

Article

Happiness in Czechia during the COVID-19 Pandemic

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Abstract: The unprecedented growth of prosperity in developed countries, including the countries of Central and Eastern Europe, interrupted by the economic crisis in 2008–2009, came to a halt at the beginning of 2020. This was due to the outbreak of the COVID-19 respiratory disease pandemic, for which no cure was known in June 2020. The response of governments in the form of declaring a state of emergency and closing national and regional borders for several months had serious economic and, above all, psychological consequences. Anxiety, depression, and possibly suicides were expected to increase. In this paper, we focused on the experience of happiness, understood as positive emotion, expressing the highest degree of well-being. The conceptualization of happiness is based on the analysis of six indicators. The aim of the paper was to explore the experience of happiness during the COVID-19 pandemic in Czechia. Two hypotheses were formulated in terms of the expected effects of this pandemic on the experience of happiness. Measuring happiness in one region of the Czechia on a scale of 0–10 using both face-to-face methods and social networks yielded different results from those expected.

Keywords: happiness; pandemic COVID-19; Czechia; quality of life; quality of place



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1. Introduction

In the second half of the 20th century, developed countries experienced a period of unprecedented economic growth, which brought a large group of their inhabitants improvements in standard of living, resulting in a form of hedonistic prosperity and waste. After the collapse of the bipolar world in the early 1990s, these countries were joined by the countries of Central and Eastern Europe, which went through a period of fundamental political, social, and economic change, called transition. The most successful of these countries, referred to as “post-transitional”, were Czechia, Slovakia, Poland, and Hungary, known as the Visegrad Group (V4), as well as Slovenia [1]. In some economic indicators, these countries have overtaken the less developed countries of Western Europe, such as Portugal and Greece. The growth in prosperity was interrupted by the financial and then economic crisis caused by the collapse of Lehman Brothers bank in 2008, but prosperity returned after several years of stagnation. This lasted until the beginning of 2020, when the respiratory disease COVID-19, for which there was no vaccine, was discovered in China. It significantly affected Iran first, followed by Italy, and subsequently, other European countries. In a short time, the disease spread throughout the world, and the WHO declared it a pandemic [2].

At the time of writing, the first data on the economic impact of COVID-19 were beginning to appear; on 12 June 2020, Eurostat published data for April 2020. According to Eurostat, industrial activity in EU countries decreased by 27.2% compared to April 2019 [3]. According to the International Monetary Fund [4,5], the current pandemic would have a worse impact on the economies of countries than the crisis of 2008–2009. In Czechia, the

indicator of economic confidence, expressing the expectations of consumers and managers across economic sectors, recorded a deterioration in expected development [6]. Unemployment was expected to be a significant manifestation of this development. Measures related to COVID-19, such as quarantine, isolation of the elderly, travel bans, etc., were expected to increase anxiety, depression, and possibly suicide rate [7].

The aim of the paper was to explore the experience of happiness during the COVID-19 pandemic in Czechia. For the reasons we describe in the introduction, we expected to find reduced experience of happiness compared with 2019. We state two hypotheses. The first: *Happiness experienced during the COVID-19 pandemic will be significantly lower than during the corresponding period in 2019.* The second: *A decrease in happiness will be more pronounced for women than for men.*

This paper has three parts. In the first, we deal with the COVID-19 pandemic; in the second, we outline the concept of happiness; and in the third, we measure happiness and analyze the measured values.

2. Respiratory Disease COVID-19 and Its Influence on the Life of Inhabitants of Czechia

At the beginning of 2020, the respiratory disease COVID-19, caused by the SARS-CoV-2 virus, previously referred to as 2019-nCoV, broke out in Wuhan, China.

This disease was considered to be the most serious pandemic since the 1918–1920 influenza pandemic, known as the “Spanish flu”. The COVID-19 pandemic (hereinafter referred to as the pandemic) had a major impact on the lives of people around the world. The statistical platform Statista [8] reported the number of deaths from COVID-19 per 1 million inhabitants of the country. Table 1 shows the 10 most affected countries, the V4 countries, and the least affected countries.

Table 1. Numbers of deaths from COVID 19 per 1 million inhabitants in selected countries on 7 May and 7 June 2020.

Rank	Country	Death	
		7.5.	7.6.
1.	Belgium	736.7	835.9
2.	Spain	557.9	580.6
3.	Italy	495.7	557.5
4.	United Kingdom	460.4	600.2
5.	France	387.6	433.3
6.	Netherlands	306.9	347.6
7.	Sweden	298.5	448.0
8.	Ireland	289.1	342.8
9.	USA	230.9	330.3
10.	Switzerland	212.5	225.6
29.	Hungary	40.1	55.5
35.	Czechia	25.4	30.7
38.	Poland	19.8	29.4
68.	Slovakia	4.7	5.1
140.x	Ethiopia	0.04	x
146.	Mozambique	x	0.07

x—The number of monitored countries was 140 on 7 May and 146 on 7 June. The order of countries was on 7 May.

There are significant differences between the countries: Czechia, with a comparable population to Belgium, had almost 30 times fewer deaths per 1 million inhabitants as this country. A possible explanation of the differences between the countries of Western Europe, on the one hand, and the countries of Central and Eastern Europe, on the other, is given by Murgaš, Petrovič [9].

Although it is emphasized that the death toll in a pandemic is orders of magnitude lower than in “common diseases” such as cancer, and according to medialized opinions of immunologists, not a single healthy person has died in a pandemic, the pandemic

causes great stress for several reasons. One of the most important is that there was no cure for COVID-19 while this paper was being written. Another is the fact that the average data on the number of people with COVID-19 and of deaths for each country in absolute numbers are not as high as the number of deaths from diseases of the circulatory system and neoplasms, but there are large differences between regions of individual countries. The management of the pandemic was achieved at the cost of a huge strain on health workers.

Fortunately, the death toll in the current pandemic is incomparable to the 1918–1920 viral disease pandemic, known as the ‘Spanish flu’, which had an estimated average of 50 million deaths worldwide. The difference between the Spanish flu pandemic and the current COVID-19 pandemic is that the current pandemic affects all countries of the world due to globalization. The governments of individual countries responded to the spread of the current pandemic by declaring quarantines in the most affected regions and then in entire countries. The borders were closed, and people were ordered to stay at home and wear face masks. With the exception of grocery stores, pharmacies, drugstores, and petrol stations, all businesses were closed, and economic life ceased.

According to a study by Imperial College researchers in London, strict restrictive measures in 11 Western European countries save 3.1 million lives [10]. The numbers of people with COVID-19 and of deaths were lower in comparison to the first scenarios of expected development, so, from May 2020, restrictive measures began to be gradually relaxed in all countries, including border opening, and most southern European countries with a high share of tourism in GDP lifted restrictions for tourists.

In addition to the direct health effects, especially on the number of infected and dead, the pandemic has indirect, psychosocial, and economic effects. Social isolation has far-reaching effects, especially for the elderly. In old age, loneliness is a significant risk factor in the development of depression; the cost of treating depression in Czechia exceeds CZK 30 billion per year, and the disease is a significant risk factor in suicidality.

Suicidality is related to divorce rate, alcohol abuse, and unemployment. An increase in divorce rates can be expected as a result of the increase in domestic violence [11]. According to the Czech National Institute of Mental Health (further in text NIMH), 35 percent of women and 28 percent of men experienced mild mental health problems during quarantine. Moderate- and high-severity mental health problems were reported by 23 percent of women and 15 percent of men. “The measured results do not deviate from the commonly recorded trends, from which it is known that neurotic (anxiety) and affective (for example depression) problems are about two times more common in women than in men” [7]. This means that a pandemic has a greater impact on men than on women.

In respect of the economic impacts of the International Monetary Fund in April 2020, the world economy is forecast a decline of 3% [4]. In June 2020, the OECD assumed an economic decline in the world economy in 2020 by 6 percent; in the event of the outbreak of the second wave of the pandemic in autumn or early winter, a decline of 7.6% is expected. That would mean the world’s greatest economic crisis since the Great Depression in the early 1930s [12].

3. Happiness

Happiness, together with satisfaction with life, belongs to “central research areas in the social sciences, including economics” [13], its research currently experiencing a boom [14]. The growing popularity of the phenomenon of happiness in public space goes hand in hand with the growth of prosperity. New concepts such as happyology (happiology) or science of happiness are emerging. According to Huta [15], the public and the media often misunderstand positive psychology as a kind of happyology, which is supposed to bring people maximum and never-ending happiness. Moreover, at the same time, most media content exists for immediate consumption and therefore in attractive formats and attractive packaging, despite the fact that they do not bring happiness [16]. Moreover, the growing popularity of the phenomenon of happiness in public space also goes hand in hand with questions about the concept of sustainable development that are beginning to appear,

which are associated with the recognition that uncontrollable growth in any area (such as production, population, pollution, etc.) is unsustainable in any environment and limited by finite resources. The development of topics related to richer lifestyles and climate change, which are a threat to life on earth, are added to the concept of sustainable development [17]. The economics of happiness has become part of the economic mainstream [18] as well as part of sustainability.

Of what does happiness consist? Philosophers have been dealing with this question since antiquity. From a philosophical point of view, there are two distinguished definitions of happiness: (i) state of mind and (ii) life that goes well for the person leading it. The first meaning of happiness is psychological matter, just as pleasure or depression. In the second sense, happiness is a matter of value as well as well-being [19]. In common speech, we sometimes talk about happiness in trivial situations, for example, “I am lucky to have found lost keys”. The statement ‘... happiness that ...’ is an expression of an attitude or opinion, not a feeling, and therefore in reality it is not happiness [20].

Happiness is an emotion that, together with anger, disgust, fear, sadness, and surprise, form six basic human emotions [21]. Delle Fave et al. [22] consider emotions to be a qualitative aspect of happiness, and they put the former into a hedonic context.

According to psychologists, the dominant emotion at the beginning of the COVID-19 pandemic was anxiety. Positive emotions are the most important part of happiness; they create it, together with satisfaction with life and coping resources (Cohn et al. 2009). People can experience three kinds of happiness, all of which are associated with positive emotions: (i) pleasure and gratification, (ii) embodiment of strengths and virtues, and (iii) meaning and purpose. From the first to the third kind, happiness increases [23]. The fact that happiness is an emotion is a key factor in understanding happiness, conceptualizing it, and measuring it. This knowledge can be understood as the first point of the conceptualization of happiness.

According to Rojas [24], happiness is a final goal; according to Aristotle, happiness is supreme good. Bentham’s demand for the greatest happiness for the greatest number of people is well known. It follows from the above statements that happiness is an end in itself, not a partial goal for achieving other goals. This finding represents the second point of conceptualizing happiness.

Happiness itself has three dimensions [23]:

- (i) A pleasant life: a life that successfully pursues positive emotions about the present, past, and future.
- (ii) A good life: using your signature strengths to obtain abundant gratification (through activities we like doing) in the main realms of your life.
- (iii) A meaningful life: using your signature strengths and virtues in the service of something much larger than you are.

All three dimensions are subjective; happiness does not have an objective dimension. This finding represents the third point of conceptualizing happiness.

A different approach to the study of happiness came from a Dutch sociologist Ruut Veenhoven. In 1984, he founded the World Database of Happiness at the Department of Sociology at Erasmus University in Rotterdam. According to him, happiness is interchangeable with well-being. Accordingly, happiness has two components—an affective component called the “hedonic level of affect” and a cognitive component called “contentment”. His conceptualization of happiness is based on the assumption that happiness is a degree; his definition of happiness is related to this: happiness is “the degree to which a person evaluates the overall quality of his/her own life as a whole positive. In other words, how much one likes the life one lives”. The World Database of Happiness was based on this definition [25].

Veenhoven [26] compiled the Happy Life Years (HLY) index, based on life satisfaction, expressed on a scale of 0–10, and life expectancy, expressed in years. The index indicates how happily people live in a given country, and for how long. Table 2 (adapted from [26])

shows the countries in the first ten places, the V4 countries, and the countries in the last place in the world.

Table 2. Country ranking in happy life years 2010–2018.

Rank	Country	Satisfaction with Life	Life Expectancy	Happy Life Years
1.	Switzerland	8.5	82.6	66.8
2.	Denmark	8.3	79.4	66.1
3.	Island	8.0	82.1	65.4
4.	Norway	8.0	81.5	65.0
5.	Finland	8.0	80.5	64.4
6.	Canada	7.9	81.5	64.0
7.	Sweden	7.8	81.8	63.9
8.-9.	Austria	7.7	81.1	62.3
8.-9.	Costa Rica	7.8	79.9	62.3
10.	Israel	7.6	81.8	61.9
32.	Poland	7.0	76.4	53.8
34.	Czech Republic	6.7	77.7	52.1
35.	Slovakia	6.9	75.4	51.9
60.	Hungary	6.1	74.6	45.2
162.	South Sudan	3.4	55.3	21.0

HLY is used in the Happy Planet Index, measuring the ecological efficiency of our lives. The second component of the index is footprint [27]. Epistemological ambiguity and terminological chaos, valid for the study of the concept of quality of life, have been transferred to the study of the phenomenon of happiness. Happiness is difficult to describe objectively, and it has no generally accepted definition, understanding, or measurement. Opinions on happiness are converging, but most researchers agree that happiness is based on the subjective perception of the individual and not on objective observation. Happiness is identified with quality of life, welfare, well-being, personal well-being, and satisfaction with life. The authors of [28–30] identify happiness with utility. Happiness is identified with satisfaction with life, even in Deutsche Post Glücksatlas. Satisfaction is measured as the sum of income, work, health, housing, and free time [31]. According to Layard [32] happiness is, in fact, an essential component of satisfaction.

The identification of happiness with quality of life and other related concepts cannot be accepted. This statement is based on the knowledge that quality of life expresses cognitive judgment, and on the other hand, happiness expresses emotions [33]. In other words, quality of life contains affective and cognitive components, but happiness is only affective [34]. Happiness is part of quality of life, namely its subjective dimension, for which the name well-being is adopted [35–37]. This finding can be understood as the fourth point of the conceptualization of happiness. Although we do not agree with the identification of happiness with quality of life and satisfaction with life, we accept that other authors consider them interchangeable.

According to Ness [38] “The genetic influences are commonly shown to explain 30–50% of the variation in overall happiness indicators . . . Genetic factors thus account for nearly half of the variations in happiness scores, leaving the genetic effect sizes among the largest effects found in happiness research overall . . . Two Norwegian studies report 70–80% of long-term levels to be due to genes. By contrast, environmental factors are mainly time-specific and circumstantial boosts in happiness, thus usually relatively short lived”. Lyubomirsky [39] concludes that 50 percent of a given human’s happiness level is genetically determined (based on twin studies), 10 percent is affected by life circumstances and situation, and the remaining 40 percent of happiness is subject to self-control. Peterson [40] is critical about Lyubomirsky’s statement [39]; he considers the division of sources of happiness as the division of a cake into pieces to be simple and seductive but incorrect. The inhabitants of Scandinavia, for example, do not have the same sources of happiness as the inhabitants of sub-Saharan Africa, and, for example, the people of one country who are

atheists do not have the same sources of happiness as religious people. Diener [41], in his analysis of myths about happiness, describes the 50:40:10 ratio of sources of happiness as “myth number 2”.

Myths about happiness:

- happiness has constant individual “desired value”;
- the causes of well-being can be understood as a pie chart of influences;
- money is linked to happiness;
- correlations show a causal relationship;
- context can be ignored;
- discovering which nations are the happiest is a meaningful goal;
- Most people long to be happier than they already are.

Based on a study of the literature, Kahneman and Krueger [42] report factors associated with happiness and a high level of satisfaction with life (Table 3).

Table 3. Correlates of high life satisfaction and happiness.

Smiling frequency
Smiling with the eyes (authentic smile)
Ratings of one’s happiness made by friends
Frequent verbal expressions of positive emotions
Sociability and extraversion
Sleep quality
Happiness of close relatives
Self-reported health
High income, and high-income rank in a reference group
Active involvement in religion
Recent positive changes of circumstances (increased income, marriage)

Factors influencing happiness can be divided into psychological, socioeconomic, environmental and cultural factors. According to different criterions, we can classify them using tangible and intangible factors or with circumstances and internal, psychological, and external factors.

Happiness is influenced by marriage, meaningful and well-paid work, good social relationships with family or friends, being part of a community, and personal freedom and values, including religion [23,32,43,44]. Education does not correlate with happiness [45]. The consensus is not clear about the effect of health on happiness. Some researchers classify it as a factor influencing happiness [32,46], but at the same time, they think that good health is not a necessary condition for happiness [46]. Seligman [23] considers the relationship between health and happiness to be more complex. He believes that the individual’s subjective perception of their disease is more important than the diagnosis of a serious illness. He again refers to the ability of a person to adapt to various facts. However, this theory does not apply to very seriously ill patients with a combination of several diseases, which predisposes them to dependence on others.

The influence of money and material possessions on happiness is judged ambiguously, so the answers to the question “does money buy happiness?” are different. Easterlin [30] believes that happiness grows with increased income, but only to a certain extent. After reaching that level, happiness and satisfaction with life do not continue to grow. Based on a Gallup World Pool surveyed by 1.7 million individuals around the world, [47] found that “income satiation” is occurring at USD 95,000 for life evaluation and USD 60,000 to 75,000 for emotional well-being. It follows that life evaluation and emotional well-being, in our understanding of quality of life and happiness, are two different things.

Understandably, in poorer countries, there is satiation with less money, and in richer countries, with more money. According to Kahneman and Deaton [48], in the US, this income was USD 75,000. In Europe, [49] considers the amount of EUR 27,913 per year to be the limit of satiation (rounded to USD 35,000). It is natural that this figure is only

indicative, because in Europe, there are significant differences in the living standards of the population of individual countries. At the same time, people have different lifestyles; in other words, they differ in what they spend money on. The authors of [23] present the results of research on this topic and state that money affects us to the extent that it is important to us. According to Dunn et al. [50], “If money doesn’t make you happy, then you probably aren’t spending it right”.

In connection with the relationship between happiness and money, the authors of [51] draw attention to the questions of what kind of happiness—hedonistic, prevalent in contemporary society mass consumption, or eudaimonia—is sustainable. Thus, they take as their focus, in the study of happiness—“here and now”—an element of the future. They answer that eudaimonia is the first step towards achieving sustainable consumption.

Blanchflower deals with the influence of age on experiencing happiness. In his study, based on measuring happiness in 132 countries around the world, he states that happiness changes with age in the form of a U-shape. The lowest is at the age of 47 in developed countries, and at the age of 48 in the developing countries [52]. The issue of variability of happiness over time is addressed by the “set point of happiness theory”. According to Blanchflower, the level of happiness of an individual is stable in the long run. Positive and negative events in everyone’s life have only a short-term impact on the experience of happiness; after their disappearance, the level of happiness returns to the state of equilibrium [53].

Happiness is significantly influenced by culture; it can be said that happiness—as well as quality of life—is “culturally anchored” [1]. Culture has an impact primarily on the geographical differentiation of happiness at the level of nations. In terms of happiness, but also quality of life, individual countries belong to two major civilization areas, Euro-American and East Asia, while Eurasian civilization is generally considered individualistic and East Asian considered collectivist. People in individualistic countries are happier than people in collectivist countries. The Czech Republic is one of these individualist countries. There are also significant differences in countries within single civilization areas—65 percent of people in Denmark are happy, but only 5 percent in Portugal [54].

Murgaš [1] dealt with cultural and geographical influences on satisfaction with life. The influence of culture on happiness was studied by Shin [55] in the USA, Russia, Australia, Japan, China, and India. According to him, happiness has three components: (i) enjoyment, (ii) achievement, and (iii) satisfaction. The number of people who are very happy and quite happy, according to surveys in 2008, was higher in English-speaking countries, such as the USA and Australia, and the Confucian countries of China and Japan, but in India (82%), people were very happy and quite happy almost as much as in the USA (83%). It can be stated that, as in the case of satisfaction with life [1], cultural and geographical influences also affect achieving happiness. This means that happiness is not automatically low or high in each country within the civilization areas.

According to Veenhoven [56], the study of happiness in studies collected in the World Database of Happiness draws several important conclusions:

- most people are happy;
- the average happiness in nations is increasing;
- inequality in happiness is decreasing;
- differences in happiness between nations are not the product of social position but of individual life ability.

There are several reasons to address happiness. According to Bao and Lyubomirsky [57], “the empirical evidence suggest that happiness plays a causal role in the attainment of success, as well as in the practice of behaviors related to success. This occurs, we argue, through experience of positive affect, which makes happy individuals more, likely to approach people and situation, and helps build their intellectual, social, physical, and psychological resources and skills”. Happiness research shows that happier people are more educated, have higher wages, live longer, are healthier, marry more, divorce less, have more friends, find a job that they enjoy more easily, and live a happier life in their

marriage. However, the problem is to determine what is primary and what is derived. If, for example, people live longer because they are happy, or they are happy because they live longer. The question under discussion is whether happiness and a happy life are the same. From a philosophical point of view, a happy life is identical to a good life [28].

Another reason for the meaningfulness of dealing with happiness is that, along with quality of life, it becomes a public policy goal. The growing interest in measuring happiness and/or quality of life is the result of a decline in interest in GDP per capita, expressing many years of human development. This development can be illustrated by the example of the British Office for National Statistics (hereinafter ONS), which has been measuring happiness and well-being since 2011 [58]. Austin [59] considers the position of happiness and quality of life as goals of public policy to be so strong that she marks them as hegemony. The reason is that the problem of sustainability and quality of life is a problem of values [60]. Kohák [61] calls ecological theory environmental ethics. These issues are addressed in several types of work [62–76].

We understand happiness as the highest achievable quality of life. This means that the place, or rather its quality, does not contribute to happiness, or participates to a small extent. A person living for decades in a refugee camp and a resident of Denmark, a country considered the happiest in the world, can both be happy. On the Cantril scale of 0–10 happiness, the highest rating is ten; on the seven-point Likert scale, the highest rating is seven.

In the research “The Happy Danes: Exploring the Reasons Behind the High Levels of Happiness in Denmark”, conducted by the the Danish Happiness Research Institute, the authors state that the titular reasons are factors such as trust, social security, wealth, freedom, work, democracy, civil society, and work life balance [77].

The phenomenon of happiness is holistic when negative emotions are added to it. These are unpleasant feelings, such as anger, sadness, fear, or hatred. Their significance is that even happy people experience them, but their positive interpretation is essential [78]. According to surveys, people are happiest when they do some of their favorite activities [32]. To this can be added another statement—that happiness is social, in that it results from good social relations and enculturation, which we understand as a process of incorporating the individual into culture and fair institutions [79]. Layard [32] argues that there is no happiness that is better or worse. He only claims that there are some unhealthy ways to achieve feelings of happiness, such as drug or alcohol use.

In the outline of the conceptualization of happiness, we start from the following premises:

- (i) happiness is an emotion—this is a fact that is a key factor in understanding happiness and conceptualizing it;
- (ii) happiness is, for every person, a goal in itself, not a sub-goal for achieving other goals;
- (iii) the dimensions of happiness are subjective—happiness has no objective dimension;
- (iv) happiness is part of quality of life, namely its subjective dimension, which is known as well-being.

We add the following statement to these premises:

- (v) happiness can only relate to the individual, not to society. There is no happy society (nor unhappy), only happy people in society [55].

Based on previous statements of happiness, we define happiness “as positive emotions expressing the achievement of the highest possible satisfaction with life”. On the Cantril scale, 0–10, representing the most common measure of quality of life, happiness is an expression of the value 10.

4. Measurement

Researchers pay great attention to measuring happiness [25,80–84]. Measurement using subjective or objective indicators is possible. The first is usually done in the form of a face-to-face interview, where the interviewee most often replies to the question of how happy they are, using the Cantril scale of 0–10 or by obtaining objective data on indicators

characterizing what researchers consider to be happiness. Measuring happiness, in the first case, is simple, by averaging the answers for a city, region, or state. In the second case, the measurement is a complex mathematical operation; far more important than the actual measurement is the selection of indicators. This represents the second step in the sequence of steps in the study of happiness:

Conceptualization → selection of indicators → measurement → interpretation of the findings.

There is no agreement on the number of indicators. They are used in the number of units up to ten, usually grouped into dimensions or domains. Murgaš [85] considers optimal the “smallest possible number of indicators with the highest possible information value”.

We measured happiness on the Cantril scale of 0–10 in the months of April–May 2020, in the period when the pandemic peaked and then began to decline in the region of northern and central Bohemia, including Prague. The measurement N = 293 (older than 18 years) consisted of 143 men and 150 women. The criterion of anonymous face-to-face research was to obtain a comparable representation of men and women and a representation of different age groups. Approximately 15 percent of respondents refused to answer, more men than women. In the period 2000–2009, according to CVVM data, the average satisfaction with life decreased from 6.3 (January 2000) to 6.0 in the period September 2012–January 2013, and then slowly increased to 6.8 in June 2019 [85,86]. In line with this positive development, until the beginning of 2020, i.e., just before the outbreak of the pandemic, the satisfaction of the Czechia population with material living conditions grew [85,87]: in January 2020, 55% of the population rated their conditions as good (on a 5 point scale as very good and good), 33% as neither good nor bad, and 12% as bad (on a 5 point scale as bad and very bad). In the first measurement of the satisfaction of Czechia population with material living conditions in February 1999, 24% assessed their conditions as good, 50% as neither good nor bad, and 26% as bad. The described development of satisfaction with material living conditions corresponds to the growth of wages and the growth of GDP per capita in Czechia in the period 2003–2015 [1]. It is also in line with the described increase in quality of life and happiness in developed countries. For example, in the UK, in measuring happiness on a scale of 0–10 in the period April 2011–March 2019, the number of people who responded 9 or 10 rose from 31.9% at the beginning, to 35.4% at the end of the reference period [58].

We compare measured values of happiness, quality of life, quality of place, and related phenomena in 2020 in Tables 4–6 with the measurements in 2019 (Table 7) [88], in which 1356 respondents over 18 years of age from all 77 (LAU 1) districts of Czechia participated.

Table 4. The variables in year 2020.

	Variables	Happiness	Quality of Place	Quality of Life	Health	Trust	Health
All	Mean	7.53	7.78	7.64	8.23	5.78	8.23
	StdDev	1.63	1.52	1.52	1.77	2.00	1.77
Men	Mean	7.25	7.73	7.43	7.76	5.45	7.76
	StdDev	1.56	1.37	1.59	1.65	2.19	1.65
Women	Mean	7.76	7.82	7.83	8.63	6.05	8.63
	StdDev	1.65	1.64	1.43	1.78	1.77	1.78

Table 5. Matrix of correlations of values in 2020—men.

Men	Happiness	Quality of Place	Quality of Life	Safety	Trust	Health
Happiness	x					
Quality of place	0.24 **	x				
Quality of life	0.38 ***	0.30 ***	x			
Safety	0.03	0.14	0.19 *	x		
Trust	0.13	−0.04	0.19 *	0.1	x	
Health	0.13	0.07	0.27 ***	0.24 **	0.1	x

* 0.05 > p > 0.01, ** 0.01 > p > 0.001, *** 0.001 > p .**Table 6.** Matrix of correlations of values in 2020—women.

Women	Happiness	Quality of Place	Quality of Life	Safety	Trust	Health
Happiness	x					
Quality of place	0.43 ***	x				
Quality of life	0.56 ***	0.34 ***	x			
Safety	0.35 ***	0.24 **	0.34 ***	x		
Trust	0.04	−0.09	−0.05	0.12	x	
Health	0.37 ***	0.13	0.31 ***	0.58 ***	0.02	x

** 0.01 > p > 0.001, *** 0.001 > p .**Table 7.** Values of variables in year 2019.

Variables	Happiness	Quality of Place	Quality of Life	Safety	Trust	Health
Average value	7.0	7.0	7.4	8.0	6.0	8.6

According to our measurements, the course of experiencing happiness according to age groups is different from Blanchflower's U-shaped form [52]. From value 7.3 for the youngest people, it rises to 8.3 in middle age and then, in "young old age", falls to about the same value as in the beginning. In the "old age" category, 71 and over, it falls slightly (Table 8).

Table 8. Values of happiness according age group.

Age	Mean	Value
18–27	Mean StdDev	7.3 1.6
28–40	Mean StdDev	7.8 1.6
41–54	Mean StdDev	8.3 1.4
55–70	Mean StdDev	7.4 1.7
71+	Mean StdDev	6.9 2.1

5. Discussion

Measuring happiness, quality of life, and quality of cities in 2020 brought surprising results. As Table 4 shows, the values of happiness and other variables achieved at the time of the peak of the pandemic are high. The pandemic did not affect the experience of happiness in the northern and central Bohemia region. It is appropriate to ask whether the measured values would be even higher without a pandemic or not, but of course we will not know the answer to this question. The measured values are in line with the growth of the happiness rate, as quantified by the World Happiness Report, which measures happiness at the country level since 2012. In the first measurement for the years 2007–2010, Czechia was in 38th place. In other measurements, it took 39th, 31st, 27th, 23rd, 21st, and in the World Happiness Report 2020 for the year 2017–2019, 19th place [89,90]. In future research, it would be appropriate to repeat the measurement of happiness in the studied region during the year 2021. This would show whether the growth of happiness in 2019 despite the pandemic meant the end of the growth period of happiness in Czechia, as stated by CVVM (2019–2020). This would mean that the processes determining the happiness of Czechs in the period up to the outbreak of a pandemic had a more robust impact on the experiencing of happiness compared to the effects of a pandemic, which reduced the experience of happiness. In Table 9 [88], as in Tables 1 and 2, we rank the order in the first ten places, the order of Czechia (Table 10 [9]), other V4 countries, and the country in the last place.

Table 9. Ranking of happiness 2017–2019, selected countries.

Rank	Country	Value
1.	Finland	7.809
2.	Denmark	7.646
3.	Switzerland	7.560
4.	Iceland	7.504
5.	Norway	7.488
6.	Netherlands	7.449
7.	Sweden	7.353
8.	New Zealand	7.300
9.	Austria	7.294
10.	Luxembourg	7.238
19.	Czechia	6.911
37.	Slovakia	6.281
43.	Poland	6.186
53.	Hungary	6.000
153.	Afghanistan	2.567

Table 10. Comparison of happiness values in Czechia in years 2019 and 2020.

Year	Happiness	Quality of Place	Quality of Life	Safety	Trust	Health
2019	7.0	7.0	7.4	8.0	6.0	8.6
2020	7.5	7.8	7.6	8.2	5.6	8.2

According to our measurement (Table 6), the course of experiencing happiness according to age groups is different than Blanchflower's [52] stated U-shaped form. From the value of 7.3 in the youngest people, it rises to value of 8.3 in middle age, and then, in "young old age", it falls to about the same value as in the beginning. In the "old age" 71 years and over category, it falls slightly.

The happiness of men and women in 2020 is higher than its average value in 2019; the same applies to quality of place. The average value of quality of life, due to the high quality of life of women, in 2020 is higher than the average value in 2019, as well as in the case of safety. Only in the case of trust and health are the average values lower in 2020 than in the previous year, 2019. In both cases, the values of men are significantly lower

compared to those of women. It follows from the above that happiness, quality of life, and quality of place in Czechia continue to improve, which is not surprising. It is surprising that this is happening during the COVID-19 pandemic, which has significantly affected the way of life of people around the world. This statement means that the first part of the hypothesis was not confirmed.

Table 4 shows that, not only for happiness but also for other variables, the values of women are slightly different in some and in others more different, but always higher than the values of men. This means that the second hypothesis was not confirmed. It follows that measuring the happiness of men and women in Czechia is in line with the general trend of the world, according to which there is either no significant difference between the values of men and women, or in the countries with the best rankings according to average happiness values, women's happiness values are higher than men's happiness values. The size of the difference between the values of happiness of men and women is not related to the attainment of the level of social and economic development in the given country or to religion [91].

In addition to the numerical differences in the experience of happiness of men and women, the different structure of relationships with other relevant variables is also worth noting. Within men, there is medium correlation between happiness and quality of life and a small correlation between quality of place, trust, and health. The correlation with security is very small. For women (Table 8), there is a high correlation between happiness and quality of life and a medium correlation with quality of place, health, and safety. There is very little correlation only with the trust variable. The values of all calculated correlations of women are higher than the values of men. Thus, women's happiness has a stronger relationship to other variables than men's happiness. Gender equality is another variable influencing women's happiness. Murgaš [1] presents Hofstede's six cultural dimensions influencing happiness. We focused on gender differences between them because we were measuring them. Hofstede calls the differences masculinity vs. femininity, and characterizes Czechia as a masculine society. In masculine countries, people "live in order to work". Society is driven by competition, achievement, and success, with success being defined by the winner or best in field. Managers are expected to be decisive and assertive. As for the characteristics of Denmark—one of the countries with the highest levels of happiness—Denmark is a feminine society. A low score (feminine) on the dimension means that the dominant values in society are caring for others and quality of life. A feminine society is one where quality of life is the sign of success, and standing out from the crowd is not admirable.

Over the last few decades, there has been a significant improvement in gender equality in developed countries, among which there are nevertheless significant differences. The length of time devoted to housework and childcare by men and women is a part of gender equality. Based on data from the European Social Survey [92], 26 European countries were assessed in terms of the relationship between the unequal division of household labor between women and men and women's happiness. The assumption that women, who have a higher share of domestic work compared to men, report lower values of happiness has been confirmed. It can be stated that large gender differences between men and women within one country causes a lower level of happiness in women [1,93–96]. From this point of view, the higher achieved happiness of women in the Czech Republic may mean a shift in Czech society towards Hofstede's feminist society. We paid increased attention to the sphere of women's happiness. This is due to the fact that, as we have already mentioned, in the countries with the best ranking according to the values of average happiness, the values of women's happiness are higher than the values of men's happiness. This results in an important statement for decision-makers in public policy, not only in the Czech Republic but also in other developed countries with lower measured values of happiness. Improving happiness, as well as quality of life, in society can be achieved, among other methods, by creating conditions for improving women's happiness. The second hypothesis in our research was formulated on the basis of the expectation of an

approximately twice as frequent occurrence of neurotic and affective problems of women compared to men (NUDZ 2020). However, this occurrence did not affect the high measured values of women's happiness.

6. Conclusions

The COVID-19 pandemic in 2020, which was later described as its first wave, significantly affected all countries, including the Czech Republic. The aim of this paper was to explore the experience of happiness during the COVID-19 pandemic in Czechia. The health, and especially the socio-economic impact, of the pandemic was significant. On this basis, two hypotheses were made. A brief conceptualization of happiness is based on the fact that this is a positive emotion. According to the mediated opinions of psychologists, the dominant emotion at the beginning of the COVID-19 pandemic was anxiety. Our understanding of happiness is based on six premises; according to one, happiness is part of quality of life, namely its subjective dimension, for which the name well-being is adopted. It follows that happiness and quality of life cannot be identified. Part of the conceptualization is the analysis of cultural influences on the experience of happiness. We measured happiness on a scale of 0–10 between April and May 2020, when the pandemic peaked and then began to decline, using face-to-face and social networking methods. The research was focused on the region of northern and central Czechia. On a scale of 0–10, not only was happiness measured, but so too were related variables of quality of life, quality of place, safety, trust, and health. The measurements yielded surprising results of high values of happiness, quality of life, and quality of place, which means that their growth from previous years continued. This means that the first hypothesis, assuming lower measured values of happiness at the time of the pandemic compared to the previous year, was not confirmed. The second surprising result is the higher measured value of happiness and quality of life as well as quality of place in women compared to men. In the second hypothesis, we assumed that the decrease in happiness values would be more pronounced in women compared to men. This second hypothesis was not confirmed either. Among other things, the European Social Survey shows that the values of happiness are also influenced by large gender differences between men and women within a country. From this point of view, the higher achieved happiness of women in the Czech Republic may mean a shift in Czech society towards Hofstede's feminist society.

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