a result of career shocks caused by COVID-19, increasing the pressure on the sector which can harm the quality of care.

Theoretical framework

Career shocks

Recently, Akkermans et al. (2020), identified the COVID-19 pandemic as a potential career shock that might have a major impact on people's work and careers. A career shock can be defined as “a disruptive and extraordinary event that is, at least to some degree, caused by factors outside the focal individual's control and that triggers a deliberate thought process concerning one's career. The occurrence of a career shock can vary in terms of predictability and can be either positively or negatively valenced” (Akkermans et al., 2018, p. 4). A career shock can take place in one's private life or at work.

The definition consists of four core characteristics. Firstly, a career shock must activate people to actively think about their careers (Akkermans et al., 2018). Career shocks trigger a thought process that may cause people to make different career choices, and thus have an impact on one's career. When, for example, employees consider working less because of the birth of a child or because of the illness of a loved one, these career shocks trigger a thought process about their career.

Secondly, career shocks must be contextual factors that lie outside someone's individual control (Akkermans et al., 2018). Even though, the shock may be expected, there still need to be a certain level of lack of control over the shock and its effects to be considered as a career shock. For example, performing well at work increases the chances of a possible promotion, but whether it actually leads to a promotion depends on factors beyond one's control.

In the third place, career shocks can vary in the degree to which they are unexpected or expected and predictable and controllable (Akkermans et al., 2018). Career shocks are often times unexpected, meaning either that they cannot be anticipated and proactively acted upon or, even when expected, the effects of the shock can be anticipated to a certain extent only. Even when events were expected the effects can still be shocking. For example, in a situation where a person had foreseen that he would be fired because his two previous evaluations had

not been so positive and the company had financial difficulties, the moment when he actually gets fired and the consequences of this still might be very shocking. The difference between predictability and controllability lies primarily in the time at which the individual is able or likely to initiate a thought process and thus take action with regard to the impact of the shock on their career. The degree of predictability and controllability influences the individual freedom of choice and thus also the consequences of the career shock (Akkermans et al., 2018).

The last characteristic is that career shocks can be both positively and negatively valenced. The more positively valenced a career shock is, the more positive the career outcomes of that shock will be, and vice versa. Thus, the impact of a career shock is likely to differ according to how strongly a person experiences that shock (Akkermans et al., 2018). Positively valenced career shocks, for example an unexpected promotion, are likely to positively impact someone's career, whereas negatively valenced career shocks, for example being fired, illness or the loss of a loved one, are likely to negatively impact someone's career (Seibert, Kraimer, Holtom & Pierotti, 2013).

Looking at the four core characteristics of a career shock, the current COVID-19 pandemic we are living in may be perceived as a career shock by employees. COVID-19 and its impact could activate people to actively think about their careers (Akkermans et al., 2020). For example, employees from the hospitality sector have seen that restaurants and bars are immediately closed in times of a virus and therefore, fearing future viruses, look for a job that offers more job security. Another example is that people have become impressed by the importance of the healthcare sector during the COVID-19 crisis and decide to re-educate to be able to work in the healthcare sector. These examples show that COVID-19 can trigger a thought process, which can potentially change employees' thoughts about and decisions in their careers. COVID-19 is also clearly a contextual factor that lies outside someone's individual control, as the spread of the COVID-19 virus and the measures imposed by the government to prevent further spread of the virus lie not within anyone's control. The third characteristic of career shocks is that they do differ in terms of the degree of unexpectedness and predictability and controllability (Akkermans et al., 2018). Although the COVID-19 crisis was unexpected for most people, the extent to which the impact of COVID-19 is controllable varies from person to person (Hite & McDonald, 2020). This makes that COVID-19 may be perceived as a career shock by some, but this is not necessarily the case for others. Lastly, COVID-19 can be both positively and negatively valenced. Generally, the COVID-19 crisis would be seen as negative, for example because of job insecurity or less social contact.

However, there also may be positive consequences, such as spending more time with family or an significant increase in sales for the owner of an online web shop.

Although the existing literature focuses more on events that are based on specific individual experiences, the study from Wordsworth and Nilakant (2021), that examined the earthquakes in New Zealand as a career shock, shows that career shocks can also be events that have a generic effect on whole populations. In addition, the previous paragraph outlined that the COVID-19 pandemic possesses the four core characteristics of a career shock which is line with a recent article by Akkermans et al. (2020) that identified the COVID-19 pandemic as a career shock. Based on this COVID-19 may be perceived as a potential career shock that might have a major impact on people's careers, but this does not have to apply to everyone as COVID-19 (Hite & McDonald, 2020) and career shocks (Burton et al., 2010; Akkermans et al., 2020) will be perceived differently by each person. For example, the study from Guan, Deng and Zhou (2020) found that culture (e.g. religious culture or occupational culture) may influence individuals' responses to the career challenges during the COVID-19 pandemic. In addition they found that national culture influences the collective actions and norms during the COVID-19 pandemic which will have a great impact on the COVID-19 measures imposed by the government, which in turn will impact employees' individual coping processes. Because of these differences the research question first indicates whether and how employees perceive the impact of the COVID-19 crisis as a potential career shock.

Motivation at work

Besides that career shocks can substantially alter an employee's career path, career shocks can also change an employee's motivation (Pak et al., 2020). Motivation can be defined as "an internal state, condition, need, desire or want that serves to activate or energize behaviour and give it direction" (Huitt, 2001, p. 1). However, motivation is a broad concept and therefore this study focuses on one specific type of motivation, the motivation at work mentioned by Kanfer, Beier and Ackerman (2013). Motivation at work can be defined as "the cognition, affect, and behaviours that employees use to accomplish tasks within their jobs" (Kanfer et al., 2013, p. 255). In other words, the degree to which a person has the motivation to do his or her job properly and to perform well at work. This research explicitly focuses on the motivation at work because COVID-19 and the measures taken as a result of COVID-19 have a major impact on people's work and lead to changing conditions at work (Kniffin et al, 2021; Schwarz et al, 2020). For example, COVID-19 has increased the workload in the healthcare sector and employees must follow strict COVID-19 protocols (e.g. wash hands,

wear a mouth mask, keep 1.5 metres distance) while performing their work. Another example from the hospitality sector is that it was only allowed to be open for takeaway or delivery for most of the time during the COVID-19 crisis, and during the time they could open it was only allowed to receive a small number of guests. These measures taken as a result of COVID-19 have drastically changed the work of employees working in the hospitality sector. It is important for employers to ensure that their employees remain motivated during the COVID-19 crisis as motivation leads to better individual and organisational performance (Alexandru, 2019; Hee & Kamaludin, 2016; Meadows et al., 2016) and employees are crucial for achieving organisational goals (Burlea-Şchiopoiu & Ferhati, 2021). Unmotivated employees can harm the organisation as they will reduce their efforts, cause conflicts and act against the organisation's interests (Alexandru, 2019).

Motivation and career shocks

The Work-Home Resources model (W-HR model) from Ten Brummelhuis and Bakker (2012) is used to understand how career shocks can have an impact on employees' motivation at work. The W-HR model distinguishes several factors that might influence the motivation at work. The W-HR model makes a distinction between the work, home and individual domain. The work domain consists of work demands, work resources and work outcomes. The same applies to the home domain that consists of home demands, home resources and home outcomes. The individual domain consists of personal resources (Ten Brummelhuis & Bakker, 2012). The model describes work-home conflicts as a process whereby demands in one domain deplete personal resources and impede accomplishments in the other domain (Ten Brummelhuis & Bakker, 2012, p. 545). So the model assumes that employees who are confronted with too many home demands (e.g. care for young children) will lose personal resources (e.g. health, energy, focus and self-efficacy), which will lead to impaired work outcomes, including their motivation at work. This also happens in the opposite way, so employees who are confronted with home resources (instead of home demands), such as understanding from your partner or respect from a friend, will gain more personal resources which will result in better job outcomes.

In line with the factors identified in the W-HR model, COVID-19 is likely to have an impact on the motivation at work as different factors in the work, home and individual domains are under pressure during the COVID-19 crisis (Kniffin et al, 2021; Schwarz et al, 2020; Brooks et al, 2020). The model assumes, for example, that overload demands such as working overtime or urgent care tasks can have a negative impact on the motivation at work.

However, as a consequence of COVID-19 employees from the healthcare sector are working overtime to compensate for the loss of colleagues who are infected with the COVID-19 virus or are in home quarantine. According to this model, this change as a consequence of COVID-19 will have a negative impact on employees' motivation at work. Furthermore, Brooks et al. (2020) indicated that the COVID-19 crisis have led to negative psychological effects such as post-traumatic stress symptoms, confusion, and anger. This can lead to emotional demands such as disappointments and conflicts at home, which according to the model will have a negative impact on the motivation at work. On the other hand, employee who perceive a lot of support from their supervisors during the COVID-19 crisis, will gain more personal resources which will have a positive impact on their motivation. These are just a few examples that show how COVID-19 affects contextual demands and contextual resources, which in turn affect the motivation at work. So, following the model, COVID-19 has a positive impact on the motivation at work when it increases resources (factors that work motivating) or decreases demands (factors that work demotivating), while COVID-19 has a negative impact on the motivation at work when it decreases resources or increases demands.

Barriers and opportunities

Building further on the W- HR model potential factors in which employees may perceive barriers and opportunities with regard to their motivation at work during the COVID-19 crisis are identified. Potential factors in which employees may perceive barriers are in line with the work and home demands. Together these demands are called contextual demands (Bakker & Demerouti, 2007; Peeters, Montgomery, Bakker & Schaufeli, 2005) and are commonly categorized into overload demands, emotional demands, physical demands and cognitive demands (Ten Brummelhuis & Bakker, 2012). Overload demands occur when one needs to perform many tasks at a high speed and are for example a high workload or many household chores. Emotional demands are issues that touch the individual personally and are emotionally such as demanding interactions with customers or divorcing from your partner. Physical demands refer to tasks that require physical effort such as lifting weights or care for young children. Cognitive demands are tasks that require a lot of concentration such as writing a report or the coordination of household and care tasks (Ten Brummelhuis & Bakker, 2012). The W-HR model assumes that these demands will lead to a loss of personal resources, which will lead to a reduced motivation at work and thus can form barriers. For example, an overload demand such as working overtime often or an emotional demand such as conflicts can have a negative impact on someone's motivation at work.

Potential factors in which employees may perceive opportunities are in line with the work and home resources, together called contextual resources, and personal resources. The W-HR model distinguishes four types of contextual resources namely social support, autonomy, opportunities for development and feedback. Social support refers to the instrumental, informational, emotional and appraisal support provided by significant others. Examples are support from colleague's, supervisors or friends. Autonomy means that the individual can decide how and when tasks are performed such as planning leisure time. Opportunities for development and feedback are aspects which give employees feedback and the opportunity to develop themselves. The W-HR model assumes that employees because of this work and home resources will gain more personal resources, which will have a positive impact on their motivation. For example social support from a supervisor can have a positive on someone's motivation at work (Bajrami et al., 2021).

Furthermore, they W-HR model distinguish five types of personal resources. These resources are proximate to the self and include personal traits and energies, which can have an impact on the motivation (Ten Brummelhuis & Bakker, 2012). Physical resources can have an effect on the state of the individual's body and are for example health, energy and sleep. Psychological resources such as optimism and focus help employees to deal actively and efficiently with tasks (Ten Brummelhuis & Bakker, 2012). Affective resources such as mood and fulfilment improve the mental state of individuals. Intellectual resources such as skills and experience help employees to discharge their tasks, while instrumental resources such as time and money facilitate role performance (Ten Brummelhuis & Bakker, 2012). For example a psychological resource such as optimism can have a positive impact on someone's motivation at work. These contextual demands, contextual resources and personal resources have indicated potential factors in which employees may perceive barriers and opportunities with regard to their motivation at work during the COVID-19 crisis. These contextual demands and contextual and personal resources might also be affected by the COVID-19 government policy of a country (Rahiem, 2021). For example, a government policy of strict lockdown and little or no social contacts may be at the expense of the 'social support' resources, which may reduce someone's motivation (Husky, Kovess-Masfety & Swendsen, 2020). Another example is that an unclear government policy that offers little perspective can be at the expense of someone's 'personal affective resources', causing a negative mood which in turn can have a negative impact on someone's motivation (Salem, Elbaz, Elkhwesky & Ghazi, 2021). These are just a few examples of how government policies can have an impact

on the resources and demands identified in the W-HR model, which in turn have an impact on the motivation at work.

Methodology

Research design

The research question formulated was answered by means of qualitative research. Qualitative research concerns all forms of research that are aimed at collecting and interpreting linguistic material in order to make statements about a (social) phenomenon in reality. Qualitative research is aimed at obtaining information about what is going on among a particular target group and why (Bleijenbergh, 2015). This is in line with the aim of this study to gain insight into whether and how employees from the healthcare and hospitality sector have perceived COVID-19 as a potential career shock, how they have perceived the impact of COVID-19 with regard to their motivation at work and what opportunities and barriers they have perceived to remain motivated during the COVID-19 crisis. Using a qualitative research design helped to acquire in-depth understanding of how COVID-19 triggered thought processes, how employees perceived COVID-19 as a career shock, what impact COVID-19 had on their motivation at work and what barriers and employees they perceived to remain motivated during COVID-19. This explorative approach yielded rich data, which helped to better understand COVID-19 as a career shock and the impact of COVID-19 on the motivation at work by elaborating on existing theory and generating new theory (Bluhm, Harman, Lee, & Mitchell, 2011). Furthermore, this approach can provide more insight into detailed descriptions of working practices, experiences, feelings, opinions and needs, that were needed in order to answer the research question, than a quantitative approach that relies only on predetermined and close-ended questions (Bleijenbergh, 2015).

Qualitative research consists of different forms of which the case study is one. A case study refers to an empirical inquiry that investigates a contemporary phenomenon in depth and within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident (Yin, 2002). The way in which employees perceived the impact of COVID-19, as a potential career shock, with regard to their motivation at work can be seen as a contemporary phenomenon that was examined in depth through interviews. Case studies often focus on and are suitable for unusual, neglected or unknown cases, which may provide a new insight into the problem area (Yin, 2002). As COVID-19 is an unusual and new phenomenon and it was unknown whether COVID-19 was perceived as a career shock, had an

impact on motivation at work and what barriers and opportunities employees perceived, the case study was ideally suited for this study.

As this study involved both the healthcare sector and hospitality sector and the similarities and differences between those sectors, it can be classified as a comparative case study. It is interesting to look at those sectors as they both have been affected by the COVID-19 crisis to an enormous amount, but in two completely different ways. Because of these different impacts employees from one sector could have perceived COVID-19 as a career shock, while employees from another sector did not. These different impacts could also have led to a differences in the impact of COVID-19 on the motivation at work and the perceived barriers and opportunities with regard to that motivation. It was relevant to look at both sectors as the different impacts of COVID-19 for example could have required a different HR approach to keep employees motivated during COVID-19. Because in-depth information was needed, COVID-19 was a relatively new phenomenon and two sectors had to be compared, this study was conducted using a comparative case study which best suited this purpose.

Sample

This study focused on employees who are working or worked in the healthcare and hospitality sector during COVID-19. These employees were able to explain and clarify how they perceived the impact of the COVID-19 crisis with regard to their motivation at work and which barriers and opportunities they perceived in dealing with it. The sample technique applied to collect data in this study is non-probability sampling, because not everyone had an equal chance of being included in the sample as the respondents were not selected randomly (Vennix, 2019). Only employees who were active in the healthcare or hospitality sector and came from the researcher's network or the network of the other researchers in the thesis circle had a chance of being included in the sample. These respondents were approached by asking them in real life or via a phone call whether they wanted to participate in the study. Within each sector, employees of different genders and ages were approached to make sure that the respondents in the sample formed a good representation of the population. When a sample includes only respondents who meet certain characteristics, this is called a purposive sample (Vennix, 2019). In the end, six employees from the healthcare sector and six employees from the hospitality sector were selected to be respondents in this study based on their differences in position and demographics in order to achieve a representative sample in terms of gender, age and position. Table 1 outlines the demographic characteristics of the respondents in the sample. In the total sample, gender is equally distributed (50% female, 50% male) and the

average age of the respondents is 38.83 years. Looking at the healthcare sector, the gender distribution is unequal (66.66% female, 33.33% male), but this is not a problem as there is an overrepresentation of females compared to males in the healthcare sector (CBS, 2016). The average age of the respondents from the healthcare sector is 39.67 and from the hospitality sector 38 years and thus both do not differ much from the average age of the whole sample and from the average age of 41 of the active labour force in The Netherlands (CBS, 2019).

Table 1. Demographic characteristics of the sample

Participant (n=12)	Gender	Age	Position	Sector
A	Female	25	Nurse at a COVID-19 department	Healthcare
B	Female	54	Nurse and case manager dementia	Healthcare
C	Female	34	Nurse	Healthcare
D	Female	51	Nurse in home care	Healthcare
E	Male	51	Disabled care worker	Healthcare
F	Male	23	Disabled care worker	Healthcare
G	Male	26	Waiter	Hospitality
H	Male	58	Sales director	Hospitality
I	Female	34	All- round hospitality worker	Hospitality
J	Male	64	Team leader restaurant	Hospitality
K	Male	24	Restaurant manager	Hospitality
L	Female	22	Waitress	Hospitality

Instruments and procedure

The data was collected through semi-structured interviews. The interviews were conducted either face to face or via a Zoom connection. This choice was left to the respondent so they felt comfortable with the interview setting. A number of questions and the structure of the interview were largely fixed in an interview guide, but there was a lot of space to ask follow- up questions about the respondents' answers and to deviate from the interview guide. This gave the researcher guidance when conducting the interviews and ensured sufficient useful information was gathered from the interviews. Respondents were asked how they perceived the impact of the COVID-19 crisis, to draw a timeline how their motivation at work changed during COVID-19 and which barriers and opportunities they perceived with regard to their motivation at work. When the line was drawn, questions were asked about the shape of the line and the different parts marked. This offered the possibility of asking follow-up questions, for example when a respondent said something interesting or when it was not entirely clear what the respondents meant. This interview method provided detailed and extensive information which was needed to identify the work practices, experiences, feelings and opinions of the respondents. The interview guide used for conducting the interviews is included in appendix A. In addition to the topics of COVID-19 and motivation at work, the

interview guide also includes the topics of motivation to work and employability, as a result of working in a research group with two other researchers. After the interviews were transcribed, they were sent to the respondents to check whether the transcripts corresponded to what they meant during the interviews and if they would like to add anything. However, no respondent has corrected or added anything. This approach reduced the chance of a misfit between the constructed realities of respondents and the reconstructions attributed to them and is known as member checking (Symon & Cassell, 2012).

Analysis

After 12 interviews were conducted and transcribed, the data was coded and analysed using the qualitative data analysis and research software Atlas.TI. The data was coded on the basis of a template analysis. A template analysis is often used to thematically analyse qualitative data, usually in the form of interview transcripts. Furthermore, it is a style of thematic analysis that balances a relatively high degree of structure in the process of analysing textual data with the flexibility to adapt it to the needs of a particular study (Symon & Cassell, 2012). These features made the template analysis suitable for coding and analysing the data of this study.

From the theoretical framework some initial codes were derived, which identified themes strongly expected to be relevant for the analysis. These initial codes led to an initial coding template of the key concepts motivation at work, career shocks and barriers and opportunities and are included in appendix B. Interview quotes that seemed to tell something about career shocks, the motivation at work or barriers and opportunities were coded. If an interview quote corresponded to an initial code it was coded as such, if not new codes were defined. Initial codes that did not fit the collected data were abandoned. Cluster of codes that together represent a certain topic were summarized into more general, higher order themes. This method was applied to all interviews and the coding template was modified in the light of careful consideration of each transcript. This ultimately led to a final coding template which is included in appendix C. In order to determine whether COVID-19 was perceived as a potential career shock, a table based on the assigned codes was created indicating for each respondent whether and how the four criteria of a career shock derived from the theory were met. The final coding template and the table about career shocks formed the basis for interpreting the data and writing the results and conclusions.

Quality criteria for qualitative research

Four quality criteria for qualitative research can be distinguished: credibility,

transferability, dependability and confirmability (Lincoln & Guba, 1985). In order to meet the credibility criteria, follow-up and clarification questions were asked during the interviews when things were unclear or interesting things were stated, as that gives a good view of the constructed realities of respondents. In addition, member checking was used, which reduced the chance of a misfit between constructed realities of respondents and reconstructions attributed to them (Symon & Cassell, 2012). In order to meet the transferability criteria, it is important to provide enough details about the research case. Therefore, the results chapter gave detailed descriptions of perceptions of the respondents and in what context those perceptions were formed. Also, when a respondent is quoted, the gender, age and position of the respondent are mentioned. These detailed descriptions enable the reader to judge what the context is and whether their own context fits with that, which enhances the transferability of the results (Symon & Cassell, 2012). Tsoukas (2009) introduced the concept of analytical refinement which means that the findings of qualitative research are not there to generalize from sample to population, but from observation to theory. This is in line with the aim of this study to broaden the understanding of the three main concepts of this study with fresh observations. In order to meet the dependability and confirmability criteria methodological choices were explained and the initial and final coding templates were added, as this shows where the data comes from and how meaning has been given to the collected data (Symon & Cassell, 2012).

Results

The research question consists of three parts. The first part includes the question whether employees have perceived COVID-19 as a potential career shock. The second part asks how employees have perceived the impact of COVID-19 with regard to their motivation at work. The third part includes the question what barriers and opportunities employees have perceived in dealing with the impact of COVID-19 with regard to their motivation at work. The answers to these questions will be discussed successively in this section.

Career shocks

Based on the theory of Akkermans et al. (2018) discussed in the theoretical framework, an external event has to meet four criteria in order to be considered as a career shock. A career shock must be perceived as a disruptive and extraordinary event that is caused by contextual factors that lie outside someone's individual control, must activate people to actively think about their careers, can vary in the degree to which it is unexpected or expected and predictable and controllable and is positively or negatively valenced (Akkermans et al.,

2018). Based on these four criteria it was determined whether and how employees perceived COVID-19 as a potential career shock. The results are shown and discussed per criteria.

Disruptive and extraordinary event caused by factors outside individual control

All respondents indicated they perceived COVID-19 and its impact as disruptive and extraordinary. So, both employees from the healthcare and hospitality sectors perceived COVID-19 as disruptive and extraordinary, but the reasons why they perceived it as such do differ. Employees from the healthcare sector perceived COVID-19 and its impact as disruptive and extraordinary because they had to work in special COVID-19 teams and departments, had to work with mouth masks and COVID-19 suits, had to work overtime and because the work had become heavier and more intensive. One respondent stated: *“It all became very sad and it became much heavier. Many more people became ill and we really had a lot of deaths”* (25 year old female working as a nurse at a COVID-19 department in a hospital). COVID-19 was also perceived as disruptive and extraordinary by a 54-year-old female working as a home care nurse and she stated: *“We set up a special COVID-19 team and during that period I really worked much more than my normal hours”*. Employees from the hospitality sector perceived COVID-19 and its impact as disruptive and extraordinary for other reasons. Employees from the hospitality sector indicated that they had no work at all, their work had completely changed from serving in a restaurant to preparing take-away and delivery orders and the number of guests and turnover had decreased significantly. One respondent stated: *“the work we are currently doing is completely different from what it was before”* (26-year-old male working as a waiter).

Employees from the healthcare and hospitality sectors did not only perceive COVID-19 and its impact as disruptive and extraordinary at work, but also in their private lives at home. The lack of contact with family and friends, not being able to go out for dinner or to the pub, and being hindered in practising hobbies were particularly perceived as disruptive and extraordinary at home. One respondent who lives in Belgium stated: *“The fact that I live in Belgium and the borders were closed and I could not go back to my family was the hardest for me”* (34-year-old- female working as an all-round employee in the hospitality sector). A 54-year-old woman from the healthcare sector even lost a friendship because her friend thought the COVID-19 measures were nonsense, while in her work she saw daily what impact COVID-19 could have on the health of people.

Besides that all respondents perceived COVID-19 and its impact as disruptive and extraordinary, they also perceived it as something outside their own individual control. The

employees' perceived uncertainty about COVID-19 and its consequences in terms of how work had to be organised differently or whether they could keep their jobs, as well as what COVID-19 exactly did to their health, demonstrates that they perceive COVID-19 as something beyond their control. This is further demonstrated by the fear of getting infected or infecting others with the COVID-19 virus. One respondent stated: *"It seems terrible to me if I get COVID-19 because I have not been careful enough and then infect one of our vulnerable patients"* (54-year-old female working as a nurse). Other respondents indicated the dependence on government-imposed measures as reason why they perceived COVID-19 as something outside their own individual control.

Degree of unexpectedness and predictability and controllability

Career shocks can vary in the degree to which they are unexpected or expected and predictable and controllable. For some events, the occurrence itself will be unexpected, for other events, the occurrence may be predictable but the effects may still be shocking (Akkermans et al., 2018). Looking at these criteria, only the degree of controllability is reflected in the data. The respondents did not talk about the degree to which COVID-19 was unexpected or expected and predictable. However, the respondents did talk about the degree to which COVID-19 and its impact were perceived as controllable.

COVID-19 and its impact were perceived as controllable by the majority of the employees from both the healthcare and hospitality sectors. It is striking that the two employees (1 hospitality and 1 healthcare) who perceived COVID-19 as less controllable were both relatively young (22 and 23 years old), which seems to indicate that relatively younger employees perceived COVID-19 as less controllable than relatively older employees. However, three respondents aged between 24 and 26 perceived COVID-19 as controllable. For the two employees who perceived COVID-19 as less controllable, COVID-19 seemed to have a mental impact. The 23-year-old male working in the healthcare sector stated that the lack of perspective sent him into a negative spiral, reducing his energy and causing him to feel depressed more often. The other respondent stated: *"It is always in the news, which I find very irritating and also makes me a little sad. There is always something underlying...oh no you can't because there is COVID-19"* (22-year-old female working as a waitress). All the other respondents perceived COVID-19 as controllable for a variety of reasons. One female (54 years) working as a nurse perceived COVID-19 as controllable, because she felt that her employer has managed the COVID-19 situation well and her family coped well with it too. Similarly, two respondents who had to home school their children due to COVID-19 felt their

family coped well with it, causing COVID-19 to remain controllable. One respondent stated his wife already had experience in teaching at home because they had travelled through Asia for two months and then also had to teach their son at home. Another respondent stated she only had to work evening and weekend shifts and perceived a lot of support from “*grandpa and grandma*” who live next door and like to look after the grandchildren. Three younger respondents perceived COVID-19 as controllable because they made it “*pleasant and comfortable at home*” and could still make pleasure with friends despite the lockdown because they lived with friends. Two relatively older respondents (51 and 58 years old) mentioned their age as a reason why they perceived COVID-19 as controllable. One of them compared the COVID-19 crisis with the credit crisis of 2008 and stated: “*I have been in this job for 12 to 15 years. I have been through a crisis before, never a pandemic but a crisis. You can look at it a bit more calmly than when you are younger. I don't want to say that you have to become overconfident, but you know how to stay calm and how to manage things*” (58-year-old male working as sales director). Several respondents stated that their optimism contributed to why they perceived COVID-19 as controllable. A good example of this is: “*I am not bothered by the measures and I don't make a fuss about it. You have to keep in mind that it is temporary. That is how I see it*” (24-year-old male working as a restaurant manager).

Deliberate thought process concerning one's career

Whereas all respondents perceived COVID-19 as disruptive and extraordinary and as something outside their own control, and most respondents perceived COVID-19 as controllable, there are bigger differences between respondents in the extent to which COVID-19 triggered a thought process about one's career. Since the other criteria are met, this is the main criterion for determining whether a person has perceived COVID-19 as a (potential) career shock. Whether and how COVID-19 has led to a deliberate thought process concerning one's career varies per respondent, but the thought processes can be categorized into three main categories. The first category consists of respondents for whom COVID-19 triggered a deliberate thought process about his or her career. For respondents from the second category COVID-19 did trigger a thought process but it stayed with thoughts and did not actually lead to further steps. The third category consists of respondents for whom COVID-19 triggered no thought process at all or there was already a thought process going on which had nothing to do with COVID-19.

For three respondents, one from the hospitality sector and two from the healthcare sector, COVID-19 triggered a deliberate thought process about his or her career. There are no

clear differences between sector and gender. One respondent worked as a nurse in a rehabilitation department and in the healthcare ambulance service at the beginning of the COVID-19 crisis. In the care ambulance she had to transport COVID-19 patients, but she did not feel entirely comfortable with that: *“I asked myself: is this something I really want? because I expose myself to a virus. I also have a family”* (34-year-old female). When she became infected with the COVID-19 virus at work, she decided that she did not want to work in direct contact with patients anymore and started working as a telephonist at a general medical practice centre. For a male who was self-employed in the events sector before the COVID-19 crisis, COVID-19 actually triggered two deliberate thought processes about his career. At the beginning of the COVID-19 crisis, his work in the events sector came to a complete halt, prompting him to look for something else. He stated the following about it: *“After four weeks, I thought, how long is this going to take? I have a care diploma, so I'm going to apply somewhere. I was immediately hired* (51 year old male working as a caretaker for people with a mental or physical disability). The fact that his original work came to a halt as a result of COVID-19 led to a thought process about his career and prompted him to work in the healthcare sector. The fact that he was forced to work in the healthcare over the past year as a result of COVID-19 triggered a second thought process about his career as he stated: *“The work I have done in the healthcare sector over the past year has really been of added value to me. The pleasure I have now and the attention and love I get from those people is really special. Even after COVID-19, I will continue to work as an on-call worker in the healthcare sector”*. COVID-19 changed his thoughts about his career after COVID-19 as he now would like to combine his work in the events sector with work in the healthcare sector. A female (34 years old) from the hospitality sector could not work at all due to COVID-19 and ended up sitting at home. She did not have a problem with this because it meant she had seven months of maternity leave instead of two, allowing her to spend more time with the baby. COVID-19 has made her realise that *“working full time is not necessary”* and *“it does not always have to be busy and a lot”*. Having a child has also changed her thoughts about her career: *“It is just a job now. I do not live for a career. I go to work and I like it and it is enriching, but I have much more fun apart from that”*. When asked what impact COVID-19 has had on those thoughts, she stated: *“COVID-19 has made me have those thoughts earlier”*. Before the COVID-19 crisis, she was an assistant manager, but when they reopened she decided to return in the position of staff member. Having a child, which in the literature is described as a potential career shock, led to the biggest change in her thoughts about her career, but COVID-19 has made her have those thoughts earlier and has strengthened those

thoughts by showing how pleasant it can be to be at home more.

For some respondents COVID-19 triggered a thought process but it stayed with thoughts and did not actually lead to further steps, as was the case with the aforementioned respondents. A difference could be seen between employees from the healthcare and hospitality sectors. Whereas COVID-19 in the healthcare sector only triggered a thought process for one respondent, this was true for three respondents from the hospitality sector. On the other hand, the thought process of the employee from the healthcare sector was stronger than those of the employees from the hospitality sector. The employee from the healthcare sector stated: *“I have had moments when I thought it would be better if I stopped for a while. Especially in the beginning when we had to work unprotected. Then I felt I was actually taking a big risk and I wondered whether it was worth it to me”*. Her dutifulness and sense of responsibility have resulted in these thoughts not being turned into actions: *“Despite the fear I feel of getting COVID-19, I will continue with my work”* (51-year-old female working as a nurse in home care). Three employees working in the hospitality sector indicated COVID-19 triggered a thought process because their work became less fun due to COVID-19, COVID-19 gave them more time to think about and explore other sectors and COVID-19 showed them you have to do something you like. However, these thoughts were weak or short dated, because it seemed them difficult to find another job during COVID-19 or they were not yet ready to switch from a side job to a permanent job in the field they had studied for.

For almost an equal number of respondents, three from the health sector and two from the hospitality sector, COVID-19 did not trigger a thought process at all or there was already a thought process going on which had nothing to do with COVID-19. Striking is that two young respondents (23 and 25 years old) from the hospitality sector both changed jobs during COVID-19, but this had nothing to do with COVID-19. Both also indicated they were hindered by COVID-19 when changing jobs because their new employers were a bit more reluctant and it was less easy to arrange viewing days. Furthermore, it is noteworthy that in the hospitality sector COVID-19 did trigger a thought process among relatively younger employees (four respondents aged between 22 and 34), but not among relatively older employees (58 and 64 years old). The 58-year-old respondent indicated that this was because of his position and his trust in the company even during these difficult times and the 64-year-old respondent assumed he would be able to continue working for his current employer until the retirement age.

Positively or negatively valenced

In both the healthcare and hospitality sectors, the majority of the employees negatively valued COVID-19 and its impact. Employees negatively valued COVID-19 because of less social contact, its mental impact, fear of the virus, changes in their work, the closure of stores and restaurants and not being able to practise hobbies. The changes in work as a result of COVID-19 such as the increased emotional demands in the healthcare sector and the closure of the hospitality sector were perceived as negative. At home, reduced contact with family and friends and not being able to practice hobbies led them to value COVID-19 negatively. One respondent stated: *“I sometimes get grumpy that I cannot practice my hobbies. It should not take that long anymore. If you have seven days there is one day that it frustrates me”* (56-year-old male working as sales manager in the hospitality sector).

In contrast, in both sectors there was one employee who valued COVID-19 positively. The employee from the hospitality sector indicated he perceived the *“cocoon”* he had to live in as positive, because it was an eye-opener that he and his family were living in too much of a hurry and stated: *“We are really going to take a different course after COVID-19. We are going to live more consciously, with more time and quality”* (51 year old male working as a caretaker for people with a mental or physical disability). In the hospitality sector, it was a female who valued COVID-19 positively because she became pregnant during the first lockdown, which meant she had more *“quality time”* with her husband before the child was born and more time with the baby after. Only looking at employees for whom COVID-19 has been a career shock, the proportions are quite different (2 positive, 1 negative). This seems to indicate that those who value COVID-19 positively are more likely to perceive COVID-19 as a career shock than those who value COVID-19 negatively.

Motivation at work

COVID-19 had an impact on the motivation at work for both employees working in the healthcare and hospitality sectors. Whereas COVID-19 had an impact on the motivation at work for all employees in the hospitality sector, this was not the case for all employees in the healthcare sector. A recurring narrative was that employees from the healthcare sector had the intrinsic motivation to take good care of patients. The intrinsic motivation did not decrease or increase as a result of COVID-19, but did ensure for two respondents (two females aged 51 and 54) that their motivation at work did not change even though they worked over time and were afraid of getting COVID-19. The other employees from the healthcare sector also indicated that they were intrinsically motivated, but despite that, COVID-19 led to a decrease

in their motivation at work for a variety of reasons. For a female (25 years old) who works at an intensive care unit in a hospital, the emotional demands in her work led to a decrease in her motivation and she stated: *“I had to get used to the fact that people were suddenly ill. They were not prepared to get ill. Especially in the second wave, I had at least one death every work shift. I had more work shifts with a death than work shifts without one. It was hard for me to deal with all those deaths and having to take care of those families”*. This had a major impact around the holidays in particular, because of the contrast between the conviviality at home and the fierce situation at work. When the number of deaths and infections fell, her motivation rose again. The motivation of a 23-year-old male decreased because he had fallen into a negative spiral as a result of a lack of a positive perspective, while the motivation of a 34-year-old female decreased because of a COVID-19 infection which made her feel she no longer wanted to work in direct contact with patients to protect her own health. For a male (51 years old) that made the switch from being self-employed in the events sector to an employee in the healthcare sector a person-job fit seem to have an impact on his motivation. He stated: *“when I worked at groups with disabled people my motivation dropped because I am not a man of administering medicines on time and doing everything by the book. Then I started looking within the organisation to find some more light-hearted work and now I am in the day care and that is where I come into my own”*. When he started at the day care his motivation increased again, what seem to indicate that a person-job fit can have an impact on the motivation at work.

Where the course of the motivation at work during COVID-19 in the healthcare sector strongly varied between the employees, a clearer pattern could be detected for employees from the hospitality sector. The motivation decreased during the first lockdown when the hospitality sector was closed for the first time, increased in the summer period when the hospitality sector was allowed to reopen with restrictions and decreased again at the end of 2020 when the hospitality sector was closed for the second time. One respondent stated the following about the closure of the hospitality sector: *“What I normally like is the conversation with guests, the social aspect and that disappeared. As a result, my motivation at work decreased”* (26-year-old male working as a waiter). Half of the respondents from the hospitality sector indicated that they had not been able to work at all, either for a short time or for a longer period, as a result of COVID-19, which reduced their motivation. When the hospitality sector was allowed to reopen with restrictions, the motivation at work increased again because it became more like *“the old situation”* before COVID-19 and the elements of the work that employees like, such as contact with guests, came back. When the hospitality

sector was closed for the second time, the motivation at work for three respondents decreased even more than during the first lockdown because employees found it difficult to remain motivated for longer periods of time for take-away and delivery work, which they liked less and because the renewed closure of the hospitality sector was perceived as a “*hard blow*”.

In general, the impact of COVID-19 on the motivation was greater for employees from the hospitality sector than from the healthcare sector, which can be explained by two main reasons. Firstly, because the changes in work due to COVID-19 had a different impact on the person-job fit. Although the work of employees from the healthcare sector changed due to the consequences of COVID-19, they still could do the work that fits with their individual’s characteristics such as their personality and interests. However, the fit between the work and individual characteristics of employees from the hospitality sector became smaller because the aspects of the work they like could not be or limited performed due the COVID-19 measures. Secondly, because the decreases in resources in the hospitality sector were perceived as a greater barrier for the motivation at work than the increases in demands in the healthcare sector.

Barriers and opportunities

The third component of the research question indicates the barriers and opportunities employees perceived in dealing with the impact of the COVID-19 crisis with regard to their motivation at work. First of all, the opportunities employees from both sectors perceived will be discussed, followed by the barriers.

Opportunities healthcare and hospitality sector

Both employees from the healthcare and the hospitality sector indicated that support from colleagues helped them to remain motivated or increase their motivation during COVID-19. One employee from the healthcare sector stated: “*I noticed that the colleagues I worked with were also motivated, so that makes a difference. If there are a few who give up, then that also has its impact on the team, but I have never experienced that*” (34-year-old female working as a nurse at a rehabilitation department). A pleasant working atmosphere and a pleasant team in which colleagues support each other, can be spoken about incidents and where, in addition to hard work, there is also time for a bit of fun, were perceived as motivating factors. In addition to support from colleagues, also support and understanding from the supervisor or employer were perceived as motivating. This support was expressed in various ways and differed between both sectors. An example of a respondent from the

healthcare sector is that the GGD did not want to take a test at the beginning of the COVID-19 crisis, but then her supervisor himself contacted the GGD and arranged a test on the same day. This made her feel her supervisor took it very seriously and was on top of things, which motivated her. Other examples of support from the supervisor or employer were daily contact, gifts and bonuses. The understanding and respect that employers and supervisors had for the hard work done by employees during COVID-19 and the feeling that employers and supervisors were doing everything possible to get through this intense period as best as possible were perceived as motivating by employees working in the healthcare sector. In these uncertain times for the hospitality sector, employees from this sector particularly perceived it as motivating to feel supported by their supervisors, to be clearly informed about the financial situation and future of the company and to receive a form of certainty from their employers about keeping their jobs. Two employees even received a salary increase which had a positive impact on their motivation. One respondent stated: *“I have received a salary increase even during a difficult time for my employer. That motivates me because that gives me the feeling that they are happy and satisfied with me”* (26-year-old male working as a waiter).

Furthermore, half of the respondents from the healthcare sector indicated that a cautious and adequate COVID-19 approach by the employer motivated them. With a cautious and adequate COVID-19 approach employees mean keeping (potential) COVID-19 patients strictly isolated, trainings focused on hygiene regarding COVID-19 and how to conduct COVID-19 tests and having sufficient protective clothes. It is striking that not a single worker from the hospitality sector spoke about the COVID-19 approach of his or her employer and whether that had an impact on their motivation at work. This could be related to the fact that employees working in the healthcare sector do come into direct contact with patients and therefore run the risk of being infected, while in the hospitality sector that contact became less and even disappeared for a while. One respondent who worked for two different employers during COVID-19 noticed a clear difference in COVID-19 approach and described the impact of that on her motivation as follows: *“In the rehabilitation department, ad-hoc things happened all the time and it felt like you were continuously behind the times. For example, patients with fever were admitted and placed on a non- COVID-19 department. No clarity and no clear policy demand a lot from staff and yourself. At the general medical practice centre everything was much more thought-out and less ad hoc, which motivated me because you feel somewhat protected”* (34 year old female). Finally, several employees from both the healthcare and hospitality sectors indicated that responsibilities and decision-making authority motivates them in general, but this was not reinforced by COVID-19.

At home, almost all employees from both sectors indicated they perceived support from their partners, families or friends which helped them to remain motivated at work. This support was expressed in various ways such as being able to talk about work, having grandparents looking after the children and having fun with friends in their spare time. One employee working in the healthcare sector even received cards and flowers from neighbours because there was so much talk in the news about how hard it was for employees in the healthcare sector.

On a personal level, employees from both sectors indicated that certain character traits had helped them to remain motivated. Optimism, down-to-earthness, adaptability, sense of responsibility and passion for one's work were all mentioned by multiple respondents from both sectors. Optimism helped to keep one's head up and to hold on to the beautiful and positive things in the sometimes difficult and uncertain time of COVID-19. Adaptability and down-to-earthness helped employees to deal with all the changes that COVID-19 brought about both at work and at home. One respondent indicated that his adaptability helped him to remain motivated: *“New measures also meant that the employer had to come up with new things. You have to be open to the fact that you will have to do other work for a longer period of time now. You have to be a bit light-hearted and accommodating”* (26-year old-male working as a waiter). Also, the sense of responsibility to take good care of patients or to serve guests with take-away or delivery food in the best possible way helped employees to remain motivated. Passion for one's work was perceived as an opportunity for employees from the healthcare sector because although they had to work hard and the work became more demanding, they could still do the work they are passionate about, whereas for employees from the hospitality sector it was more of a hindrance because the work they are passionate about could not be performed or only to a limited extent.

Barriers healthcare and hospitality sector

All employees from the healthcare sector indicated that they worked more as a result of COVID-19. Half of them perceived working overtime and the increased workload as a barrier for their motivation. In addition to the increased workload, the increased emotional demands of the work were also perceived as a barrier by the majority of respondents from the healthcare sector. One respondent stated: *“I worked at a group with mentally disabled people where a number of patients had to be quarantined. Talking to a client with a door in between and hearing them cry and not being able to explain to them properly that the quarantine is temporary and best for them, was very painful”* (51 year old male). Another respondent was

particularly hindered by the number of deaths that followed each other in rapid succession and found it hard to deal with those deaths and have to inform the patient's relatives. Whereas in the healthcare sector the emotional demands were seen as too heavy and therefore as a barrier, in the hospitality sector the lack of contact with guests was perceived as a barrier for the motivation. The employees from the hospitality sector indicated that they like the social aspect of their work and that contact with guest motivates them. One 22-year-old female working as a waitress even stated that she likes the contact with guests the most about her work, but now she only had contact by phone, which has led to a decrease in her motivation at work. Also, five out of six employees from the hospitality sector indicated that they liked the work during COVID-19, such as delivery and take-away, less than the work before COVID-19 which had a negative impact on their motivation. The respondent who did not indicate this works as a sales director where he did face new challenges, but his work did not change as drastically as it did for the other employees in the hospitality sector. Where half of the respondents from the healthcare sector indicated that a cautious and adequate COVID-19 approach by the employer was perceived as an opportunity for the motivation, it also worked the other way around as a careless and inadequate COVID-19 approach was perceived as a barrier. Employees from the hospitality sector, on the other hand, did not speak of an adequate or lax COVID-19 approach from their employer, but indicated that misunderstandings and disagreements about the COVID-19 situation hindered their motivation sometimes. A 26 year old male working as a waiter for example stated that at the time the hospitality sector was opened with restrictions, he sometimes felt like a "*police officer*" and sometimes got unpleasant reactions from people, which hindered his motivation. Several employees from both sectors indicated that they perceived the fear of getting infected or unknowingly infecting a vulnerable person (especially in the healthcare sector), uncertainty about how the work has to be organised differently and uncertainty about the duration of the COVID-19 crisis as barriers for their motivation. Employees from the hospitality sector also indicated uncertainty about whether the sector remained closed or could be reopened again and two respondents mentioned the uncertainty of job retention.

At home, employees from both sectors indicated that friends, going out and practising hobbies were missed, but for the vast majority that did not hinder the motivation at work. It is notable that it had no impact on the motivation of employees who indicated they perceived COVID-19 and its impact as controllable, but it did have an impact on the motivation of employees who perceived COVID-19 as less controllable. For example the closure of schools as a result of COVID-19, which meant that two respondents had to teach their children at

home, was not perceived as a barrier because of working hours that enabled home education and experience with home education because of a previous journey through Asia.

From a personal point of view, two employees from both sectors indicated that a negative mood and pessimism had a negative impact on their motivation at work. In times of COVID-19 where employees have to deal with less social contact and there is little perspective, a negative mood and pessimism can cause them to fall into a negative spiral, which has a negative impact on their motivation at work. One respondent stated: *“You are in a negative spiral. We have so little perspective. I notice that I have ended up in a kind of slump which reduces my energy”* (23 year old male working as a mentor for people with a mental disability). Furthermore, two employees, one from both sectors, indicated that their character trait to find it difficult to lose control hindered their motivation during the uncertain time of COVID-19 where not everything is within one's own control. One respondent stated: *“I go to work and my partner goes back to work and the baby goes to daycare. So all those bubbles are out of my control. I find that a bit unpleasant, I have to get used to that”* (34-year-old female working as an all-round employee in the hospitality sector).

Unexpected findings

From the interviews conducted, it emerged that government policy can also have an impact on how employees perceive the impact of COVID-19 as a career shock with regard to their motivation at work, while this was not expected based on the theoretical framework. Employees from both the healthcare and hospitality sectors indicated that the way the government managed the COVID-19 crisis and what COVID-19 measures they imposed, had an impact on their motivation at work. Dutch employees from both sectors indicated that an unclear COVID-19 government policy had a negative impact on their motivation at work. A 23-year-old male working in the healthcare sector stated: *“We have so little perspective. The government says and promises a lot, but all the time they do not fulfill those promises”*. Looking forward to relaxation of the measures and being disappointed every time caused him to fall into a negative spiral, which had a negative impact on his motivation. Also a 22-year-old female working as a waitress indicated that the government's COVID-19 policy had a negative impact on her motivation and stated: *“You always have to wait and there is no clarity from the government towards the hospitality sector, which is quite frustrating”*. Government policy did not only have an impact on the motivation of relatively younger employees, but also of relatively older employees. A 51-year-old female working as a nurse clearly indicated that she did not support the advice of the government organisation RIVM to

employers that employees did not have to work with protective clothing at the beginning of the COVID-19 crisis. Her employer followed this government advice, which led to a drop in her motivation because she no longer felt safe at work. For these respondents, the unclear COVID-19 policies or disagreeing with the policies led to a decrease in their personal resources (e.g. mood and optimism), which caused a decrease in their motivation.

Another example of a government-imposed COVID-19 measure that can have an impact on employees' motivation is the closure of schools. Two respondents with young children indicated that they had to home school their children because of this COVID-19 measure. In the case of these two respondents, the closure of schools did not lead to an increase in overload demands as they had experience with home schooling because they had travelled through Asia for two months or because they had working hours that matched home schooling and perceived support from their parents that like to look after the grandchildren. However, as COVID-19 and its impact are perceived differently by each person, for other employees the closure of schools may lead to an increase in overload demands as teaching their children at home causes them to perform more tasks simultaneously, which might decrease their motivation at work. In summary, from the data emerged that COVID-19 measures imposed by governments can be associated with changes in employees' demands and resources identified in the W-HR model, which ultimately can lead to changes in employees' motivation at work.

Furthermore, the answers given by the only respondent in the sample who lives and works in Belgium showed that the Dutch and Belgian COVID-19 government policies differ, which may cause differences in the degree of changes in employees' demands and resources and with that also in employees' motivation. This respondent stated: *"the fact that I live in Belgium and the borders were closed and I could not go back to my family was very difficult"* and *"In Belgium, we had cuddle contacts. You were allowed to have one cuddle contact per family, which meant that only one person from outside your household was allowed to visit you. So you became very restricted in your freedoms"* (34-year-old- female working as an all-round employee in the hospitality sector). In this case, the COVID-19 measures imposed by the Belgian government went at the expense of the social support resources of the respondent, which led to a decrease in her motivation. In contrast, the Dutch COVID-19 measures allowed citizens more to visit family and friends which made the social support resources less abruptly restricted, as a result of which the motivation of employees did not decrease or decreased less. This is illustrated by the following statement of a Dutch respondent: *"I am not really bothered by the COVID- 19 measures. If I can spend a lot of time with friends at home, then I can*

function well at work” (25-year-old female working as a nurse at a COVID-19 department in a hospital).

The statements of the respondent who works and lives in Belgium also uncovered differences in the support measures offered by the Dutch and Belgian government. The respondent who works and lives in Belgium stated: *“The Belgian government has invoked a technical unemployment scheme. This is a temporary unemployment benefit that applies to everyone who cannot work because of COVID-19 and the COVID-19 measures and also applies to the hospitality sector. Because of this I received a benefit for the first time in my life, which I actually perceived as quite pleasant”* (34-year-old- female working as an all-round employee in the hospitality sector). Dutch employees from the healthcare sector did not receive a temporary unemployment benefit, but indicated that their employers received state support which partially covered the costs and from which the employees’ salaries had to be paid. That the Dutch state support did not mean that employees could easily keep their jobs is illustrated by the following statement: *“I saw colleagues being fired and contracts not being renewed because my employer had financial difficulties due to COVID-19. We had a team of 21 people, but now we are only with 8”* (26-year-old male working as a waiter). The differences between the support measures offered by the Dutch and Belgium government could mean that COVID-19 did form a career shock for Dutch employees because they lost their jobs or started looking for a job with more income security, while this was not the case for Belgian employees because of the temporary unemployment benefit offered by the government.

Additional analysis

In the 'unexpected findings' section was shown that from the interviews emerged that government policy can have an impact on employees’ motivation at work and that the COVID-19 government policies of The Netherlands and Belgium differ. However, as the sample only consists of eleven respondents who work and live in The Netherlands and one respondent who works and lives in Belgium additional secondary data was collected to be able to compare the differences between the Dutch and Belgian COVID-19 government policies and how employees perceived the impact of this COVID-19 measures on a larger scale. In the following, a summary of the used data collection methods and most important findings of the additional analysis is provided.

The additional analysis started with the identification of the COVID-19 measures imposed by the Belgian and Dutch governments. For the Dutch COVID-19 measures, the

following search terms were sought in Dutch: 'COVID-19 measures Netherlands' (42,700,000 results), 'COVID-19 measures Netherlands beginning COVID-19 crisis' (7,610,000 results), 'Most important COVID-19 measures Netherlands' (1,440,000 results), 'Overview of COVID-19 measures Netherlands timeline' (813,000 results) and 'COVID-19 government policy Netherlands' (42,000,000 results). Over twenty (newspaper) articles and websites found using these search terms were used to draw up a list of the largest and most important COVID-19 measures imposed by the Dutch government including the used search terms, timelines with the course of the COVID-19 measures and the consulted sources (see appendix D). In summary, the largest measures imposed by the Dutch government were the closure of the hospitality sector, schools and non-essential stores, the introduction of the mouth mask obligation and curfew, the imposed travel and entry bans and the financial support packages. The same data collection method was used to identify the measures imposed by the Belgian government, using the search terms 'COVID-19 measures Belgium' (13,800,000 results), 'Most important COVID-19 measures Belgium' (1,120,000 results), 'COVID-19 government policy Belgium' (11,900,000 results) and 'Overview of COVID-19 measures Belgium timeline' (276,000 results). In summary, the largest measures imposed by the Belgian government were the closure of the hospitality sector, schools and non-essential stores, introduction of the mouth mask obligation and curfew, closing the borders, financial support packages, introduction of social bubbles in which it only was allowed to see small numbers of people and the prohibition of non-essential movements (see appendix D for a more comprehensive and detailed view of the Belgian COVID-19 measures).

Because detailed lists of the largest and most important COVID-19 measures imposed by the Dutch and Belgian government were drawn up, the similarities and differences could easily be compared. Both governments stressed the basic rules of washing your hands regularly, coughing and sneezing into your elbows, keeping 1.5 meters distance and staying at home and testing in case of complaints. Both governments also closed the hospitality sector and schools depending on the number of COVID-19 infections in their country. A difference is that in the Netherlands the non-essential stores were only closed during the second wave in December 2020, while in Belgium all non-essential shops closed during the first wave in March 2020 and again in October 2020. The Belgian government policy was stricter in this respect and tried to prevent unnecessary contact with this measure. The fact that the Belgian COVID-19 policies were stricter than the Dutch COVID-19 policies was also reflected in the prohibition on non-essential movements while Dutch citizens were free to move around the country, the earlier and in some places outdoor introduction of the mouth mask obligation and

a €208 fine for violating the COVID-19 measures instead of €95. Although the curfew in Belgium was introduced earlier and applied for a longer period, it was only in force from 12:00 a.m. to 5:00 a.m., with the exception of big cities where the curfew was from 10:00 p.m. to 6:00 a.m., while in the Netherlands the curfew was in force from 9:00 p.m. and later 10:00 p.m. to 4:30 a.m. Furthermore, at the start of the COVID-19 crisis, the Netherlands only had an entry ban for travellers from countries outside the EU, but welcomed travellers from EU countries, while Belgium partially closed its borders and banned non-essential movements to and from Belgium. In addition, at some times during the COVID-19 crisis, Belgians were only allowed to have one ‘cuddle contact’ and families were only allowed to receive four different visitors every two weeks, while the Dutch were allowed to receive two different visitors every day. Finally, there are differences between the support measures offered by the Dutch and Belgian government. Dutch employers can be reimbursed for a large share of their wage costs with the measure ‘Temporary Emergency Measure Bridging for Employment’ (Tijdelijke Noodmaatregel Overbrugging voor Werkgelegenheid’ (NOW) in Dutch), if they expect to lose at least 20% turnover due to the consequences of COVID-19. Belgian employers, on the other hand, can rely on the technical unemployment system, by which their employees receive a temporary benefit equal to 70% of their average wage.

The above mentioned differences between the Dutch and Belgian government-imposed COVID-19 measures cause differences in the degree of changes in the demands and resources between Dutch and Belgian employees, which may cause differences in the perceived impact on their motivation at work and whether they perceived COVID-19 as a career shock, as shown earlier in the ‘unexpected findings’ section. In addition to the primary data collected for this study, secondary data is used to examine on a larger scale how employees from the Netherlands and Belgium perceived the COVID-19 measures imposed by their governments and how these measures had an impact on their motivation at work.

Based on the previously compiled list of the largest and most important COVID-19 measures of the Netherlands and Belgium, opinions about the different COVID-19 measures and the way the government managed the COVID-19 crisis were searched on Twitter. Over 40 tweets were used to create a view of the opinions and experiences of Dutch and Belgian residents. A detailed view of The search terms that were entered into the Twitter search function and the tweets found is included in Appendix E. In addition to the tweets five (newspaper) articles and websites, found using the search terms ‘Belgian opinions on COVID-19 measures’ (2,830,000 results), ‘Dutch opinions on COVID-19 measures’ (7,640,000 results), were used. In the following, a summary of these findings is provided.

The analysis of the secondary data showed that both Dutch and Belgians felt that the COVID-19 measures were unclear at some times and that their governments communicated poorly. One Dutch male Tweeted: *“The unclear and contradictory measures make people have little confidence in the government policies”* (Bossenbroek, 2020). Another Dutch male tweeted: *“What an unclear road map of the government. They should take a lesson in communication”* (Visser, 2020). This is in line with respondents who indicated that the Dutch government was unclear and that they did not always agree with the COVID-19 policies. Also Belgians indicated that their government did not have clear policies or poorly communicated their policies. One Belgian tweeted: *“Until recently, I generously supported the government in its COVID-19 policy. I notice, and this worries me, that I am finding it increasingly difficult. A lot has been going wrong lately in terms of decisions and communication. Come on government, hold me!”* (Witzier, 2021). Another Belgian spoke words of a different nature and put the quality of the Belgium government policies in perspective: *“Our politicians communicate well. One half of the population agrees with their decisions, the other half does not. Isn't that the typical definition of a good decision in Belgium?”* (Riepl, 2021). Although it is impossible to impose COVID-19 measures that everyone agrees with, it is clear that both the Dutch and Belgian governments have sometimes failed to implement and communicate a clear COVID-19 policy. Following the statements of the interviewed respondents for whom the unclear COVID-19 policies led to decreases in their personal resources (e.g. mood and optimism) causing decreases in their motivation and the aforementioned, it is assumed that this may also be the case for other employees.

Looking at the COVID-19 measures imposed by the Dutch and Belgian governments, they both severely restrict the social contacts of their inhabitants. In Belgium, the rules were generally stricter and limited the social contacts of inhabitants more than in The Netherlands, which also emerged from the interviews. As a result, Belgians were expected to perceive a greater decrease in their social support resources, which would have a negative impact on their motivation. However, analysing the secondary data, no clear differences between the Dutch and the Belgians were found, as they both perceived the measures as causing a strong decrease in their social support resources. For example, one Dutch male tweeted: *“@MinPres already talked about outdoor sports with the OMT? Because I do need social contact again after almost 5 months”* (De Groot, 2021). With a petition that was signed 5,000 times, inhabitants of the Belgian-Dutch border tried to ensure that people with family on the other side of the border receive the same relaxation as residents of Belgium. The initiators of the petition explained: *“Keeping the borders closed has a huge impact on the people living in the*

border region. Many people have not seen their families for months” (Lux, 2020). This indicates that the measures may not only lead to decreases in social support resources, but also to increases in emotional demands, as not being able to see one's family for a long period of time can have emotional impact too. Regardless of whether the Belgian measures restricted social contacts more than the Dutch measures and whether the inhabitants perceived this as such, the COVID-19 measures that restrict social contacts lead to decreases in social support resources and increases in emotional demands, which has a negative impact on employees' motivation.

Furthermore, both governments closed the schools depending on the number of COVID-19 infections in their country. Two respondents already indicated that they had to home school their children because of the COVID-19 measures, but perceived that as manageable. That home schooling was not perceived in this way by everyone becomes clear from the following tweet from a Dutch woman: *“I already worked at home. But now the children are no longer allowed to go to school or to the day-care. So, now I cannot organize home schooling properly and cannot work properly”* (Verdel, 2020). Another Dutch indicated that his work stress increased every day (Gijsbers, 2020) and a Belgian indicated that he had to bring his children to their grandparents who do not live nearby because of the closure of schools (Wisse, 2020). This tweets show that the measure to close schools can lead to an increase in overload demands and emotional demands at home, which might decrease employees' motivation.

Summarized, the additional analysis showed that there were similarities and major differences between the COVID-19 measures imposed by the Dutch and Belgian governments and the way in which they managed the COVID-19 crisis. In addition, it showed that the motivation of employees from both countries is indirectly affected by the imposed COVID-19 measures as the COVID-19 measures caused decreases in resources and increases in demands, which in turn affect employees' motivation again.

Discussion

Conclusion

This study investigated the following research question: *“How do employees from the healthcare sector and hospitality sector perceive the impact of the COVID-19 crisis, as a potential career shock, with regard to their motivation at work and which barriers and opportunities do they perceive in order to remain motivated?”*. This was interesting as COVID-19 was identified as a potential career shock that might have a major impact on people's work and careers (Akkermans et al., 2020). In addition, the study of Pak et al (2020) showed that career shocks can change employees' motivation (Pak et al., 2020). However, the factors that have an impact on the motivation at work were under great pressure for certain groups of employees during the COVID-19 crisis (Kniffin et al, 2021; Schwarz et al, 2020; Brooks et al, 2020), while motivation is crucial for individual and organisational performance (Alexandru, 2019; Hee & Kamaludin, 2016). The research question was examined with the use of semi- structured interviews in which twelve respondents working in the healthcare and hospitality sectors were asked to reflect on the impact COVID-19 had on their thoughts about their careers and motivation at work.

This study found that COVID-19 can be a career shock as it caused employees to look differently to their careers or to search for a different job, but that is by no means the case for all employees. Furthermore, this study found that COVID-19 can have an impact on the motivation at work. In general, this impact is greater for employees from the hospitality sector than from the healthcare sector, which could be explained by the differences in the reduced person-job fit and perceived hinder of the increased demands and decreased resources between both sectors. Finally, this study found several barriers and opportunities to remain motivated during COVID-19. Social support at work and at home, feedback, autonomy and opportunities for development all form opportunities for employees from both sectors, while a cautious and adequate COVID-19 approach primarily forms an opportunity for the healthcare sector. The increased workload, increased emotional demands at work and fear of getting infected form the largest barriers for the motivation of employees working in the healthcare sector. For employees working in the hospitality sector, on the other hand, the lack of contact with guests, the sole preparation of delivery and takeaway meals and uncertainty about the duration of the COVID-19 measures and job retention form the largest barriers for their motivation. Lastly, this study found that the COVID-19 government policies of countries differ, causing differences in the extent to which the COVID-19 measures lead to a decrease

in resources or an increase in demands identified in the W-HR model, which in turn leads to a different impact on employees' motivation at work.

Theoretical contributions

Scientific literature on career shocks and their impacts on careers is still sparse (Akkermans et al., 2018; Rummel et al., 2019) and there is a need for empirical findings that can help the field forward (Akkermans et al., 2018, p. 8). This study contributed to this need by providing preliminary insights into the way employees from the healthcare and hospitality sectors perceived the COVID-19 pandemic as a career shock. Based on a recent article by Akkermans et al. (2020), in which they theoretically applied the core characteristics of a career shock to the COVID-19 pandemic to check whether COVID-19 can be considered as a career shock, it was expected that employees could perceive COVID-19 as a career shock. Indeed, this study found that COVID-19 has been a career shock for a quarter of the respondents as COVID-19 triggered a deliberate thought process concerning their careers and caused them to start in another job or to work less. This contributes to the literature that COVID-19 cannot only be classified as a career shock based on theory, but also based on empirical data. For a third of the respondents COVID-19 did trigger a thought process about their careers, but these thoughts were weak or short dated and did not lead to any follow-up steps. Therefore, at this moment in time, it can be concluded that COVID-19 has not been a career shock for these respondents. However, as the COVID-19 pandemic is still going on and its impact is far from clear, the thought processes about their careers may change over time, which means that COVID-19 yet could be considered as a career shock for these respondents in a later moment of time. This in line with a study by Seibert et al. (2013) which findings demonstrate that the actual impact of a career shock on one's career outcomes may not be immediate, but rather manifest over time. This study contributes to the literature by showing that also for COVID-19, as a career shock, applies that its total impact may only become clear over time. This is in line with the study of Akkermans et al. (2020) that argues that there may be differences between short-term and long-term consequences of COVID-19. This study also showed that COVID-19 can be both a positive and a negative career shock and that the degree of perceived controllability of the career shock differs per person. This is in line with several studies that showed that the impact of COVID-19 (Hite & McDonald, 2020) and career shocks (Burton et al., 2010; Akkermans et al., 2020) will be perceived differently by each person. Furthermore this study found that two career shocks can occur simultaneously and can reinforce each other. The fact that two career shocks can occur simultaneously was

highlighted in the literature before by Seibert et al. (2013) who gave the example of a mentor leaving the organisation and a significant organisational change as two negative career shocks that occurred simultaneously. However, the combination of COVID-19 and the birth of a child and that both career shocks can reinforce each other, has not been highlighted in the literature before.

The second contribution of this paper was to examine how employees perceive the impact of COVID-19 with regard to their motivation at work. As existing literature showed that career shocks can change employees' motivation (Pak et al., 2020) and COVID-19 was identified as a potential career shock (Akkermans et al., 2020) it was expected that COVID-19 could have an impact on the motivation. The findings of this study are in line with this expectation and show that COVID-19 had a negative impact on the motivation at work for the majority of the respondents from both sectors. This study found that the impact that COVID-19 has on the motivation at work partly depends on the extent to which the changes in work due to COVID-19 lead a reduction of the fit between employees' work and their individual characteristics such as their personality and interests, also known as the person-job fit (Kristof-Brown, Zimmerman, & Johnson, 2005). This is more or less in line with the study by Pak et al. (2020) who found that the impact of a career shock on the motivation to continue working is determined by the way the person-job fit is altered. This study contributes to the literature by showing that COVID-19 as a career shock can have an impact on the motivation at work by reducing the person-job fit.

The third contribution of this study was to examine what barriers and opportunities employees perceive to remain motivated during the COVID-19 crisis. Using the W-HR model several factors that can have an impact on the motivation at work were identified. Looking at the barriers with regard to the motivation at work this study showed that overload demands (e.g. working overtime, high workload), emotional demands (e.g. death of patients, fear of losing job, family health concerns) and physical demands (e.g. working with protecting clothing) can form barriers for the motivation at work. This is in line with existing dimensions from the W-HR model that assumes that these demands deplete personal resources, resulting in diminished outcomes including the motivation at work (Ten Brummelhuis & Bakker, 2012). However, as COVID-19 is a new phenomenon new type of barriers within these dimensions emerged such as the fear of a COVID-19 infection, uncertainty about the duration of the crisis and uncertainty about new organisation of the work (all emotional demands) and working with protective clothing and keeping 1,5 meter distance (physical demands). Thus, this study adds some new type of barriers to the literature. The W-HR model also mentioned

cognitive demands, tasks that require a lot of concentration, as a barrier for the motivation. However, employees did not perceive cognitive demands as a barrier for their motivation at work. These findings are not in line with the W-HR model that assumes that cognitive demands deplete personal resources, which can result in a lower motivation at work. Looking at the opportunities this study showed that social support (e.g. support from colleagues, partner and family), autonomy (e.g. responsibilities, autonomous work), opportunities for development (e.g. training programmes, COVID-19 related courses) and feedback (e.g. supervisor evaluation) can form opportunities for the motivation at work. This is in line with existing dimensions from the W-HR model that assumes that these resources lead to the development of personal resources, resulting in improved outcomes including the motivation at work (Ten Brummelhuis & Bakker, 2012). In addition to the existing resources this study found one new COVID-19 specific resource in the form of a cautious and adequate COVID-19 approach from the employer. Opportunities for the motivation at work in this resource are for example strict isolation from (potential) COVID-19 patients and sufficient protective clothes. Thus, this study contributes to the literature showing that a cautious and adequate COVID-19 approach from the employer can be an opportunity for the motivation at work.

Lastly, this study found that the COVID-19 policies of the Dutch and Belgium governments differ. This is in line with the findings of Li, Lu and Zheng (2021) who found that countries have taken different approaches to control COVID-19 depending on country-specific factors such as cultural traditions and institutional backgrounds. Furthermore, this study found that COVID-19 measures imposed by governments can be associated with changes in demands and resources from the W-HR model, which ultimately can lead to changes in employees' motivation at work. For example, was found that the Belgian COVID-19 measures to close borders and to allow only one visitor went at the expense of social support resources, which led to a decrease in motivation. On the other hand this study also showed that the by governments imposed COVID-19 measures, for example the closure of schools, can lead to increases in overload demands, which might decrease employees' motivation. Although, earlier studies did make use of the WH-R model to compare government policies, such as for example the study from Heras et al (2020) who showed that government effectiveness influences work-family related resources and with that work-family balance satisfaction, they did not look at how government-imposed COVID-19 measures affect the resources and demands in the W-HR model and how that affects employees' motivation. This study contribute to the literature on government policy by showing that the imposed COVID-19 measures can lead to decreases and increases in the

employees' demands and resources, which ultimately can lead to changes in their motivation at work.

Limitations and suggestions for future research

The findings of this study should be considered in light of a few limitations. The first limitation is related to the small sample size of twelve respondents. Due to the small sample size and qualitative design the results of this study cannot be generalized (Vennix, 2019). However, the results indicate interesting areas to explore with quantitative data. For example, a quantitative design could be used to test whether other employees perceive the same barriers and opportunities as indicated in this study.

A second limitation of the sample is that the respondents from the healthcare and hospitality sectors hold different positions. On the one hand, this is a strength because it gives a diverse view, on the other hand it is a limitation because it may lead to under or over representation of certain positions. For example, the sample of employees from the healthcare sector consists of four nurses, but not one doctor. Due to the over and under representation of certain positions in the sample compared to the population the results of this study are not representative for the whole sector and cannot be generalized (Ritchie & Lewis, 2003). In future research, the sample has to be representative for the entire sector by taking into account the variation in positions.

A third limitation of this study is that the findings of this study are based on a single measurement moment. As the COVID-19 crisis is still going on it is hard to determine the full impact of COVID-19 at this moment in time. In addition, the study of Akkermans et al. (2020) argued that there may be differences between short-term and long-term consequences of COVID-19. For this reasons, future research is recommended on how the perceived impact of COVID-19 may change over time and how the short-term and long-term consequences of COVID-19 differ from each other. This could for example be done using a qualitative longitudinal study which makes it possible to indicate fluctuations in behaviours, thoughts and emotions among a fixed group of respondents (Bleijenbergh, 2015).

A fourth limitation is the chance on social desirable answers because of the topic motivation at work. Social desirability refers to the tendency of research subjects to give socially desirable responses instead of choosing responses that are reflective of their true feelings or behaviour (Grimm, 2010). Employees are expected to be motivated at work to a certain degree, which increases the change of social desirable answer which why they may have scaled their motivation at work higher than it actually was. However, this research

guaranteed anonymity which according to Kelman (1958) decreases the chance on social desirable answers. In future research, this change could be reduced by interviewing employees' managers or employers, in addition to employees themselves. In this way, you get a two-sided view on an employees' motivation at work, which makes it possible to identify when an employee gives an incorrect description of his or her motivation at work.

Furthermore, this study focused explicitly on COVID-19 as a career shock and its impact on the motivation at work. However, career shocks might also influence other work and career related outcomes. In addition to motivation at work, Kanfer et al. (2013) also distinguish the motivation to work and motivation to retire, which also can be interesting outcomes. The study by Blokker, Akkermans, Tims, Jansen and Khapova (2019) shows that career shocks can also have an impact on career competencies and employability. Therefore, it would be interesting to look at multiple work and career related outcomes in future research.

Finally, from the data emerged that government policy might have an impact on employees' motivation at work and whether they perceive COVID-19 as a career shock. However, the additional analysis conducted to further explore these findings only compared the Dutch and Belgium COVID-19 government policies and were based on secondary data. Therefore, it is recommended to conduct quantitative future research using primary data to find out how COVID-19 government policies of several countries differ from each other and how that affects employees' demands and resources and ultimately their motivation at work.

Practical implications

Several studies has shown that motivation leads to better individual and organisational performance (Alexandru, 2019; Hee & Kamaludin, 2016; Meadows et al, 2016) and that unmotivated employees will reduce their efforts (Alexandru, 2019). Therefore, it is important for employers and managers to ensure that employees remain motivated during the COVID-19 crisis. This study provided some insights into the barriers and opportunities employees from the healthcare and hospitality sectors perceived to remain motivated. Based on these insights it is recommended to pay more attention to the opportunities and to remove or minimise the barriers found in this study.

The increased workload and increased emotional demands of the work formed the main barriers for employees from the healthcare sector. In order to be able to minimise the impact of the increased workload the study from Heath, Sommerfield and Ungern-Sternberg

(2020) found that direct management support contributes to staff feeling positive about work and the capacity to cope with work stress and a high workload. Furthermore they found that managers should manage expectations clearly and compassionately, clarify work hours and should aim for work schedules that promote physical resilience (Heath et al., 2020). The study of Heath et al. (2020) also found that employers could apply a psychological resilience intervention strategy to help employees better cope with the increased emotional demands due to COVID-19. The intervention had three levels of support: a Battle Buddy system to provide peer support; unit level support through appointing a mental health consultant; and individual support for at-risk individuals. Whereas the latter two elements are more resource-intensive, the Battle Buddy concept is easily implemented and requires few resource commitments (Heath et al., 2020). Also uncertainty and fear of getting infected with the COVID-19 virus formed a barrier for the motivation at work. This barrier can be minimised by rapid and clear communication as that helps to address reactions based on uncertainty or fear. Especially frequent communication, without being overly reassuring, can be very helpful (Wu, Styra, Gold, 2020). A cautious and adequate COVID-19 approach, on the other, formed an opportunity for employees to remain motivated during COVID-19. Employers should provide clear evidence-based plans including direction about processes and appropriate provision of supplies and equipment, particularly in the face of potential shortages (Wu et al., 2020).

For employees from the hospitality sector the uncertainty about the reopening of the sector and job retention and a reduced person-job fit due to changes in the work caused by the COVID-19 measures formed the main barriers for the motivation at work. The study from Bajrami et al. (2021) showed that employers and managers can be crucial in keeping employees from the hospitality sector motivated during COVID-19. The study showed that employers and managers should try to provide sufficient amount of information on time to all employees and give them enough time to process the information and ask questions. Leadership should be based on informing employees, appreciating the way they are doing their job, taking care of their health and well-being, and enabling them to actively participate in decision making in order to ensure they remain motivated (Bajrami et al., 2021).

This study also found that COVID-19 can be a career shock for employees causing them to look for another job. Therefore, it is recommended to employers and managers to explore whether COVID-19 has led to the will to look for another job for their employees. If this is indicated in time, employers and managers could still do something to keep their employees on board. They should create more challenging tasks, respect the efforts invested in doing the job and give support to the employees as that can increase their commitment to

the organisation and create desire to stay (Bajrami et al., 2021). This can especially be of great importance in the healthcare sector as there is a shortage of personnel (Verenigde naties, 2021).

Finally, this study found that both Dutch and Belgian employees felt that the COVID-19 government policies were unclear and poorly communicated at some times. The study from Torney-Purta, Barber and Richardson (2004) showed that trust in the government is a requirement for societal participation and a lack of trust can cause people to believe that their participation is a waste of time. Since unclear and poorly communicated policies do not contribute to trust in the government, it is recommended to governments to come up with strong cohesive national policies and clearly communicate those policies as that will result in people being more likely to trust the government (Sibley et al., 2020). Governments can do this by being open and transparent to the public as that was one of the lessons learned in the earlier fight against the Middle East Respiratory Syndrome (Moon, 2020) and addressing the community risks at least as much as individual risks (Airhihenbuwa et al., 2020).

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Appendix A: Interview guide

Goedendag, ik heb u vandaag uitgenodigd voor een interview in het kader van mijn afstudeeronderzoek voor mijn master aan de Radboud Universiteit in Nijmegen. Het interview zal gaan over Corona en uw werk. Ik verwacht dat dit interview ongeveer 60 tot 90 minuten zal duren. Uiteraard kan ik niet allemaal onthouden wat er in die tijd is gezegd en daarom wil ik het interview graag opnemen. Heeft u daar bezwaar tegen?

Verder zou ik dan nu graag het toestemmingsformulier met u doornemen. Dit interview zal anoniem zijn waardoor alles wat u zegt niet direct herleidbaar is naar u. Daarnaast is alles wat wij bespreken tijdens dit interview vertrouwelijk. De data van dit interview zal (anoniem) voor de komende tien jaar worden opgeslagen op een veilige locatie op de Radboud Universiteit. Wanneer het gesprek op wat voor manier ongemakkelijk wordt voor u, heeft u de mogelijkheid om zonder opgave van redenen te stoppen. Als u akkoord bent met deze voorwaarden mag u het toestemmingsformulier ondertekenen

Uitreiken toestemmingsformulier

Dan start ik nu de opname en dan kunnen we beginnen met het interview.

Opname starten

Het interview kan worden opgesplitst in drie onderdelen: een aantal algemene vragen, vragen over de motivatie en vragen over inzetbaarheid. Het gaat tijdens dit interview om uw beleving, daarin zijn geen foute antwoorden mogelijk, er is dus geen goed of fout.

Deel 1: Algemene vragen

Allereerst starten we met wat algemene vragen (om het ijs te breken zullen we maar zeggen).

1. Wat is uw leeftijd?
2. Wat is uw hoogst gevolgde opleiding?
3. Heeft u op dit moment een baan of bent u werkzoekend?
4. Wat voor werk doet u op dit moment?
5. Wat zijn/waren uw belangrijkste taken?
6. Hoe lang werkt u al in uw huidige of laatste positie?
7. *Als de positie tijdens corona begonnen is: wat deed u hiervoor?*
8. Hoeveel uur werkt(e) u gemiddeld per week?
9. Hoeveel uur daarvan werkt(e) u thuis? (Voor de Corona pandemie)
10. Hoeveel uur werkt(e) u thuis naar aanleiding van de Corona pandemie?
11. Werkt(e) u fulltime of parttime?
12. Kan u op een schaal van 1 tot 10 toelichten in hoeverre corona impact heeft gehad op uw dagelijks leven?

Deel 2: Motivatie op het werk en motivatie om te werken

Voor elk van de volgende onderdelen vraag ik u een tijdlijn te tekenen over hoe uw motivatie of inzetbaarheid sinds begin 2020 (vlak voor Corona) tot nu ontwikkeld is. Ik zal u daarna vragen om deze tijdlijn toe te lichten. Terwijl u deze tijdlijn toelicht zal ik u niet onderbreken. Als u klaar bent met uw toelichting dan zal ik nog wat verdiepende vragen stellen. Heeft u daar nog vragen over? Is het duidelijk wat ik bedoel en wat we gaan doen?

TEKENEN: Motivatie op het werk

Het gaat hier over in hoeverre u vlak voor (begin 2020) en tijdens Corona de motivatie heeft gehad om uw werk uit te voeren en goed te presteren op uw werk. Mag ik u vragen om vanaf vlak voor de Corona crisis en tijdens Corona **uit te tekenen hoe uw motivatie op het werk is veranderd?** Neem hierin rustig de tijd om na te denken hoe dit is veranderd in deze tijd.

- **Zoom:** ik deel nu mijn scherm waarin u de tijdlijn ziet, klik rechts bovenin in ‘view options’ en vervolgens op ‘Annotate’. Hiermee kan u de lijn tekenen. Midden in de balk staat een gekleurd vierkant, waarmee u de kleur van de lijn kunt aanpassen. Teken deze lijn in het blauw.
- **Fysiek:** ik geef u nu een tijdlijn op dit vel papier. Teken met de blauwe pen deze lijn.

Geef de geïnterviewde de tijd om de tijdlijn in te vullen

TEKENEN: Motivatie om te werken (tot aan/na het pensioen)

Daarnaast ben ik benieuwd naar uw motivatie om te werken, wat inhoudt uw motivatie om te blijven werken (tot aan of tot na uw pensioen). Mag ik u vragen om vanaf het begin van 2020 uw **motivatie om te blijven werken te tekenen** en hoe deze is veranderd in deze tijd. Teken deze lijn in het dezelfde tijdlijn, maar nu in het rood.

Geef de geïnterviewde de tijd om de tijdlijn in te vullen

VRAGEN: Motivatie op het werk

Zou u de lijn willen omschrijven/toelichten?

- Beginpunt (= hoe hoog is uw motivatie op een schaal 0-10)
- Verloop
- Fluctuaties (= waar fluctueert het? Hoogte-/dieptepunten)
- Indien het een rechte lijn is: wat heeft ervoor gezorgd dat de pandemie geen invloed heeft gehad op uw motivatie op het werk?

Doorvragen:

- Zijn er dingen geweest die u **geholpen** hebben?
 - Zijn er dingen op uw **werk** die u geholpen hebben met uw motivatie op het werk? (*Bijvoorbeeld advies, begrip en/of respect van collega's, teamgevoel, de mogelijkheid om uw werktijden in te plannen, nieuwe dingen leren binnen uw functie of werk, financiële beloningen*)
 - Zijn er dingen in uw **privé situatie** die u geholpen hebben met uw motivatie op het werk? (*Bijvoorbeeld begrip vanuit uw familie/gezin, liefdevol worden behandeld door uw familie/gezin, open communicatie met uw familie/gezin, het verdelen van de huishoudelijke taken binnen uw familie/gezin, de mogelijkheid om sport of hobby's uit te voeren*)
 - Zijn er **persoonlijke** dingen die u geholpen hebben met uw motivatie op het werk? (*Bijvoorbeeld uw gezondheid, energie, positieve stemming, optimisme, focus, mentale veerkrachtigheid, financiële situatie, ervaringen of vaardigheden*)
- Als u vanuit deze drie domeinen/ situaties geen ondersteuning hebt ontvangen, zijn er momenten geweest waarop u toch graag ondersteuning had ontvangen? En hoe zou dit er volgens u uit moeten zien? (Mogelijk om expliciet in te gaan op de 3 situaties)

(Bijvoorbeeld vanuit HR de mogelijkheid om parttime te gaan werken, meerdere taken mogen uitvoeren, fysieke werkplekverbeteringen als een betere laptop of bureaustoel bij het thuiswerken)

- Zijn er dingen die u **belemmerd** hebben?
 - Zijn er dingen op uw **werk** die u belemmerd hebben met u motivatie op het werk? *(Bijvoorbeeld te hoge werkdruk, overwerken, hele dagen achter de computer zitten, conflicten met collega's of boze klanten, teleurstellingen op het werk)*
 - Zijn er dingen in uw **privé situatie** die u belemmerd hebben met uw motivatie op het werk? *(Bijvoorbeeld meer huishoudelijke taken, de zorg van familie (ouderen of kinderen) op u moeten nemen, conflicten thuis)*
 - Zijn er **persoonlijke** dingen die u belemmerd hebben met uw motivatie op het werk? *(Bijvoorbeeld uw gezondheid, uw humeur, energieniveau, hoeveelheid slaap die u krijgt, voldoening die u uit uw werk haalt, financiële situatie)*

VRAGEN: Motivatie om te werken (tot aan/na de pensioenleeftijd)

Zou u de lijn willen omschrijven/toelichten?

- Beginpunt (= hoe hoog is uw motivatie op een schaal 0-10)
- Verloop
- Fluctuaties (= waar fluctueert het? Hoogte-/dieptepunten)
- Indien het een rechte lijn is: wat heeft ervoor gezorgd dat de pandemie geen invloed heeft gehad op uw motivatie om te blijven werken?

Doorvragen:

- Zijn er dingen geweest die u **geholpen** hebben?
 - Zijn er dingen op uw **werk** die u geholpen hebben met uw motivatie om te blijven werken? *(Bijvoorbeeld advies, begrip en/of respect van collega's, teamgevoel, de mogelijkheid om uw werktijden in te plannen, nieuwe dingen leren binnen uw functie of werk, financiële beloningen)*
 - Zijn er dingen in uw **privé situatie** die u geholpen hebben met uw motivatie om te blijven werken? *(Bijvoorbeeld begrip vanuit uw familie/gezin, liefdevol worden behandeld door uw familie/gezin, open communicatie met uw familie/gezin, het verdelen van de huishoudelijke taken binnen uw familie/gezin, de mogelijkheid om sport of hobby's uit te voeren)*
 - Zijn er **persoonlijke** dingen die u geholpen hebben met uw motivatie om te blijven werken? *(Bijvoorbeeld uw gezondheid, energie, positieve stemming, optimisme, focus, mentale veerkrachtigheid, financiële situatie, ervaringen of vaardigheden)*
- Als u vanuit deze drie domeinen/ situaties geen ondersteuning hebt ontvangen, zijn er momenten geweest waarop u toch graag ondersteuning had ontvangen? En hoe zou dit er volgens u uit moeten zien? (Mogelijk om expliciet in te gaan op de 3 situaties) *(Bijvoorbeeld vanuit HR de mogelijkheid om parttime te gaan werken, meerdere taken mogen uitvoeren, fysieke werkplekverbeteringen als een betere laptop of bureaustoel bij het thuiswerken)*
- Zijn er dingen die u **belemmerd** hebben?
 - Zijn er dingen op uw **werk** die u belemmerd hebben met uw motivatie om te blijven werken? *(Bijvoorbeeld te hoge werkdruk, overwerken, hele dagen*

achter de computer zitten, conflicten met collega's of boze klanten, teleurstellingen op het werk)

- Zijn er dingen in uw **privé situatie** die u belemmerd hebben met uw motivatie om te blijven werken? *(Bijvoorbeeld meer huishoudelijke taken, de zorg van familie (ouderen of kinderen) op u moeten nemen, conflicten thuis)*
- Zijn er **persoonlijke** dingen die u belemmerd hebben met uw motivatie om te blijven werken? *(Bijvoorbeeld uw gezondheid, uw humeur, energieniveau, hoeveelheid slaap die u krijgt, voldoening die u uit uw werk haalt, financiële situatie)*

Deel 3: Inzetbaarheid

Inzetbaarheid betekent wat volgens jou u kansen op de arbeidsmarkt zijn, zowel binnen u huidige organisatie als buiten deze organisatie (dus interne of externe arbeidsmarkt). Ik wil u nu vragen om een tijdlijn te tekenen waarin duidelijk wordt hoe u kansen op de arbeidsmarkt zijn veranderd vanaf het begin van 2020 (voordat de Corona pandemie begon) tot nu. (Als iemand vraagt of het twee lijnen mogen zijn, dan mag dat als dat hun opvatting is over hun inzetbaarheid.)

Geef de geïnterviewde de tijd om de tijdlijn in te vullen

Zou u de lijn willen omschrijven/toelichten?

- Beginpunt (= hoe hoog is uw inzetbaarheid op een schaal 0-10)
- Verloop
- Fluctuaties (= waar fluctueert het? Hoogte-/dieptepunten)
- Indien het een rechte lijn is: wat heeft ervoor gezorgd dat de pandemie geen invloed heeft gehad op uw inzetbaarheid?

Doorvragen:

- Zijn er dingen geweest die u **geholpen** hebben wat betreft uw inzetbaarheid?
 - Zijn er dingen op uw **werk** die u geholpen hebben wat betreft uw inzetbaarheid? *(Bijvoorbeeld advies, begrip en/of respect van collega's, teamgevoel, de mogelijkheid om uw werktijden in te plannen, nieuwe dingen leren binnen uw functie of werk, financiële beloningen)*
 - Zijn er dingen in uw **privé situatie** die u geholpen hebben wat betreft uw inzetbaarheid? *(Bijvoorbeeld begrip vanuit uw familie/gezin, liefdevol worden behandeld door uw familie/gezin, open communicatie met uw familie/gezin, het verdelen van de huishoudelijke taken binnen uw familie/gezin, de mogelijkheid om sport of hobby's uit te voeren)*
 - Zijn er **persoonlijke** dingen die u geholpen hebben wat betreft uw inzetbaarheid? *(Bijvoorbeeld uw gezondheid, energie, positieve stemming, optimisme, focus, mentale veerkrachtigheid, financiële situatie, ervaringen of vaardigheden)*
- Als u vanuit deze drie domeinen/ situaties geen ondersteuning hebt ontvangen, zijn er momenten geweest waarop u toch graag ondersteuning had ontvangen? En hoe zou dit er volgens u uit moeten zien? (Mogelijk om expliciet in te gaan op de 3 situaties) *(Bijvoorbeeld vanuit HR de mogelijkheid om parttime te gaan werken, meerdere taken mogen uitvoeren, fysieke werkplekverbeteringen als een betere laptop of bureaustoel bij het thuiswerken)*

- Zijn er dingen die u **belemmerd** hebben?
 - Zijn er dingen op uw **werk** die u belemmerd hebben wat betreft uw inzetbaarheid? (*Bijvoorbeeld te hoge werkdruk, overwerken, hele dagen achter de computer zitten, conflicten met collega's of boze klanten, teleurstellingen op het werk*)
 - Zijn er dingen in uw **privé situatie** die u belemmerd hebben wat betreft uw inzetbaarheid? (*Bijvoorbeeld meer huishoudelijke taken, de zorg van familie (ouderen of kinderen) op u moeten nemen, conflicten thuis*)
 - Zijn er **persoonlijke** dingen die u belemmerd hebben wat betreft uw inzetbaarheid? (*Bijvoorbeeld uw gezondheid, uw humeur, energieniveau, hoeveelheid slaap die u krijgt, voldoening die u uit uw werk haalt, financiële situatie*)

Slot

Dan zijn we aangekomen bij het einde van het interview. U heeft me veel inzichten gegeven. Voor mij is alles duidelijk. Heeft u nog vragen over het interview? Of wilt u nog iets kwijt?

Stop de opname

Ik zal het transcript van ons interview binnen zeven werkdagen naar u toesturen, zodat u nog eens terug kunt lezen wat we hebben besproken. Ik wil u vragen dit door te lezen en te beoordelen of wat u tijdens het interview heeft bedoeld ook zo in het transcript naar voren komt. Dit doe ik om te waarborgen dat de door u beschreven informatie overeenkomt met hoe ik dit heb opgeschreven. Dan wil ik u hartelijk bedanken voor de deelname aan het onderzoek en ik zal u op de hoogte houden van de uitkomsten.

Appendix B: Initial coding template

Concepts	Dimensions	Indicators	Definitions
Motivation at work	<ul style="list-style-type: none"> - Degree of motivation to perform well at work - Degree of motivation of properly doing job 	<ul style="list-style-type: none"> - Decline - Growth - No change 	“the cognition, affect, and behaviours that employees use to accomplish tasks within their job” (Kanfer et al., 2013, p. 255).
Career shock			“a disruptive and extraordinary event that is, at least to some degree, caused by factors outside the focal individual's control and that triggers a deliberate thought process concerning one's career. The occurrence of a career shock can vary in terms of predictability and can be either positively or negatively valenced” (Akkermans et al., 2018, p. 4).
	<ul style="list-style-type: none"> - Perceived as a disruptive and extraordinary event 	<ul style="list-style-type: none"> - Disruptive - Extraordinary 	
	<ul style="list-style-type: none"> - Caused by factors outside the focal individual's control 	<ul style="list-style-type: none"> - Factors that lie outside one's control 	
	<ul style="list-style-type: none"> - Triggers a deliberate thought process concerning one's career 	<ul style="list-style-type: none"> - Thought process concerning one's career 	
	<ul style="list-style-type: none"> - The occurrence of a career shock can vary in terms of predictability 	<ul style="list-style-type: none"> - Unexpected - Expected - Predictable - Controllable 	
	<ul style="list-style-type: none"> - Either positively or negatively valenced 	<ul style="list-style-type: none"> - Perceived positively - Perceived negatively 	
Work demands and home demands (contextual demands)			Physical, emotional, social, or organizational aspects of the social context that require sustained physical and/or mental effort (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001; Peeters, Montgomery, Bakker, & Schaufeli, 2005)
	Overload demands	<ul style="list-style-type: none"> - Working overtime - High workload - Many household chores 	Overload demands occur when one needs to perform many tasks at a high speed (Ten Brummelhuis & Bakker, 2012)

		- Urgent care tasks	
	Emotional demands	- Emotionally demanding interactions with customers or clients - Conflicts - Disappointments	Emotional demands are issues that touch the individual personally and are emotionally (Ten Brummelhuis & Bakker, 2012)
	Physical demands	- Lifting weights - Care for the elderly - Care for young children	Physical demands refer to tasks that require physical effort (Ten Brummelhuis & Bakker, 2012)
	Cognitive demands	- Coordination of household - Multitasking - Writing a report	Cognitive demands are tasks that require a lot of concentration (Ten Brummelhuis & Bakker, 2012)
Work resources and home resources (contextual resources)			Resources that are located outside the self and can be found in the social contexts of the individual. (Ten Brummelhuis & Bakker, 2012)
	Social support	- Advice from co-worker - Understanding - Love - Respect from a friend	Social support refers to the instrumental, informational, emotional, and appraisal support provided by significant others (House, 1981; Ten Brummelhuis & Bakker, 2012))
	Autonomy	- Control over work design - Planning leisure time - Allocation home tasks	Autonomy means that the individual can decide how and when tasks are performed; Ten Brummelhuis & Bakker, 2012)
	Opportunities for development	- New tasks at work - Attending courses - Participating in sports - Hobbies	Aspects which give individuals the opportunity to develop themselves (Ten Brummelhuis & Bakker, 2012)
	Feedback	- Supervisor evaluation - Open communication at home - Reflection with friends	Aspects which give individuals feedback (Ten Brummelhuis & Bakker, 2012)
Personal resources			Resources that are proximate to the self and include personal traits and energies

			(Hobfoll, 2002; Ten Brummelhuis & Bakker, 2012)
	Physical	<ul style="list-style-type: none"> - Health - Physical energy - Vigor - Sleep 	I define physical personal resources as sources that can have an effect on the state of the individual's body.
	Psychological	<ul style="list-style-type: none"> - Optimism - Self-efficacy - Focus - Mental resilience 	Tools that help people deal actively and efficiently with tasks (Ten Brummelhuis & Bakker, 2012)
	Affective	<ul style="list-style-type: none"> - Mood - Fulfillment - Empathy - Gratefulness 	I define affective personal resources as sources that improve the mental state of individuals
	Intellectual	<ul style="list-style-type: none"> - Skills - Perspectives - Knowledge - Experience 	Resources that help employees to discharge their tasks (Ten Brummelhuis & Bakker, 2012)
	Capital	<ul style="list-style-type: none"> - Time - Money 	Instrumental resources that facilitate role performance (Ten Brummelhuis & Bakker, 2012)

Appendix C: Final coding template

Concepts	Dimensions	Indicators	Definitions
Motivation at work	<ul style="list-style-type: none"> - Degree of motivation to perform well at work - Degree of motivation of properly doing job 	<ul style="list-style-type: none"> - Decline - Growth - No change 	<p>“the cognition, affect, and behaviours that employees use to accomplish tasks within their job” (Kanfer et al., 2013, p. 255).</p>
Career shock			<p>“a disruptive and extraordinary event that is, at least to some degree, caused by factors outside the focal individual's control and that triggers a deliberate thought process concerning one's career. The occurrence of a career shock can vary in terms of predictability and can be either positively or negatively valenced” (Akkermans et al., 2018, p. 4).</p>
	<ul style="list-style-type: none"> - Perceived as a disruptive and extraordinary event 	<ul style="list-style-type: none"> - Disruptive - Extraordinary 	
	<ul style="list-style-type: none"> - Caused by factors outside the focal individual's control 	<ul style="list-style-type: none"> - Uncertainty about COVID-19 and its consequences - Fear of getting infected or infecting others with the COVID-19 virus - Dependence on government-imposed measures 	
	<ul style="list-style-type: none"> - Triggers a deliberate thought process concerning one's career 	<ul style="list-style-type: none"> - Triggers deliberate thought process - Triggers thought process but remains with thoughts and do not actually lead to action - Triggers no thought process 	
	<ul style="list-style-type: none"> - The occurrence of a career shock can vary 	<ul style="list-style-type: none"> - Controllable - Uncontrollable 	

	in terms of predictability		
	- Either positively or negatively valenced	- Positively valenced - Negatively valenced	
Work demands			Physical, emotional, social, or organizational aspects of the work context that require sustained physical and/or mental effort (Demerouti et al.,2001; Peeters et al., 2005)
	Overload demands	- Working overtime - High workload	Work aspects that cause employees to perform many tasks at a high speed (Ten Brummelhuis & Bakker, 2012)
	Emotional demands	- Emotionally demanding interactions with patients - Death of patients - Disagreements about COVID-19 situation - Fear of losing job - Fear of COVID-19 infection - Fear of infecting vulnerable people - Careless and inadequate COVID-19 approach - Uncertainty about the organization of work - Social distance	Work aspects that touch the individual personally and are emotionally (Ten Brummelhuis & Bakker, 2012)
	Physical demands	- Working with protective clothing - Keeping 1,5 meter distance	Work aspects that require physical effort (Ten Brummelhuis & Bakker, 2012)
Work resources			Resources that are located outside the self and can be found in the work contexts of the individual. (Ten Brummelhuis & Bakker, 2012)

	Social support	<ul style="list-style-type: none"> - Support from colleagues - Support from supervisor - Understanding of supervisor 	Work aspects that provide instrumental, informational, emotional, and appraisal support (House, 1981; Ten Brummelhuis & Bakker, 2012))
	Autonomy	<ul style="list-style-type: none"> - Autonomous work - Responsibilities - Decision-making-authority - Making schedules 	Work aspects that enable employees to decide how and when tasks are performed (Ten Brummelhuis & Bakker, 2012)
	Opportunities for development	<ul style="list-style-type: none"> - New tasks at work - Attending COVID-19 related courses - Training programme 	Work aspects that give employees the opportunity to develop themselves (Ten Brummelhuis & Bakker, 2012)
	Feedback	<ul style="list-style-type: none"> - Supervisor evaluation - Reflection with colleagues 	Work aspects which give employees feedback (Ten Brummelhuis & Bakker, 2012)
	Cautious and adequate COVID-19 approach from employer	<ul style="list-style-type: none"> - Keeping (potential) COVID-19 patients strictly isolated - Trainings focused on hygiene regarding COVID-19 - Trainings on how to conduct COVID-19 tests - Question point for COVID-19 related matters - Having sufficient protective clothing 	
Home demands			Physical, emotional, social, or organizational aspects of the home context that require sustained physical and/or mental effort (Demerouti et al., 2001; Peeters et al., 2005)

	Emotional demands	<ul style="list-style-type: none"> - Family health concerns - Uncertainty about duration of COVID-19 crisis - Disagreement about COVID-19 situation - Care for young children 	Home aspects that touch the individual personally and are emotionally (Ten Brummelhuis & Bakker, 2012)
Home resources			Resources that are located outside the self and can be found in the home context of the individual. (Ten Brummelhuis & Bakker, 2012)
	Social support	<ul style="list-style-type: none"> - Support partner - Support family - Support friends 	Home aspects that provide instrumental, informational, emotional, and appraisal support (House, 1981; Ten Brummelhuis & Bakker, 2012)
	Opportunities for development	<ul style="list-style-type: none"> - Hobbies - Pleasure with friends 	Home aspects that give employees the opportunity to develop themselves (Ten Brummelhuis & Bakker, 2012)
Personal demands			I define personal demands as demands that are proximate to the self and include hindering personal traits and negative energies
	Psychological	<ul style="list-style-type: none"> - Fear of COVID-19 infection - Uncertainty about duration of COVID-19 crisis - Having difficulty with losing control - Being worried quickly 	I define psychological demands as demands that hinder people to deal actively and efficiently with tasks
	Affective	<ul style="list-style-type: none"> - Negative mood 	I define affective personal resources as sources reduce the mental state of individuals
Personal resources			Resources that are proximate to the self and include personal traits and energies (Hobfoll, 2002; Ten Brummelhuis & Bakker, 2012)
	Physical	<ul style="list-style-type: none"> - Health - Physical energy 	I define physical personal resources as sources that can have an effect on the state of the individual's body.

	Psychological	<ul style="list-style-type: none"> - Optimism - Sense of responsibility - Down-to-earthness - Adaptability - Passionate 	Tools that help people deal actively and efficiently with tasks (Ten Brummelhuis & Bakker, 2012)
	Affective	<ul style="list-style-type: none"> - Positive mood - Appreciation of having a job - Showing understanding - Having a goal 	I define affective personal resources as sources that improve the mental state of individuals
	Intellectual	<ul style="list-style-type: none"> - Skills - Knowledge - Experience 	Resources that help employees to discharge their tasks (Ten Brummelhuis & Bakker, 2012)
	Capital	<ul style="list-style-type: none"> - Time - Money 	Instrumental resources that facilitate role performance (Ten Brummelhuis & Bakker, 2012)

Appendix D: Tables with COVID-19 measures imposed by the Dutch and Belgian governments during the COVID-19 crisis

COVID-19 measures imposed by the Dutch government during the COVID-19 crisis

Search term	COVID-19 measures	Period	Sources
'COVID-19 measures Netherlands'	<p>Basis regels</p> <p>-Wassen: Was vaak je handen. Hoest en nies in je elleboog.</p> <p>-Afstand: Houd 1,5 meter afstand. Vermijd drukke plekken.</p> <p>-Testen: Klachten? Blijf thuis. Laat je direct testen.</p>	Gehele COVID-19 crisis	<p>(Rijksoverheid, n.d.)</p> <p>(Rijksoverheid, 2020)</p>
'COVID-19 measures Netherlands beginning COVID-19 crisis', 'Most important COVID-19 measures Netherlands' and 'Overview of COVID-19 measures Netherlands timeline'	<p>Sluiten van de horeca</p> <p>- Halverwege maart gaat Nederland in gedeeltelijke lockdown en sluit de horeca tot en met 1 juni</p> <p>-Vanaf 1 juni mag de horeca weer open voor maximaal 30 gasten binnen.</p> <p>- Vanaf 1 juli mag de horeca weer open voor maximaal 100 gasten binnen.</p> <p>-Hersluiting horeca vanaf 14 oktober tot en met 27 april 2021</p> <p>- Vanaf 28 april 2021 mochten horeca-terrassen weer open, van 12.00 tot 18.00 uur, met maximaal twee personen aan een tafel.</p> <p>-Vanaf 5 juni mocht de horeca ook binnen open van 06:00 tot 22:00</p> <p>-Volledige heropening horeca</p>	<p>-Maart 2020 tot en met juni 2020</p> <p>-Juni 2020</p> <p>-Juli 2020</p> <p>-Oktober 2020 tot en met april 2021</p> <p>-April 2021 tot en met begin juni 2021</p> <p>-Begin juni 2021 tot en met eind juni 2021</p> <p>-26 juni 2021</p>	<p>(Rijksoverheid, 2020)</p> <p>(Rijksoverheid, n.d.)</p> <p>(Rijksoverheid, n.d.)</p> <p>(Vereniging Chinese-Aziatische Horeca Ondernemers, 2020)</p> <p>(Nederlands Horeca Gilde, 2021)</p> <p>(Koninklijke Horeca Nederland, 2020)</p>
'COVID-19 government policy'	<p>Sluiten van scholen en kinderdagverblijven</p>		

<p>Netherlands' and Overview of COVID-19 measures Netherlands timeline'</p>	<p>- Hogescholen en universiteiten sluiten hun deuren. Scholen in het primair, voortgezet en middelbaar beroepsonderwijs en kinderopvang blijven open</p>	-13 maart 2020	(NU.nl, 2020)
	<p>- Het hele onderwijs komt stil te liggen. Basisscholen, middelbare scholen, universiteiten en hbo-opleidingen gaan allemaal dicht.</p>	-15 maart 2020	
	<p>- Basisscholen vanaf 11 mei weer open. Scholieren krijgen ongeveer de helft van hun lestijd weer les op school, maar wel in kleinere groepen. De andere helft van de tijd zouden ze thuiswerk krijgen.</p>	-11 mei 2020	(Rijksoverheid, n.d.)
	<p>-Het voortgezet onderwijs gaat weer van start</p>	-2 juni 2020	
	<p>- Het middelbaar beroepsonderwijs en het hoger onderwijs (hbo en universiteiten) mogen vanaf 15 juni weer beperkt starten</p>	-15 juni 2020	
	<p>- Scholen in het primair en voortgezet onderwijs sluiten vanaf 16 december</p>	-16 december 2020 tot en met 8 februari 2021	(Algemene Vereniging Schoolleiders, 2020)
	<p>- De basisscholen mogen weer open per 8 februari</p>	-8 februari 2021	(POraad, 2021)
	<p>- Middelbare scholen en het middelbaar beroepsonderwijs kunnen vanaf 1 maart 2021 op minimaal 1 dag per week weer fysiek onderwijs geven</p>	-1 maart 2021	(Rijksoverheid, n.d.)
<p>-Per 26 april mogen de universiteiten en hogescholen ook weer open. Voor elke student geldt dat ze dan ongeveer 1 dag per week fysiek onderwijs mogen volgen op de universiteit of hogeschool.</p>	-26 april 2021	(Strating, 2021)	

	- Middelbare scholen mogen vanaf 31 mei 2021 weer volledig open	-31 mei 2021	(Rijksoverheid, n.d.)
'COVID-19 measures Netherlands' and 'Most important COVID-19 measures Netherlands'	<p>Avondklok</p> <p>-In heel Nederland geldt vanaf zaterdag 23 januari een avondklok. Tijdens de avondklok is het verboden om tussen 21.00 uur 's avonds en 04.30 uur 's ochtends buiten te zijn. Je mag alleen naar buiten als je een geldige reden hebt. In dat geval moet je een formulier 'Eigen verklaring Avondklok' meenemen. Het overtreden van de avondklok leidt tot een boete van €95.</p> <p>-Avondklok van 22:00 tot 04:30</p> <p>-Op 28 april 2021 om 4.30 uur verviel de avondklok. Er waren geen formulieren meer nodig.</p>	<p>-23 januari 2021 tot en met 30 maart 2021</p> <p>-31 maart 2021 tot en met 27 april 2021</p> <p>-28 april 2021</p>	<p>(Rijksoverheid, 2021)</p> <p>(RTL Nieuws, 2021)</p> <p>(Rijksoverheid, n.d.)</p>
'COVID-19 measures Netherlands', 'COVID-19 government policy Netherlands' and 'Overview of COVID-19 measures Netherlands timeline'	<p>Sluiten van niet essentiële winkels en afgelastingen grote bijeenkomsten</p> <p>- Bijeenkomsten met meer dan 100 personen worden afgelast. Ook in publieke locaties zoals musea, concertzalen, bioscopen, theaters, sportclubs en sportwedstrijden.</p> <p>-Winkels in de detailhandel dienen uiterlijk om 20.00 uur te sluiten. Koopavonden worden afgeschaft</p> <p>-Alle winkels met niet-essentiële levensbehoeften gaan dicht</p> <p>-Winkelen op afspraak (waarbij winkelbezoek mogelijk is na voorafgaande afspraak, gedurende een beperkt "tijdslot" en voor een beperkt aantal klanten) word toegestaan</p> <p>-Volledige heropening niet-essentiële winkels</p>	<p>-13 maart 2020</p> <p>-15 oktober 2020</p> <p>-15 december 2020 tot en met 26 april 2021</p> <p>-3 maart 2021 tot en met 25 april 2021</p> <p>-26 april 2021</p>	<p>(Rijksoverheid, 2020)</p> <p>(Algemeen Nederlands Persbureau, 2020)</p> <p>(Rijksoverheid, 2020)</p> <p>(Coronakrant, 2021)</p> <p>(Lijbaart, 2021)</p>

<p>'COVID-19 measures Netherlands' and 'Overview of COVID-19 measures Netherlands timeline'</p>	<p>Mondkapjes (plicht) -Vanaf 1 juni moeten reizigers in het openbaar vervoer een mondkapje dragen</p>	-1 juni 2020	(RTL Nieuws, 2020)
	<p>-Landelijk dringend advies voor het dragen van niet-medische mondkapjes in publieke binnenruimtes</p>	-30 september 2020	(RTL Nieuws, 2020)
	<p>- Mondkapjes plicht door Coronawet per 1 december in binnenruimtes en voor iedereen boven de 13 jaar</p>	-1 december 2020	(Zijp, 2021)
	<p>-De mondkapjesplicht vervalt grotendeels, behalve op de plekken waar 1,5 meter geen mogelijkheid is</p>	-26 juni 2021	(Zijp, 2021)
<p>'COVID-19 measures Netherlands', 'COVID-19 government policy Netherlands'</p>	<p>Overheidssteun -Ondernemers kunnen met de Tijdelijke Noodmaatregel Overbrugging voor Werkgelegenheid (NOW) een groot deel van hun loonkosten vergoed krijgen als ze verwachten ten minste 20% omzet te verliezen.</p> <p>-De Tijdelijke overbruggingsregeling zelfstandig ondernemers (Tozo) is een van de regelingen van het kabinet om zelfstandige ondernemers te ondersteunen tijdens de coronacrisis.</p> <p>- Met de Tegemoetkoming Ondernemers Getroffen Sectoren COVID-19 (TOGS) konden ondernemers een eenmalige tegemoetkoming van € 4.000 netto krijgen waarmee ze hun vaste lasten kunnen betalen.</p>	<p>-NOW1 tot en met 1 juni 2020</p> <p>- NOW2 tot en met 1 september 2020</p> <p>-NOW3 van oktober 2020 tot en met 1 juli 2021</p> <p>-27 maart 2020 tot en met 26 juni 2020</p>	(Rijksoverheid, n.d.)
<p>'COVID-19 measures Netherlands', 'Overview of COVID-19 measures'</p>	<p>Reis-en inreisverboden -Tijdelijk verbod op passagiersvluchten uit gebieden waar een uitbraak van COVID-19 heeft plaatsgevonden.</p>	-Maart 2020	(Rijksoverheid, 2020)

Netherlands timeline' and 'COVID-19 government policy Netherlands'	-Voor reizigers uit landen buiten de EU geldt het Europese inreisverbod. Reizigers uit overige EU-landen zijn welkom	-18 maart 2020 tot en met 15 juni 2020	(Lutgendorff, 2020) (Government of the Netherlands, n.d.)
	- Het dringende advies om niet naar het buitenland te reizen	-3 november 2020 tot en met 15 april 2021	
	- Toeristen en buitenlandse reizigers uit landen waar de gezondheidsrisico's vergelijkbaar zijn met of lager zijn dan in Nederland, kunnen Nederland binnenkomen en Nederlanders mogen naar deze gebieden toe	-Juni 2021	

COVID-19 measures imposed by the Belgian government during the COVID-19 crisis

Search term	COVID-19 measures	Period	Sources
'COVID-19 measures Belgium'	<p>Basis regels</p> <p>-Was je handen regelmatig En volg ook andere hygiëne regels zoals bij hoesten of niezen</p> <p>-Houd 1,5 meter afstand want dat is veiliger</p> <p>-Ziek of symptomen? Blijf thuis en neem contact op met je huisarts en laat je testen</p>	-Gehele COVID-19 crisis	(Belgium.be, n.d.)
'Most important COVID-19 measures Belgium', 'COVID-19 government policy Belgium' and 'Overview of COVID-19 measures Belgium timeline'	<p>Sluiten van de horeca</p> <p>-Sluiting horeca vanaf 14 maart</p>	-14 maart 2020 tot en met tot en met 7 juni 2020	(Desmyter, 2020)
	<p>-Heropening van de horeca (verplichte sluiting om 01:00, maximaal 10 personen aan een tafel, mondkapje verplicht voor personeel)</p>	-8 juni 2020 tot en met 18 oktober	(Horeca Magazine, 2020)
	<p>-Alle horeca moet opnieuw dicht per 19 oktober</p>	-19 oktober 2020 tot en met 7 mei 2021	(Belga, 2020)
	<p>-Vanaf 8 mei mogen cafés en restaurants hun terrassen weer openen</p>	-8 mei 2021 tot en met 8 juni 2021	(Verstraete, 2020)
	<p>- Horecagelegenheden zoals cafés, bars en restaurants mogen</p>	-9 juni 2021	(Belga, 2021)

	<p>weer open volgens een zeer nauwkeurig protocol (obers moeten een masker dragen, tot 23:30 geopend)</p> <p>-Nachtclubs mogen nog niet opengaan voor eind augustus, omdat er geen veiligheidsafstand kan worden voorzien.</p>	-Eind augustus 2021	
<p>COVID-19 government policy Belgium' and 'Overview of COVID-19 measures Belgium timeline'</p>	<p>Sluiten van scholen</p> <p>-Alle lessen op scholen worden vanaf maandag 16 maart opgeschort</p> <p>-Scholen worden gedeeltelijk weer geopend</p> <p>-Alle leerlingen kunnen terug naar school. De herstart van het schooljaar gebeurt in een voltijdse vijfde week</p> <p>-De scholen blijven open, maar de bezettingsgraad bij het hoger onderwijs daalt tot maximaal 20 procent (voor fysieke lessen) en er geldt een mondkemperplicht</p> <p>-Kleuterscholen blijven open, maar het lagere en hoger onderwijs moet weer op afstand plaatsvinden</p> <p>-De scholen kunnen opnieuw openen. Enkel de bovenbouwleerlingen moeten de lessen nog voor de helft thuis volgen. Studenten van hogescholen en universiteiten blijven grotendeels online lessen volgen.</p>	<p>-16 maart 2020 tot en met 14 mei 2020</p> <p>-15 mei 2020</p> <p>-1 september 2020</p> <p>-23 oktober 2020</p> <p>-24 maart 2021 tot en met 18 april 2021</p> <p>-19 april 2021</p>	<p>(HLN, 2020)</p> <p>(HLN, 2021)</p> <p>(NU.nl, 2021)</p> <p>(HLN, 2021)</p> <p>(Liantis, 2021)</p>
<p>COVID-19 government policy Belgium', 'COVID-19 measures Belgium', 'Most important</p>	<p>Sluiten van niet essentiële winkels</p> <p>-op 18 maart sluiten alle niet-essentiële winkels</p> <p>-Alle winkels mogen opnieuw de deuren openen vanaf 11 mei. Ze moeten wel enkele maatregelen</p>	<p>-18 maart 2020 tot en met 10 mei 2020</p> <p>-11 mei 2020 tot en met 29 oktober 2020</p>	<p>(HLN, 2021)</p>

<p>COVID-19 measures Belgium' and 'Overview of COVID-19 measures Belgium timeline'</p>	<p>in acht nemen zoals het limiteren van het aantal bezoekers</p> <p>-Alle niet-essentiële winkels en contactberoepen moeten opnieuw sluiten</p> <p>-Niet-essentiële winkels mogen weer heropenen. Shoppen gebeurt wel alleen en maximaal een halfuur. Contact beroepen blijven gesloten.</p> <p>-Kappers mogen weer openen vanaf 13 februari. Alle andere niet-medische contactberoepen, mogen 1 maart weer open</p> <p>-niet-medische contactberoepen moeten opnieuw sluiten en winkelen kan enkel nog op afspraak</p> <p>-Heropstart van contactberoepen en winkelen zonder afspraak</p>	<p>-30 oktober 2020 tot en met 30 november 2020</p> <p>-1 december 2020</p> <p>-Februari/ maart 2021</p> <p>-24 maart 2021</p> <p>-26 april 2021</p>	<p>(Heylen, 2020)</p> <p>(HLN, 2021)</p>
<p>'COVID-19 measures Belgium'</p>	<p>Avondklok</p> <p>-Vanaf 19 oktober 2020 geldt de avondklok in België van 00:00 tot en met 05:00. In grote steden geldt de avondklok langer van 22:00 tot 06:00</p> <p>-De avondklok werd op 8 mei 2021 afgeschaft</p> <p>-Het overtreden van de COVID-19 regels kan leiden tot geldboetes tussen €208 euro tot € 4.000.</p>	<p>-19 oktober 2020</p> <p>-8 mei 2021</p>	<p>(HLN, 2021)</p> <p>(Baert, 2021)</p> <p>(De Telegraaf, 2020)</p>
<p>'COVID-19 measures Belgium' and 'Overview of COVID-19 measures Belgium timeline'</p>	<p>Reis- en inreisverboden</p> <p>-België gaat in strenge lockdown waarbij allen essentiële verplaatsingen, zoals naar de winkel, de apotheek en het benzinestation, nog zijn toegestaan. Andere verplaatsingen dienen te worden beperkt.</p>	<p>-18 maart 2020</p>	<p>(HLN, 2021)</p>

	<p>-De grenzen van België worden gedeeltelijk gesloten. Niet-essentiële verplaatsingen van en naar België zijn verboden. Belgen mogen alleen maar de grens oversteken als dat echt moet: voor woon-werkverkeer, goederenverkeer, een medische of familiale noodzaak.</p> <p>- Vanaf 8 juni is het mogelijk om in België uitstappen van één of meerdere dagen te doen.</p> <p>-Vanaf 15 juni opent België zijn grenzen voor reizen naar en vanuit de Europese Unie</p> <p>-Tijdelijk verbod voor reizen ‘met een recreatief en toeristisch karakter’.</p> <p>-Het verbod op niet-essentiële reizen wordt opgeheven. Reizen wordt nog altijd uitdrukkelijk afgeraden, maar Belgen mogen dus wel opnieuw de grens over, zonder zich daarvoor te moeten verantwoorden.</p>	<p>-20 maart 2020</p> <p>-8 juni 2020</p> <p>-15 juni 2020</p> <p>-27 januari 2021 tot en met 18 april 2021</p> <p>-19 april 2021</p>	<p>(HLN, 2021)</p> <p>(Belgium.be, 2020)</p> <p>(HLN, 2021)</p> <p>(HLN, 2021)</p> <p>(Roberts, 2021)</p>
<p>‘Overview of COVID-19 measures Belgium timeline’ and ‘COVID-19 measures Belgium’</p>	<p>Sociale contacten</p> <p>-Alle samenscholingen worden verboden. Wie een frisse neus wil halen, kan dat doen in het gezelschap van familieleden of één vriend(in)</p> <p>-Fysieke activiteit in openlucht is toegestaan met maximaal twee personen (in plaats van één persoon)</p> <p>-De sociale bubbel wordt uitgebreid naar vier personen.</p> <p>-Belgen mogen nu contact hebben met 10 verschillende personen per week</p> <p>-De bubbel van 10 wordt uitgebreid naar 15</p>	<p>-18 maart 2020 tot en met 3 mei 2020</p> <p>-4 mei 2020</p> <p>-10 mei 2020</p> <p>-8 juni 2020</p> <p>-1 juli 2020</p>	<p>(HLN, 2021)</p>

	<p>-De sociale bubbel wordt verkleind van 15 naar 5</p> <p>-Belgen nog maximaal drie nauwe contacten hebben</p> <p>- Elk individu mag voortaan maximaal één 'knuffelcontact' hebben. Eén gezin mag vier dezelfde bezoekers ontvangen per twee weken.</p> <p>- Het is weer mogelijk om met tien personen buiten samen te komen</p> <p>-Belgen mogen binnen 8 personen op hetzelfde moment thuis ontvangen.</p>	<p>-25 juli 2020</p> <p>-9 oktober 2020</p> <p>-19 oktober 2020</p> <p>-8 maart 2020</p> <p>-juni 2021</p>	<p>(Belgium.be, n.d.)</p>
<p>'COVID-19 measures Belgium', Overview of COVID-19 measures Belgium timeline' and 'COVID-19 government policy Belgium'</p>	<p>Mondkapjes (plicht)</p> <p>- Vanaf 4 mei moeten reizigers in het openbaar vervoer verplicht een mondkapje dragen. Op andere plekken zijn mondkapjes niet verplicht, maar worden ze wel sterk aangeraden om het risico op besmetting verder in te perken</p> <p>-Vanaf 11 juli moet iedereen die in België gaat winkelen een mondkapje dragen.</p> <p>-Vanaf 25 juli is het verplicht om een mondkapje te dragen op (drukke) openbare plaatsen</p> <p>- De grote versoepelingsdag, betekent in veel centrumsteden ook het einde van de mondkapjeplicht, maar niet in alle steden</p> <p>-in België is het nog steeds verplicht een mondkapje te dragen in openbare binnen ruimtes.</p>	<p>-4 mei 2020</p> <p>-11 juli</p> <p>-25 juli 2020</p> <p>-9 juni 2021</p> <p>-27 juni 2021</p>	<p>(Cornillie, 2020)</p> <p>(Horrichs, 2020)</p> <p>(HLN, 2021)</p> <p>(De Bleser, 2021)</p> <p>(Spanje vandaag, 2021)</p>

‘COVID-19 government policy Belgium’	Overheidssteun -Als onderneming kan je, wanneer je hinder ondervindt ingevolge de verspreiding van het coronavirus, een aanvraag voor steunmaatregelen indienen bij de FOD Financiën	- Tot 30 juni 2020	(Van de Castele, 2020)
	-Bepaalde werkgevers die hun werknemers tijdelijk niet kunnen tewerkstellen door de coronacrisis kunnen gebruik maken van het tijdelijke werkloosheidsstelsel. De werknemers ontvangen een RVA-uitkering die wordt verhoogd tot 70% van het begrensd gemiddeld loon, met een maximum van € 2.754,76 per maand.	-Geldig tot en met 30 september 2021	(Agentschap Innoveren & Ondernemen, 2021)
	-De Vlaamse regering besliste tevens om de water-, gas- en elektriciteitsrekening voor technisch werklozen voor één maand te betalen.		(Van de Sype, 2020)

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Appendix E: Opinions about Dutch and Belgian COVID-19 policies

Topic	Search term	Netherlands	Belgium
Sluiting horeca	<p>‘Coronam aatregelen, horeca, Nederland ’ (Twitter)</p> <p>‘Coronam aatregelen, horeca, België’ (Twitter)</p>	<p>- Hoeveel % van de besmettingen zijn te wijten aan die "gevaarlijke #Horeca"? 40%? 30%? Nog minder? In Nederland, waar voor de Horeca véél minder strenge regels golden: 1,8%. Voor MAXIMUM 1,8% moet een hele sector + zijn >120.000 werknemers door een diep dal. #coronamaatregelen (Malorcus, 2020)</p> <p>- Meer malloten bij de misselijkmakende (weinig) Koninklijke Horeca Nederland die coronamaatregelen via een kort geding door de rechter willen laten verzwakken. Carnavalsdoden waren niet genoeg? (Meyer, 2020)</p> <p>- De afgelopen 5 maanden heb ik door heel Nederland heel veel op terrassen gezeten. Vrijwel overal had de horeca de coronamaatregelen goed op orde. Dat avond- of nachtkroegen worden gesloten kan ik nog wel begrijpen, maar dat alles nu opnieuw dicht moet is echt heel unfair. (Visserman, 2020)</p>	<p>-Probleemgemeentes in quarantaine plaatsen? Ho maar! Vlaamse horeca onthoofden? Doen! #coronamaatregelen #horecadicht #veiligheidsraad #Belgie #vivaldiregering (Bakker, 2020)</p> <p>- Professioneel voetbal mag blijven doorgaan, want dat treft de economie. Horeca niet, dan? #corona #coronamaatregelen #belgie #covid19 (Snicky, 2020)</p> <p>- Ik hoop dat deze wake-up call van de Veiligheidsraad werkt op de bevolking. Ik wil niet opnieuw met verplicht verlof... #coronamaatregelen #horeca #COVID19 #belgie (Teeuws, 2020)</p> <p>- Het regent oproepen om #coronamaatregelen te lossen door tal van sectoren: #horeca #foren #sport #toerisme #winkels #solden De redenen zijn legio, soms zelfs tot in het belachelijke Versoepel de maatregelen niet... situatie in België is bijzonder ernstig! #covid19be #blijfthuis (De Koning, 2020)</p>

		<p>- Ik wil op dit moment alleen maar zeggen: Please lieve mensen, gebruik je verstand en #Blijfgezond want #AlleenSamen kunnen we dit overwinnen... #Corona #COVID19 #coronamaatregelen #StaySafe #horeca #zorg #Nederland #lockdown</p> <p>(Langeveld, 2020)</p>	
Mondkapjes	<p>‘Coronamaatregelen, mondkapje dragen’ (Twitter)</p> <p>‘Coronamaatregelen, mondkapjesplicht België’ (Twitter)</p>	<p>-Had dit eerder gedaan. #mondkapjes #persconferentie (Duk, 2020)</p> <p>-8 uur per dag verplicht in de winkel met een kapje op. Alle vieze bacteriën inademen en het zwaar benauwd krijgen. Denk eens na! (Cryptocoiner, 2020)</p> <p>-Het viel me op dat nu vandaag, in dezelfde supermarkt als ik gisteren was, er aanmerkelijk meer klanten een mondkapje dragen. Toch een positieve ontwikkeling! #COVID_19 #coronamaatregelen (Lassing, 2020)</p> <p>-Dat je nu nog geen #mondkapje wil dragen is een keuze maar vertel niet dat ik er wel 1 draag omdat ik bang ben. Ik draag een #mondkapje uit #naasteliefde want we doen het #samen #coronamaatregelen (Donkers, 2020)</p>	<p>-Ik woon in België en iedereen draagt hier al maanden verplicht een mondkapje (na vandaag overigens niet meer verplicht). Heel kleine moeite. (Peters, 2020)</p> <p>-In België draagt iedereen een mondkapje, personeel en patiënten, altijd en overal. Wallinga: "Bepalend is het gedrag van de mensen: hoe iedereen zich aan de genomen maatregelen houdt." De verantwoordelijkheid wordt weer bij de burger neergelegd (Joosten, 2020)</p> <p>-Ik tegen mijn oom in België: “je komt toch wel deze kant op na je tweede vaccin?” Mijn oom: “ja, allee, ik neem mijn mondkapje wel mee hè. Als jullie Hollanders geen mondkapjes dragen is da jullie probleem. Niks mee te maken. Amai zeg.” Ik: “ok. Jij & je mondkapje zijn welkom.” (Bazzi, 2021)</p>

<p>Sociaal contact</p>	<p>‘coronamaatregelen, sociaal contact’ (Twitter)</p> <p>‘Perceptie Belgen over sluiten van de grenzen’ (Google)</p> <p>‘Belgische meningen over COVID-19 maatregelen (Google)</p> <p>‘Knuffelcontact’ (Twitter)</p>	<p>-Ik heb het echt zo hard gehad met heel dit gedoe. Geen vooruitzichten. Terwijl ik net nu zo hard nood hebben aan sociaal contact en perspectief.</p> <p>(Hannahpetitjean, 2020)</p> <p>- Word ik als enige blij van het kleinste in real life (niet virtueel) sociaal contact deze tijden? (Ben wel vergeten hoe een conversatie houden moet maar dat ter zijde) #Vaccin #Corona #coronamaatregelen #Covid #COVID19</p> <p>(Sergeantjen, 2020)</p> <p>- @MinPres nog gehad over buiten sporten met het OMT? Want ik heb wel weer behoefte aan sociaal contact na bijna 5 maanden... #coronamaatregelen #versoepelen</p> <p>(De Groot, 2021)</p>	<p>-Dat geen sociaal contact gaat weer de doodsteek zijn voor velen #coronamaatregelen #COVID19</p> <p>(Luyten, 2020)</p> <p>- Met de petitie die donderdagavond online werd gezet en inmiddels al bijna vijfduizend keer ondertekend is, hopen de initiatiefnemers de Belgische overheid duidelijk te maken dat ze meer aandacht willen voor grensfamilies. "Het gesloten houden van de grenzen heeft voor de mensen die in de grensregio wonen een enorme impact. Veel mensen hebben hun familie al maanden niet gezien" leggen de initiatiefnemers uit in de petitie.</p> <p>(Lux, 2020)</p> <p>-Schoonmoeder komt naar ons als knuffelcontact maar wij 4 mogen niet naar haar. Wat een onzin #coronamaatregelen voor debielen!</p> <p>(Bleu- Eyes, 2020)</p>
<p>Sluiting scholen</p>	<p>‘scholen dicht’ (Twitter)</p> <p>‘Scholen dicht, kinderen thuis’ (Twitter)</p>	<p>-En de scholen open, scholen dicht discussie gaat verder. Deze keer vanwege code oranje. We gaan open. Ik weet niet zo goed wat ik ervan vind. Ik ben vooral moe.</p> <p>(Heek, 2021)</p> <p>-Ik lees nu dat ze de basisscholen toch graag open willen na de kerstvakantie. Als juf wil ik even kwijt: houd nou die scholen dicht! We zijn nu aan voorbereiden, zodat we dadelijk 2 weken goed thuisonderwijs kunnen doen.</p>	<p>-Ik woon in België. hoorde donderdagavond om 2300h dat mijn kinderen 5 weken thuis zullen zijn miv vrijdag... Scholen 3 weken dicht, aansluitend 2 wkn vakantie. ik werk full-time. Ik moet ze naar Zeeland brengen nu....naar oma terwijl dat contact met grootouders wordt ontraden</p> <p>(Wisse, 2020)</p> <p>-“De leerachterstand is al groot genoeg, onze scholen nemen heel veel voorzorgen. Als we sluiten gaan we nog meer psychische problemen zien bij de kinderen. Ze hebben het nu al heel moeilijk</p>

		<p>Ik word zó moe van steeds die verandering!</p> <p>(Lin, 2020)</p> <p>-Ik werkte al thuis. Maar nu mogen de kinderen niet meer naar school of de opvang: dus kan ik thuisonderwijs niet goed organiseren én ik kan niet fatsoenlijk werken. Kinderen misbruiken voor beleid....</p> <p>(Verdel, 2020)</p> <p>-Dus de scholen gaan dicht zodat ouders weer thuis gaan werken? Als de scholen open zijn, werk ik thuis. Als ze dicht zijn, zit ik thuis op de kinderen te passen terwijl mijn werkstress elke dag toeneemt en ik langzaam gek wordt. Ik vind deze redenering echt onverteerbaar.</p> <p>(Gijsbers, 2020)</p>	<p>en de school is het enige wat ze nu nog hebben (Els Dhondt)</p> <p>(HLN,2020)</p> <p>-Schoolgebouwen moeten dicht. Afstandsonderwijs voor alle kinderen zoals tijdens de eerste golf. Dit brengt problemen mee, ja, maar scholen zijn hier beter op voorbereid dan tijdens de eerste golf en die problemen wegen niet op tegen elk leven dat we hierdoor moeten afgeven.” (Victor Marcelis)</p> <p>(HLN,2020)</p> <p>-Bij sluiting school etc is er wetgeving die zorgt dat je technisch werkloos bent. Maar wat met alleenstaande ouders die op woensdag geen opvang hebben en in late shift staan? Ik heb nog 1 vakantiedag. Wil mijn werkgever niet benadelen maar heb geen opvang.</p> <p>(Rose, 2020)</p>
Onduidelijk of slecht COVID-19 beleid	<p>‘Onduidelijke Coronamaatregelen’ (Twitter)</p> <p>‘Coronamaatregelen’ (Twitter)</p> <p>‘Corona overheidsbeleid Nederland (Twitter)</p> <p>‘Corona overheidsbeleid België (Twitter)</p>	<p>-#coronamaatregelen Nederland zijn niet "too little", maar wel "too late". Kabinet heeft eerst aangemodderd met als strengste maatregel horeca uurtje vroeger sluiten. Moet nu dieper in economie én welzijn snijden. Ontsporende #coronacijfers zijn politieke verantwoordelijkheid.</p> <p>(Lievens, 2020)</p> <p>-De onduidelijke en tegenstrijdige maatregelen maken dat mensen weinig vertrouwen hebben in het overheidsbeleid. Het ligt dus</p>	<p>-Tot voor kort steunde ik de overheid ruimhartig in het coronabeleid. Ik merk - en dat baart mij zorgen - dat ik het steeds lastiger vind.</p> <p>Een crisis managen is ingewikkeld. Vandaar mijn ruimhartigheid. Maar er gaat de laatste tijd wel heel veel mis in besluiten en communicatie. Kom op overheid houd mij vast!</p> <p>(Witzier, 2021)</p> <p>-Coronadoden-wereldkampioen België gaat voor de snelste en meest onduidelijke afbouw van #lockdown en #coronamaatregelen Succes verzekerd.</p> <p>(Bosch, 2020)</p>

	<p>‘Belgische meningen over COVID-19 maatregelen (Google)</p>	<p>wel degelijk aan de overheid! #coronamaatregelen</p> <p>(Bossenbroek, 2020)</p> <p>-Wat een onduidelijke routekaart van de regering. Die mogen wel een lesje communicatie nemen.</p> <p>(Visser, 2020).</p>	<p>-Om maar te zwijgen over de onduidelijke en te late informatie naar ondernemers en zelfstandige over al dan niet opstarten in de verschillende sectoren. #begov #coronamaatregelen #België</p> <p>(Leru, 2020)</p> <p>-Is het slechte Corona beleid in België een weerspiegeling van het jarenlange slechte bestuur van dit land?</p> <p>(Van Hout, 2020)</p> <p>-Onze politici communiceren ook goed. De ene helft van de bevolking is het eens met hun beslissingen, de andere helft niet. Is dat niet de typische definitie van een goede beslissing in België? (Marck Houcke)</p> <p>(Riepl, 2021)</p>
Overheidssteun	<p>‘Overheidssteun, horeca’ (Twitter)</p>	<p>-De cijfers van de horeca (en andere getroffen bedrijven) die ik tot op heden heb gemaakt kleuren diep diep rood. Ondanks de overheidssteun. Ondernemers houden dit niet vol, hoe gaan we dit oplossen? Ik maak me ernstig zorgen. Zo kan het toch niet veel langer. #op1</p> <p>(Dreschler, 2021)</p> <p>-Spreek je net horeca ondernemer met omzet verlies 180.000 euro, die tegelijkertijd geen overheidssteun meer ontvangt. Met tranen in ogen vertellen dat failliet onafwendbaar is en dat ie z'n huis moet verkopen. #waarzijnwemeebezig</p> <p>(Van der Vegt, 2020)</p>	<p>-Na bijna twee maand technisch werkloos te zijn nog altijd geen uitkering ontvangen. Gelukkig heb ik een bijberoep en een spaarrekening. Maar hoe doen mensen zonder reserve dit? Mijn hart breekt wanneer ik daaraan denk</p> <p>(Moreau, 2020)</p> <p>-Goed dat mensen die technisch werkloos zijn en op 70% van inkomen terug vallen geen energiekosten moeten betalen Wil me niet moeien maar misschien ook goed idee voor de zelfstandigen die op 0% van inkomen terug vallen? @HorecaVL@DeCaluwe_M #horeca #coronavirus</p> <p>(De Vriese, 2020)</p>

	<p>-Ik heb nauwelijks gewerkt afgelopen jaar (horeca) en nu dus ook mijn baan kwijt dank U regering en we hadden het zo goed voor elkaar</p> <p>(Cornelisse, 2021)</p> <p>-Honderdduizenden banen staan op het spel. Bedrijven staan op omvallen. Overheidssteun is onvoldoende. Bij 100% sluiten dan ook 100% vergoeden van de kosten. Maar de beste steunmaatregel is horeca en winkels op verantwoorde manier direct weer openen!</p> <p>(De Jong, 2021)</p>	<p>-Vrijdagochtend liet minister van Sociale Zaken Maggie De Block (Open VLD) weten dat ondernemers in de horecator gedurende één kwartaal vrijgesteld worden van sociale bijdragen. Maar de horecasector zelf vraagt verdergaande maatregelen.</p> <p>(Cardinaels, 2020)</p>
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