



## Mental Health of Grade 12 Students amid COVID-19: A Mixed Method Study

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### Abstract

The COVID-19 pandemic compelled countries globally to a complete lockdown. This unusual disruption to routine lifestyle has created a sense of anxiety and fear across the globe. Examinations, entrance tests, admissions to schools and colleges were postponed, and they switched to the online mode of instruction. This prevailing uncertainty led to the deteriorated mental health of Grade 12th students. Understanding their current mental health from their lived experiences can lead to better management, decisions from the authorities, and mental health care. The present study aimed to analyze the mental health of 12th-grade students' from their lived experiences during the COVID-19 pandemic. The study employed a mixed-method research design. The quantitative part involved the administration of a questionnaire to 300 students pursuing their 12th grade in Bangalore city. The qualitative part involved a semi-structured interview of eight students and analyzed interview data using interpretative phenomenological analysis (IPA). The study revealed a high degree of mental stress experienced by the participants. Girls' had higher mental stress than boys did. The study described the participant's lived experiences amidst the COVID-19 pandemic in main themes and sub-themes. The main themes found are factors affecting mental health, positive lived experiences, and mechanisms to cope with the crisis.

**Keywords:** mental health, covid-19, grade 12, lived experiences, coping mechanism, pandemic

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## Introduction

Titles The SARS-CoV-2, also known as the COVID-19 first appeared in the city of Wuhan, China (Chahrour et al., 2020). The pneumonia-like disease was highly contagious, due to which the government of China initiated a lockdown on the entire city on January 23, 2020 (Xiang et al., 2020). Despite the measures, the COVID-19 was detected across countries and quickly turned into a global health crisis within a few weeks (Spina et al., 2020). The World Health Organization (WHO) declared COVID-19 a global pandemic on March 11, 2020 (Coronavirus Disease 2019 (COVID-19) Situation Report – 51, 2020). High rates of infectivity compelled some of the worst-hit countries like China, Italy, and Spain to impose lockdowns during the 1st week of March 2020 (Barkur et al., 2020). India reported the first case of COVID-19 in Kerala on January 27, 2020 (Andrews et al., 2020). Considering the fewer positive cases, many researchers wondered if India could escape the COVID-19 infection. A demographic factor with a warmer climatic condition, BCG vaccine, a younger population, and availability of various generic antibiotics made many experts wonder these factors could favor India (Rammohan & Rela, 2020). Slowly the number of confirmed positive cases started to rise in India.

The government of India introduced social distancing to combat the spread of the infection in the large-scale population movement, and on Midnight of March 24, 2020, the Prime Minister of India ordered a nationwide lockdown (Sardar et al., 2020). Due to the highly contagious nature and high-rate transmission of COVID-19 infection, countries were compelled to initiate complete lockdowns. An initiative which had a significant impact on the economy and socio-economic status of countries around the world (Nicola et al., 2020). With a population of 1.3 billion people from diverse states and cultures, India witnessed one of the largest national lockdowns in the world. WHO widely praised and acclaimed it as “tough and timely” (The Lancet, 2020). The strict Lockdown, isolation, and restricted social activities aggravated the mental health conditions within the population (Kaur & Sonali, 2020). Even the WHO expressed its concern about the effect of the pandemic on the public’s general mental health (Zhou et al., 2020). Factors like depression, solitude, paranoia, scarcity of resources, fear of being unemployed, fear of transmitting the disease affect the mental health conditions of the general population. A recent survey by the Indian Psychiatric Society reported that the rise in mental illness during the COVID-19 Outbreak increased by 20% (Kumar & Nayar, 2021). In India, researches on mental health suggest that the pandemic has caused an increase in paranoia, anxiety, display of panic behavior, worrying, difficulty sleeping, and hoarding behavior (Roy et al., 2020).

The Lockdown has negatively impacted more than 91% of the student’s in the world, affecting one-on-one interactive learning with their mentors and peer groups (Lee, 2020). In India, March to May is the month for conducting annual examinations and admission entrance tests. Due to Lockdown, students have no other choice than to prepare for examinations by themselves. Pre-

university board of Karnataka has postponed the grade 12 English examination to April 2020 (Minister, 2020). The government also postponed the scheduled entrance examination to join various professional courses after grade 12. Apart from learning themselves, students were confined to home. It can aggravate their anxiety levels. Some children might display clingy, attention-seeking behavior and dependence on their parents, which impact their interest in education (Jiao et al., 2020; Lee, 2020). The pandemic has disrupted access to basic services such as the closure of playgrounds, clubs, parks, swimming pools, play stations, and social gathering restrictions which significantly reduced the physical activity of the children (Fegert et al., 2020)

With more significance towards flattening the COVID-19 infection curve, less significance given towards students' mental health in India. Closure of all educational sectors created a sense of uncertainty amidst students, especially for students in their Grade 12th and final semester degree programs. The fear of the unknown can lead to a higher level of anxiety (Mowbray, 2020). Covid-19 generated paranoid tendencies, depressive symptoms, marital conflicts, fear, and anxiety among individuals and communities (Kaya & Kosan, 2021). Especially amidst students in Grade 12th with their final year exams postponed and admissions of many students into Universities remaining questionable. National Level Entrance exams for Engineering and Medicine were also postponed, adding further students' prevailing anxiety. People believe that Grade 12 is a crucial academic decision-making year for most developing countries globally, and students' performance in grade 12 makes or breaks their Lives. Therefore revealing their lived experiences in unprecedented times like this gains importance.

In India, the first case of the COVID-19 was reported in Kerala on January 27, 2020 (Andrews et al., 2020), and slowly the number of confirmed positive cases displayed a steep rise. India witnessed one of the largest national lockdowns in the world. But the strict Lockdown, isolation, and restricted social activities aggravated the mental health conditions within the population (Kaur & Sonali, 2020; Kumar & Nayar, 2021). The adolescent phase of life can be described as a stressful period (Arnett, 1999), and displaying an increased vulnerability towards mental disorders. Therefore, the present study was conducted to gain insight into the grade 12th students' lived experiences during the COVID-19 and various challenges affecting their mental health.

The present study adopted mixed method research via survey and interview methods. Parametric analysis and interpretative phenomenological Analysis (IPA) ("Qual. Psychol. A Pract. Guid. to Res. Methods.," 2003), was considered an efficient method to analyze emotionally charged experiences. The phenomenological approach captures the participant's life and their experiences or meaning attached to a phenomenon. Therefore, the present study aimed to analyze the lived experiences of 12th-grade students affecting their mental health, provide insight into students'

positive lived experiences during the pandemic, and suggest ways to cope with the ongoing pandemic.

### Methods

The present study adopted a sequential exploratory quantitative-qualitative mixed-method research design to understand the lived experiences of grade 12 students' mental health (Namey, 2005). As mixed-method helps converge, the data points and diverse perspectives and relationships can be understood. In the present study, the quantitative outputs are triangulated by the interview outputs, strengthening the findings.

### Ethical clearance

The present study sought ethical clearance from the institutional review board (IRB). The ethics application included the details regarding the study participants, assent forms, and consent forms. Participants could withdraw from the study at any time if they are not comfortable participating. Data obtained are encrypted and stored with password protection and are accessible only to the researchers.

### Quantitative method

The study employed a survey questionnaire to collect quantitative data. Researchers used the perceived stress scale (PSS) developed by Cohen and others quite suitable for the present study (Cohen et al., 1983). The study checked the adequacy and feasibility of using the PS scale for the current study with the help of a panel of subject experts. After expert verification, a pilot study was conducted to establish the scale's reliability to a sample of 100 students studying in grade 12. The study analyzed the pilot test data using Cronbach's alpha reliability test and found the internal consistency value of 0.543. For the field study, researchers sent out PSS questionnaires to 500 students pursuing Grade 12 from the colleges of Bangalore city, India, and obtained only 300 successful responses. Out of which 165 were boys, and 135 were girls. Table 1 below presents the items of the PSS questionnaire (Wengraf, 2001). The study employed descriptive statistics and an independent sample t-test to understand the stress level among the students. The researcher used SPSS software (Morgan et al., 2004) for statistical analysis of the data obtained from the PSS survey.

Table 1. \**Perceived Stress Scale*

<b>Perceived stress scale items</b> (Never- 0, almost never- 1, sometimes- 2, fairly often- 3, very often- 4)	
1.	How often have you felt upset because of something that happened unexpectedly in the past month?
2.	In the past month, how often have you felt that you were unable to control the important things in your life?

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3. How often have you felt nervous and “stressed” in the past month?

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  4. How often have you dealt successfully with irritating life hassles in the past month?

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  5. In the past month, how often have you felt that you were effectively coping with important changes that were occurring in your life?

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  6. How often have you felt confident about your ability to handle your problems in the past month?

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  7. How often have you felt that things were going your way in the past month?

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  8. In the past month, how often have you found that you could not cope with all the things that you needed to do?

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  9. In the past month, how often have you been able to control irritations in your life?

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  10. How often have you felt that you were on top of things in the past month?

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  11. In the last month, how often have you been angered because of things that happened that were outside of your control?

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  12. In the last month, how often have you thought about things you have to accomplish?

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  13. In the last month, how often have you been able to control the way you spend your time?

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  14. How often have you felt difficulties were piling up so high that you could not overcome them in the last month?
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\*Item numbers 4, 5, 6, 7, 9, 10, and 13 are to be reverse coded.

Researchers established the face and content validity of the interview items.

### **Qualitative method**

The study employed semi-structured interview techniques to collect data. Interviews provide detailed and in-depth information on the students lived experiences amidst the crisis. Bangalore was one of the most COVID-19 affected cities in India. At the same time Bangalore, being a metropolitan city, hosts people from all over the country. People chose to work here since it has considerably good schools and colleges to educate their children and has the best climatic conditions in the country. Therefore the uncertainty created by the pandemic among these parents and the difficulties faced by the students studying in Grade 12 amidst pandemic gains importance and are to be recorded for better future actions by stakeholders in such conditions. In order to account the details of the lived experiences study selected eight students using convenient purposive sampling and conducted semi-structured interview on an online platform. The study involved only those who were willing to participate. The researcher obtained a parental consent form as well. Researchers found that few parents were not willing to participate. However, within the final sample selected for the study, the economic status, occupational status of parents, and family situation are almost similar. All of them are from middle-class families and have single parents working (usual father). Families are willing to invest in their children to provide a good higher education and have made a few tentative plans.

Table 2 below presents the interview guide items. The corresponding author of this study developed the initial draft of the interview guide, who has a Ph.D. in education and has 20 years of research experience. A panel of experts validated the same, making the final draft available.

Table 2. *Semi-Structured Interview Items*

<b>Semi-structured interview questions</b>	
1.	<p>What were your initial thoughts when you first heard about COVID-19?</p> <ul style="list-style-type: none"> <li>• What were you anxious about? Why?</li> <li>• Did you feel depressed? For what? Why?</li> <li>• Were you under pressure on your performance? Elaborate</li> </ul>
2.	<p>How has this crisis had an impact on your personal and academic life?</p> <ul style="list-style-type: none"> <li>• What are the positive sides of the covid-19 situation? Why? How?</li> <li>• How was your relationship with your parents?</li> </ul>
3.	<p>How did you cope with the situation?</p> <ul style="list-style-type: none"> <li>• What are the preventive measures you took for your hygiene?</li> <li>• How did you come to know about covid-19 precautions?</li> <li>• What did you do during your free time? Why? How?</li> </ul>

The study took consent from both parents and students for interview data before collecting the data. The study assured the confidentiality of the data for all the participants and parents. The researcher assigned pseudonyms P1, P2 ...P8 to identify the participants and to maintain confidentiality. The study cleared the interview transcripts data revealing participants' identities. The data was stored in secured drives that only the researchers could access. Participants could contact the researcher if they felt discomfort during or after the scheduled interviews. The study also provided contacts of college counselors in case the students needed any guidance and counseling help. Table 3 presents the demographic characteristics of the interview participants. Data that have been analyzed must go here.

Table 3. *Participants' Demographic Characteristics*

Participant	Gender	Age (Years)	Subject stream
P1	M	17	Science
P2	F	17	Commerce
P3	F	17	Science
P4	M	17	Science
P5	M	17	Commerce
P6	F	18	Science
P7	M	17	Arts
P8	M	17	Commerce

The study followed an interpretative phenomenological analysis (IPA) (Smith & Osborn, 2015). IPA provides a comprehensive understanding of lived human experiences using a small-scale homogeneous analysis of a sample (Todd et al., 2010; Žiaková et al., 2020). The researcher used Google-meet video-conferencing platform to conduct the interview and transcribed the verbatim (Nehls et al., 2015). The researcher, the corresponding author of the article, conducted the interview. The interviewer holds an MPhil and Ph.D. degree in education. In addition to this, the interviewer holds a postgraduate diploma in guidance and counseling. The researcher began the interview with rapport building session with a few general questions to make the participant feel socially comfortable with the interviewer. The researcher explained the purpose of the study and cleared their doubts at the beginning of the interview. On the spot, prompts were provided to elicit more information from participants during the interview. The researcher redefined the subsequent interview questions based on the inputs obtained for each question. The researcher jotted down the notes about participants' comments and the researcher's thoughts during the interview. Researcher noted that, neither the participants nor the parents had any infected person in the family. The researcher was memoing the important ideas which came out in the interview as soon as possible after an interview.

Subjected the interview transcripts through the following steps during the analysis,

- Researchers read the transcripts multiple times to understand each participant's profile, and this process continued until they reached a saturation point where no new ideas were generated.
- Researchers recorded the emerging themes and new ideas provided by each participant.
- Researchers re-read the transcripts to arrive at a title for each emerged theme and sub-themes and eliminated any subjectivity statements made in the notes.
- Further condensing sub-themes obtained the essence from each lived experience of the student
- Researchers grouped the related themes across the transcripts to maintain face validity. Researchers combined refined the main themes and sub-themes to ensure that the final analysis matched the participant's profile and that the data presented was justified.

## **Results**

As the study followed a mixed-method design, the presentation of results is in two sections. Section-1 dealt with quantitative analysis, and section-2 dealt with qualitative analysis.

### Section-1. Quantitative Analysis

The study employed Descriptive and Parametric statistical analysis for the data obtained through the survey tool Perceived stress scale. The results of which are discussed below.

Figure 1 and tables 4 and 5 below present the results of descriptive data analysis conducted using the perceived stress scale. There were 165 boys and 135 girls in the sample of 300 students. Girls had higher mental stress than boys did (MB < MG). That is MB = 27.91 with SD = 1.509 and MG = 30.22 with SD = 2.05. The mean stress score of the total sample is found to be 28.95 (SD = 2.112), indicating high stress among grade 12 students during the pandemic time. From the percentile score, it is inferred that 25 % of the scores are below 27 and 50% are between 27 and 31, and 25 % are above 31, indicating experience of high mental stress among grade 12 students. Discussion on findings must be related to previous research.

Table 4. *Descriptive Statistics of Perceived Stress Score*

N		Mean	Std.	Variance	Range	Min.	Max.	Percentiles		
Valid	Missing		Deviation					25	50	75
165	0	27.91	1.509	2.278	6	25	31	27	28	29
(Boys)								7		
135	0	30.22	2.05	4.204	6	27	33	31	31	31
(Girls)								8		
300	0	28.95	2.112	4.462	8	25	33	28	31	31
(Total)								7	5	

Table 5. *Item Wise Descriptive Statistics*

Perceived Stress	Q1	Q2	Q3	*Q4	*Q	*Q6	*Q	Q8	*Q	*Q	Q11	Q1	*Q	Q1
					5		7		9	10		2	13	4
Very often	150	105	135	30	0	0	0	150	0	0	105	150	0	150
Fairly often	135	180	105	30	0	0	0	150	0	0	195	105	0	150
Sometimes	15	15	60	0	45	45	0	0	0	60	0	45	15	0
Almost never	0	0	0	105	150	165	165	0	105	150	0	0	195	0
Never	0	0	0	135	105	90	135	0	195	90	0	0	90	0
Percentage	86.25	82.5	81.25	26.25	20	21.25	13.75	87.5	8.75	22.5	83.75	83.75	18.75	87.5



Mean	3.4	3.2					0.5	0.3				3.3	0.7	
(N=300)	5	3.3	5	1.05	0.8	0.85	5	3.5	5	0.9	3.35	5	5	3.5
SD	0.5	0.5	0.7		0.6		0.5	0.5	0.4	0.7		0.7	0.5	0.5
	9	6	7	1.32	8	0.65	0	0	8	0	0.48	3	4	0

Subtitles From table 5, it is clear that questions number 1, 2, 3, 8, 11, 12, and 14 have greater than 80 % agreement by the respondents to the positive statements describing stress. Similarly, questions number 5, 7, 9, and 13 have less than 20% agreement by the respondents to the negative statements indicating the high-stress level. The mean value for each positive item is greater than three and less than 1 for each negative item indicating a high-stress level among the students. The number of students indicates various perceived stress levels for each item of the scale presented in Figure 1 below. Must be in lower case and suitable to the mentioned format. Other sub-sections need to follow the same format.

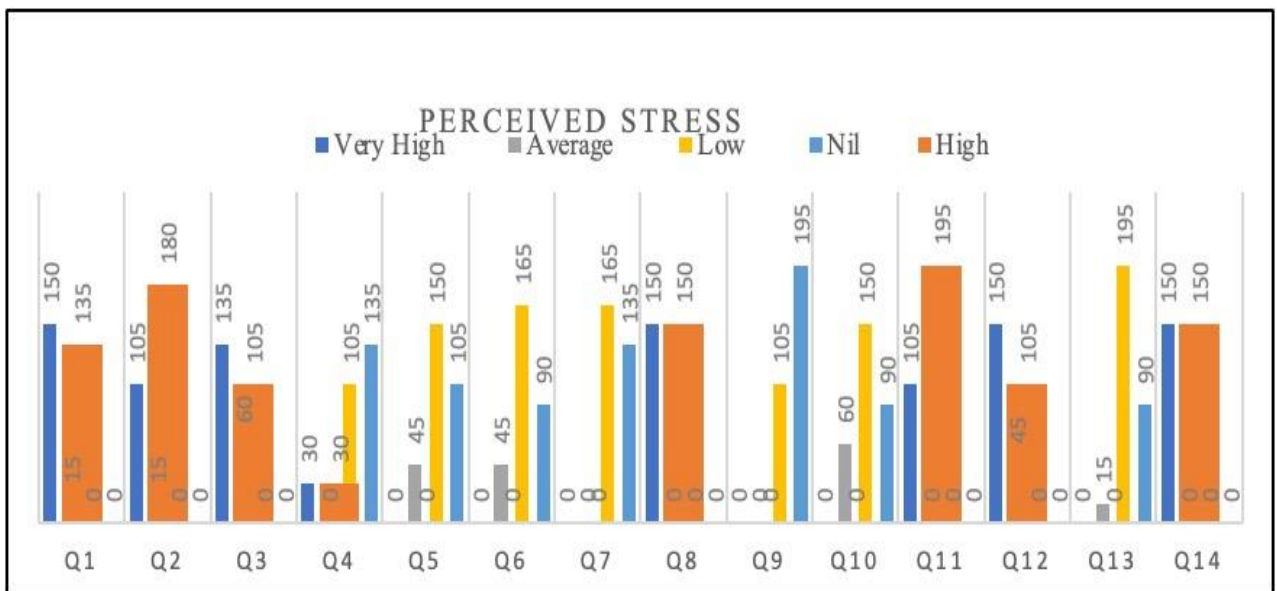


Figure 1: Perceived stress level

The independent sample t-test shows that there is a statistically significant difference in the perceived stress experienced by boys and girls ( $t_{10.910} (241), p < 0.05$ ). Table 6 below presents the results of the independent sample t-test.

Table 6. *Showing The Results of The Independent Sample t-Test*

		Levene's		t-test for Equality of Means						
		Test for		t	df	Sig.	Mean	Std. Error	95%	
		Equality of							Sig.	Difference
F	Sig.	Variances		(2-	Difference	Difference	Interval of the			
							tailed)	Lower	Upper	
Perceived stress	Equal variances assumed	24.320	.000	11.241	298	.000				2.313
	Equal variances not assumed			10.910	240.536	.000	2.313	.212	1.895	2.731

## Section-2. Qualitative Analysis

The study employed Interpretative phenomenological analysis for the data obtained from semi-structured interviews and the results discussed below. The study was able to come up with three main themes; (1) Influence on mental health, (2) Positive experiences, and (3) coping with crisis and subthemes such as Situation anxiety, depression, competition stress, study time, parental support, systematic routine, preventive measures, and entertainment.

Table 7 presents the themes and sub-themes from interpretative phenomenological analysis conducted for the semi-structured interview data.

Table 7: *Showing the Themes and sub-themes*

1. Influence on mental health
a. Situation anxiety
b. Depression
c. Competition stress
2. Positive experiences
a. Study time

- 
- b. Parental support
  - c. Systematic routine
3. Coping with crisis
    - a. Preventive measures
    - b. Entertainment
- 

### **Influence on mental health**

This theme provides a description of the participant's mental health affected due to the COVID-19 pandemic. The researcher questioned the participants about their initial responses to the pandemic. Participants elaborated on the experiences of the Lockdown, restrictions, and social distancing that had an impact on their mental health.

**Situation anxiety:** Most participants displayed immediate anxiety symptoms, and many described their anxiety as draining physically and mentally.

P1: I never expected the pandemic to be this contagious, and ...I thought India might not be affected... that much based on the number of positive cases initially [...]... The Lockdown was completely unexpected, and I could not engage in my routine or meet my friends [...] I do not know if it would get any better or worse, and I am always thinking about it...

P2: I had plans of applying abroad, and... I always wanted to pursue my business studies in the U.K, and the sudden Lockdown and restrictions on traveling caught me by surprise... I could not come to facts with the entire situation. I was anxious about my admissions and the functioning of the Universities abroad.

P1 was anxious about the COVID-19 becoming worse and its impact on his social life. Whereas P2 is concerned about her higher studies abroad and displayed anxiety symptoms during the course of the interview.

P4: I wanted to crack my NEET exams and want to pursue my medicals. The postponement of entrance tests, delays in exams, and admissions have created a sense of panic. I cannot sleep at night either nor have my food on time.

P3: I live with my grandparents, and my parents are abroad [...]The elderly are at a higher risk than the young, and it's scary to know I could be a potential carrier to my grandparents or put their lives in danger every time I step out of the house.

P4 reported having anxiety due to the postponement of the NEET exam and experiencing irregular sleep and eating at an irregular time. Irregular eating and sleeping habits have a known correlation with mental health (Acharya et al., 2018). P4 cannot concentrate on studies, and their confidence

level has decreased. This is also in agreement with the earlier study conducted by Martin (Martin, 2010). P3 fears that she might infect her grandparents, and given their age, it might be fatal for them. Her anxiety was triggered by the belief that she might survive the pandemic and it could affect her grandparents.

**Depression:** Some participants also displayed mild-to-moderate symptoms of depression; the enclosed lifestyle, restricted social activities, and isolation have been overwhelming for some participants. Many of their peer relationships were affected, resulting in unexplainable emotional breakdowns.

P2: [...] I could not come to terms with what was going on in life [...] I feel lonely [...] I experience constant emotional breakdown; I lock my room and cry for no reason.

P6: [...] I do not know where I am heading in my life; I feel like I have no one [...] I could not process my future goals nor my feelings. It is a mixture of emotions; this uncertainty also distracts my concentration in my studies.

P6 displayed a feeling of living a meaningless life and losing hope, a common symptom of depression. In contrast, P2 is experiencing constant emotional breakdowns because of her remarkable enclosed life and frustration. She also finds it difficult to focus at times. She is over-stressed and loses mental balance (Zuckerman, 1989).

P1: It feels very sad; I cannot meet my friends and cannot afford good internet to stay in touch with them through social media. I feel very lonely most of the time... [...] I cannot have any revision sessions with my friends for entrance exams...

P1 was affected by the abrupt restrictions on his social life. Not being able to meet his friends or stay in touch with them has made him sad lonely, and he is losing out on his study session

**Competition stress:** Students in Grade 12th are to face numerous competitive tests like NEET, JEE, GATE, and CET for higher educational studies. The abrupt lockdowns resulted in the closure of many institutions and the postponement of many entrance tests. This can aggravate symptoms of stress among the Grade 12th students, and many students experience stress as they foresee their admissions might delay. They kept browsing on the internet to understand the situation and the likelihood of occurrences of their entrance examinations. This is in agreement with the earlier study conducted by Jacobson that excessive browsing will affect mental health (Jacobson et al., 2020).

P4: I was preparing for the entrance test for the past two years, and because of the COVID-19, the test was postponed [...] I started stressing out, and my migraine got worse [...] I may miss out on an entire year

P3: [...] My connectivity was poor, and I was not able to access study resources online, and I had my entrance tests coming up [...]; my preparation was severely affected [...] I had enrolled in tutorials for this test (CET) [...] I started having constant headaches.

P4 and P3 both were preparing for their entrance tests. P4 has been preparing for the past two years, and the sudden postponement of exams has aggravated his prevailing exam anxiety adding to his stress. In contrast, poor internet connectivity has affected exam preparation for P3.

P5: [...] Physical activity was different; I could not enroll myself in any clubs or play sports with my friends [...] I feel my physical fitness was declining, and I wanted to play for the State in the coming year. It was very stressful to think all these years of hard work might be in vain.

P7: [...] My cousins in the family all were able to obtain good grades in their 12th board exam, and my family expects me to secure distinction [...] With the current situation, I am unsure whether I can meet my parent's expectations and If I get a lower percentage, I might not get admission in a good college.

P5 has to maintain his physical form for his State-level selection, and the Lockdown has affected his fitness; he is missing regular practice. P5 is stressing-out that he might not be able to stand out during his selections. P7 is facing family pressure; all his cousins have obtained good grades in their grade 12thboard exam; the ongoing uncertainty in exams adds to his prevailing stress.

Based on the interpretation of the scripts above, the COVID-19 pandemic and the various restrictions imposed have had a significant mental impact on the Grade 12th Students. Many participants were faced with significant levels of anxiety, stress, and depression.

### **Positive experiences**

The Participants also described some positive experiences that evolved during the COVID-19; many were able to convert this into a positive opportunity. Students were able to connect with their families, work on their hobbies, study more, and lead a healthy lifestyle. Students were able to utilize this crisis for a positive transformation; they valued nature, humanity, and family (Kaya & Kosan, 2021).

**Study time:** The Lockdown also provided students with plenty of time at home to study. Some students utilized this time to prepare for their entrance tests.

P2: Because of the pandemic, I have more time to prepare for my entrance tests abroad [...]. I started looking at various Universities offering business studies in the U.K.

P4: [...] restrictions at home also provided me with plenty of time to revise my content knowledge [...] I was solving papers and reading more [...] I had Friends on the phone call for group revision

P2 and P4 both utilized this time for their test preparations.

**Parental support:** The imposed lockdowns provided more parent-child interactions. Participants experienced more time with their parents and bond with their families. Parents provided emotional, moral, and financial support during this crisis period (Kaya & Kosan, 2021).

P5: My dad usually works late, and I rarely get to meet him [...] because of this pandemic, he works from home, and I got to spend more time with him [...] most of the household chores were taken care of by my family so I could focus on myself.

P1: I spent more time with my parents [...] they made me feel less lonely and comforted me emotionally

P7: My parents work late, and I usually don't get to spend much time with them [...] After a long time, we were able to sit together, talk, and share conversations [...] I feel like I got to know them more

P5, P1, and P7 reported facing more time with their parents. Each participant bonded with their parents in their respective ways. Parents provided their children with emotional support, reassurance, and counseling to ensure good mental health.

**Systematic routine:** The pandemic also allowed many participants to re-organize their lifestyles together. Participants reported that they spent significant time in self-reflection and scheduling their daily routine.

P5: I can rest for longer, get more time for myself, and my travel-time to school has reduced [...] I read books, eat healthily, and keep my body and mind stable.

P3: I have scheduled my daily routine; its more organized [...] I explored my talents and hobbies and worked on my music, which is also my passion

P8: It is very relaxing, and I wake up early, have my morning walks on the terrace, and enjoy my view [...] It is also a stress-relief from school and homework

### **Coping with crisis**

This last theme reports the participants' various mechanisms to cope with the pandemic situation. It aligns with the study's objective to understand how the Grade 12th students are managing COVID-19. It explores the various measures used by participants to ensure they are physically and mentally sane (Galea et al., 2020). A study conducted by Kaya and Kosan (2021) found coping mechanisms such as reading a book, spiritual orientation and maintaining hygiene.

**Preventive measures:** Most participants reported they followed WHO's guidelines and TV news channels to ensure maximum preventive measures to keep their families and themselves safe.

P4: [...] I use sanitizer regularly and make sure I wash my hands before eating [...] Refrain from going out, refrain from ordering food online, and go out only when necessary

P2: [...] wearing masks if I go out, I maintain social distancing and use cashless payments whenever necessary.

P3: [...] washed my clothes every time I stepped out, showered, drank warm water, and inhaled steam at night.

P4, P2, and P3 followed preventive protocols, sanitizing, washing hands, and other health remedies to stay safe.

P8 reported switching to an alternative healthy lifestyle to keep himself fit. He looked at this as an opportunity to transform himself.

P8: [...] Started yoga at home, meditation, and eating healthy as possible [...] I also work out at home to keep myself fit [...] I used to skip breakfast sometimes during school, and my lunch was not great [...] Now I get good home-food and regular-sleep

**Entertainment:** In order to cope with the crisis, the participants also engaged themselves in various leisure activities. They reported engaging with their hobbies and exploring other means to socialize with their peers.

P8: [...] I started using zoom video calls, texts, and I am on Instagram these days... [...] gaming online with my friends.

P5: [...] YouTube and Netflix with family [...] I also binge-watch series to distract myself from pandemic news.

P5 and P8 reported that they used social media to keep themselves distracted and overcome boredom, and earlier studies revealed that isolation leads to boredom (Brooks et al., 2020). P4 worked on exploring his articulation skills, writing poems, and reading books.

P4: I like to read and write; I started writing poems whenever I am free [...], staying in constant touch with friends via social media.

P1 turned towards nature for his daily leisure. He also ensures daily physical activity to maintain his mind and body health

P1: [...] Taking morning walks, enjoying the nature [...] maintaining my Garden

## Discussion

The present study aimed to provide a detailed account of the mental health status of Grade 12 students amidst pandemic. The mixed-method research approach revealed the mental health issues faced by the students during the pandemic. Measurement of academic stress among Grade 12

students revealed that almost 80 % of the students suffered from mental illness due to situational anxiety, perceived academic stress, and depression. Survey results found that girls' mental health is more affected than boys are. This could be due to prevailing gender stereotypes coupled with pandemic uncertainties. The present study's findings add to the adolescents' mental health research by interpreting the lived experiences of Grade 12 students during a pandemic. The interview participants of the present study reported that the common symptoms of their mental ill-health are anxiety, depression, and stress. However, their mental ill-health is the prevailing (chronic) uncertainty of the pandemic, postponement of important academic decisions, frustration. The mental ill-health is due to uncertainty with their entrance tests, admissions into Universities, fear of getting the covid infection, and spreading infection. Stagnated lifestyle and frustrating routines have increased their anxiety. The restricted social movements, isolated lifestyle, and not meeting friends have also created a sense of loneliness. It is evident from the earlier study that loneliness and depression are strongly associated (Hakulinen et al., 2018; Wakefield et al., 2020), loneliness can predict depression (Cacioppo et al., 2010), and individuals felt anxiety and fear due to covid-19 (Kaya & Kosan, 2021). Lack of social movement and communication, the 12th Graders experiencing loneliness has slipped into depression as observed by the researchers during the study. Simultaneously, the study also found that participants could turn the crisis into a positive transformation, and many tuned towards nature, eating healthy, and staying fit.

Students also looked at the postponement of exams and Lockdowns as an opportunity for extended study time. The confinement also provided an opportunity for family bonding (Bruining et al., 2020) and parental support. Students experienced emotional and financial support from their family members. Most of the participants adhered to the TV-NEWS guidelines regarding coping with crisis, wearing masks, sanitizing hands, social distancing, and indulging in healthy eating habits. Contrary to it, the negative news and limited information caused fear and anxiety in the community (Bao et al., 2020; Shigemura et al., 2020).

The present study revealed the importance of understanding the mental health of grade 12 students due to pandemics and the need for implementing stronger mental health services. Provisions, such as individual accessible student-guidance service cells, organized systems for examinations, scheduled time-table to reduce mental stress, timely and accurate updates of schools functioning and activities, mainstream media coverage on mental hygiene, telehealth counselling services (Zhou et al., 2020), better policies from the government to ensure stress-free academics. This is also in concurrence with the study conducted by Kaya and Kosan (2021), who reported a list of psychosocial interventions and psychotherapeutic interventions. Students in grade 12 make crucial career decisions, and the current pandemic can only aggravate their mental strain. Such issues are often un-recognized under quantitative investigations; hence, the qualitative approach helped. It is



also essential to address such micro-level issues within different age groups, especially students under 17-18 years, to take measures in the case of any similar pandemics.

## **Conclusion**

The study brought out the lived experiences of 12th-grade students affecting their mental health. The quantitative result clearly showed the high level of anxiety experienced by the students of grade 12 amid the Covid-19 pandemic, and girls had more anxiety than boys did. Qualitative analysis, apart from the negative experiences of grade 12 students, provided insight into the positive lived experiences of students during the pandemic and suggested ways to cope with the pandemic. The mixed-method design strengthened the findings of the present study. However, there is a need to know more facts about the lived experiences of 12th-grade students with a large sample to reach better cope mechanisms. The study identifies the mental health status of grade 12 students during a pandemic and emphasizes the need for creating a conducive environment for students to study peacefully. It is possible only when parents provide psychosocial support needed by their wards and school boards provide clear directions for their future. The government takes legitimate actions and provides students with security for life. Create opportunities to help them in their mental and physical hygiene. The study is limited to the lived experiences of 12th-grade students only. Some studies were conducted during pandemic on various social phenomena, pandemic preventive measures, etc. As 12th grade is a crucial point in students' lives since that decides their future, there is very little research done on it; thus, knowing their lived experiences will help schools promote better mental health and hygiene to the grade 12 students.

**Ethical Approval:** *This research was conducted with the permission of the research conduct ethics committee, Christ University, with decision no CU: RCEC/66/11/21 dated 20.03.2020*

**Conflict Interest:** *There is no conflict of interest among the authors*

**Authors Contributions:** *The second author provided technical assistance such as data saving, formatting, literature review, introduction, etc. The corresponding author contributed with the idea to complete the entire work.*

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