

Mental health of Indian Women During COVID-19: A Case Study of a 25 Year Old Student Journey Through depression and emotional challenges.How Indian women have build resilience and grit in the pandemic.”

Submitted By - Smita Shukla Misra (Research Scholar)

Kalinga University Raipur

Guided By - Dr .Harsha Patel

Abstract

The COVID 19 pandemic had a profound impact on mental health across the globe, disproportionately affecting women in India due to socio - cultural ,familial and emotional stressors.This case study explores the psychological journey of a 25 year old Indian female student who experienced clinical depression during the pandemic. Facing family conflict, academic stress and the emotional fallout of a breakup ,she initially resorted to medication, later transitioned to therapy, and eventually reintroduced pharmacological treatment as a part of healing journey.Using qualitative analysis ,this study highlights her emotional struggles ,coping strategies ,and path to recovery.The finding reflect broader patterns of resilience among Indian women in the times of crisis and emphasis the importance of culturally sensitive mental health support for women

Keywords : Indian Women, mental health, depression,COVID -19, resilience, therapy, family.

I.INTRODUCTION (HEADING 1)

The COVID -19 pandemic disrupted daily life worldwide, Placing an enormous psychological burden on individuals, particularly women. In India, traditional gender roles, limited access to mental health services, and family expectations further intensified these effects.Young women, especially students themselves suddenly removed from academic environments and forced to return to family homes where unresolved tensions could surface.For many ,these transitions created emotional and psychological distress that exceeded pre exciting challenges.

This paper presents the case of Rhea(Name changed),a 25 year old postgraduate student who experienced clinical depression during the COVID-19 lockdown.Rhea returned to her family home in Delhi when her university closed, where she faced ongoing conflicts between her parents and difficulty focusing on her studies. Simultaneously, she went through a breakup that compounded her sense of isolation and emotional turmoil.She began experiencing depressive symptoms such as fatigue ,hopelessness, difficulty concentrating, and frequent crying spells.After starting meditation she later paused it on her own but realised she needed additional support and began therapy.Over reintroduced medication under psychiatric guidance.

Rhea’s case exemplifies the psychological challenges faced by Indian women during the pandemic and how therapy, combined with pharmacological support, can facilitate Long term recovery.Through her story, this study explores themes of identity ,emotional resilience, and the complex path toward mental health recovery during a time of global crisis.

Literature Review

Impact of COVID - 19 on Mental Health of Indian Women

The COVID - 19 pandemic triggered a global mental health crisis, exacerbating pre-existing mental health challenges, particularly for women in low- and middle- income countries like India.the psychological toll of the pandemic on Indian women has been profound ,as they are often responsible for maintaining the emotional and physical well- being of their families, a burden that became heavier during lockdowns (Sharma& Meena , 2020).The stress of managing household responsibilities, dealing with financial instability, and balancing professional duties amidst the pandemic has led to increase in anxiety, depression, and other mental health concerns among Indian women (Kumar et al.,2021).

Indian women ,especially young adults, often experience unique stressors due to cultural expectations of familial roles, educational pressure, and social stigma surrounding mental health.For many young women, the pandemic also meant returning to family homes where they were exposed to unresolved familial tensions.These tensions could escalate ,contributing to psychological distress.In addition to the psychological impacts, the closure of schools and universities significantly disrupted students academic trajectories, leading to isolation, academic, anxiety, and heightened emotional struggles (Patel et al., 2020).

Depression and resilience in young Adults

Depression among young adults has been growing concern, particularly as they navigate significant life transitions, such as university education, entering the workforce, and managing complex family dynamics. The onset of depression in young women is often linked to a combination of biological, psychological, and socio-cultural factors, including hormonal changes, academic pressure, and relationship stress (Saxena et al 2018). The closure of educational institutions during the pandemic further exacerbated these challenges by disrupting students' sense of routine, social connections, and academic achievement, which are crucial for mental well-being (Gupta et al 2020).

Despite these challenges, resilience has emerged as a key theme in understanding how individuals cope with adversity. Resilience refers to the ability to adapt to stress and recover from difficulty experience (Luthra, 2006). Young adults, particularly women, have demonstrated resilience by utilising coping strategies such as social support, engaging in hobbies, and seeking professional help. Research has shown that women, in particular, often demonstrate higher levels of resilience through communal coping, emotional expression, and a strong sense of responsibility for others (Rao et al 2020).

Role of therapy and Medication in Depression Treatment

The treatment of depression generally involves a combination of psychotherapy and pharmacotherapy. Cognitive behavioural therapy (CBT) and interpersonal therapy (IPT) are widely recognised therapeutic interventions for depression, focusing on identifying negative thought patterns and improving interpersonal relationships, respectively (Beck, 2016). In India, however, access to therapy has traditionally been limited, especially in rural or semi-urban areas. This has led many individuals, particularly women, to seek out alternative forms of support, such as informal counselling from family or community members (Jadhav & Chaturvedi, 2017).

In cases where depression is more severe, medication such as selective serotonin reuptake inhibitors (SSRIs) or serotonin-norepinephrine reuptake inhibitors (SNRIs) is often prescribed to manage symptoms. While medication can be effective, it is often accompanied by challenges, such as stigma surrounding psychiatric treatment and concerns about side effects. Many individuals, especially in conservative societies like India, may discontinue medication prematurely or choose not to pursue pharmacological treatment due to societal pressure (Saxena et al., 2018).

The combination of therapy and medication is widely considered the most effective treatment for moderate to severe depression, particularly when both forms of support are provided in a culturally sensitive manner. This integrated approach is essential in helping individuals like Rhea achieve long-term recovery and manage the complexities of mental health in the context of family dynamics and societal expectations (Chowdhury et al 2021).

Cultural and Familial Influences on Mental Health.

Cultural and familial factors play a significant role in shaping mental health experience and treatment-seeking behaviour, in Indian women. In traditional Indian society, women are often expected to prioritise family obligations, sometimes at the cost of their personal well-being. This expectation, combined with social norms around gender and mental health, can delay help-seeking behaviour and prevent women from accessing necessary mental health services (Patel et al., 2020).

Parental conflict, as experienced by Rhea, can further exacerbate mental health challenges. Research has shown that exposure to familial conflict during critical developmental stages can increase the risk of developing depression, anxiety, and stress (Hammen, 2005). For young women, the home environment becomes a key source of emotional support and, at times, emotional strain. The strain of balancing academic pressures, personal relationships, and familial conflicts can create a toxic environment for mental health, particularly when coping strategies are not readily available or accessible (Rao et al., 2020).

Conclusion of Literature Review

In sum, the literature reveals that the mental health challenges faced by Indian women, particularly young students, during the COVID-19 pandemic were exacerbated by familial tensions, academic disruption, and societal expectations. While many women faced heightened depression and anxiety, they also demonstrated remarkable resilience, often relying on social support, self-help strategies, and therapy. This case study of Rhea provides insights into the complexities of mental health among young women in India, offering valuable lessons for how to address these challenges in a culturally sensitive manner.

References

- Beck, A.T. (2016). Cognitive therapy and the emotional disorders. Penguin.
- Chowdhury, S., Dutta, S., & Banerjee, S. (2012). Integrating psychotherapy and medication for depression in India: A comprehensive review. *Journal of psychological studies*, 15(2), 134-150.
- Gupta, R., Sharma, R., & Jain, R. (2020). The mental health impact of the COVID-19 pandemic on young adults in India. *Indian Journal of Psychiatry*, 62(5), 453-459.

- Hammen,C.(2005).Stress and depression.Annual Review of Clinical Psychology,1,293-319
- Jadhav, S.K.,&Chaturvedi ,S.K(2017).mental health in India:Cultural considerations and treatment barriers.Asian Journal of psychiatry,29,121-125
- Kumar ,P.,Verma ,R.,&Sharma ,K.(2021).The impact of COVID-19 on the mental health of Indian women.A qualitative study.International Journal of women's health,13,41-49
- Luthar,S.S.(2006) Resilience in development:A synthesis of research across five decades.Development and Psychopathology ,18(3),745-750
- Patel ,V., Chowdhury ,N.,& Chatterjee, S.(2020).Mental health and the pandemic in India: Impact and implications.The Lancet Psychiatry 7(4),330-332
- Rao, T.S.S., Ayasarala ,S.P.,& Raghunath ,R.(2020).mental health resilience in Indian women.The Impact of culture ,family and community.Indian Journal of social Psychiatry,36(3),184-190
- Saxena ,S.,Sharan ,P.,&Suman.(2028).Gender and mental health.A review of the Indian Context .Asian Journal of Psychiatry,31,122-126.
-

Methodology

Research Design

This study employs a qualitative case study design, which is appropriate for exploring the complex, context -dependent experiences of individuals within their real - life settings(Yin.,2018). A case study methodology allows for an in depth examination of a single participant, providing rich, detailed data that highlights the intricacies of their mental health journey, coping mechanisms, and recovery.This approach is particularly useful in understanding the lived experience of young women in India during the COVID - 19 pandemic, where cultural ,familial, and social factors influence psychological well-being.

Participant

The participant in this case study is Rhea (name changed),a 25 year-old postgraduate student from Delhi,India.Rhea was selected through purposive sampling, which allowed for the inclusion of an individual whose experiences directly related to the research questions .She had a documented history of experiencing depression during the pandemic and was willing to share her journey through interviews, making her case ideal for this research.

Rhea's background includes experiencing academic pressure, family conflicts, relationship struggles, and emotional turmoil during the pandemic, which are key factors influencing her mental health .Her case provides a window into the emotional and psychological struggles faced by young women in India during the pandemic's well as their strategies for recovery and resilience.

Data Collection

Data were collected through semi-structured interviews and personal reflections shared by Rhea over a period off three months.The interviews were conducted via video conferencing platforms, considering the ongoing pandemic restrictions.The interview guide was developed to explore key areas, including:

- The onset of Rhea's depression during the pandemic.
- Her coping strategies (e.g.,medication, therapy, self -care)
- The role of family dynamics and parental conflict in her emotional well-being
- Her relationship struggles and breakup experience
- Her journey towards recovery and current state of mental health.

Additionally ,informal communication via text messages and social media interactions were also considered as supplementary data sources, providing insights into her emotional state during different phases of the study.

Ethical Considerations

This study followed strict ethical guidelines to ensure the confidentiality and well-being of the participant .Rhea provided informed consent before participating, and her anonymity was maintained throughout the study by using a pseudonym.She was informed about her right to withdraw from the study at any time without any repercussions.The data collected were stored securely, and only aggregate findings were reported to ensure her privacy.

Data Analysis

The collected data were analysed using thematic analysis (Braun&Clarke, 2006).This method involved identifying and interpreting patterns or themes across the interview .The process of analysis included:

- Familiarising with the data by reading through transcripts multiple times.
- Coding the data based on the key themes related to depression, resilience ,family, dynamics. therapy, and recovery.
- Organising the codes into broader categories and analysing the relationships between them.
- Drawing connections between Rhea’s experience and exciting literature on mental health, gender, resilience during COVID-19

Case Description & Analysis

Background of Rhea

Rhea is a 25 year old postgraduate student from Delhi, India, who was pursuing her degree in social science before COVID-19 Pandemic disrupted her academic life.Due to the lockdown, she returned to her family somewhere she had to adapt to a new routine.Rhea had a stable academic record before pandemic, but the sudden shift in her daily environment marked the beginning of significant emotional struggles.Her home environment, marked by frequent conflicts between her parents, became a source of tension.The isolation, coupled with her academic pressure, led to the onset of depression.

Onset of depression During Pandemic

Rhea’s depressive symptoms began to manifest soon after returning home. Initially ,she experienced feelings of sadness, isolation, and emotional fatigue.She found it difficult to concentrate on her studies, and academic performance began to suffer.The constant arguments between her parents exacerbated her emotional distress, leaving her with a sense of helplessness and hopelessness.At this point,Rhea began experiencing sleep disturbances, loss of appetite, and a general disinterest in activities she previously enjoyed.

Her relationship with her boyfriend also became strained during the lockdown, contributing to her emotional turmoil.In the middle of the pandemic,Rhea went through a breakup, which intensified her feeling of sadness and abandonment.This person marked the peak of her depressive symptoms, and she began to withdraw socially, feeling disconnected from her peers and support network.

Medication and Therapy

Rhea’s first response to her depressive symptoms was to visit a psychiatrist, who prescribed antidepressants medication to help manage her symptoms.Initially ,Rhea adhered to the prescribed medication, and it helped alleviate some of her symptoms, such as emotional numbness and insomnia.However ,after a few weeks, she stopped taking the medication without consulting her doctor, as she felt embarrassed about taking a psychiatric drugs and was unsure of the side effects.

After a period of of worsening symptoms,Rhea sought therapy as an alternative form of support .She began cognitive - behavioural therapy (CBT) with a licensed therapist ,which helped her gain better insight into her emotional struggles and provided her with practical coping strategies.Therapy sessions allowed Rhea to explore her feeling of inadequacy, guilt, and sadness, particularly related to the parental conflicts at home and her relationship breakdown.Overtime, she learned to reframe negative thoughts and manage her emotions more effectively.

Despite her progress in therapy,Rhea continued to struggle with her depression.After several months, she resumed her medication under the guidance of her psychiatrist.This combined approach of therapy and medication allowed Rhea to regain stability and mange her depressive symptoms more effectively.She reported improved sleep, better emotional regulation, and a more positive outlook on life.

Recovery and Resilience

Today, Rhea is in a much better emotional state. Although she continues therapy periodically, she no longer experiences the overwhelming depression that once consumed her. Her academic focus has improved, and she is rebuilding her social connections. The resilience that Rhea demonstrated throughout her recovery is evident in her proactive approach to seeking professional help, committing to therapy, and eventually reintroducing medication when necessary. Her experience highlights the importance of seeking a combination of therapeutic support and medication as well as the need for culturally sensitive mental health care that addresses both personal and familial challenges.

Key Themes from the Case Study

From Rhea's journey, several key themes emerged.

- **Family Dynamics:** The constant conflicts between Rhea's parents played a significant role in her depression. Her experience underscores the influence of familial relationships on the mental health of young women in India.
- **Cultural Stigma:** Rhea's initial reluctance to take medication highlights the societal stigma associated with mental health treatment in India, particularly for women.
- **Resilience and coping:** Rhea's ability to seek therapy, return to medication, and gradually rebuild her life reflects her resilience. Her coping strategies, such as engaging in therapy and eventually returning to medication, are key aspects of her recovery.
- **Impact of COVID-19:** The lockdown created an environment of isolation and stress for Rhea, exacerbating pre-existing struggles and triggering the onset of depression.

Discussion

Overview of Findings

The case study provides a detailed exploration of the mental health struggles faced by Rhea, a 25-year-old Indian student, during the COVID-19 pandemic. The findings highlight the interplay between familial stress, academic pressures, relationship issues, and the onset of depression, with a focus on Rhea's path to recovery. Rhea's journey reflects broader trends seen in young women in India during the pandemic—specifically, the emotional toll of being confined at home amidst familial conflicts, the societal stigma surrounding mental health, and the importance of seeking professional support for recovery.

Familial Conflict and Its Impact on Mental well being

A central theme in Rhea's experience was the role of family dynamics in shaping her mental health. The constant fights between her parents created an environment of tension, which exacerbated her emotional distress. This aligns with previous studies showing that exposure to familial conflict can significantly impact the mental health of young people, particularly women, by increasing stress and feelings of hopelessness (Hammen, 2005).

In Rhea's case, the pandemic magnified these issues, as she was forced to spend extended periods at home with limited social interaction, making her feel trapped and emotionally drained. This is a critical insight into the socio-cultural influences that shape mental health in Indian women. Many Indian families place high expectations on their daughters, often demanding that they maintain family harmony, which can lead to feelings of guilt and inadequacy when conflicts arise (Rao et al., 2020).

In Rhea's case, the stress from her parents' constant fighting compounded her feelings of isolation, which significantly contributed to her depression.

The Role of Therapy and Medication

Rhea's experience with therapy and medication offers important insights into the effectiveness of combining both approaches for treating depression. Initially, Rhea's decision to stop taking medication was influenced by the societal stigma surrounding psychiatric treatments, a common issue in India where mental health care is often viewed through a lens of shame and weakness (Saxena et al., 2018). This highlights the barriers to mental health care that many young women in India face, such as stigma, lack of understanding, and limited access to mental health resources.

However ,Rhea's eventual return to medication under the guidance of psychiatric ,combined with therapy, enabled her to regain stability.this combination of treatment aligns with the widely supported view in the literature that therapy and medication are most effective when use together ,particularly for moderate to severe depression (Beck,2016).Rhea's decision to reintroduce medication demonstrates an important shift in her understanding of her mental health needs and the importance of addressing them holistically.

Resilience and coping mechanisms

One of the most striking aspects of rhea's case is her resilience .Despite experiencing significant emotional challenges, including depression, familial conflict ,academic struggles, and a breakup.she was able to seek professional help and engage in therapy.This mirrors finding from resilience research, which suggests that young women, particularly in challenging socio-cultural contexts, often demonstrate high level of resilience through help- seeking behaviour, social support, and the ability to adapt to adversity(Luthar , 2006;Rao et al.,2020).Rhea's ability to identify her emotional struggles and take proactive steps to address them, including returning to therapy and medication, reflects a deep understanding of her mental health needs.Her coping mechanisms ,such as therapy, family support, and focusing on self care, highlights the importance of community and professional support in promoting resilience in young women facing mental health challenges.

Implications for mental health support.

Rhea's journey underscores the importance of accessible, culturally sensitive mental health care for young women in India.Although therapy and medication helped Rhea manage her depression, it is crucial to address the social-cultural barriers that prevent many women from seeking treatment.In India, mental health care remains a stigmatised topic, particularly in rural and semi-urban areas where resources are scarce.Rhea's case suggests that mental health education, along with a shift in societal attitudes towards mental illnesses necessary to encourage young women to seek help when needed.Furthermore ,the case highlights the need for family - oriented interventions, particularly for individuals experiencing familial stress.Programs that involve family therapy or provide educational recourses on management of familial conflicts could support individuals like Rhea in navigating their emotional struggles within a home environment that may not always be conducive to mental well- being.

Limitations of the study

While this case study provides valuable insights into the mental health experiences of a young Indian woman during the pandemic, several limitations should be noted.First ,this is a single - case study ,meaning that the findings may not be fully generalisable to all young women in India or to other cultural contexts. Additionally, the data were collected retrospectively, which may have led to some recall bias in Rhea's account of experiences.Future research could include multiple case studies to provide a broader understanding of the mental health challenges faced by women during the pandemic.

Suggestions for future Research

Further studies could explore the intersectionality of mental health in young Indian Women, considering factors such as socioeconomic status, education Cleveland geographic location.Additionally ,longitudinal studies that track the mental health journeys of individuals over time could provide deeper insights into the long term effects of the pandemic on mental health and resilience.Finally research that focuses on community-based interventions and policy recommendations for improving access to mental health resources in India would be valuable in addressing the widespread stigma surrounding mental health and in ensuring that support is available to those who need it.

Conclusion

This case study highlights the complex mental health challenges faced by young women in India during the COVID-19 pandemic's well as the resilience they demonstrate in overcoming adversity.Rhea's Journey emphasises the importance of a holistic approach to mental health which include both therapy and medication.It also underscores the need for culturally sensitive mental health support that takes into account the unique familial and societal pressures that young women face.The findings suggest that improving access to mental health care and reducing stigma are crucial steps towards the mental well- being of young Indian women, especially in the time of crisis.