

Understanding Challenges and Coping Strategies of University Students in Dhaka City During COVID-19

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ABSTRACT

The COVID-19 health emergency has challenged the socio-economic circumstances and health status of mankind worldwide. The effect of these disruptions trickled down and impacted the lives of vulnerable people, including students. The prolonged closure of educational institutions has contributed to aggravating these negative impacts. Around 40 million students have experienced adverse financial and health repercussions amidst the pandemic in Bangladesh. Students experienced inevitable changes in the trajectory of their lives, including lifestyles, relationships with family and community, and reliance on support. As the pandemic-ordained lockdown required virtual learning, students found themselves unprepared, anxious, and ambivalent. The coping strategies of the students amidst the COVID-19 have not been adequately explored in Bangladesh. The objectives of our study are firstly, to delve deeper into the challenges and coping strategies embraced by the students from public and private universities in Dhaka. Secondly, it aimed to identify how social connectedness supported students for resilience building.

A qualitative research design and case study approach was employed to achieve the overall objectives of the current study. We collected qualitative data through in-depth interviews (IDIs), focus group discussions (FGDs), and key informant interviews (KIIs) to explore socio-economic and health challenges and coping strategies using social support. The study population was university students aged 19 – 24 years. This study followed purposive sampling. We conducted 20 IDIs, 2 FGDs, and 5 KIIs respectively to collect qualitative data. Codes were framed by reading and re-reading narratives from IDIs, KIIs, and FGDs. Codes, retrieved from two differently prepared sets of codes were merged and compared to identify general themes in order to achieve fair interpretation of the existing data. A thematic analysis was adopted by categorizing codes into sub-themes leading to major themes. Data were manually indexed, summarized, and interpreted to figure out the underlying insights.

Our study findings revealed how students encountered multidimensional challenges such as adjusting to online education, restricted life, financial hardship of the family, and public health crisis. Different types of academic pressure, sleeping problems, personal relationship break-up, and traumatic experiences during lockdown periods affected students' physical and mental wellbeing. Social media posts, loss of concentration, brain malfunctioning, tension about the health of the elderly family members, and death of relatives contributed to initiate anxiety, create stress, and depression in students. The study participants explored both bonding and bridging types of social capital for their coping strategies at individual and community level through direct contact and social networking. Some maladaptive coping practices were noticed among the students as well. Differences in public and private university students regarding enrolment, attending online classes, examinations were noticed. Gender had differential impacts and support systems were influenced by their socio-economic background. Social capital/ social connectedness acted as a significant positive feature for building resilience. Individual social networks offered support and demonstrated a substantial increase in students' resilience to overcome the COVID-19 challenges.

1. Introduction

In the backdrop of the COVID-19 pandemic, the Bangladeshi population witnessed and experienced countrywide social, economic, and educational disruptions. The effect of these disruptions trickled down and impacted the lives of vulnerable people disproportionately. Students are part of this vulnerable grouping. Around 40 million students across Bangladesh have experienced adverse repercussions associated with financial, physical and psychological wellbeing amidst the pandemic. The prolonged closure of educational institutions has contributed to aggravating these negative impacts, especially for undergraduate university students.

Through this study, we have identified and explored a plethora of challenges encountered by undergraduate university students in Dhaka city during the COVID-19 pandemic. The study exclusively relied on the detailed accounts and recollection of undergraduate students, targeting those between 19 and 24 years who studied in Dhaka city. Coping strategies that were illuminated through the study were analyzed in light of social capital theory and resilience building.

A multidimensional approach was adopted to understand the psychological, social, and personal domains of coping strategies to illustrate a lucid understanding of resilience building. As such, the study adopted both macro-sociological and micro-sociological lens to make sense of the context, underlying meanings, and themes that had arisen through the data collection process.

1.1: Background and Rationale

The COVID-19 public health emergency has challenged the socio-economic circumstances and psychological wellbeing of humankind worldwide. Increased financial and health risks associated with COVID-19 and mobility restrictions imposed to reduce its transmission have had impacts on all population groups.

However, given their stage of social development, the young population has been particularly impacted. COVID-19 has led to educational impacts, financial pressures, and unemployment crises. The resultant effects appeared in increasing the existing elevated levels of anxiety, depression, and anxiety for youth. Such impacts appear widespread - a global survey on COVID-19 and youth presented concerns about the consequences of COVID-19 on income loss, employment status, disruptions to education, family

relationships, friendships, individual freedom, accessing reliable information, and mental wellbeing (OECD 2020).

Consideration of the impact of COVID-19 on young populations, particularly university students requires analysis of a diverse set of dimensions namely economic, educational, family relationship, physical and psychological challenges. According to the World Health Organization (WHO, 2020), 60% of the world's students have suffered due to nationwide closures of schools, colleges, universities, and other educational institutions.

Bangladesh identified its first three cases of COVID-19 on 8 March 2020 and consequently, the government of Bangladesh decided to close its government-run and non-governmental educational institutions as part of preventive measures to combat the spread of the virus. Following this news, the whole nation declared a lockdown from 25 March 2020 for 3 months to maintain social distancing and to slow down the spread of the virus. Though in time, the country-wide lockdown was lifted, many forms of educational institutions remained closed for a further 15 months until September 2021, when the government decided to reopen schools (Mahmud, 2021)

The young population aged 15-24 in Bangladesh represents 20% of approximately 160 million people (UNFPA 2019). Some young people in Bangladesh are victims of poverty and due to economic hardship, many of them are deprived of appropriate nutrition, proper education, training, and mental development which stunts their overall wellbeing. A study by the South Asian Network on Economic Modelling (SANEM) stated that COVID-19 has pushed 8.7 million youth into poverty in Bangladesh. Young people, who are already living in difficult and/or disadvantaged circumstances in Dhaka, were to experience homelessness, close living conditions in urban poor and informal settlements, fewer employment opportunities, gender-based violence, increased care burdens, mental health issues, and limited access to health services and protection measures (COVID 19: Working with and for Young People 2020). The closure of educational institutions has increased these effects by creating additional mental and academic growth burden (Dutta & Smita, 2020).

The socio-economic and psychological plight of university students amidst the pandemic ordained lockdown and how they have coped and managed till date is yet to be illuminated. Likewise, the case of Bangladesh is no exception against a COVID backdrop. University students have managed to sit for their mid-term examinations, viva-voce

sessions, submit assignments and even graduate. Private university students remained subject to changes in evaluation protocols, where for a semester (or two); students exclusively relied on informal assessments such as more assignments or term papers, take home examinations, and open book tests instead of descriptive written examination in the class room to attain their end-of-term grades. Similarly, public university students had to wait for months to integrate themselves into the “new normal” as administrations were bewildered by the lockdown and became reluctant to move to online classes. Moreover, public university students struggled to adjust to online classes, preferring conventional teaching approaches (Sarkar et al, 2021).

Possibly, some young adults are able to withstand the disruptions caused by the COVID-19 lockdown by finding solace in maintaining close contact with family members, friends, and relatives through virtual social networks. In a UK Youth Survey, around 86% of the respondents stated that online activities, using social media platforms, and engagement via phone were common methods used to provide services to cope with COVID-19 related challenges in UK communities (UK Youth, 2020). The extent to which these coping mechanisms and others were used during lockdown for university students in Dhaka will be explored via this research.

Given the existing literature gap, through utilization of a purposively selected student sample we were able to explore the underlying strategies students undertook to cope with COVID-19 created crisis. Secondly, via the application of in-depth qualitative research methods such as IDIs, FGDs, and KIIs, using a social capital lens we were able to explore in depth individual coping, institutional protocols for COVID-19 management and community support. And thirdly, by holistically observing and analyzing the coping strategies exhibited by students and analyzing findings via a social capital and resilience building lens we are able to make recommendations for how to reduce mental health impacts of events like the pandemic in our young adult population. Using the appropriate tools and measures has enabled us to interpret the recollections of university students in Dhaka city and identify how they have managed to build and maintain their resilience that will assist them in the aftermath of the pandemic.

1.2 Structure of the Research Report

The report is divided into five chapters. The chapters are developed and articulated on the basis of research objectives and findings. This first chapter discusses the background, the research problem, significance, rationale, justification of the study. Chapter Two outlines

the theoretical framework and undertakes the relevant literature review to develop objectives, and thesis structure as well as outlining the five research questions which guide the study. The main theories guiding the study are summarized and discussed to conceptualize the main themes. Chapter Three discusses the overall research approach, which includes the methodology, and the data collection methods used in the study. A single case study approach is adopted for the study with a combination of qualitative methods for data gathering such as individual in-depth interviews, focus group discussions, semi-structured interviews with key informants. Chapter Four's findings and discussion proceed by narrating study participants – university level students' challenges during COVID-19 and responses to cope with the changing situation. Findings demonstrated that students encountered multidimensional challenges such as adjusting to online education, restricted life, financial hardship of the family, and public health crisis. As coping strategies individual social networks offered support and demonstrated a substantial increase in students' resilience to overcome the COVID-19 challenges. Finally, Chapter five summarizes the thesis's major analytical findings focusing on their diverse coping strategies through social capital lens. Social capital acted as a significant positive feature for building resilience. The chapter concludes by suggesting future directions for research and outlines some policy recommendations for dealing with such sudden and unanticipated situation in future.

2. Literature Review

At present, the world is grappling to make sense of the SARS-CoV-2 virus, and its rapid mutations. Bangladesh, too, is experiencing socio-economic stagnation due to the initial lockdown from 26th March 2020-May, 2020. Throughout this ongoing pandemic, the country conducted a series of partially successful, and in some cases, failed strategies such as full lockdown, COVID-19 cases-based identification zones, and partial lockdown. Yet, travel restrictions, immunization, mass COVID-19 testing, and social distancing remain a challenge. By October 2020, the COVID-19 cases more than doubled in the country, and India, the neighboring country, had become the second worst COVID-19 stricken nation in the world, placing Bangladesh at imminent risk (Islam et al 2020).

The widespread reach of the COVID-19 pandemic has heralded a drastic change in societies across the world, leading to the deteriorating mental health of many people, and the decaying of social life within communities. Mental health issues such as stress, anxiety, and depression are affected a large fraction of the world. A Chinese sample demonstrated 24.9% of anxiety among university students, with students aged 22 or less having experienced greater psychological distress (Cao et al, 2020). Pronounced levels of stress and significant psychological distress were also exhibited by students in France, Canada, and the UK (Husky et al, 2020; Prowse et al, 2020; Lai et al, 2020). Multiple studies have identified that the outbreak of infectious diseases is usually followed by negative repercussions on the mental health of students (Akan et al, 2010; Sayeed et al. 2020). Undergraduate students have experienced greater psychological impacts compared to other students in the form of anxiety, stress, and deterioration of their mental health during the COVID-19 period (Faisal et al, 2020; Khan et al, 2020; Padron et al, 2021).

One of the first Bangladeshi studies to have researched the psychological health impacts of COVID-19 reported an estimate of 33.3% of university and college students suffering from anxiety, 28.5% suffered from stress, 69.31% experienced event-specific distress, and 46.92% experienced mild to extremely severe forms of depression due to COVID-19 (Khan et al. 2020). Moreover, the prevalence of suicidal tendency and severe depression were reported respectively at 12.8% and 18% (Tasnim et al, 2020; Islam et al, 2020). Furthermore, a study comprising of 15543 university students from different public and private universities of Bangladesh, placed the rate of students suffering from severe anxiety at 44.59% (Dhar et al, 2020).

In response to these adverse impacts of Covid, the pandemic has provided many examples, including in university students, of coping strategies, and institutional and community support to develop and sustain resilience building. Coping strategies are a multifaceted phenomenon, covering a wide spectrum of human emotions, perceptions, and experiences. The significance of social capital as a coping strategy has been highlighted by multiple studies published in pre-pandemic times. For instance, in an economically disadvantaged community located in the Philippines, a photo-voice study shed light on the prevalence of bonding and bridging of social capital. Social capital was used for pragmatic problem solving and resilience building by seeking the help of informal/formal entrepreneurs, youth, and middle-aged housewives (Cai, 2017). Further, a study based on Mexican migrant women living at the border of Tijuana in hopes of crossing over to the USA found that these women fueled their resilience and reached the USA through persistent display of courage, by coping through religious beliefs, and by receiving support from their social circle, institutions, and their families (Lemus-Way & Johansson, 2020). Likewise, families in Korea have demonstrated better abilities in building resilience through changes and times of crises by engaging in social connectedness, coming together, and through determination (Rigazio-DiGilio & Ki, 2012). Similarly, research in Tanzania suggests that social capital and bonding contributes to building resilience in the context of climate change effects (Mngumi, 2020).

Social capital is equally competent in resilience building. Social support and attachment have been cited across five studies as a precursor for building resilience amidst the COVID-19 pandemic as it is effective in reducing depression, stress, and public anxiety. Moreover, only high levels of social support may compensate for lower resilience (Mohamed et al, 2021; Lie et al, 2021; Mai et al, 2021). Similarly, trait resilience, social participation, and trust in healthcare were associated with lower stress, and lower distress (Coulumbe et al, 2020). Coping strategies involving the use of social media for reaching out to other people, sharing resources related to social distancing, and repeatedly socializing with a small group of people are just a few of the examples through which people have dealt with the challenges of the pandemic (Polzzi et al, 2020).

In Hong Kong, during the COVID-19 pandemic, depressive disorders among 15-year-old people were associated with lacking a sense of belonging followed by a void in perceived social harmony (Li et al, 2020). A study in Sweden found an occurrence of better health during the COVID-19 crisis in neighborhoods with social interaction and social support,

suggesting the strengthening of social bonds during a crisis (Zetterberg et al, 2021). Likewise, in Somalia, several citizens experienced a sense of collective displacement, trauma, and a lack of resources and healthcare facilities because of the pandemic. As a result, people resorted to seeking solace within faith-based activities and social connections which have proved to support the healing process (Bentley et al, 2020). Likewise, another Chinese study attributed higher levels of resilience during the pandemic to stakeholders and volunteers working towards diffusing relevant information, and to people adopting an online life where they may connect with other members of their community. The authors reported that once community members mobilized the process of disseminating information, panic and confusion decreased within the community (Pana et al, 2020).

The acceptance of meaningful and socially productive coping strategies has led college students in the USA to act selflessly, learn to be grateful, develop creative solutions through teamwork, and to finding clarity regarding their futures amidst the COVID-19 pandemic (August & Dapkewicz, 2021). Similarly, undergraduate students who socialized with their friends in Turkey were able to cope better with the pandemic and exhibited better psychological wellbeing (Arslan, 2020). Another study conducted in the USA found that graduate and undergraduate students commonly used distraction as a coping strategy but the most effective coping strategy which aided in alleviating stress and depression was behavioral activation (Wasil et al, 2021). More specifically, treatments which involve engagement in enjoyable and rewarding activities using behavioural activation, a core element of many empirically supported interventions, seem effective for depression and anxiety management (Craske et al 2019; Wasil et al 2021)

Students in Pakistan resorted to coping through the COVID pandemic by firstly, seeking support from family members, secondly engaging in social activities (which was the most common coping strategy), mental disengagement, and involving oneself in humanitarian work. However, female students sought more social support than their male counterparts (Baloch et al, 2021). College students in China benefitted from social support and adaptive coping strategies as it helped mitigate the potential onset of or alleviated Acute Stress Disorder during the outbreak of COVID-19 (Ye et al, 2020). Yet, social support is not exclusively demonstrated through human interaction. In fact, a study in the USA shed light on the critical role companion animals played in the reduction of isolation, loneliness, depression, and anxiety. As companion animals provided their guardians with a sense of

purpose, self-compassion, and the capability to follow a routine, they were able to cushion the effects such as isolation and stress, both associated with the COVID-19 pandemic (Kogan et al, 2021)

Coping strategies relating to escapism were more evident among younger undergraduate students (Patias et al. 2021) whereas humor was utilized by a faction of students to manage their anxiety (Savitsky et al. 2020). A sample of college students in India reportedly dealt with stress by engaging in online-based non-profit initiatives, social media, voluntary internships, household chores, and creative activities that they may have decided to take up as newly founded hobbies (Chandra, 2020).

A study in Australia illuminated coping strategies to deal with stress from COVID-19. The stated coping strategies were prayers and meditation, daily exercise, resorting to entertainment through movies and music, engaging in household chores, personal interaction with friends and family, seeking professional help, avoiding the news, working from home, engaging in hobbies such as reading, drinking and smoking, and lastly, using social distancing measures (Rahman et al, 2020). Sports activity such as Moderate Physical Activity (MPA) and Vigorous Physical Activity (VPS) have also been linked to bettering wellbeing, and building resilience (Carriedo et al, 2020).

Additionally, research in Spain found that during the COVID-19 lockdown, many of the students preferred to involve themselves in activities that were deemed as distracting and relaxing over strategies revolving around a structured routine (Padron et al. 2021). One study in Mexico, based on the response of 1290 university students indicated that 74% of students dealt with their situations firstly through positive reappraisal, and secondly through practicing cognitive coping approach strategies involving reassuring messages (Gaeta et al. 2021). Additionally, positive personal non-cognitive traits such as grit and gratitude have been found to significantly build pandemic resilience and contribute to protecting students' psychological wellbeing (Bono et al, 2021). However, 17–20-year-old individuals experienced more negative impacts such as stress and anxiety due to the pandemic in Tehran. Moreover, in contrast to other studies, prolonged confinement at home, and overuse/overdependence of internet and social media platforms during the pandemic were identified as having the potential to negatively influence the resilience level of the age group (Alizadeha and Sharifib, 2021). Resilience building through social capital and adoption of diverse coping strategies is responsible for increasing happiness among people (Peker and Chengiz, 2021). A majority of the studies cited in this paper are

quick to point out the significance of social support and coping strategies during a pandemic without giving much heed to the process and reasons behind individual actions. There is a plethora of literature available, depicting the mental health impacts of COVID-19 on university students. Though, limited research is available on student engagement with coping in times of uncertainty.

On a similar note, we found a few gaps whilst reviewing the cited studies. First, to our knowledge, no literature exists in the Bangladeshi context that adopts a social capital lens to scrutinize the social and mental health impacts of the pandemic and the coping strategies utilized by undergraduate university students to build their resilience. Secondly, there is insufficient qualitative literature threading through rich and contextual narratives, which depicts the impacts of COVID-19 pandemic on the mental health and lifestyle of students. Lastly, despite showing potential for research, the age range of 19-24 has been excluded from several COVID-19 related sociological studies across countries. Hence, our research plays a pivotal role in shaping the post-COVID discourse concerning young people and students in Bangladesh.

2.1: Research Objectives and Questions

Two concrete objectives and five research questions were articulated as a guiding principle for the research. The objectives of the study were to firstly, delve deeper into the challenges and coping strategies exhibited by undergraduate students from public and private universities in Bangladesh particularly those who attended classes on campus and lived in Dhaka during the COVID 19 period (From March 2020 to February 2021). Secondly, it aims to make sense of how students' social connectedness or social capital supported them in coping with the challenging or changing situation. In doing so, the following research questions were framed to answer the overall question:

1. What were the circumstances that students faced during the COVID 19 period (March 2020-onwards)?
2. How did COVID 19 affect different aspects of their lives?
3. What were the strategies used by them for coping with the changing situation?
4. What supportive mechanisms did they use to help them to cope with the new normal situation?
5. Were there any barriers to using the supportive mechanisms that were available?

2.2: Theoretical frameworks utilized for analysis

The theoretical framework for this research is based on theories of social capital and resilience building. By exploring the theories and their application to the experiences of

university students during COVID-19, we were able to deepen our understanding of the relationship between social capital, coping strategies, and resilience building.

Social Capital

Social capital is considered as an asset or a resource for the individual for developing resilience whereas as an individual asset, social capital consists of a person's relationships to available social resources (Ledogar & Fleming 2008). Social capital symbolizes cultural traits of society and is valued as a source of wealth (Putnam, 1993; Fukuyama, 1995). Putnam defined social capital as “the characteristics of social organization, such as trust, norms, and networks, which enhance social efficiency by promoting coordination and action. Social capital increases the return on investment in physical and human capital.” (pp.35-36). Fukuyama (2001) also added that the differential impact of norms, values, and beliefs on trust, networks, and institutions is the basis of social capital. “Social capital is broadly defined to be a multidimensional phenomenon encompassing a stock of social norms, values, beliefs, trusts, obligations, relationships, networks, friends, memberships, civic engagement, information flows, and institutions that foster cooperation and collective actions for mutual benefits and contributes to economic and social development” (Bhandari & Yasunobu, 2009, pp. 5-6).

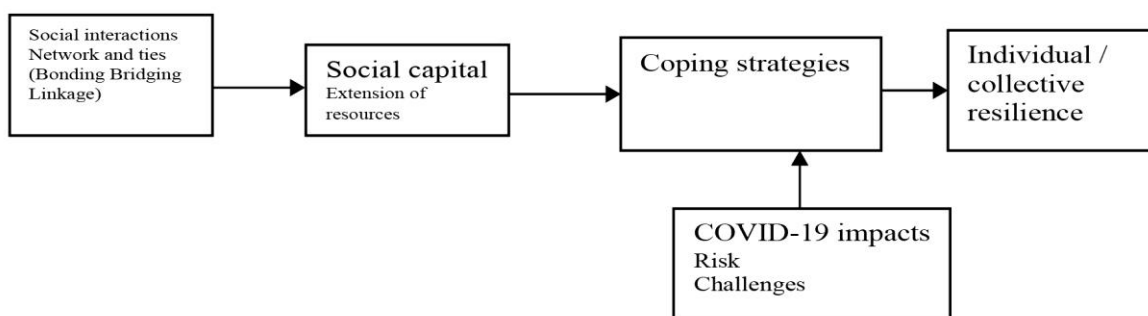
Social capital is also characterized by the combination of bonding (Links to people based on a sense of common identities (“people like us”) – such as family, close friends, and people who share common culture), bridging (Links that stretch beyond a shared sense of identity, for example to distant friends, colleagues, and associates) and Linkages: Links to people or groups further up or lower down the social ladder) dimensions (Mignone and O'Neill 2005). A recent study (Bently et al, 2020) on a Somali community in the USA reveals that social connection and religious faith serve as first-line coping pathways in response to longstanding collective trauma and the acute stressors posed by COVID-19. Another study by Lemus-Way & Johansson (2020) on the resiliency of Mexican migrant women interprets that factors such as social support from people, institutions, and their families, their spirituality, willpower, and religious beliefs fostered their resilience. Social network is an important carrier of social capital which refers to the relationship-social bonding formed among relatives, neighbours, friends, mentor, and so on. Thus, an individual can build different types of relationship networks through blood relationships, kinships, occupations, interests, and other channels. Wang et al (2021) argues that “the richer the relationship network, the wider the social scope and, and the realization of the

value of social capital needs to be based on social networks”(p.3). The above-mentioned studies showed a potential linkage between the individual-level coping with adverse situations and social connectedness.

Resilience Building

Resilience is a multilayered phenomenon. As a theory, resilience building branches out towards sociology and psychology. Hence, resilience may be used in different contexts. Resilience building is recognized and made evident through the embeddedness of resilience in the social structures, social processes, and the ideological and societal expectations of social groups (Bottrell, 2009). Overall, resilience is often interpreted as a “buffer capacity” for recovering one’s previous state of being (Folke et al. 2010). Emphasis is placed on returning to a contextually normal state (Pendall et al. 2009). The resilience building approach also extends toward survival discourse which is rooted in disaster management and ecological sciences. Survival discourse entails recovery amidst a period of uncertainty and vulnerability. Considering the aforementioned, resilience building is often used by individuals, groups, and organizations to “bounce back” and persist during the aftermath of a crisis (Valikangas, 2010, p.19). Resilience may connote hope, optimism, and renewal followed by the act of attending to possibilities of living one’s life, and not merely surviving. In the case of mental health and wellbeing, resilience building is the ability of adults, who have undergone periods of isolation, or have experienced a disruptive event to maintain a relatively stable state of psychological functioning (Bonanno, 2008). The concept of resilience building help us to understand how individuals adapt, innovate, and reinvent themselves amidst periods of turmoil and uncertainty. The COVID -19 pandemic can easily be defined as a period of turmoil and uncertainty and understanding what resilience and resilience building is and how it can be developed in individuals and societies is critical to managing the risk of impacts of this turmoil and uncertainty on students’ mental health and overall wellbeing. The theoretical underpinning of our study is conceptualized as per Figure-1.

Figure1: Conceptual Framework



3. Research Design and Methods

3.1 Qualitative Methodology

This research extensively relied on qualitative methodology in pursuit of centering on a deeper understanding and examination of the phenomenon under investigation. The main strength of a qualitative study is that it concentrates on a smaller scale but captures deeper insights than the large samples that quantitative studies use (Griffin, 2004; Rowley, 2002). This study is based on the potential COVID-19 impacts on tertiary level students of Bangladesh and the different initiatives for coping that they have undertaken.

Thus, qualitative data have been obtained through 20 in-depth interviews with 10 male and 10 female students from both public and private universities located in Dhaka city. In addition, two Focus Group Discussions (FGDs)-one with public university students and another with private university students; and 5 Key Informant Interviews (KII) have been conducted to supplement the interview findings.

3.2 Target Group and Sampling Framework

The target research population for this case was university students aged 19-24 years in Dhaka. Undergraduate students go through a similar vein of attributes such as age, expectations, and life experiences. A purposive sampling of 20 individuals was selected comprising twenty individuals. Respondents were chosen from 3 Public Universities and 3 Private Universities. It was asserted that all universities chosen are located in Dhaka City and recognized by the University Grants Commission (UGC). These universities offer a comprehensive education system, and students mostly receive education from science, social science, business and liberal arts backgrounds. To justify the generalizability of our sample size, we selected general educational institutions that offer multi-disciplinary subjects instead of choosing any specialized university.

Two FGDs were conducted with mixed gendered groups (approximately 10 per FGD) drawn from one public and one private universities. These two universities were randomly chosen from the purposively selected 3 private and 3 public universities respectively for FGDs.

In addition, 5 KII with academics, policymakers, psychologists, sociologists, and parents were conducted. They were purposively chosen to understand the underlying mechanisms students followed to cope with the rising socio-economic, financial, and psychological problems created by COVID-19.

All respondents were verbally approached for their spontaneous participation in the study. All individual consent was recorded and maintained in written form or recorded audio depending on the nature of the tool used for data collection.

3.3 Data Analysis

A manual data analysis technique was adopted by following the major steps of qualitative data analysis which included: coding, identification of themes, recoding, development of categories, identification of relationships between categories, and refinement of themes (Lacey & Luff, 2007). As the data size was not too large and hence manageable, manual analysis was deemed appropriate (Basit, 2003). Questionnaires and talking points were developed in English and then translated to Bangla, which is the national and common language for Bangladeshi people. Prior to conducting all interviews and Focus Group Discussions (FGD), verbal and written consent were taken from the respondents. The interviews were tape-recorded, verbatim transcriptions were prepared from the recordings, and the transcripts were later coded. In short, a thematic analysis was conducted by first, transcribing data, second, by utilizing standard coding methods, and last, by identifying key themes that emerged. Categorical aggregation (Stake, 1995) has been used for analysis and interpretation wherever a collection of categories had emerged from the acquired data. Based on identified patterns, through the study, we attempted to establish a correlation between the categories. Once a pattern was identified, it was interpreted per the theoretical framework.

3.4 Ethical Considerations

The study has ethics approval from East West University Centre for Research and Training (EWUCRT): round 13, no 9 (3)/2021. Approved ethical guidelines were rigorously followed throughout this research. Depending on the nature of the interaction, respondents were either asked to sign a written form of consent, or the interviewers sought their verbal consent, which was recorded in an audio format. Before seeking their consent, all informants/interviewees/respondents were briefed about the nature and scope of the study, and it was made clear to them by the interviewers/facilitator as to what is expected of them. Regardless of the progress of the study, respondents were provided with the flexibility and right to withdraw from the research at any given time.

The anonymity of respondents was strictly maintained, followed by confidential treatment of personal information. Lastly, researchers strictly confined themselves to a state of value-neutrality, disengaging themselves from any personal beliefs on the prejudiced

treatment of respondents based on the respondent's gender, ethnicity, religion, social class, caste, or sexual orientation.

3.5 Limitations of the study

While conducting this research, a few constraints needed to be addressed. Firstly, due to the COVID-19 restrictions imposed by the government under social distancing measures and countrywide lockdowns, it was difficult to acquire a large portion of the sample within a short time. Secondly, the IDIs were conducted virtually, at times. This proved to be quite tedious as a result of poor network connectivity. Lastly, the pandemic restricted the mobility of researchers, hence, limiting the research sample to Dhaka. As the study was associated with concrete ethical constraints and administrative measures, certain interactions needed to take place on a face-to-face basis.

4. Study Findings and Discussion

4.1 Socio-demographic Information of the Participants

Our study participants were aged 19-24 years. A majority of participants (14) were undergraduate level students from private universities and public universities located in Dhaka city, and six (06) participants were graduate level at the same Universities. Out of 20 participants, 10 were enrolled in public universities, and 10 in private universities. Socio-demographic information of the participants is presented in the Table 1. The sex ratio for male and female was 50:50 respectively. Most of the participants' fathers (14) were service holders. The rest were businessmen and except one who was a farmer. Half of the participants' mothers were housewives, and of the remainder, eight were teachers by profession and two were businesswomen. Most of the public university students were living outside of Dhaka during lockdown and the interview period, whereas private university students were living in Dhaka city. More than half of the participants (13) belonged to a family having more than 6 members: among them 4 participants have 8 members family whereas 3 participants belong to a single child family.

Table 1: Socio-demographic Profile of the Respondents

Characters of the respondents	Number (N)
Sex	
Male	10
Female	10
Age (years)	
19-20	2
21-22	10
23-24	8
Family size (members)	
03	3
04	5
05	6
06	3
08	4
Level of education	
Undergraduate	14
Graduate	06
Students' studying subjects	
Science and lab-based	7
Business	8
Arts & humanities	5
Father's profession	
Service	14
Business	5
Farmer	1

Characters of the respondents	Number (N)
Mother's profession	
Housewife	10
Teacher	8
Business	2
Living place during lockdown	
Dhaka	13
Outside of Dhaka	07
COVID 19 infection status	
Self	5
Family members	7

Source: Field Work (2021-2022)

4.2 Different Views of Students on Online Education

The completely new system of online education associated with social distancing restrictions to manage COVID-19 appeared a major challenge for study participants. Most respondents reported that they faced some challenges when first exposed to online education including online classes, online examinations, course load, pressure of different types of assignment, communication gaps with teachers, assessment system and technical difficulties. The study participants explained the reasons for such challenges. A greater part of the respondents reported that they faced problems during online examinations such as feelings of disorientation and scope of taking unfair means like cheating in the examination or submitting plagiarized works. Some respondents felt that some courses were not fit for online teaching, e.g., those that need practical or in person class such as mathematics and laboratory-based subjects like engineering and pharmacy. Many of them experienced immense academic pressure as they had to complete the semester within a limited time frame with the additional burden of the uncertainty of covid, family members testing positive and restrictions on usual activities. This meant that focusing on their usual studies and assessments was very difficult. One respondent shared:

My university was closed when Coronavirus hit first. So, I was kind of far from my academic studies. After 20 to 25 days my elder brother, his wife also tested COVID-19 positive. After the Eid-ul-Adha our classes started in July 2020. After that my second elder brother and his wife became COVID-19 positive. On the other hand, at the same time it was very difficult for me to submit assignments and concentrate on studies. I am currently studying in the 8th semester. Now all the major level courses are being taken online which seems to me to be totally inappropriate. Moreover, I am in a department where I have courses like math

and statistics. It would have been better if I could have done the physical classes. So, I am just completing my semester for getting a certificate (IDI1, Male Student, 20).

An inability to easily communicate with teachers was another problem identified by some of the study participants because most of the teachers were not oriented with the system, there was no option for face-to-face communication and some teachers were not considered student friendly. They thought communicating online was not easy as many faculty members did not check email regularly and did not reply in a timely way and as a result, they lost interest in online classes. The respondents felt they lacked concentration during online classes, and this led to poor attendance. However, a few respondents felt that they spent a huge amount of time focused on their online-based studies. The following quote from one FGD provides more insight into the way students felt about their interaction with teachers during the transition to online:

In physical classes we have a good amount of communication with our teachers, but that's not possible in online classes. Our performance will always depend on our interaction. Many of our teachers who are excellent at conducting physical classes, but they are not able to conduct online classes efficiently. Because this system was new to them as well. We can only communicate with them through emails. However, all faculty members did not respond on time. Even we had to wait 2 days during weekend for getting replies. (FGD. 2).

Another respondent stated that:

Our grade assessment was fully assignment based. The first problem I faced was adjusting to online exams – we had fixed submission times causing nervousness causing a lot of struggles in finishing our assessments. Apart from that, I faced network issues causing disturbance in my concentration and many faculty members didn't record their sessions causing me to miss out on important details. Another issue was that we faced a big communication barrier with our faculty members (IDI 2. Female Student, 19).

Another participant reported feelings of frustration related to lack of support and help which has had a negative impact on study enjoyment and motivation:

Online class has made me frustrated. We used to get lab support in the normal days, but it remained absent during pandemic periods. If I experienced any difficulty related to study materials or examination preparation, I could discuss with my friends and seniors on campus. Now I have to communicate everything through the screen which I find most annoying in the online class. I have to connect with my teachers through emails to find out something. Before I used to go to campus, I was more interested in studying which is no longer the case (IDI 4. Male Student, 21).

Another quote depicts the stress felt by the students attending online classes amidst COVID-19:

Yes, it was uncertain for the average student. I am not talking about the toppers as they are always in tune with their studies. We went through mental pressure. We have no scope for group studies earlier we used to spend more time on group studies and in libraries that helped a lot for improvement. Overall, a lot of students including myself cried every day during our final exams. We had to sit for exams, viva, and assignments online, which was quite stressful (FGD.2).

In addition, the respondents who studied at public universities faced prolonged uncertainty regarding their student life because of delays in starting online classes and uncertainty about final examinations. A large proportion of respondents was going to graduate without experiencing campus life again. Another commonly mentioned difficulty by respondents were the various kinds of technical challenges such as problems with their internet connection, lack of internet facilities and not having appropriate devices to attend or fully engage in online classes. These difficulties faced by students and staff had wide-ranging impacts on learning, such as examination pressure and missing information provided by teachers. A study participant from a public university indicated:

Study related everything was online based. My exams were being conducted online – every question had a time limitation, and it was very hectic as in the examination hall we had a certain flow but sitting at home it was difficult to manage time as we had to finish writing and then take pictures and send them to the faculty in that limited time frame. I faced problems with my connection which caused me to submit a paper a little late and then I had to give a retest as my submission wasn't accepted. I should've kept mobile data as back-up. Many

teachers have connectivity issues which cause students to not understand what they're explaining or at times they might be sharing their screen, but we can't see anything (IDI 2, Female Student, 19).

This study also highlighted one of the areas of social inequality that manifested through the experience of the students of online education system during lock down periods. Significant difference was identified between public and private students regarding the access to internet and devices. The majority of the public university students faced hurdles for accessing technology which were vital for continuing online education. The following quote from the focus group discussion with public university students explains the situation:

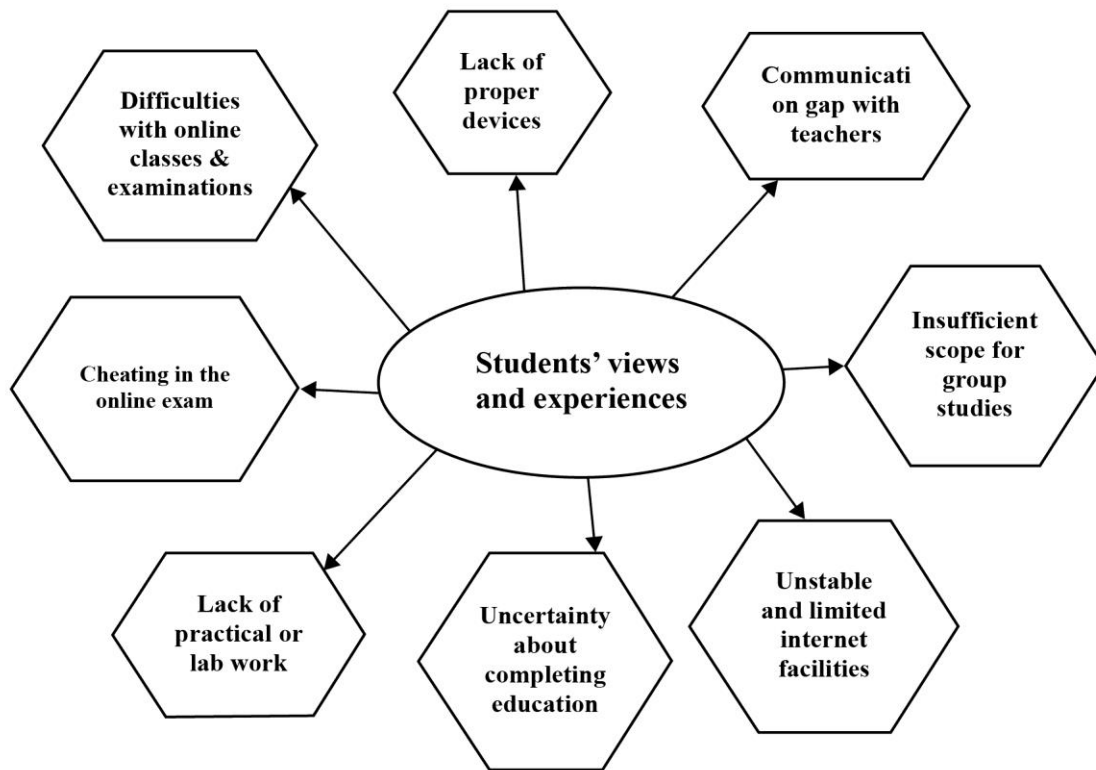
We had to join in online classes to adapt to the changed situation even having two differences of opinion as to whether there will be a class or not, cost of mobile data and its frequency and availability. First time everybody was in dilemma. Moreover, no mobile companies provided data services at low cost that was one of the challenges for public university students. Because you know majority of the students do not come from economically solvent families (FGD.1).

The research participants' results during online education shows a mixed record. Most of their CGPA were consistent, five students' CGPA decreased, and five students improved their CGPA. This picture indicates that majority of them could adapt well with the changing system, and some appeared to thrive and interestingly all of those were female students. The positive new online system of learning was expressed by one:

I have adopted very quickly to online classes. My results have improved a lot. Many of my friends have said that they have a lot of problems adopting to online classes, but I haven't. My CGPA increased up to 3.8. Our faculties used to provide recordings of classes and that helped me a lot (IDI 7, Female Student, 21).

No noticeable difference was found among private and public university students in this regard. Figure 1 presents a summary of student's views and experiences of online education.

Figure 2: Students' Views and Experiences of Online Education



4.3 Problems Faced during the Lockdown Period

Fearful of losing family members

Respondents encountered problems in their family and social life during the initial lockdown period. Half experienced a loss of physical social connection due to isolation for covid infection. Also, two respondents lost close relatives during the first lockdown, with FGD findings and interviews highlighting the stories of these young people during these times:

I was initially happy but things changed when family members fell ill. Two of my relatives living in the US passed away within three days of testing positive. I was quite frightened. My Boro Chachi (eldest paternal uncle's wife) also tested positive for COVID-19. At that point, COVID turned into a taboo. My Boro Chachi was in the ICU, and she passed away after three days. This was quite traumatic for me and my family. My father at first didn't maintain social distancing. He used to go to the masjid regularly. But I didn't meet my nana (maternal grandfather) for an entire year, he fell ill and passed away during the lockdown. It was a shame that I couldn't see him (FGD2. Female Student).

A similar experience was shared by another respondent:

Initially, I took lockdown as a normal incident, I thought that everything will be normal soon. Gradually the university closed, and I was under mental pressure. I have never experienced staying at home for so long. I thought lockdown would not be extended. Then my family members got affected by COVID-19. I didn't think about myself because I'm young but my parents were 50 plus years old which made me tensed. My dad's immune system is somewhat better, but my mum has diabetes, heart disease and blood pressure. Moreover, in the last two years I have lost my paternal grandmother and aunt. (IDI4, Male Student, 23).

Respondents and their families also faced challenges related to covid infection and the impacts of the widespread infection on accessing health services for other conditions. Eight respondents reported that at least one of their family members had been infected while six respondents were infected themselves. Two respondents reported that their parents already had pre-existing health conditions but due to lockdown they did not receive the correct medical treatment.

Restricted mobility, restricted life

Respondents faced restrictions during the lockdown that impacted many facets of their life. They had to spend time in isolation for their own or family members' infection, stayed at home for prolonged periods, were fearful of getting infected, scared to go outside and unable to attend their jobs due to the lockdown. Some male respondents particularly shared their feelings about loss of freedom due to lockdowns. All participants identified significant changes in their family life due to restrictions indicating a mixture of positive and negative experiences. Positive experiences included more quality time with family; increased awareness about family issues; improved communication with relatives. On the other hand, negative impacts included tension in their family (particularly with parents) from long periods of being at home and feelings of irritation by even the normal behavior of others. It was also revealed that on a personal level, respondents experienced a range of issues because of lockdown restrictions such as feelings of loneliness, boredom, uncertainty about their future life, a loss of motivation to do anything, becoming introverted, cautious and overprotective. One participant shared her initial feeling about lockdown days:

I was in class when the teacher made the announcement (about the lockdown). I was very happy at first. I assumed that I would enjoy a short holiday. I resorted to watching movies, and almost forgot about studies. I began to get bored, and my boredom got worse because I could not meet my friends. I was upset because I used to maintain a large circle of friends. I assumed that it (COVID19) was an international phenomenon but once the virus arrived in Bangladesh, I was panic attacked. (FGD1 Female Participant).

Similar types of concerns were shared by others:

Before COVID-19, the maximum time we used to go outside for my university classes but now we are continuously staying at home so that's why I am reacting to every situation. Basically, we are becoming short tempered, our inner frustration was increasing which creating misunderstanding with our family members (FGD.1).

On the other hand, due to lockdown, some respondents could spend more times with their families which made them concerns for family affairs. This was a positive impact allowing them to bond with their families and be more engaged in family matters:

I didn't experience much of a crisis before COVID-19. My father is a 65-year-old working man who had an open-heart surgery. My family and I were extremely cautious about my father's health and took strict precautions. It was awful for me to witness how families were not claiming their loved one's dead bodies. I even heard of instances where people were dead inside their home for three days. Such incidents evoked a sense of responsibility in me, and I started to engage myself in family matters (FGD 2. Male Participant).

This happened due to potency of their bonding relationship such as: spending quality times with family members, developing close bonding with siblings, socializing with friends and relatives (e.g., through video calls, group chatting, face-book). They felt more connection with family matters rather than the issues of peer groups. Most importantly, some boys changed their gender roles by starting household work such cooking, cleaning homes, washing cloths and helping mothers. Some started to take financial responsibilities for their families.

Financial hardship

As the lockdown restrictions were imposed in Bangladesh, respondents and their families experienced numerous forms of financial impact. The fathers of six respondents lost their income. Similarly, six respondents reported that their family-led businesses had to be shut down due to the lockdown. The family members of five respondents had salary deductions and one respondent's family could not keep paying their housekeepers. Compounding this lack of income was the increased costs for healthcare related to covid infection. Four respondents reported an increase in their medical costs.

The following quote extracted from one of the interviews delves deeper into the matter:

My father had a business, and he is old. Now the business has been shut down because of Coronavirus & my elder brother's salary has been reduced. Besides I was also doing a part time job from there I was laid off for 6 to 8 months. On the contrary, due to COVID-19 our family's health expenditure had increased. This type of situation we never faced before (IDI1, Male Student, 21)

Due to these financial impacts, the respondents, of whom, a majority were students who were from public universities, reported that their living standard had decreased. Four respondents had experienced a fall in their family income by 60-70% and others had to compromise with their daily necessities:

My family faced a lot of financial crises. My father is a retired person. My mother used to run a kindergarten school for 18 years, but it could not be continued due to COVID-19. Since students were not giving tuition fees so teachers were not getting salaries, eventually many teachers quit their jobs. Even many of them started working in garments. We took a loan for our house before pandemic that became a huge burden for us. We needed to cut our regular budget to repay the loan. (IDI 13. Male Student, 22)

Respondents also experienced personal level financial crisis during the lockdown period, they lost their personal savings and faced difficulty in paying their semester fees. Likewise, two respondents failed to repay their personal loans. A few respondents also lost their sources of income during the lockdown by losing their tutoring jobs, their part-time jobs, Teaching Assistantship positions at university or discontinued their personal

businesses. Lastly, due to financial constraints, four respondents left Dhaka city and went back to their hometowns or villages.

Lifestyle changes were linked to reduced income and financial hardship:

We had to depend on our savings, but house rent, and semester fees remained the same without any reduction. Our luxurious lifestyle accessories had to be reduced, even regular hanging, and eating, while outing was highly compromised. Normal clothes were bought to celebrate Eid Festivals. (IDI 1. Male Student, 21)

Social stigma when returning to rural areas

One of the study participants shared the social stigma he faced when he left Dhaka for his village in a rural area of Bangladesh following the closure of his university and hostel. Despite many villagers not believing Covid was real, there was a lot of fear and misconceptions about it. He shared his experience during the focus group discussion:

I saw contradictory situations in my village. They did not believe in COVID-19, but no one was allowed to enter their village because of being COVID-19 positive. I needed to leave my home and went to my maternal grandparent's house because of some Facebook's post where I mentioned my villager's irrational attitude due to lack of proper knowledge. No one came to attend the zanjaja (burial) after one of my school-teacher died in our area. We noticed several cases in newspaper where people left their infected parents and relatives alone (FGD1, Male participant).

The situation he faced during that period created large psychological pressure for him because he could not stay beside his elderly parents, and he did not know how long he could stay at his relative's house.

4.4 Changing Lifestyles, and Physical and Mental Health Impacts

Impacts on lifestyle

COVID-19 experiences brought noticeable changes in the attitude and lifestyle of our study participants. The transition to a virtual platform for many aspects of everyday lives influenced life issues such as sleeping time and quality, device dependency, loss of interest in and lack of attention to studies. Negative attitudes toward quarantine, a drop in level of

confidence, loss of spirit, and highly emotional reactions were reported by many students. One female respondent addressed her feelings:

I started getting very irritated due to the restrictions being imposed on me and online classes drained me out. Talking about minor changes – I gained a lot of weight. Other than that, I have lost my focus on everything, and I have no spirit. (IDI 2. Female Student, 24)

Unusual food addiction and addiction to virtual platforms were reported by our study participants. Addiction towards different types of food and virtual life was one of the emerging problems during lockdown periods with consequences for mental and physical wellbeing as explained by a male respondent:

In the beginning of mobility restrictions, I felt very frustrated and angry but mainly anxious. Anyway, I felt like I was trapped I couldn't describe my feelings. I stopped going outside like I would do before the pandemic. I was very thin before, but now I have gained a lot of weight. I would eat fast food all the time, but now I eat homemade different countries' cuisine and I actually like to cook those. (IDI 3. Male Student, 22)

Physical health impacts

Consequential physical health impacts reported related to food and cigarette consumption and long periods of device use. Smoking behavior changed during lockdown periods with rates of smoking reported to sharply increase in some students, though a few students mentioned that they quit smoking during this period due to their time spent at home. One respondent said:

I am a chain-smoker now; smoking increased a lot during lockdown periods. It was hard to get out of this situation. My social connections were low during the lockdown period. Needless to say, I didn't talk to anyone except my family members. I didn't use Face-book, and apparently talked less with my friends which was a frustrating situation for my overall physical and mental health (IDI 13. Male Student, 22).

A large number of respondents informed that they had eye-related issues such as headaches due to long periods of use of electronic devices such as desktop, laptop and

mobile. Others also reported Musculo-skeletal issues such as back-ache and other body aches associated with long periods of sitting on devices. One male participant explained his negative experiences:

I tremendously suffered from headache and pain in the eyes. Sometimes I thought how long I have to use these electronic gadgets or equipment. Watching movies is not so problematic as I felt to attend the online classes. I participated in many co-educational activities during off-line classes. As I started online classes, I have not been able to participate in those activities due to having stress in online studies. I used to spend time in clubs when the classes were over. I could enjoy those face-to-face conversations that weren't actually available online (IDI 3. Male Student, 22).

COVID- 19 mobility restrictions and patterns of mental health effects

Mental stress was found as a common phenomenon for the study participants due to academic pressure. Impatience and mood swings remained prevalent often leading to quarrels with family members. A few respondents felt a loss of concentration and some of them felt as if their brain did not work properly. Tension about their parents and elderly family members' health affairs also contributed to the loss of mental wellbeing. As the closures of educational institutions continued for a long time due to a sharp increase in COVID-19 cases, fear of infection, panic attacks, and trauma were also identified as major mental health impacts during lockdown periods.

Most of the study participants felt depression due to academic pressure, sleeping problems, and personal relationship challenges. One participant expressed her feelings:

My personal relationship had a great change due to the distance we created. I went through a breakup this year, and COVID-19 is unexpectedly responsible for that. Before getting infected with corona virus, I didn't face so many problems. But afterwards, due to my beloved uncle's death and my illness, I mentally broke down and experienced huge psychiatric difficulties... I also got burdened with my personal relationship and wished to have a space for mental peace. For that reason, I had to decide to break up the long-cherished love relationship (IDI 17. Female Student, 23).

Sleeping problems were reported as one of the major reasons for developing depression in many students. One respondent reported his views:

“Within the first three months of COVID-19, my personal relationship broke down and I became emotionally frustrated. I could not sleep well at night. My sleeping cycle is terrible as I sleep in the morning. I felt a lot of headaches due to depression. Although I used to suffer from depression due to personal reasons, now I am depressed about my academic results. There was no way to make my mood better” (IDI 1. Male Student, 21).

Anxiety was reported by respondents. Social media related stories, news, and face-book posts triggered student’s anxiety.

A respondent described the toll of the lockdowns on his own mental health:

“At first, my mother had mistreated me for using most of the time electronic devices and we all had trouble breathing at night. Second, I used to do active politics on campus. Political crisis is always there but during the pandemic it came to such a stage that I was panicked sitting at my home. Everyone was giving consolation through online which didn’t work for me. I didn’t post anything about this personal crisis on my social media. By July 2020, I decided that I would commit suicide. But again, a few days later I realized that I was going to take a very wrong decision” (IDI 18. Male Respondent, 22)

More serious mental health illness also was reported to manifest in students across the universities. Self-harm, bipolar disorder, suicidal tendencies, hallucinations, and obsessive-compulsive disorder were mentioned. Findings from one FGD participant illustrates this:

“I once cut off my hair as I couldn’t express myself or socialize. I lost concentration in reading. My father also infuriated me as he mentioned how he was ashamed to mention to his friends that I study at a private university. I retaliated by shouting. I was so frustrated that I took the scissors and impulsively cut off my hair” (FGD 2. Female respondent).

One IDI male participant expressed his feelings and medical diagnoses of more serious mental illness:

I have always felt like I was locked in a closed room, I could not sleep and that’s why I started meditating. I felt a lot of headaches due to depression. I went to the doctor,

and the doctor detected bipolar disorder in me. I started meditation, but I still felt troublesome sleeping patterns. Although I used to suffer from depression due to personal reasons, now I am depressed with my life (IDI 1. Male Student, 21).

Prolonged home stay, absence of physical contact with relatives and peer friends, deaths of family members and relatives due to COVID-19, ongoing COVID-19 news in TV channels and social media, exposure to online education, changing socio-economic circumstances and family pressures challenged the mental wellbeing of university students during the pandemic period. Mental health challenges of anxiety, stress, and depression were reported by participants. Those mental health challenges were linked to the immediate and resultant impacts of COVID-19 related restrictions and other socio-structural barriers in the community. Students with premedical mental health conditions and those who experienced traumatic mental conditions and personal relationship break-up during the pandemic also reported significant suffering with some developing psychiatric disorders which required medical diagnosis.

In accordance with the KII psychologist's view, "mental health support was an auxiliary part before this COVID-19 pandemic. A very few private and public universities provided mental health support through their own mental health support centres or internet-based workshops, seminars during COVID-19 period. Motivational sessions are not sufficient compared to full time psychological support" (KII 2, Psychologist).

As identified by one KII, COVID lockdowns highlighted the multiple pressures on university students in Dhaka highlighting the inadequacy of existing mental health services offered by universities in terms of mental health and wellbeing counselling and supports and referrals for more serious mental health conditions. The COVID period exposed the mental health pressures on university students and the limited mental health services available at both public and private universities. Given the high costs of access, and inadequate attention to mental health and wellbeing at family and community levels, mental health counseling or support should be considered a public health priority for university students to avoid further substantial health impacts.

Mental health counseling was managed in all private universities. A number of respondents received free counseling services, and a few respondents said their universities hosted webinars on mental health issues and counseling, whereas public universities lack this. A male student shared his ideas:

Our university has a Mental Health Counseling Center, the concerned people are not active to support students and staff as well. Many students committed suicide during this lockdown. Managing serials for counseling also looks a long-term process. The center would function properly if the entire process was made easier for the general students. (IDI 18, Male Student, 22)

On the other hand, students at private universities shared their satisfaction due to counselling services offered by their universities. A private university authority (KKI.3) informed that to assist the students in their academic and socio-emotional well-being they gave more emphasis on providing counselling service free of cost. A significant number of students took counselling service from the university for their psychological crisis.

But the cost, particularly relative to the reduced income during this time, was thought prohibitive for many:

Hmm, my psychological sessions were too expensive. In total, I spent 8,500 taka and per session it was 3000 taka. I am not going outside so that's why I am not getting pocket money. As there are lots of people who want to take psychological help from the experts but due to this costly amount, it is not possible for most of them. I think in every educational institution especially, universities should have at least two psychologists. Students should pay a little bit more money for the fund (IDI8. Female student, 21).

4.5 Use of Social Capital as the Mechanism to Cope with the Situation

Support of family, relatives and friends

Most of the respondents indicated a heavy and constant reliance on their social support systems for coping with the new-normal situation in response to the covid lockdown situation. This social support system mainly included bonding relations with family members, cousins, relatives and friends. A majority of the participants identified strong family bonding such as affable relationship with parents and siblings as an important support mechanism to cope with the situation. They spent quality time with their family members and siblings became best friends. Some of the respondents lived in a close-knit family with their extended family members such as relatives of joint family which appeared to help a lot compared to those who lived in a nuclear family environment.

Social connectedness via virtual channels also played an important role in this regard. One female study participant expressed her feelings:

I got mental support from my family and my relatives also have helped me a lot. I have some cousins and I always share my feelings and thoughts with them, and they share too. If I talk about social connectedness, I used social media and it has helped me in this purpose. Through texting and video call, I have kept contacts with my relatives and cousins. (IDI 20, Female student, 21)

Thus, their family support helped them to overcome mental crises related to any kind of personal issues. Due to lockdown most of the participants could not share their crises with their friends and they became more close to family members. A male student shared his experiences:

I was engaged in a relationship, but the relationship broke down during the pandemic. The girl was a junior student at my university, and she got married. I was very upset; I went to my sister's house. My mother and sister helped me a lot during this time. I used to share it with my close friends which I could not at that time. My sister became my best friend and I spent quality time with my nephew and niece. When the lockdown was over, I went to visit many places with my friends (IDI 13. Male Student).

Another example of family support was related to the health impacts of COVID and isolation requirements and that restrictions had a silver lining, by providing the time for family bonds to be strengthened:

We were very worried for my sister and my niece who were supposed to come from Australia at that time. As we all were COVID-19 positive at home, we didn't know where we would keep them if they arrived at that moment. There was a rule that those entering the country would have to maintain a strict 14-day quarantine, and we were quite lost. We didn't know where to keep them. We even thought of relying on our aunt and uncle (paternal), but they were already busy with my father. They were overseeing his affairs while he was hospitalized, and they took care of me and my mother, as we didn't have the capacity to do anything at home. We were just resting in our rooms. Hence, I am lucky that I live in a joint-family. So, my aunt and uncle were going to the hospital, as my

father was at the ICU. He needed injections every day, so my uncle would stay at the hospital. I meet my cousins all the time, they come over all the time. My extended family including my grandmother and uncle (paternal) stay on the second floor. We have this family gathering, with no fixed time. Like today evening, we all went to the rooftop. This wouldn't have happened before as we had a fixed time, but now, every day is a Friday (ID15. Male Student, 21).

These stories reveal not only the need for family support for practical tasks, but how lockdowns meant that people had more time to provide the support and improve their family relationships.

After family, respondents identified friends and peers as an important support system. They utilized social media to maintain their social connections with them. The respondents felt this form of social connection helped to reduce their loneliness particularly for those respondents who have a nuclear family. Interestingly one respondent reported that before COVID lockdown he was not deeply connected with any social circle, but the new way to socially connect online provided a new way to connect that helped to reduce his previous lack of social connection:

I am not really a social person. Frankly speaking, I am very introvert as I belong to a single parent family. I was more comfortable with my family environment. But COVID-19 changed everything, I could understand the importance of friends and friendship in life. Online class and different online courses helped me to be more connected with friends and to make new friends. Now I am feeling stronger than before due to my friends circle. (IDI 7. Female student, 24)

While a majority of the study participants received social support from their friends and peers, a considerable number of the respondents got social support from their neighbors, teachers and colleagues from their workplace. The value of workplace connections was expressed by one female respondent:

At the initial stage of lock down, I tried to communicate with my friends at least once in a week via video call. After one and half month of our first year, I got selected for ISSB (Bangladesh Air Force's GDP Pilot) and we had to stay in the camp. I spent a nice time there, and I got back home with proper safety. If anybody felt depressed in the team, our instructors of the ISSB cordially helped

him or her; they were very nice and kept inquiring about us. I got new friends and mentors from there which is strength for me (IDI 14. Female Student, 22).

Hence, it is well established from the findings that different types of social connections worked as major supportive mechanisms for the students to cope or adjust with the new normal situation.

Supports from community and institutions

Bridging social capital also played an important role for many students to overcome financial hurdles faced during that period. Around 20 percent tuition fee waiver, regular scholarship, subsidies on universities expenses (inside the campus), reduction of the library fees, student fees, or student activities fees were important supports for students in private universities in Dhaka. Direct support from teachers for students such as purchasing of electronic gadgets, laptop or android mobile phone was also highly regarded. One third of the respondents claimed that they received economic support from university and mental support from teachers during the pandemic periods. One female respondent expressed her feelings:

We received a waiver amounting to a particular percentage, we are still receiving it. We don't have to pay library fees as we weren't attending university. Our university used to give us emails urging us to reach out to them for counseling, but what's the point of the email if they are going to pressurize us with work? Our Vice Chancellor keeps providing us with emails to express how we all are going through a tough time, we love him. His words or those emails are comforting. (IDI 5. Female Respondent, 23)

In contrast to private university respondents, public university students did not receive monetary help or a tuition fee waiver from their university authority. However, a few participants received some form of scholarship or financial support from their teachers. Installment basis supports for purchasing personal electronic devices such as smart phones, laptop was also available for some students in public universities and bus services provided for free during the occasion of Eid (an Islamic festival) were helpful for the university students. A male student addressed his experience:

At present, students at our University who don't have a phone are asked to submit application. After that they have been given TK 8,000 each and have to

repay this money in installments. We have some teachers who have been very supportive, asked to contact them personally if there is any problem. Moreover, scholarships have been arranged especially for the poor students. Before Eid, 15 to 16 University buses gave free ride for students to reach their home. (IDI 13, Male Student)

Though a high official from university grant commission (KKI.3) made the following remark on it.

More than 300, 0000 students and teachers at primary, secondary, and tertiary level, got zoom link facilities for online classes across the country. Students in public universities received approximately 500, 000,000 taka as soft loan without interest to buy laptop or smartphone to join online classes. UGC basically made an agreement with five leading mobile companies to provide internet facilities for students from both public and private universities across the country during COVID-19 pandemic.

Virtual platforms for social connectivity

Virtual platforms appeared as an important medium during COVID restrictions for young adults' social connectivity. Most of the respondents used YouTube, Facebook, WhatsApp, Instagram, and online video games, and different online television platforms for watching movies as a means of entertainment. Engaging in group chats was mentioned by some respondents while other respondents were more passively engaged in group chats, eg via sharing memes. All respondents reported watching movies and TV shows via streaming platforms. How COVID restrictions impacted online engagement is reflected in this respondent's reflection:

Now, the situation is different – I'm still connected on social media I am not meeting people physically. There was a time when all sorts of function such as Eid, Pohela-falgun, Pohelaboi-shakh, etc. were celebrated online via viber, WhatsApp, messenger, zoom etc. So, now even if we don't interact via social media it doesn't matter to me, that's how things are working for me. But, frankly speaking, I don't connect that much on social media (FGD 2. Female Student).

Interestingly, a few respondents reported that they reduced their dependency on social media particularly Facebook, while others commented on the both the positives and negatives from using social media:

Virtual social connectivity played a positive and negative role. I was that person who needed to meet their friends or communicate with their partners. Social media helped me connect with them, and share memes via group chats. These things kept me sane to some extent. Then again, I would see people bashing someone for things that would usually be perceived as normal. I saw a lot of negativities; I would wonder why the pandemic had to occur at such a time when social media is at its peak (IDI 5, Female Student, 23)

And this:

As I mentioned, I went to our old family home, it didn't really help. I also watch Korean drama, and I also like to talk to unknown people via social networks without disclosing my identity. It is easier to express yourself with people who don't know you. No matter how much we accuse Face-book of being a waste of time, it actually helps us forget a lot of things through memes, videos, and trolls. There should be a sense of control, and one should be able to control the level of advantage we have over social media. Without utilizing it cautiously, this may prove to be a disadvantage (FGD 1. Female participant).

These findings reveal the new positive opportunities provided by engagement with the online platforms explored by study participants. Interestingly, the need for balance and recognition of the negative impacts was also identified by some of the respondents. The value of online connection in this youth population and its contribution to building social capital to cope with the situation was highlighted by a sociologist (KII.1) “the new generation could translate their virtual knowledge and social network to a new form of social capital. Eventually this became an important tool for their coping mechanism during COVID-19 period”.

4.6 Coping through Social and Spiritual Activities

Other than support from social connections informally via chatting and face-booking, some respondents engaged in social and spiritual activities. Some participants engaged in voluntary work while others got involved in religious activities. During both focus group

discussions, a considerable number from both private and public universities students identified that within COVID limitations and restrictions they had tried to engage themselves in social activities such as giving money and food package to poor people/families, taking sick people to hospital and sourcing food and medicine for many families who needed support. A few indicated that they were taking care of street animals like dogs and cats. Similar patterns of coping strategies were evident from the quote mentioned below:

I have engaged myself with some voluntary works. During lockdown me and my friends provided cooked foods from our home to helpless people. We collected money from rich relatives and friends for poor people and distributed both money and food for them. I have adopted a few dogs from the street and now they are with me. (IDI.12 Male, 21).

Besides personal volunteer community activities, many were also involved in social groups of their university and community. A female respondent from a public university observed that:

I am a social person and involved in different types of social and cultural activities of my department and hall. Though I need to move to my home (Uttara) from university hostel, I regularly used to come to campus whenever I got chances. I engaged myself in voluntary groups who were helping those families who lost their work due to lockdown. Another group were providing food for the dogs who stayed in campus. I am happy to be part of them. (IDI 16. Female Student, 23).

Seven respondents became involved in religious activities and three respondents started meditation. Interestingly the majority of these were female.

Before getting infected with COVID, I didn't face many problems but afterwards, due to my uncle's death and my illness, I became mentally ill. I had difficulty sleeping at night as I would experience hallucinations, where I would meet my dead uncle and he would talk with me. At that point, my personal life was getting affected, and to overcome it I engaged myself in religious activities which gave me mental peace (IDI 17, Female Student, 23).

Many participants reengaged in their hobbies like singing, painting, writing, playing guitar, indoor games, gardening, cooking and taking care of pets. These activities eventually helped them to be more connected with family and self. Some were engaged in talks related to family responsibilities, something that had not happened before. They informed regarding their recent involvement in following activities:

As most of the time we stay at home so we can engage ourselves in many activities, which we did not think before, such as rooftop gardening, pet rearing, helping mother in household activities, cooking new dishes, reading books, writing poems, learning guitar, taking care of ill family members, taking father's responsibilities and voluntary works (FDG1 & FGD 2).

The findings support that healthy family bonding, social connectivity and institutional supports enhance the social capital of these young adults. Moreover, self-initiated caring activities also played a vital role in coping with the situation for many of them.

4.7 Exploring Opportunities of Virtual Spaces

Productive utilization of virtual spaces

More than half of the respondents made use of online spaces to engage in online courses, webinars and workshops to pass the time during COVID restrictions. Three also took part in competitions hosted online and one took part in a virtually hosted music competition. Respondents reported development of their technological skills through online courses and received certificates. A few respondents engaged in creative extracurricular activities such as learning to play guitar and painting for relief from academic pressure, while others developed business skills through online courses. Three respondents also started their own online businesses to adapt to their changed economic conditions and one reported that the business continued beyond the restrictions:

After passing one year I realized we might not return back to our previous normal life. We have to cope with a new normal world. I started to think to engage myself in some activities. I and my two friends started homemade food supply business. Because for the last few months we stayed at home, I spent more time with my mum and family. I used to help her during cooking, and these inspired me to watch cooking videos from different countries. Still, we are continuing our venture (IDI 9. Male Students, 22).

Respondents also used the opportunity to create or find a new source of income, including one who used his writing skills for this purpose:

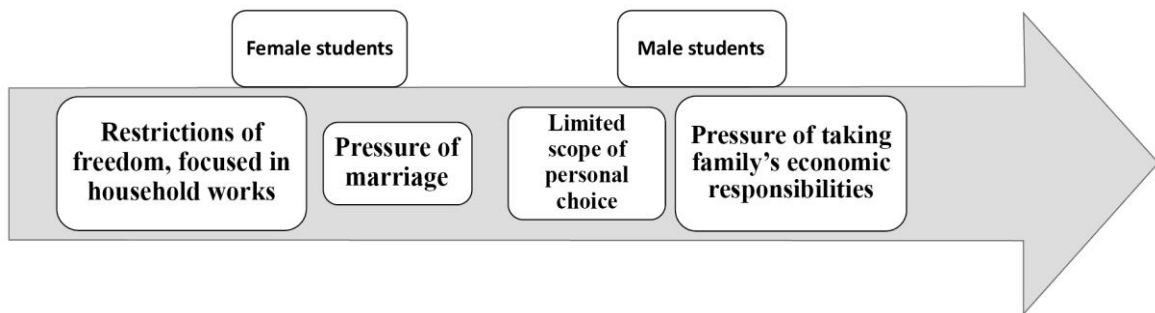
I started participating in online competitions and those were a good cash grab as well a source of skill enhancement. I participated in Business conferences as now I'm studying finance, previously I was a science student. I had no idea regarding business, but these conferences helped me out and enhanced my skills. Later on, I have started content writing for online businesses (IDI 4. Male Student, 22).

One respondent indicated that their knowledge and skills had decreased due to restrictions as they did not have access to their usual face to face debates and competitions.

4.8 Emerged Challenges and Barriers

This study also revealed some family associated barriers faced by respondents when coping with challenges posed by COVID-19. These barriers appeared to be gendered and are summarized in Figure 2.

Figure 3: Gender Differentiation Experiences and Impacts on Life



One female respondent shared her experiences regarding her mobility restriction which stopped her personal income

I came up with a food business which was encouraged by my family in the beginning, but after increase in the COVID-19 everyone started discouraging me and I had no support. I faced a lot of restrictions from my family when I tried to do anything for my personal development. Economically there were a few barriers due to not having any income. It restricted me from doing anything. (IDI.2 Female, 24)

Most female respondents experienced increased pressure from their family for marriage due to prolonged economic instability and uncertainty of academic life. One FGD participant stated:

The education system in rural Bangladesh is very poor. As many girls are married here and the boys have joined in various jobs with their father's and most of them will never return to school. Many girls from the family have been pressured to get married especially those whose parents are ill and aged. We know some cases where due to family pressure and future uncertainty girls agreed to get married (FGD.1)

This immense pressure to marry, which females had avoided while studying is illustrated by one female student:

I should have started my graduate studies (MSS) this year. Now situation has become so uncertain that I am not sure when can complete my graduation as there was no clue about final examination schedule. I am in huge mental pressure from my family members for getting married. Many of my classmates are already married/engaged during the first lockdown period. It seems my future life plans (starting family life after completing education and joining service) are going to change. Not sure how long I can resist my parents if situation continues like this for months. They are also feeling pressure from society and relatives for my marriage as my father is a retired person (IDI 17. Female Student, 23).

With some similarities, most of the male respondents were also worried about their future education should they have to takeover family responsibilities:

I don't know when my final exam is going to happen. I am taking preparation for BCS as I am committed to a girl and her family is giving pressure for marriage. I need to take my family's economic responsibilities as well because my father is going to retire next year. It seems my future life planning is going to ruin. (FGD.1, Male participant).

Thus, Gender differential experiences and impacts were observed regarding coping with the changing situations. While male students were more pressurized for taking families' financial responsibilities, on the other hand female students faced early marriage pressure. Patriarchal gender norms and roles play an important role in influencing family decisions in educational investment. Longer time of closures of educational institutions increased care-related tasks for girls more than boys in many contexts. This also affects female students' ability to continue education in the longer period (World Bank Group, 2020).

5. Summary, Conclusions and Recommendations

All over the world educational institutions experienced difficulties associated with Covid-19. Students were challenged by change to online classes, postponement of teaching, modifications to assessment and online examinations. Our study findings revealed that these challenges were compounded by fear of infection, anxiety associated with witnessing COVID-19 outbreaks all over the world, restrictions on personal freedom, financial hardship, and family health crisis. The impacts were not equally felt by the students who shared their stories. Many students were geographically disadvantaged and economically unable to bear the cost of technology requirements (suitable devices and internet). Our findings revealed a gap between public and private university students particularly who had to leave Dhaka city during the lockdown period. This finding is consistent with other countries like Indonesia where geographical and socio-economic diversity influenced COVID impact on students (Putra et al., 2020). Additionally, our studies also revealed that for every negative impact, there were some benefits. For example, some students who were not financially disadvantaged by online education, thrived in a less pressured, less social environment, while others struggled to cope with the reduced face to face social isolation. Some students found positives in spending more time with nuclear and extended family, increasing their bonds and strengthening their relationships. Some thrived socially in the virtual space and gained new skills online, using them to develop business and improve their finances or engage in creative activities, while others struggled to interact online further increasing their feelings of loneliness.

For both students and teachers, online education and assessment tools were a new chapter in the education sector. Our findings revealed that universities themselves were challenged by the need for a sudden transition to online learning and modifications to assessment styles to respond. Some assessment decisions, like online exams were deemed problematic due to technological challenges and academic integrity. Students mentioned that online open book exams and online assignments were unfair and open to dishonesty.

Increased financial burden was a commonly expressed theme and this created excessive pressure for students at an individual and family level. More specifically, job loss in family members, salary or business shut down leading to reduced incomes at family level, intensified mental stress in students who commonly depend upon their family's income for tuition fees and other educational costs. The study results from students in France, Canada,

and the UK also support our current findings during the COVID-19 pandemic period (Mathilde et al, 2020; Prowse et al, 2020; Lai et al, 2020).

Findings also reveal how COVID-19 often reinforced the traditional gender roles that remain strong in Bangladesh with differentiation in social and familial expectations of young females and males. Males faced family pressure to use their free time to contribute to the family's finances whereas females encountered early marriage pressure. This finding demonstrates how patriarchal social and gender norms and values define gender roles and responsibilities even in a crisis. Interestingly, some male respondents indicated that COVID-19 restrictions that reduced their time out of home (eg. for study, working) provided time and opportunity to help with caring of siblings, and cooking – home tasks being traditionally filled by females. Conversely, one female respondent reported her establishment of a business during restrictions in order to contribute to family finances. These exceptions to the norm illustrate how COVID-19 restrictions had some positive influence on entrenched gender roles.

Both physical and mental health impacts were expressed by student respondents. Prolonged periods at home with reduced physical activity, and long periods of engagement with electronic devices were associated with reported physical changes or health problems such as loss of appetite or increased weight gain, body aches, back, neck and eye pain. However, mental health and wellbeing associated with increased academic pressure, sleeping disorder, personal relationship break-up, fear of infection, mobility restrictions, loss of social connection, and traumatic experiences associated with family and friends' loss to COVID-19 during lockdown periods emerged as most significant. This was manifested in impatience and mood swings, anxiety, depression, self-harm, suicidal tendencies and in some cases other more serious mental illness. Further, browsing repeated face-book posts related to new cases corona infection and death toll, shared memes on social media, fear of corona infection, and uncertainty about education future created anxiety in our university students aged 19 to 24. Our findings are consistent with the study results that have emerged from Iran, China, and Bangladesh (Alizadeha & Sharifi 2021; Cao et al 2020; Khan et al. 2020). Similarly, a study on Chinese students during the epidemic revealed that economic stressors, effects on daily life, and academic delays were positively related to anxiety levels of students (Huang et al, 2020). Rahman et al (2021) found prevalence of suicidal risk among Bangladeshi young population increased significantly and a longitudinal dataset of students conducted before and during

the COVID-19 pandemic showed a 90 percent increase in depression rates compared to the same population just before the pandemic (Giuntella et al 2021).

The underlying socio-economic and health challenges during lockdown or homestay periods influenced students' coping strategies. Despite the challenges identified, our findings suggest that many students were able to utilize their available resources to cope with or adjust to their new normal situation. Both positive and negative coping strategies were employed by the students during the pandemic period. Positive coping strategies are mainly determined by the use of two types of social capital- bonding and bridging. Our study participants coped via their bonding relationships such as: spending quality time with family members, developing close bonds with siblings or socializing with friends and relatives (e.g. through video calls, group chatting, face-book). Virtual connectivity became an important builder of social capital for them in the pandemic. It played an important role in sharing feelings, news information, and pandemic prevention knowledge. This finding is consistent with that of Wang et al (2021) who found in a rural community in China that information technology played a vital role in enhancing social capital of the villages shaping their resiliency during the pandemic. This finding however also highlights the potential for increased impact on those who were not able to access these technologies highlighting the unequal impacts of Covid.

Our study participants also acknowledged the importance of bridging social capital particularly supports from their educational institutions and faculty members for overcoming the challenges they faced. These supports included waiver of tuition fees, financial support, laptops, counseling services and motivational words and deeds. Some of the public university students received financial support from the faculty members and respective departments. Both financial support and mental health support were considered by many respondents as critical to coping with diverse covid impacts. The unequal accessibility and sheer lack of mental health services were highlighted by some: *Regarding mental health, as a student I would like my institution to offer counselling services since almost everyone is suffering from mental health conditions due to this pandemic.* (IDI 16. Female Student, 23).

On the other hand, diverse and multiple self-initiated coping strategies were reported which include religious/ spiritual activities, self-care, meditation, exercise, online business ventures, voluntary activities to help others in the community, increased focus on studies, reengagement with hobbies, avoidance of negative news on COVID-19, increased

Face-book engagement, and learning healthy diet. Negative coping strategies employed by students involved developing a smoking habit, increased dependency on devices and social media, breaking relationships, changed sleeping patterns and abnormal food habits. Positive coping strategies of the students demonstrate that healthy relationship with parents and siblings, living in joint families, close connection with relatives and friends and having a stable family income are protective factors for students against the challenges experienced during COVID-19 outbreak. On the other hand, lack or absence of these factors influenced them in adopting maladaptive practices.

Our study findings also exposed some gender differentiated coping strategies adopted by male and female students. Male students engaged themselves in social and volunteering activities such as collecting money and providing food packages to poor people or families, taking sick people to hospital, reaching food and medicine for many families, taking care of street animals. However, due to mobility restrictions imposed by their parents' female students reported less involvement in such activities. Some female students reported that they were not allowed to go out during lock down periods, compared with males who were tasked with buying food, medicine and other items, tuition, or part time jobs. Consequently, females employed coping strategies like involvement in religious activities, reengagement with their hobbies like singing, painting, writing, playing guitars, indoor games, gardening, cooking and taking care of pets. These activities eventually helped them to be more connected with family and community though these reinforce gender differentiated roles and responsibilities.

Through retrospection and narratives, we were able to deduce that both individual-level and community-level social support contributed significantly toward shaping the coping mechanisms of students and building resilience for dealing with the emerging challenges of COVID-19. This research has shown that social capital (via both individual: bridging and bonding and societal: Linkage) played a significant and positive role in building resilience in university level students during the restrictions imposed by the COVID-19 pandemic. In particular, social connection via information technology becomes an important agent for building social capital in the pandemic for the university level young adults. However, the pandemic and its necessary restrictions, exposed the socio-economic and gender inequalities that currently exist, and, in some instances, these may have reduced access to the supports necessary during this difficult time. Two important supports that emerged in this study were the need for financial assistance to those most in need to

assist them to convert to online education and to survive following loss of income, and mental health services to help students develop strategies to both cope with the impacts and maintain good mental health and provide the support needed should mental illnesses develop or be exacerbated.

To better prepare for other waves of COVID-19 or other pandemics, key investments should be made to:

- Develop a higher education contingency plan that identifies financial and mental health support structures for students
- Ensure a response unit of the Ministry of Education to identify and respond to the diverse challenges encountered by students of all levels.
- Find ways to reduce the gap between economically and geographically disadvantaged students.
- Engage the private sector including banks, mobile companies and development organizations to plan for providing supportive initiatives in their respective areas.
- Provide professional psycho-social counselling services for students, involving them in extracurricular activities to enhance student mental wellbeing (mental health promotion).
- Maintain blended teaching and learning and invest in technology and training of university staff in order to meet the challenges of the 4th industrial revolution.

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