



THE COVID-19 CRISIS: EXAMINING SOCIOLOGICAL DIMENSIONS OF MENTAL HEALTH AND EMPLOYMENT CHALLENGES AMONG YOUTH IN JAMAKHANDI TALUKA, BAGALKOT, KARNATAKA

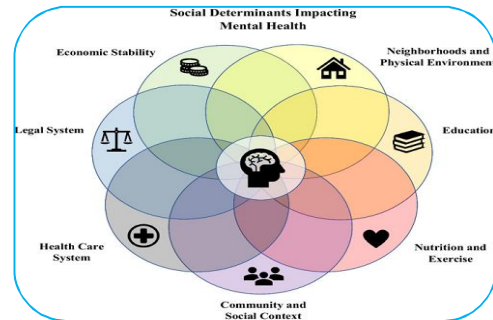
Prof. Pushpa M. Hunashyal¹ and Prof. M. P. Baligar²

¹Research Scholar , Department Of Sociology.

²Research Guide , Akka Mahadevi University Vijayapura. Karnataka state.

ABSTRACT

The COVID-19 pandemic has had significant social and economic impacts worldwide, with youth in rural areas like Jamakhandi taluka, Bagalkot district, Karnataka, facing unique challenges. This study investigates the sociological dimensions of mental health and employment issues among young people in this region, focusing on how pandemic-induced disruptions have amplified mental health concerns and limited employment opportunities. Through qualitative interviews, surveys, and regional data analysis, the study examines factors such as social isolation, economic strain, and educational setbacks, as well as their interplay with local sociocultural conditions. Findings indicate that youth in Jamakhandi, especially from economically vulnerable and marginalized communities, experience elevated stress levels, anxiety, and job insecurity. The study also explores the role of local infrastructure, healthcare accessibility, and digital connectivity in shaping these experiences. By providing insights into the specific mental health and employment challenges faced by rural youth, this research seeks to inform targeted interventions and policies that address both immediate and long-term needs, contributing to a resilient post-pandemic recovery in the region.



KEYWORDS: COVID-19, Mental Health, Sociological Dimensions, Rural areas, Social Isolation, Job Insecurity, Healthcare Accessibility, Digital Connectivity, Post-Pandemic..

INTRODUCTION

The COVID-19 pandemic has triggered an unprecedented global crisis, leaving profound social, economic, and psychological impacts on individuals and communities across the world. In rural areas such as Jamakhandi Taluka, located in the northern part of Karnataka, India, the pandemic has amplified existing vulnerabilities and brought new challenges, particularly for the youth. This research article seeks to examine the socio-sociological dimensions of mental health and employment challenges faced by young people in Jamakhandi Taluka during the COVID-19 crisis.

The outbreak of COVID-19 in early 2020 led to sweeping disruptions, including lockdowns, social distancing measures, and the closure of schools, colleges, and workplaces. For youth in rural areas, these disruptions have had far-reaching consequences, particularly with regard to mental health

and employment. In many regions of India, including Jamakhandi Taluka, young people face a multitude of challenges, such as limited access to mental health care, a lack of stable employment opportunities, and the impact of prolonged social isolation. As these issues intersect, they often exacerbate one another, creating a complex and multifaceted crisis for the youth. Mental health concerns have emerged as a critical issue during the pandemic, as anxiety, depression, and stress have risen among youth due to uncertainties about the future, disruptions in education, and the economic hardship faced by families. The toll on mental well-being is compounded by the limited availability of mental health support systems in rural areas, where stigma surrounding mental health issues often prevents young people from seeking help.

METHODOLOGY

This study will adopt a mixed-methods approach, combining both **qualitative** and **quantitative** research techniques to comprehensively assess the mental health and employment challenges faced by youth in Jamakhandi Taluka during the COVID-19 crisis. The methodology will enable a holistic understanding of the sociological dimensions of the issues at hand, capturing both the depth of individual experiences and broader patterns within the community.

RESEARCH DESIGN

The study will be descriptive and exploratory in nature, aiming to gather detailed insights into the mental health and employment challenges faced by youth, as well as to identify socio-demographic factors influencing these issues.

Data Collection Methods

Survey/Questionnaire: A structured questionnaire will be developed to collect quantitative data. The survey will include closed-ended questions to assess: The survey will be administered both online (where possible) and through paper-based questionnaires in villages with limited internet access.

LIMITATIONS OF THE STUDY

- **Access to Participants:** Due to the rural setting and limited internet access in some areas, reaching participants for online surveys may be challenging, and a paper-based approach will be necessary for some.
- **Stigma Around Mental Health:** The social stigma surrounding mental health issues may result in underreporting of mental health problems among participants, especially if they fear judgment from their community.
- **Geographical Constraints:** While the study focuses on Jamakhandi Taluka, the findings may not be entirely generalizable to other rural regions with different socio-economic and cultural contexts.

Expected Outcomes

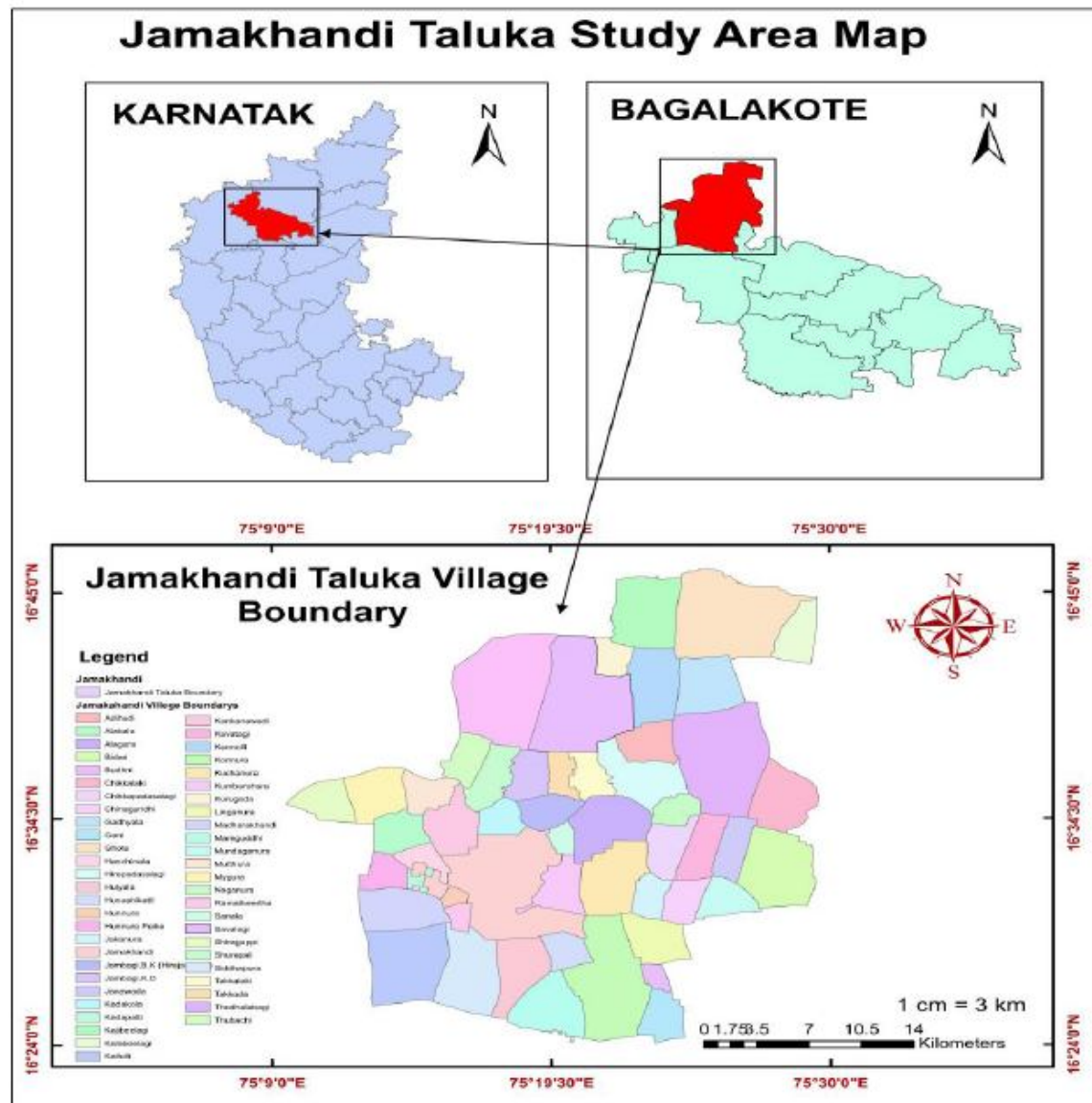
- **Identification of Key Mental Health Issues:** The study aims to identify the most common mental health challenges among youth in Jamakhandi Taluka during the COVID-19 pandemic.
- **Understanding of Employment Disruptions:** Insights into how youth employment has been disrupted and the long-term implications for economic stability and skill development.
- **Policy Recommendations:** The study aims to provide evidence-based recommendations for improving mental health support, increasing employment opportunities, and addressing the digital divide in rural areas

OBJECTIVES

- To Assess the Impact of the COVID-19 Pandemic on the Mental Health of Youth in Jamakhandi Taluka

- To Examine the Employment Challenges Faced by Youth in Jamakhandi Taluka During the Pandemic.
- To Explore the Socioeconomic and Demographic Factors Influencing Mental Health and Employment Challenges
- To Investigate the Availability and Accessibility of Mental Health Support Services for Youth in Jamakhandi Taluka
- To Understand the Role of Education and Digital Infrastructure in Shaping Employment and Mental Health Outcomes.

ABOUT THE STUDY AREA



REVIEW OF LITERATURE

The COVID-19 pandemic has brought to the forefront a multitude of social, economic, and psychological challenges, especially for youth in rural areas like Jamakhandi Taluka. Research on the impact of COVID-19 on youth has primarily focused on mental health issues, employment disruptions, and the intersection of these factors with socio-economic and demographic variables. This review synthesizes existing literature on these issues to highlight the specific challenges faced by youth during the pandemic, with a particular focus on rural India.

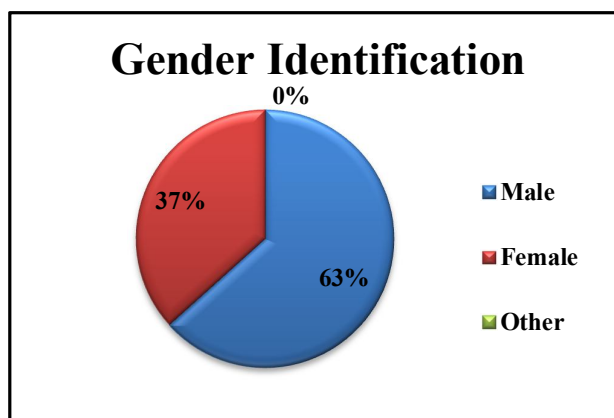
- The sense of uncertainty caused by the pandemic—particularly regarding academic progression and future employment—has been a primary source of distress. Studies by **Roy et al. (2021)** and **Rathod et al. (2020)** highlight that youth have experienced increased feelings of hopelessness and anxiety related to disrupted educational schedules, loss of internships and job opportunities, and concerns about long-term economic instability.
- The pandemic has caused significant disruptions to employment, with youth in rural areas experiencing disproportionate impacts. According to **Bhaumik and Mitra (2020)**, the Indian youth labor force, particularly in rural regions, has been severely affected due to lockdowns, economic slowdowns, and a lack of job opportunities in sectors like agriculture, informal labor, and small businesses. Youth who previously relied on part-time or informal work faced sudden unemployment, while those in agriculture, a key sector in rural India, saw significant drops in wages and job opportunities as supply chains were disrupted.
- The shift to remote work and online learning posed an additional challenge. A study by **Raghavan et al. (2021)** found that rural youth often faced significant barriers to accessing digital education and employment platforms, primarily due to limited internet connectivity and inadequate technological infrastructure. **Kaur (2020)** further suggests that rural youth who had limited digital literacy struggled to access online job opportunities, exacerbating unemployment challenges.
- Additionally, **Jha et al. (2020)** report that youth from marginalized backgrounds, including women, Dalits, and Adivasis, were disproportionately affected by the economic disruptions caused by the pandemic. These groups faced higher rates of unemployment and were less likely to receive government support or access to skill development programs, leading to increased economic vulnerability.
- The lack of employment opportunities not only causes financial strain but also impacts self-esteem and future prospects, leading to feelings of hopelessness and anxiety. A report by **Bharadwaj et al. (2021)** found that the prolonged economic downturn during the pandemic led many youth to experience depression and frustration, as they were unable to achieve their career aspirations or secure stable employment.
- While the negative impacts of the pandemic on youth mental health and employment are well-documented, there is also a growing body of literature on resilience and coping strategies. Research by **Nair and Mehta (2021)** highlights that many rural youth have demonstrated remarkable resilience, relying on family networks, community support systems, and traditional coping mechanisms to navigate the challenges brought about by the pandemic.
- Moreover, **Prasad et al. (2020)** suggest that digital technology, while a barrier for many, has also served as a tool for some youth to connect with broader job markets, access online education, and participate in entrepreneurial ventures. However, the extent to which these opportunities are available to rural youth remains uneven and largely dependent on local infrastructure.
- Various studies have recommended policy interventions to address the mental health and employment challenges faced by rural youth. **Raghavan et al. (2021)** call for the expansion of digital infrastructure in rural areas, emphasizing the need for better internet connectivity and digital literacy programs to ensure that youth can access educational and employment opportunities.

- Additionally, **Sarkar (2020)** advocates for the inclusion of mental health services within community health programs, particularly in rural areas where access to formal mental health care is limited. The integration of mental health support into primary health care and educational institutions could be a vital step in addressing the mental health crisis among youth.
- Finally, **Jha et al. (2020)** highlight the need for targeted economic recovery programs that address the unique needs of rural youth, including skill development initiatives, job creation in the agricultural and informal sectors, and financial support for youth-led businesses.

RESULT AND DISCUSSION

TABLE 1: GENDER OF RESPONDENTS IN THE TALUKA

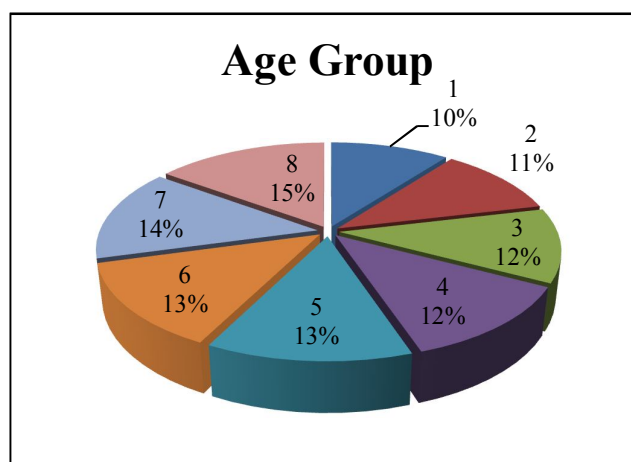
SI No	Gender	Percentage
1	Male	63.30%
2	Female	36.70%
3	Other	0



The table shows the gender distribution, with males comprising the majority at 63.3%, while females make up 36.7%. No representation is recorded for other gender categories, suggesting a binary dominance in the dataset or possible limitations in capturing a broader range of gender identities. This distribution indicates a notable gender disparity, with males representing nearly twice the percentage of females.

TABLE 2 : AGE GROUP OF INDIVIDUAL RESPONDENT IN THE TALUKA

SI No	Age Group	Percentage
1	18	14%
2	19	28%
3	20	28%
4	21	10%
5	22	4%
6	23	6%
7	25	2%
8	26	2%

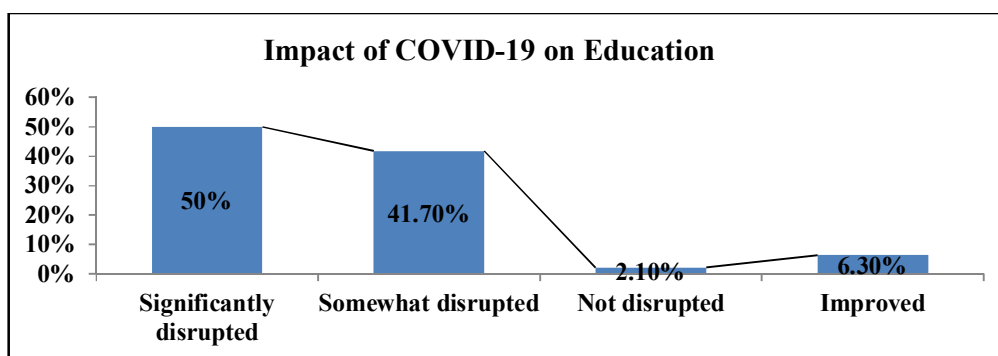


The table shows the distribution of individuals by age group, with the highest percentages at ages 19 and 20, each accounting for 28%. This suggests that these age groups are the most prevalent in the dataset. Age 18 follows with 14%, while the percentages steadily decrease with age: 21-year-olds

make up 10%, 22-year-olds 4%, and those aged 23, 25, and 26 each comprise a small minority (6%, 2%, and 2%, respectively). This trend indicates a concentration of individuals in their late teens, with a sharp decline in representation as age increases beyond 21.

TABLE 3: IMPACT OF COVID-19 ON EDUCATION OF INDIVIDUAL RESPONDENT IN THE TALUKA

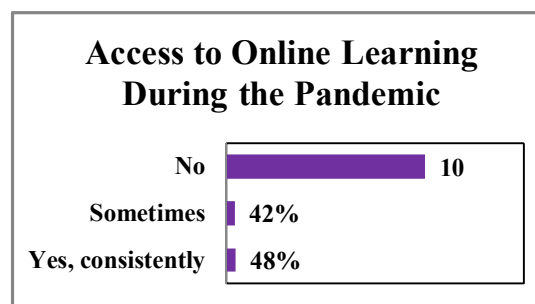
SI No	Impact of COVID-19 on Education	Percentage
1	Significantly disrupted	50%
2	Somewhat disrupted	41.70%
3	Not disrupted	2.10%
4	Improved	6.30%



The data reveals that COVID-19 had a largely negative impact on education, with 50% reporting significant disruption and 41.7% somewhat disrupted, likely due to school closures and challenges in adapting to online learning. A minimal 2.10% saw no disruption, suggesting some institutions were better equipped to adapt. Interestingly, 6.30% indicated improvements, possibly due to innovations in online education. Overall, the pandemic largely disrupted traditional education, though a few saw positive changes.

TABLE 4: ACCESS TO ONLINE LEARNING DURING THE PANDEMIC IN JAMKHANDI TALUKA

SI No	Access to Online Learning	Percentage
1	Yes, consistently	48%
2	Sometimes	42%
	No	10

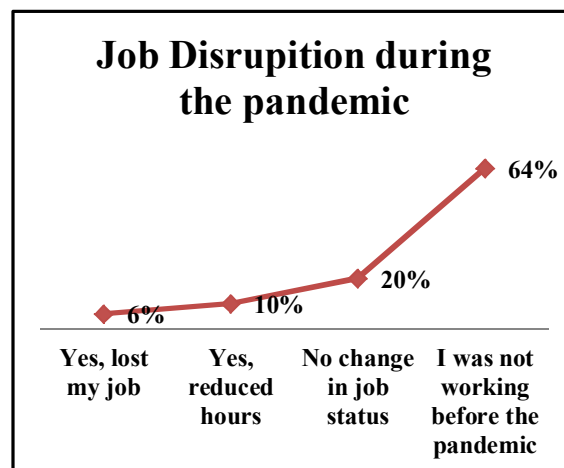


The data shows that nearly half (48%) of respondents had consistent access to online learning during the pandemic, suggesting reliable internet and device availability for this group. However, 42% had only intermittent access, likely facing challenges such as shared devices or unstable connections. Meanwhile, 10% had no access at all, highlighting a significant digital divide that may have hindered

learning opportunities for this group. This distribution underscores varying levels of online learning accessibility, with a substantial portion struggling to maintain regular engagement.

TABLE 5: JOB DISRUPTIONS DURING THE PANDEMIC IN JAMKHANDI TALUKA

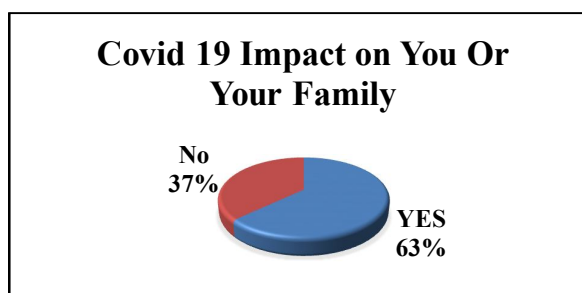
SI No	Job Disruptions during the pandemic	Percentage
1	Yes, lost my job	6%
2	Yes, reduced hours	10%
3	No change in job status	20%
4	I was not working before the pandemic	64%



The table shows that the majority of respondents (64%) were not working before the pandemic, while 20% experienced no change in job status. Among those affected, 10% had reduced hours, and 6% lost their jobs entirely due to the pandemic. This indicates that although a significant portion faced job disruptions, most were either unaffected or not in the workforce prior to the pandemic.

TABLE 6: COVID 19 IMPACT ON FAMILY IN JAMKHANDI TALUKA

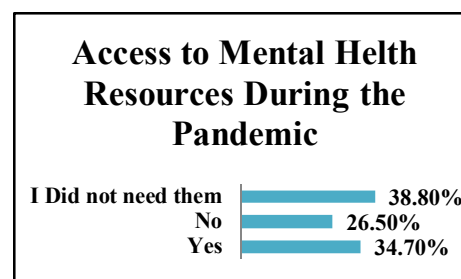
SI No	Covid 19 Impact on family	Percentage
1	YES	63%
2	No	37%



The table shows that COVID-19 had a significant personal impact, with 63% of respondents reporting that they or their families were affected by the pandemic, whether through health issues, financial strain, or lifestyle changes. Meanwhile, 37% indicated no direct impact, suggesting that over a third of families managed to avoid major disruptions. Overall, the majority felt the effects of COVID-19, highlighting its widespread impact on individual lives and households.

TABLE 7: ACCESS TO MENTAL HEALTH RESOURCES DURING THE PANDEMIC IN JAMKHANDI TALUKA

SI No	Access to mental health Resources	Percentage
1	Yes	34.70%
2	No	26.50%
3	I Did not need them	38.80%



The table shows that access to mental health resources during the pandemic was mixed. About a third (34.7%) had access to mental health support, while 26.5% did not, indicating gaps in available resources during this time. Interestingly, 38.8% reported that they did not need mental health resources, suggesting varied personal experiences with mental health needs throughout the pandemic. Overall, while some had access, a significant portion either lacked support or felt they did not require it.

SUGGESTIONS FOR ADDRESSING CHALLENGES

Based on the findings, the following suggestions are proposed to mitigate the mental health and employment challenges faced by youth in Jamakhandi Taluka during and after the COVID-19 crisis:

1. Improving Mental Health Support

- **Community-Based Mental Health Programs:** Expanding mental health services at the community level is essential. Community health workers can be trained to provide basic counseling and emotional support, and local organizations should be involved in reducing stigma and promoting mental well-being.
- **Awareness Campaigns:** Initiatives aimed at raising awareness about mental health issues and available support services could encourage youth to seek help. These campaigns should focus on breaking the stigma surrounding mental health and promoting open discussions within families and communities.
- **Support for Youth Entrepreneurship:** Providing financial assistance, mentorship, and market access to youth with entrepreneurial aspirations could stimulate small businesses in rural areas. Government initiatives like start-up grants or micro-loans could be a valuable resource for young entrepreneurs.
- **Creation of Local Employment Opportunities:** Efforts should be made to stimulate local economies through job creation initiatives, particularly in agriculture, small industries, and infrastructure projects. Public works programs could employ youth in community development projects and provide an income while enhancing local infrastructure.
- **Promoting Family Support:** Families should be encouraged to play an active role in supporting their children's mental health and employment aspirations. Workshops for parents and caregivers can promote understanding and improve the home environment for youth coping with pandemic-related stress.

CONCLUSION

The COVID-19 pandemic has exposed and deepened the mental health and employment vulnerabilities of youth in rural areas such as Jamakhandi Taluka. Addressing these challenges requires a comprehensive, multi-pronged approach that includes improving mental health support, enhancing educational and employment opportunities, and building resilient community structures. By investing in digital infrastructure, vocational training, and support systems, policymakers can help ensure that

youth in rural areas are better equipped to cope with future crises and build more sustainable livelihoods.

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