

TROUBLED MINDSCAPES

Studying The Mental Health Of Adolescent Girls In Garment
Worker Households Amid The Covid-19 Pandemic



“Our rooms know our pain”

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ABOUT THE PROJECT



Funder: Femnet e.V

COVID-19 has had a drastic impact on garment workers and their families in Bengaluru. Garment workers faced challenges due to factory closures, reduced working hours, and heightened health risks. With limited access to healthcare and financial resources, these workers and their families experienced economic hardships and health vulnerabilities. The pandemic also exacerbated issues such as job insecurity, mental health concerns, and domestic violence, further highlighting the need for support and empowerment initiatives for this community.

Taking into account these challenges, FEMNET extended its support to Cividep for the project 'Mitigating Covid-19 Impact on the health of Women Garment Workers in Bangalore'. The objective was to equip women workers with the requisite knowledge to access the government health schemes and to take adequate steps for Covid-19 prevention for themselves and their families. Given the challenging circumstances within garment worker households, where adolescent girls and women often bear the brunt of domestic responsibilities and family pressures, we wanted to develop a support system for adolescent girls from such households to cope with the new complexities.

The report 'Troubled Mindscapes: Studying The Mental Health of Adolescent Girls In Garment Worker Households' was produced as part of this project. It sought to document the particular distress faced by adolescent girls of women worker families, create material for their counselling, providing counselling and training on mental health.

A typical day at a garment factory shopfloor in Bengaluru



ABOUT CIVIDEP

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Cividep has been working on corporate accountability and workers' rights since the year 2000. Based in Bangalore, and with field offices in other locations in South India, Cividep's work aims to safeguard the rights of communities, especially workers employed in global supply chains. We strive to hold corporate entities accountable for the impacts of their business on workers and the environment. To this end, Cividep conducts research on working conditions and corporate conduct across a range of export-oriented industries, engages in worker education, and advocates for policy change.

These initiatives are focused on the garment, leather, and electronics industries, on coffee and tea plantations, and in the area of business and human rights. Cividep is an active member of national and global networks working for the advancement of responsible business conduct and human rights.

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For more updates, subscribe to Cividep India's newsletter: <https://bit.ly/3Kkrs8M>

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ABSTRACT

The Covid-19 pandemic, which led to lockdowns and wide scale socio-economic disruption in 2020-22, affected all segments of the population. However, its impact on the mental health of adolescent girls in a lower-middle-income country like India remains relatively unexplored. This report presents the findings of research conducted on adolescent girls, specifically the children of women garment workers in Bengaluru, India. The report is based on Focus Group Discussions (FGDs) involving 44 adolescent girls and In-depth Interviews with 13 girls. It delves into the direct and indirect consequences of Covid-19 on various aspects of their lives.

Adolescents already faced pre-existing socio-economic and gender-based vulnerabilities, which were exacerbated by Covid-19. The pandemic intensified their anxieties and fears, deepened financial insecurity, disrupted their education and future aspirations, and amplified gender-based inequalities and violence. Consequently, it resulted in an overall decline in their mental health and well-being. The report concludes by offering suggestions to prevent and support adolescents from shouldering gendered burdens prematurely.

INTRODUCTION

Adolescence represents a pivotal phase in one's life, shaping social and emotional development (WHO,2021)¹. The World Health Organization defines adolescence as the age group from 10 to 19 years, while the National Youth Policy of 2014 in India narrows it down to 13 to 19 years. In India, nearly one-fifth of the population falls within this age range, accounting for approximately 253 million individuals (Census of India,2011)². This demographic faces myriad challenges including discontinuation of education, substance abuse, health issues such as anaemia and obesity, early marriages, teenage pregnancies, abuse, mental health issues including suicide, and more.

Mental health is a vital aspect of well-being, characterised by an individual's ability to recognize their own capabilities, cope with life's usual stresses, work productively, and contribute to their community (WHO,2022)³. According to the National Mental Health Survey of India (2015– 2016), around 7.3% of the adolescents aged between 13-17 years grapple with mental health issues, with 9.8 million of them requiring intervention and support (Murthy, 2017)⁴. Despite these alarming statistics, there has been a conspicuous lack of emphasis on adolescent mental health in policies and programmes.

The advent of the Covid-19 pandemic, originating in a Chinese province in December 2019 and declared a global pandemic by the WHO in March 2020, significantly impacted more than 200 countries worldwide, with 767 million confirmed cases and 6.9 million deaths⁵. India, in an effort to contain the virus, the government imposed a nationwide lockdown on March 25, 2020. This containment strategy disproportionately affected the economically disadvantaged and

marginalised populations. The consequences were widespread, with workplaces and schools closing, transportation systems suspended, and hospitals overwhelmed with COVID-19 patients.

This unprecedented lockdown and economic downturn cast a shadow on the mental health of countless individuals, exacerbating the challenges faced by those already grappling with mental illnesses. The mental health issues triggered by Covid-19 manifested in the form of stress, anxiety, depressive symptoms, insomnia, denial, anger, and fear (Torales et al.,2020)⁶. There were also several reports of suicide committed by migrant labourers, health workers and people in quarantine centres (Targum & Nemeroff, 2019⁷; Pandey, 2020⁸).

It is within this backdrop that the study of the mental health of adolescent children of garment workers gains significance. Two year after the pandemic, it becomes evident that the lessons learned from this study hold great potential in improving the lives of these girls who have endured the dual burdens of adolescence and the Covid-19 crisis. This research holds significance beyond its immediate focus on the mental health of adolescent girls from garment worker households during the COVID-19 pandemic. It extends into broader areas of public health, human rights, and health equity, actively contributing to a healthy workforce for the future. The study addresses the vulnerability of adolescent girls who faced challenges such as disruptions in education, food insecurity, poor peer support, and heightened family stress during the pandemic. Understanding the impact of these unique challenges on their mental well-being is not only an empathetic endeavour but also a practical step towards improving their lives. This knowledge is crucial for government agencies, non-governmental organisations, and educational institutions in shaping policies that address the specific needs of this demographic. By focusing on the mental health of adolescents during emergencies, the research contributes to enhancing their overall health, well-being, educational prospects, and future work opportunities.

LITERATURE REVIEW

Children and adolescents, while less susceptible to severe illness from infections like Covid-19, remain highly susceptible to the psychological impact of overwhelming and complex disasters that surround them. Their limited understanding of the situation, coupled with challenges in expressing their feelings, makes them more vulnerable. Extensive media coverage of deaths, hospital scenes, and the spread of misinformation via social media further compounds their anxieties (Gabbarron et al., 2021)⁹.

The Covid-19 pandemic has significantly affected the mental well-being of children and adolescents. Although definitive findings are still emerging, previous research on the impact of disasters and traumatic events has demonstrated enduring and adverse effects on the psychological health of young individuals. Common behavioral symptoms include anxiety, depression, disruptions in sleep and appetite. Early-life stressful events can lead to disrupted neurodevelopment, social, emotional, and cognitive impairments, psychiatric disorders, and disability.

Adolescents, in particular, faced heightened distress due to factors such as home confinement, closure of outdoor recreational activities, domestic violence, increased domestic responsibilities, academic disruptions, uncertainty about the future, parental stress, and limited access to peers, school, and teachers. Puberty, with its accompanying hormonal changes, brings shifts in social dynamics, emphasizing social status, peer groups, and relationship exploration. Studies have also highlighted an increased risk of neglect, abuse, and violence during disaster periods (Curtis et al. 2000¹⁰; Kousky 2016¹¹).

The impact of pandemics on children and adolescents remains underexplored, both globally and in India (Lee et al. 2018)¹². This knowledge gap partly stems from challenges related to access to adolescents, reliance on parents as respondents, and ethical consent issues.

A study of children and adolescents in residential care during the COVID-19 pandemic showed that these individuals experienced poorer psychological wellbeing compared to the general population (Vallejo-Slocher et al. 2022)¹³. A study of impact of Covid-19 on Australian adolescents found that three quarters of online respondents admitted to worsening mental health and negative impacts on learning, friendships, and family relationships. They also reported sleep disturbances, psychological distress and health anxiety (Li et al. 2022)¹⁴. A US-based study on adolescents and young adults exploring the effects of Covid-19 identified increased symptoms of generalised anxiety and social anxiety, with elevated rates of depression and panic/somatic symptoms, particularly among females (Hawes et al. 2022)¹⁵. A study in China involving more than 1,000 junior high school and high school students showed that more than one fifth of students experienced adverse effects on their mental health, including depression, anxiety, and stress.

In India, a few studies also attest that worry, helplessness and fear were the most common feelings among quarantined children (Saurabh and Ranjan 2020)¹⁶.

RATIONALE FOR THE STUDY

Bengaluru in south India was one of the worst affected cities during the pandemic. A highly congested city with damp weather, Bengaluru already grappled with poor air quality and respiratory issues before the pandemic (Vijayalakshmi and Raj 2020). The nation-wide lockdown, commencing on March 23, 2020¹⁷, brought about sudden closures of schools, colleges, and workplaces (UNICEF(2021)¹⁸. A staggering 1.5 million schools across India closed due to the pandemic and lockdowns, affecting the education of 247 million children enrolled in elementary and secondary schools. India ranked as the second country in the world with the longest school closures (Hamid and Poorvaja 2022)¹⁹. In Bengaluru, private schools and colleges swiftly transitioned to online classes, with government institutions following suit. After an extended period of uncertainty, the class 10 and class 12 board exams, pivotal milestones for adolescents, were eventually suspended in 2020.

The impact of Covid-19 and the subsequent lockdowns likely varied between genders and age groups. Adolescent girls encountered a unique set of health risks compared to boys. The closure of schools meant that women had to shoulder an increased burden of caregiving, particularly for elderly family members at higher risk of Covid-19 (Chauhan 2021)²⁰. Societal gender roles and expectations may have forced adolescent girls to take on additional responsibilities at home. Garment workers, a vulnerable group, experienced challenges such as job loss,

reduced wages, unpaid overtime work, and the effects of changes in labour laws in India during this period. Additionally, there was a decline in orders from global apparel companies, sudden changes in order specifications, price reductions, and implications of evolving labour laws. Domestic violence cases also saw an uptick during the lockdown, as reported by the Crime Records Bureau, National Commission for Women, and helplines (Das et al. 2020)²¹.

Given the critical stage of adolescence, the instability of their parents' employment, poverty, discrimination, and gender disparities, the impact of Covid-19 on the mental health of adolescent girls from garment worker families is likely to have significant and far-reaching consequences. The study shows that these girls were more at risk of dropping out of school, early marriages, learning setbacks, and social isolation. These challenges could jeopardise many of their future health and well-being, trapping them in a cycle of limited education, reduced job opportunities, poor health, debt, and poverty. Investigating these issues and comprehending their full extent is crucial for designing appropriate interventions. Furthermore, understanding the impact on the physical and mental health of workers and their families is essential in this context.

The subsequent sections of this report are structured as follows: Research objectives are outlined, followed by a description of the methodology and study setting. A profile of the participating adolescent girls is provided, along with an explanation of the data collection process. The data analysis approach is then presented. Findings are categorised under seven emerging themes: anxieties related to Covid-19 infection, changes in daily routines and social interactions, migration and relationships, disruptions in education, heightened financial insecurity, gender discrimination, and risks of harassment and violence. This is followed by a discussion on how adolescent girls perceive mental health and the observed impact of Covid-19 on their mental well-being. Conclusions are drawn, and practical and strategic recommendations are put forth.

RESEARCH OBJECTIVES & METHODOLOGY

This research sought to address several key questions pertaining to the mental health of adolescent girls, including those attending school, staying at home, or employed in garment worker households. These inquiries aimed to shed light on the current status of mental health among this demographic, discern the Covid-19-specific impact, and investigate the coping mechanisms employed by these adolescent girls to manage any psychological distress.

The specific objectives were:

- To examine the mental health issues faced by school-going adolescent girls from garment workers in Bengaluru
- To assess the impact of Covid-19 lockdown on the mental health of school-going and employed adolescent girls from garment workers in Bengaluru
- To comprehend the coping strategies used by school-going and employed adolescent girls during the Covid-19 pandemic to address their mental health concerns (psychological distress)

METHODS

The study used an exploratory qualitative enquiry into the psychological aspects of adolescent girl's experiences during the Covid-19 pandemic. Given the relatively uncharted territory concerning the impact of Covid-19 on mental health, qualitative research was thought to be the most useful approach to provide insights into the various factors at play. To understand some experiences, such as online schooling that participants felt comfortable discussing in a group, we initially organized Focus Group Discussions (FGDs). FGDs also served to identify individuals who may have been severely affected and could be interviewed individually to build case narratives. In-depth interviews, following the FGDs, were also conducted to delve into the nuanced aspects of dealing with the lockdown within specific individual contexts.

SETTING

The study took place in Bengaluru, the capital city of Karnataka in south India. All adolescent girls who participated in the study belonged to households in which an adult, mostly the mother, was employed in the garment industry.

ETHICAL CLEARANCE

The study protocols along with data collection tools were presented to an Ethical Review Board consisting of a mental health professional, qualitative health

researcher, and a rights-based legal professional. Some aspects of the protocol and tools were modified based on their suggestions and were approved by the Board.

STUDY PARTICIPANTS

- Total number of adolescent girls who participated in Focus Group Discussions (FGDs) - **44**
- Total number of adolescent girls who participated in in-depth interviews - **13**

Profile of adolescent girls who participated in Focus Group Discussions (FGDs)

No. of FGDs conducted	3
Total no. of participants	44
Age groups of FGD participants	
Ages 11-13yrs:	10
Ages 14-15yrs:	12
Ages 16-18yrs:	22
No. of in-depth interviews conducted	13
Age group of IDI participants	
Ages 11-13yrs:	01
Ages 14-15yrs:	04
Ages 16-18yrs:	08



Daughters of garment workers participate in an FGD at Munnade Office, Bengaluru

Profile of indepth interview participants:

Age	Family Members	Education & Current work status	Father's occupation	Mother's Occupation
15	Parents and younger sister	10th- Not working	Tailor/Security guard	Garment worker
16	Parents and two elder sisters	10th - Not working	Electrical/ Carpentry/ Driver	Garment worker
18	Mother, maternal grandmother, elder step brother	12th- Not working	NA	Garment worker
14	Parents and elder brother	8th- Not Working	Electrical/ Carpentry/ Driver	Garment worker
15	Parents and elder and younger sister	9th- Not working	Driver / Real Estate	Garment worker
13	Parents and elder sister	10th- Not working	Daily wage Worker	Garment worker
18	Parents and younger sister	Year 1 college-Not working	Daily wage Worker	Garment worker
15	Parents	8th- Not working	Electrical/ Carpentry/ Driver	Garment worker
17	Parents and younger brother	12th- Part time work	Unemployed	Garment worker
19	Parents and elder brother	12th- stay at home	Unemployed	Garment worker
18	Parents and younger brother	Year 1 college-Full time	Tailor/Security guard	Garment worker
18	Mother and younger brother	10th Drop out-Full time garment worker	NA	Garment worker
17	Parents	9th Drop out-Full time garment worker	Works in shop	Garment worker

DATA COLLECTION PROCESS

The FGDs and in-depth interviews were conducted by members of Cividep and its partner organisation Munnade. Prior to data collection, a consultant provided two 3-hour training sessions covering participant selection, informed consent and assent procedures, interview conduct, privacy assurance, gatekeeping, follow-up, and audio recording protocols. Data collection took place between September 2021 and January 2022. FGDs and interviews were held in Kannada (the local language) at Munnade's office premises.

The process began with the establishment of rapport with the parents of the adolescent girls. Each parent and prospective adolescent girl received a participant information sheet, which was explained to them, allowing ample time for questions before obtaining voluntary consent. Interviews were conducted only with the explicit consent of the girls and their parents, with specific consent for audio recording documented through signature on a consent form.

In addition to audio recordings, notes were taken during both group and individual interviews. These notes were later transcribed and translated into English, then shared with the consultant for further analysis.

DATA ANALYSIS METHOD

The interview text data were analysed using a grounded theory approach. Each line was methodically examined to generate codes categorising the narratives of the adolescent girls. N Vivo was used as the analytical tool.

Initially, over 40 codes were generated, which were subsequently refined and grouped iteratively to create sub-codes. These sub-codes included topics such as food and rations, friendships, household chores, social media, and garment work conditions. The analysis process was ongoing, involving the identification of patterns, comparisons, differences, and extremes, ultimately leading to the emergence of two or three prominent themes, discussed in detail in the following sections. The findings, along with the codes and themes, were validated through triangulation with the field researchers.

RESULTS

The findings from both the FGDs and in-depth interviews are organised according to themes that emerged during content analysis. These themes encompass anxieties related to Covid-19 infection and death, changes in daily routines and social interactions, migration and interpersonal family relationships, disruptions in schooling and learning, deepening financial insecurity, gender discrimination and early marriages, increased risk of harassment, violence, and mental health.

ANXIETIES OF COVID-19 INFECTION & DEATH

Several girls shared experiences of encountering the deaths of close relatives or neighbours due to the pandemic, evoking feelings of shock, anxiety, and fear for themselves and their families. These sentiments were particularly pronounced during the second wave of the pandemic.

For instance, one participant expressed her concerns, saying, “We were anxious and many people in my native place were also affected by Covid. Two people also died due to Covid in my native place.” (FGD 3).

Another girl described her apprehension during the second wave: “In the second wave, I started feeling scared. During the first wave I was fine, but in the second wave they were telling me that it would affect kids and middle-aged people. So, I was scared of what to do, schools were getting closed, and my mother used to go to work, so I was worried for her as well. And financial issues were also a problem... I used to tell her not to go because you never know who is infected, any person who is fine in the morning would fall sick by afternoon. And my mother used to work in a crowded place (factory). But still, she used to go. So once she gets back, I would wash her clothes in hot water and give her Kashaya (Ayurvedic tonic).”

This excerpt sheds light on the risks faced by garment workers who could not afford to miss work, risk wage loss, or prevent overcrowding in their workplaces, consequently endangering their families.

Further, one adolescent girl shared her feelings of guilt, as she believed that she might have inadvertently transmitted the infection to her own family through her social interactions. “In the second lockdown, our house owner who lives downstairs passed away due to Covid. But we came to know about that later, and we did not come out of our house for a week because of the anxiety. I was also afraid of the spread of Covid to our family because the homeowner’s grandchildren were playing with me before she passed away, and I was also thinking that it might affect my grandmother.”

Additionally, religious minority families experienced stigma and social ostracisation due to media coverage of a Covid-19 cluster in Delhi. A girl reported that, being Muslim, her family and others like hers were unfairly targeted due to an outbreak following a Muslim religious gathering in the capital city. She mentioned, “During Covid, her family was not allowed to come out of the house since there was a rumour

that Muslims were spreading Covid. They were not allowed to collect the dry ration, and NGO team members went to their home to give the ration." It is plausible that adolescent girls from Muslim families endured heightened anxieties and social isolation compared to others.

CHANGES IN DAILY ROUTINES AND SOCIALISATION

During the initial lockdown, most of the girls found themselves confined at home with their family members. Some families chose to return to their native villages in response to the lockdown. As a result of these measures, schools, workplaces, including garment factories, and various forms of informal employment that their parents were engaged in came to a standstill.

The girls reported a significant increase in household chores during the pandemic compared to the pre-pandemic period. In response to a question regarding changes they observed during the pandemic, a participant shared, "Nothing particular, only workload has increased. We have more homework and projects also to be completed."

Girls also reported alterations in their sleep patterns, such as going to bed late and waking up late, as well as an increase in screen time spent on mobile phones or watching TV. On a positive note, they mentioned dedicating more time to hobbies, engaging in conversations with family members and neighbours. What stood out most was the additional time they spent with their mothers. "I got to spend time with my mother by doing things like playing games", "Initially, my mother didn't share her issues with me, and I was so busy with college and work. But after the lockdown, my mother began sharing the challenges she faced since her marriage." Many girls discovered the challenges and difficulties their mothers encountered within the family and at the workplace, which heightened their empathy towards their mothers.

"(Before) when my mother returned from work, I didn't help her with household chores. But when I started working, I realised her struggles. Nevertheless, my mother still assisted me with household chores in the evenings." However, as the lockdown was lifted and parents had to work longer and harder, it became increasingly challenging for the girls to spend time with their families.

Socialising with their peer groups was severely impacted during the pandemic. Most girls expressed regret over their inability to meet their friends, especially those from school and those who did not live nearby. Some of them lacked mobile phones to maintain contact with their friends. "Due to Covid, we were asked to maintain distance, and only two of us were allowed to sit on a bench, so we couldn't talk much. They didn't allow us to be free, even during lunch hour, we were made to sit at a distance. During the lockdown, I would use my father's phone to call my friends."

MIGRATION AND FAMILY RELATIONSHIPS

In the study, it was observed that most of the girls spent their early childhood in their parents' native villages. During this time, they were primarily cared for by their grandparents, often their grandmothers, or by uncles and aunts from both sides of their family. Their parents, typically first-generation migrants, had moved to the city in search of job opportunities, as agriculture was no longer a reliable source of income.

This arrangement provided significant support to families of garment workers, as mothers faced heavy workloads and lacked support systems such as childcare facilities in factories or nearby family members to care for young children. Consequently, the girls developed strong attachments to their extended family members with whom they shared their daily lives, fostering relationships of trust. One participant shared her experience, saying, "I was at my grandmother's place

(maternal), along with my grandparents and sisters as my parents were in Bengaluru. After class three, I came to K***I and lived with my aunt for a year. Afterward, we moved to a new place.”

As the girls grew older and more independent, they transitioned to living with their parents in the cities. Observations by researchers revealed that, compared to boys, girls were more likely to be entrusted to the care of extended family members until they reached maturity. This, combined with their parents’ busy work lives, accentuated the absence of a deep bond with their own parents. Often, these girls were left alone at home, monitored by neighbours, or placed in daycare centres. Some of the girls expressed feelings of loneliness and shared their deep longing for the caretakers they had in their early years.

One girl recounted her close relationship with her younger aunt, who unfortunately took her own life due to a marital dispute. She spoke about how she continued to cherish memories of her younger aunt, saying, “I used to see her (younger aunt) photos at night and remember our time together. I miss her a lot. She was the only good person in that family. She used to understand me well.” Another girl expressed her longing, saying, “They used to take care of all my needs. I used to sleep alongside her more than my parents. I still miss her. The fact that she’s not here hurts. I still want her to come back.” (followed by tears)

However, it’s important to note that some girls grew up with their parents and shared strong bonds with them.

In response to the Covid-19 pandemic, many parents coped by taking their children to their native villages. This was done to seek support from extended family members for childcare and to engage in occasional work to make a living. The decision was partly influenced by the belief that rural areas were safer than crowded urban localities. During the second wave, when some factories remained open, only the children were sent to villages while parents stayed behind to continue working.

The nature of the relationships between adolescent girls and their parents and extended families played a significant role in the sense of isolation experienced during the Covid-19 lockdowns.

DISRUPTIONS IN EDUCATION

The majority of the adolescent girls expressed a strong desire to complete their higher secondary level of schooling. Some even aspired to achieve a college degree to pursue careers in fields like administration or sports, and their parents were equally supportive of their educational aspirations. However, the pandemic had a significant impact on their educational pursuits, particularly for those preparing for their 10th and 12th-grade board exams just before the outbreak.

The cancellation of these crucial exams and the subsequent evaluation based on past performances hit these students hard, as they had planned to set higher academic targets and compensate for previous lower scores. As one girl lamented, “When I was in 11th grade, I did not take studies seriously and I scored fewer marks. But due to the pandemic, we were not able to write the exams and were given marks based on the previous year’s exams. So, again, I got fewer marks in 12th grade.”



Adolescent daughters of garment workers at a Spoken-English class conducted at Munnade Trust, Bengaluru

Another respondent expressed her disappointment: “I have been worrying about the board exams being cancelled due to COVID even though I had studied diligently day and night, and my father wanted me to be the topper, but the exams were cancelled.”

The pandemic not only affected their examinations but also the quality of their education. As one girl noted: “Education was crucial, I had to put in a lot of effort, but I couldn’t (write exams). Almost a year we didn’t have college and any classes.”

Moreover, some girls had their dreams of excelling in sports at school disrupted by the pandemic.

Even before the pandemic, many girls reported that their parents struggled to pay private school tuition fees. One girl’s mother resorted to using an informal savings scheme, locally known as ‘chit,’ to pay for her children’s education. However, in times of financial strain, this money would be repurposed to cover family expenses, leaving them unable to pay school fees. “My school didn’t give me a hall ticket as Rs. 5,000 was due. I was feeling very bad. To collect the hall ticket, my mother and I pledged our (gold) earrings to get some money and get the hall ticket.”

Several girls had to discontinue their education due to various financial constraints, including health-related expenses. One girl had to drop out due to the financial challenges posed by her father’s health issues and to take care of her ailing father. “Since my father was having diabetes and liver damage due to alcohol use, I dropped out of college. Since he is a patient, one of us should always be with him. My mother has to go to the factory and my brother has to go to college.”

These girls, coming from single-income earning families, faced severe financial limitations. For instance, a girl who was working part-time alongside her undergraduate course to support her family said: “Only my mother earns, my father is not with us. But we can’t afford everything on my mother’s wages (Rs. 8,000

per month) including my sister’s education. So, I work part-time alongside my undergraduate course.”

In some cases, where girls reported leaving school due to a lack of interest in studying or difficulty in learning, it wasn’t clear whether these decisions were solely due to financial constraints. It was also uncertain if increased household responsibilities or a lack of prioritisation of their education by their families contributed to their decision to discontinue schooling. “I hated Mathematics and Sciences, so I lost interest in studying. It got stressful after class 8th so I quit studying. Plus, my parents used to not pay van fees on time, so I felt even my parents weren’t interested as well. That’s why I decided to quit,” said a girl.

Additionally, the study revealed that some schools were not flexible in reducing fees or providing additional time for parents to make payments. Even when families could afford school fees, the pandemic disrupted the learning process. Many girls struggled with attending online classes and comprehending the content presented during these sessions. Access to digital devices presented a challenge, as even buying a mobile phone was a financial stretch for their families. “Before the pandemic it was manageable on my parents’ salary. We need to pay 50K annually. After the pandemic it was difficult to manage. So, my dad used to drive from morning to 3 pm and give me Rs. 50 daily. At the end of the month I used to pay the total amount to school. We are still paying last academic year’s fee, so I’m not sure how I’ll manage this year’s fee.”

For some, affording new phones was possible, while others had to make do with sharing devices, and some couldn’t afford them at all. The lack of access to online classes left many girls unable to study effectively. Furthermore, when parents resumed offline work, the mobile phone often became unavailable for the girls to attend classes, and preference was often given to brothers for using the device.

Households not only incurred the one-time cost of purchasing a mobile phone but also had to cover the recurring expenses of recharging internet data. Unfortunately, many girls reported difficulty in understanding the lessons even when they could access online classes. “We had online classes, but I couldn’t attend a single class as I didn’t have a phone. Sometimes even when I had a phone we had issues with connection.”

“As we were sent recorded videos, we needed an internet pack and we used to recharge the phone for a month. And if it’s not there for the next month we would just let it be. I would call friends and ask any important questions and at times meet them and copy the notes.”

For those who returned to their native villages, poor connectivity and altered daily schedules further complicated the learning process. As one girl explained, “Because we did not have classes for a year, we were not able to remember whatever we had learned. I have faced many issues in remembering those. Online classes were not very effective. Sometimes there were network issues, and sometimes exams and classes got cancelled. I felt it was very difficult.”

Notably, none of the girls reported receiving any form of support from the factories or brands to pay their school fees and continue their education.

DEEPENING FINANCIAL INSECURITY

The girls in this study primarily came from low-income households, with mothers employed as garment workers and fathers involved in various forms of contractual or casual labour. These families had originally migrated from rural areas to the city in search of employment opportunities as finding jobs in their villages had become increasingly challenging. They typically resided in small, one-room kitchen-bathroom

homes with shared water sources, and their savings were meagre even prior to the pandemic.

As indicated in the table above, nearly half of the participant households relied on mothers as the primary breadwinners. In some families, fathers had irregular work patterns or struggled with addiction issues, contributing little or nothing to the family’s finances. Instead, they often used the limited resources for personal needs. To cope with financial crises, mothers frequently saved small amounts in ‘chit funds’ with minimal or no interest, which could be tapped during emergencies. Pledging gold jewellery was another common practice during times of financial strain.

One girl shared her family’s experience: “My parents moved here after my birth because they believed it was difficult to make a living in our village. After coming here, dad took a lot of loans, and because he couldn’t repay, he committed suicide. I was 12 years old then, and couldn’t know right from wrong.”

Given their already impoverished status, the sudden closure of garment factories during the pandemic was devastating for these households. They were left with minimal savings and had not received their wages. Some workers temporarily relocated to their villages to engage in agricultural work due to the uncertainty surrounding factory reopening. While a few employers provided advance payments after the initial lockdown, they often imposed additional work requirements when factories resumed operations. Women who couldn’t return to work immediately, such as those who had gone to their native villages, lost their jobs. Men, who typically engaged in casual work like auto or school van driving, or carpentry, found themselves jobless.

During this period, finding new employment was extremely challenging, and many struggled to afford school fees, rent, electricity, water, and groceries. Some girls reported going without food during this time. As one girl described, “We wouldn’t

express ourselves that we are feeling hungry or feeling bad. Because my father wouldn't eat if he sees us sad, and my mother also would feel bad. So once all are asleep, we would cry in our room. Our rooms know our pain. I would switch on the fan and cry. There have been days where we just drank water and slept."

For many girls, school provided their daily lunch, even after the closure of schools, dry rations were distributed to students. However, during the second wave of the pandemic, these rations ceased, and help from volunteers also dwindled.

"When we came back to Bengaluru during the second lockdown, we faced difficulty getting food. We got ration from school for the first two months, after which they provided ration once every two months only."

The families often experienced persistent arguments and fights due to financial and work-related difficulties, further intensifying the situation. These households grappled with interest payments on loans and mortgages, in addition to health-related expenses.

Girls frequently reported that the financial distress was the primary reason some of them had taken up part-time work or discontinued their studies to start working. "Everything (I earn) goes into paying back debts. I get nothing to keep for myself." Another said: "I used to work at a cybercafé as there were difficulties at home. I used to get back from college and then go to work. But left (work) after joining college."

GENDER DISCRIMINATION & EARLY MARRIAGES

In general, the girls were expected to bear a substantial portion of household responsibilities, such as cooking, cleaning, fetching water, and caring for younger siblings, the elderly, and the ill, especially when compared to their male

counterparts. During the pandemic, these unpaid caregiving duties became even more demanding, affecting the girls significantly. With more time spent at home, girls were often taught traditional gender-associated tasks, like cooking and creating rangolis (hand-drawn decorations). "She taught us to prepare sambar, and we learned a few things. They say that by learning a few chores, it will make life easier in the future," said one girl.

Several girls reported that male siblings were treated with preferential regard, particularly when it came to distributing chores, food allocation, access to mobile phones, and care and attention. This discriminatory behaviour extended across parents, grandparents, uncles, and aunts. Often, adults justified these behaviours by explaining that the girls would eventually be married off and move to another household. "They used to make us do all the work, saying that we are girls, and we need to learn all these. They never asked our boy cousins to do anything. That angered me. They say girls should learn such work because they have to do it at their in-law's house. Boys could go play, and we should work. We questioned them, and they said you're a girl, so can't compare with them," said a girl.

Another girl expressed her feelings: "My mother and dad favour my brother, and I don't get the things I ask for, but my brother sometimes gets the things he asks for. They love and care for him much more than for me. Sometimes he is served food to eat, but I will be told to serve myself and will explain that he is my younger brother, so I have to take care of him."

It became evident that some girls had internalised the notion that education was less important for them than for boys. The messaging, both direct and indirect, from their families about the significance of marriage led to a devaluation of education for some girls. One girl confessed, "I'm told that girls will get married and will be going to other families. So they can only have basic education to teach their children, but boys will be taking the responsibility of the family and lead it, so he should be

educated. Sometimes I also feel that I should have been born a boy so that I could have studied.”

Early marriages for girls were common even before the COVID-19 pandemic. The financial strain brought on by COVID-19 exacerbated these existing concerns, such as raising money for dowries or fears of girls eloping with boyfriends. As a result, some families married off girls under the age of 18 to reduce the financial burden during these challenging times.

One girl described her situation: “They didn’t talk about it at the time of lockdown, but now they are talking about it. A week ago, my mother and I had a fight regarding it. Last Monday, my uncle had come to invite us for his housewarming. He asked for my astrology details. I denied because I am not 18 yet and want to be independent. Then my grandmother supported him, telling that today or tomorrow I need to get married.”

During focus group discussions, more than four girls mentioned knowing someone their age who had gotten married. One girl’s classmate was married below the age of 18, while another mentioned a friend from her native village who had married. These discussions often revolved around the topic of marriage at home.

In some cases, the pandemic and family circumstances led girls to consent to early marriages, forcing them to forgo their educational aspirations and desire for independence. This internalised societal pressure was often a driving factor behind these decisions. “I want to complete my degree, either a B.Com or BBA, and then an M.Com or MBA, and work for a year. I want to lease a house or build something small of our own so that we could live a peaceful life. But they are thinking of getting me married, telling me that I am old enough. I will be 21 soon. And they talk differently while we are in the native village. If a girl is not married after 18, they think that the girl has some affair or some defect. There is nobody in my village who is unmarried after the age of 18. So my parents told me that they would search for a groom who

would let me study further. So I have agreed to it; if not, I would never agree,” said a girl.

In another case, a girl’s elder sister was married during the pandemic because she had failed in class 9, implying that she was under the legal age of marriage. For many impoverished families, conducting weddings during the pandemic was motivated by the desire to avoid the costs of organising larger ceremonies.

RISKS OF HARRASSMENT & VIOLENCE

The adolescent girls shared their experiences with various forms and degrees of harassment and violence, which took place both within and outside their homes, including on the streets, in schools, and even on social media. Even when they were not the direct targets, nearly all participants had witnessed instances of violence against other girls or women, including their own mothers and close family members.

Forms of violence, such as being disciplined through physical punishment by parents and teachers, were normalised and described casually by the girls. Some even considered it as a sign of being cared for. For example, one girl mentioned, “It’s only my dad, and he used to hit me for my studies. If dad doesn’t hit, who else will? Dad used to hit both my brother and me due to studies.”

Despite laws prohibiting physical abuse in schools, one girl reported that such abuse continued to exist. She said, “My teachers are strict; they beat us if we do something wrong. They keep a stick just for beating us.” The girls noted that teachers were more likely to use physical punishment on boys, who were often more mischievous in class.

Additionally, over five girls reported directly witnessing their mothers being physically and verbally abused by their fathers. The way they recounted these events conveyed the deep impact and trauma of witnessing such abuse. One girl shared her experience: "Since childhood, I wanted to know why my dad gave mom a lot of problems; he used to beat her a lot and finally left us. Mom faced a lot of difficulties to make ends meet. We have struggled ever since and come this far, don't know what the life ahead looks like."

Furthermore, some of the girls were also subjected to violence by their fathers, especially if they tried to intervene or protect their mothers from being harmed. One girl explained, "When she (mother) asked him to go to work, he would argue, telling that there is no work, and hit her back... If we go to interrupt them, he would hit us as well. So, my brother would sit aside. I would go to stop it and get beaten by him as well."

Several girls also reported witnessing mothers, aunts, and women in their neighbourhoods being abused by their spouses, often while under the influence of alcohol. Verbal harassment by fathers towards mothers was also reported by the girls. One girl had experienced sexual harassment by her father, a deeply distressing situation. *(Detailed case study on the next page)*

Some girls reported that their mothers were harassed and abused, including sexually, in their workplaces. Harassment was used as a means to force workers to meet unrealistic production targets and to discourage tardiness and absenteeism. For example, one girl's mother would be made to stand outside the factory if she reported late to work.

This account from an adolescent girl who left school to work in a garment factory highlights the excessive workload, long hours, irregular and low wages. She

Lakshmi, an 18-year old girl in her first year in college, lived with her younger brother, father, a security guard, and mother, a garment factory worker. Lakshmi spent her childhood with her uncle and aunt, and was fond of her fatherly uncle. After she joined her parents, her father asked her to stop all contact with her uncle. Lakshmi missed him, and his death came as a huge shock. But when she would grieve looking at his photo, the father took away the image.

It was when she was in class 9 and struggling with her studies, that the father started sexually harassing Lakshmi by making her watch pornographic content on the phone. "He used to misbehave with me and it was painful; I couldn't even share it with my mom. He used to show me disturbing videos, the forwarded ones in WhatsApp."

She didn't know what to do as her mother would be at work and brother at school. After this continued for 4-5 days, she gathered her courage to yell at him and stop. "One day I told him that cyber police can monitor all this and will put him in jail. He then stopped and I never told anyone about it."

Lakshmi eventually told her mother who remained silent about it. She also said that her dad used to pass lewd comments about her appearance and they were "something that a dad should never tell her daughter." Lakshmi broke down several times during the interview and talked about how she missed her uncle, her 'real dad'. "I don't shout, I just cry out in pain..(weeping)..He (uncle) never behaved like this with me and here is my own dad (weeping). When my friends talk about their fathers, it really hurts me."

Lakshmi was body shamed by her parents for being a broad-framed person. She recollected how her mother would hesitate to be seen with her in public as she apparently looked more like a sister than a daughter. As she was humiliated after being termed 'fat and ugly', Lakshmi suffered low self-esteem, felt neglected and unwanted by her parents. She reported that while her younger brother was fed, and given affection, she never got similar care and love.

Though the researchers tried to reach out to Lakshmi after the interview, her movements were heavily monitored by her father and a safe space could not be found to have further conversations.

mentioned, "Factory is fine; I can manage as I have helpers to assist me. Due to wage issues, a lot of people quit. So we had to take care of two jobs. I managed for some time, after that I felt the need for a helper, so I confronted my manager, and they gave me one."

Another girl stated that her mother felt safer in a factory after receiving "uniform" shirts that covered their upper bodies. It was common for women to be "stared at" by male co-workers and supervisors. Another girl mentioned that her mother had left her job because she was verbally abused by her male supervisor.

Moreover, the lockdown and online schooling made it necessary for most girls to use mobile phones to attend online classes and contact friends. The lack of physical activity and schoolwork led to increased usage of social media platforms, such as TikTok® (now banned in India). Though not widespread, some girls mentioned receiving unsolicited messages or being stalked on platforms like Facebook® and Instagram®.

For instance, one girl explained, "Some random person used to text me on Instagram, I told my mom, and she asked me to block him." She described the

messages, which began with a simple "hey" and escalated to flattery. The girl's parents supported her, and her siblings comforted her, assuring her that it was not her fault.

The above excerpt indicates that girls were indirectly blamed for 'inviting' unsolicited comments because they were active on social media. Many girls reported that their internet usage was monitored and restricted by parents and older siblings.

During the study period, media reports of sexual assaults on young girls became more frequent. This increased the girls' feelings of insecurity when moving about, going to school, or returning home. The fear of walking alone on the streets is evident in their statements:

"I feel afraid, so I go with small children who take the same way home."

"I go to school alone and am afraid of walking alone on roads where there are groups of boys."

DISCUSSION

Mental Health and Impact of Covid-19

Mental health as perceived by adolescent girls

The study aimed to investigate the mental health of adolescent girls from garment industry households during the Covid-19 pandemic. When questioned about their understanding of “mental health,” the girls provided various perspectives.

- Some girls associated poor mental health with a loss of interest in studies.
- Others linked it to persistent, distressing thoughts.
- A common theme was deep thinking about one’s problems leading to depression and mental distress.

The girls’ perceptions and expressions are reminiscent of what Nichter (2010)²² referred to as an “idiom of distress,” which includes notions like “thinking too much,” “tension,” and emotions tied to the “body and mind.” These culturally specific expressions do not neatly align with narrow biomedical definitions of mental illness.

Additionally, the adolescent girls emphasised that

maintaining good mental health is contingent on their ability to share their problems with others. They viewed sharing their mental burdens as vital for preserving their mental well-being and as a coping mechanism when they were emotionally overwhelmed.

In light of the findings presented earlier in this report and the girls’ personal definitions of mental health, it is evident that the Covid-19 pandemic has had a significant impact on their mental health and overall well-being, with very few positive effects to be found.

Direct Impacts of COVID-19 on Adolescent mental health

One of the immediate effects was heightened anxiety, fear, and panic among the adolescent girls concerning COVID-induced illness, hospitalisations, and death. Multiple participants reported this. Some had experienced the loss of close family members and friends to COVID-19.

Another negative psychological impact resulted from severed connections with family, peers, teachers, and other trusted adults. While some positive aspects, such as increased time with family, were noted, the girls predominantly felt isolated and lonely due to the social distancing norms imposed during the pandemic.

Research has demonstrated that a stable caregiver relationship fosters positive social and emotional development (Honig 2002)²³. However, in many cases, these connections were lacking, especially for those girls who had been left behind with extended families by migrating parents. Despite this, many adolescent girls had access to a few psychologically safe spaces, such as schools, peer groups, or trusted adults within their families with whom they could share their problems. Regrettably, the pandemic severed these connections. Socialisation was significantly restricted due to school closures and movement limitations. Consequently, many girls turned

to increased mobile phone usage as a coping mechanism, which, in turn, led to heightened surveillance by adults and unwelcome privacy intrusions.

The third effect of COVID-19 on mental health was the emergence of discrimination, danger, and exploitation within the girls' own homes. The lockdown created a hostile home environment, especially in households with male family members struggling with addiction. For girls already at risk from family members, COVID-19 exacerbated these dangers. Streets and public places, which were already unsafe spaces, became even more perilous as they grew deserted. Older adolescent girls increased their use of social media, exposing themselves to risks of cybercrimes like stalking.

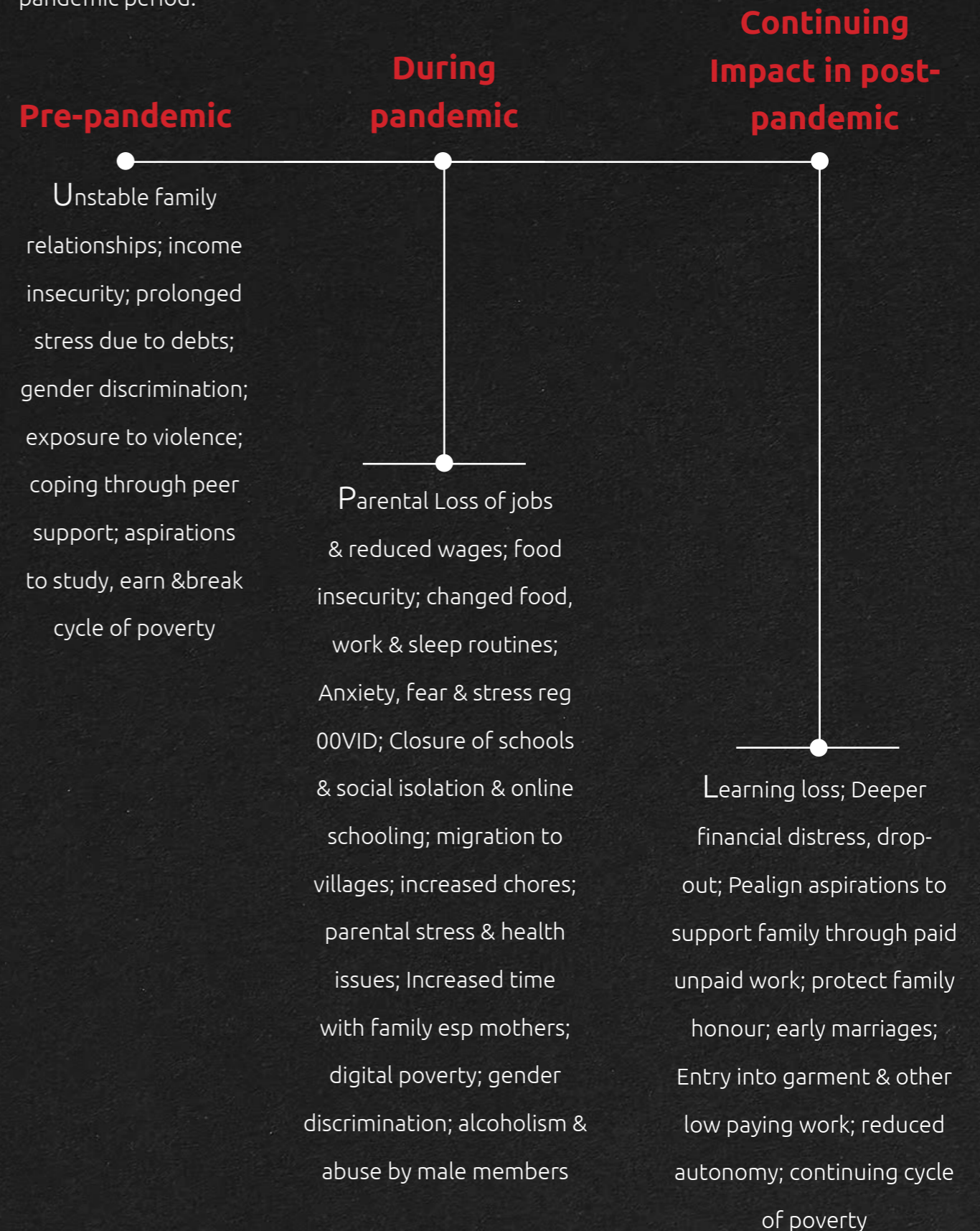
Many girls experienced gender discrimination in various forms, including limitations on digital access and increased caregiving responsibilities. Gendered forms of violence, such as early marriages and sexual harassment, were prevalent. Additionally, several girls witnessed an upsurge in domestic violence and work-related violence faced by their mothers.

At the time of the interviews, at least three participants were dealing with trauma and depression, although clinical confirmation was unavailable. While adolescence itself is a period marked by turmoil and heightened emotions, these case studies provide evidence of distress that appeared to exceed the coping abilities of these girls. Poverty, financial insecurity, health concerns, and lack of support systems all contributed to their compromised mental health and well-being.

Indirect Impacts of Covid-19 on adolescent mental health

The pandemic-related lockdown and economic distress spawned various issues that adversely affected the mental health of adolescents. One primary issue that significantly disrupted their lives was the interruption in their education. This setback dashed the hopes of those striving to excel in their studies and perform well in

Diagram 1: Based on the analysis of interviews and FGDs, the below diagram depicts the factors that were present in the pre-pandemic period, the factors that added stressors and moderated the impact on the mental health of adolescent girls during and in the post pandemic period.



their board exams. These crucial exams could have allowed them to negotiate for household resources to pursue college admissions and affirm their worth to their families and society.

Unable to afford personal mobile phones, these girls either ceased attending online classes or relied on their parents' or siblings' mobile phones in the evening to watch recorded classes or copy notes from friends. A substantial loss in learning occurred during these pivotal years, diverting them from their future educational plans. Families that were already grappling with financial instability, particularly those with mothers as primary breadwinners, were more likely to reduce their investment in their daughters' education. Girls faced diminished educational opportunities as families struggled with financial instability triggered by health expenses. This gendered impact of COVID-19 was also evident in the disproportionate burden placed on girls to shoulder household chores during the pandemic.

The cascading effect of COVID-19 left a profound impact on the lives of many adolescent girls. Their families were already in dire financial straits, with many mothers being the sole earners, toiling in highly stressful garment factories. Affording school fees, rent, and electricity bills was already a formidable challenge. This study illustrates how the financial instability of many such families worsened during the pandemic, with parents losing their jobs or failing to receive pending wages and encountering difficulties in finding new employment. Social welfare mechanisms were scarce when economic activities ground to a halt.

Debts and loans mounted, assets were lost, and families had to endure days without food. The free meals provided through schools ceased after a while. Many households were forced to take loans at exorbitant interest rates and engage in additional work. Amid this turmoil, girls were the first to bear the brunt. Many of them dropped out of school and college, took up part-time or full-time work, or were married off. Gender discrimination within households intensified as girls and women assumed an increased burden of unpaid care work. Families rationed resources such

as money for education, mobile phones, and more for the male members. As their families grappled with financial distress, the girls had to recalibrate their aspirations, and this instability, coupled with other stressors, exacerbated their mental distress.

Another critical impact of the pandemic on the girls' mental health and well-being was the curtailed autonomy and agency they experienced. As described in the earlier section on daily routines, many girls reported that they became more aware of their mothers' difficulties and began contributing more to household tasks. Exposure to the acute stress faced by their parents, in turn, had repercussions for the mental health of the girls.

While the girls understood that leaving school or taking up part-time jobs was not a matter of choice, most of them regarded it as a necessary sacrifice to alleviate the burdens on their parents. Despite recognising the hardships of working in the garment industry, some of the girls ended up taking odd jobs in the same sector after discontinuing their studies.

Remarkably, a sense of pride and honour accompanied some of their narratives: "I'm unable to sleep when I think about my mother's struggles. She has undertaken all sorts of jobs to support me. Yet, we remain in an unstable position. She has provided my brother and me with a good education, but we are unable to give her any respite. In fact, I won't be able to sleep tonight because my mother is suffering from chest pain while worrying about my brother's education."

In the above narrative, it's evident that the girl has shouldered her mother's burden and even considers it her turn to lose sleep.

Diagram 1 illustrates the various vulnerabilities in the lives of these adolescents even before the pandemic, how the pandemic exacerbated these factors, and the resulting impact on their mental health and well-being.

The study underscores how COVID-19 has burdened these girls with gendered burdens at an earlier stage in life than usual. While they aspired to break the cycle of poverty through education and employable skills, they were compelled to enter the unskilled labour market to support their families.

CONCLUSIONS

The study underlines the multi-faceted impacts of COVID-19 on the mental health and overall well-being of adolescent girls from garment industry worker households. It delineates both direct and indirect consequences, painting a stark picture of the challenges they faced. COVID-19 disrupted their education, realigned their aspirations, and forced them into the labour and marriage markets, thereby diminishing their lifetime earning potential and worsening economic and social disparities. It disrupted their food supply, plunging them into food insecurity and limiting their access to nutritious meals. Furthermore, it introduced new forms of discrimination, abuse, fear, and anxiety while magnifying existing ones, pushing these girls into increased isolation.

RECOMMENDATIONS

Here, we present a comprehensive set of suggestions and recommendations, which can be viewed as addressing both immediate, practical needs and long-term strategic needs. While we do not classify them according to specific recipients, it is imperative for all concerned individuals and institutions, be they public or private, to join hands in addressing these issues.

Immediate & Practical Needs:

- **Educational Support:** Implement educational loans and scholarships to reintegrate girls who dropped out of school or college. Offer bridge courses or tuition classes to help students bridge the learning gaps created by online

schooling during the pandemic. Ensure provision of mobile phones and laptops in similar future scenarios to facilitate continued education.

- **Mental Health Services:** Establish counselling centres, both physical and online, to provide accessible support for those in need. Sensitise teachers, school principals, doctors, and parents to identify and address mental health issues among both adults and adolescents.
- **Awareness and Education:** Raise awareness about crucial laws, including the Protection of Children from Sexual Offences Act (POCSO), the Sexual Harassment of Women at Workplace (Prevention, Prohibition, and Redressal) Act (POSH), and laws pertaining to cybercrimes. Ensure that community members, including garment factory staff and supervisors, are well-informed about these laws. Provide training in self-defence techniques, spoken English courses, and leadership programmes to boost the confidence of adolescent girls.

Long-term Strategic Needs:

- **Social Support and Safety Nets:** Strengthen social support systems and safety nets for workers. This includes ensuring fair wages, access to public health schemes, sickness leave, and benefits. Provide access to crèches, daycare centres and after-school programmes that can help alleviate some of the burdens on adolescent girls while promoting their overall development.

The challenges faced by adolescent girls from garment industry worker households persist even in a post-COVID world, necessitating these multi-faceted recommendations. It is essential to implement both immediate, practical measures and long-term strategic actions to improve the mental health and well-being of these vulnerable girls and to strive for a more equitable and inclusive society. Collaboration and coordinated efforts from all stakeholders, both public and private, are pivotal in addressing these issues effectively.

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