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"Social Media and Students During the Post Covid 19 Pandemic: Being Socially Connected While Physically Distant"

Ms. Geetam Goswami,
Research Scholar, Dept. of Management,
Assam down town University, Guwahati, Assam, India.

Dr. Seema Sharma,
Associate Professor, Dept. of Management,
Assam down town University, Guwahati, Assam, India.

Abstract

The health, safety and daily lives of all individuals are affected by the COVID-19 pandemic. Adolescents can be highly sensitive to this abrupt disruption of their lives because of the biological and psychological changes that occur during this developmental period. Social media has rapidly changed the ways in which today's adolescents socialize and interact with one another, which has contributed to an ongoing debate about whether social media is helping or harming teens in this modern technological era. The COVID-19 pandemic has only aggravated this societal dilemma as the youth are spending more time than ever before on social media. Hence, it is very necessary for parents, educators, and adolescents to better understand social media use in the context of COVID-19. The present study discusses the implications of social media for the development of studentsalong with their mental health in the context of COVID-19, with special emphasis on the ways by which social media can be made a constructive tool which can be helpful for teens in the midst of physical distancing practices, as well as finding out the various reasons how social media behaviors can negatively impact students' physical and mental health during this pandemic situation. Using research and theory, the study provides some suggesting ways on the beneficial use of social media and reducing its negative effects during the COVID-19 pandemic and as more people than ever before rely on social media to maintain social connection and avoid social isolation, therefore this study may be useful for people of all ages who want to understand the benefits and drawbacks of using social media during the COVID-19 pandemic.

Keywords: adolescents, social media, COVID-19, pandemic, mental health.

1. INTRODUCTION

The COVID-19 pandemic has drastically impacted the lives of all individuals across worldwide. For slowing the spread of Coronavirus all over the world, Social Distancing or Physical Distancing has become the primary method.While these physical distancing practices are necessary to preserve the

public's safety and health, they have also taken a toll. Humans are social creatures by nature, and social isolation has physical and mental health implications (Leigh-Hunt et al., 2017). Even though all individuals are suffering this emotional trauma, but the adolescents are mostly affected as it has put a halt in their social lives.Because of the increasing use of social media among teenagers, they may be particularly prepared with the means and skills to stay socially connected while remaining physically separated (Anderson & Jiang, 2018). However, a growing amount of evidence suggests that social media might have negative implications depending on how the teens use it. This societal problem has been amplified by the pandemic in determining whether Social Media is beneficial or harmful for the teens. No Matter some form of physical distancing practices may be necessary for an extended period of time, it for parents, educators, and teens to better understand how Social Media can be used as a productive tool for the holistic development of the adolescents. Compared to children and adults, social comparison processes are automatically activated among adolescents, triggering them to heavily rely on peers—to gain approval, feel good about themselves, and reduce uncertainty. When all physical social contacts are cut off in lockdown, feelings of loneliness might increase among adolescents, which may affect them mentally and emotionally.

Adolescents are known as heavy social media users (e.g., Instagram, Facebook) to connect with friends and to make themselves feel better. For instance, a qualitative study among adolescents with depression revealed that young people may use social media to cope with negativityand anxiety.

Adolescents, in particular, may use social media to self-regulate their emotions during the COVID-19 lockdown due to the social isolation and worry. This is in line with mechanisms of mood management theory, which postulates that individuals (subconsciously) employ specific media to regulate their emotional states and acquire a more pleasant mood and ideal degree of arousal.

Because the social isolation and health risks posed by the COVID-19 condition can lead to feelings of worry and loneliness, using social media as a coping method may be beneficial. Anxiety and loneliness, in particular, are expected to activate various social media coping techniques, which may influence their happiness. For example, a study on college students found that different aspects of social media use have varied mental health implications. As a result, viewing and interacting on Instagram reduces loneliness, however broadcasting (publicly sharing content) increases loneliness.

In the framework of COVID-19, this article uses psychological theory and research to analyze the consequences of social media on adolescent development. It emphasizes how social media can be especially beneficial for youth who are engaged in physical distancing and need to access COVID-19 resources.It also discusses how teens' safety, self-esteem, body image, anxiety, mood, and sleep can all be negatively impacted by their usage of social media. Finally, this article offers practical advice and considerations for parents, educators, and healthcare providers on how to reduce the negative effects of social media and encourage kids to utilize it for positive purposes during this challenging time. Notably, while current empirical literature guides the conclusions and recommendations offered in this article, however, at the time of this writing, empirical research on the specific influence of the COVID-19 epidemic on the use of social media use by adolescents are yet to be published. As a result, many of the hypotheses made about COVID-19 specific social media experiences need to be empirically investigated. Since many people than ever before are dependent on social media to maintain social connection and get rod off social isolation, this article may be of practical importance

for the people of all age, specially parents and educators, who are interested in the benefits and drawbacks of social media use during the COVID-19 pandemic.

What is unique about Adolescents?

Adolescence is the period of life that spans childhood and maturity, and its definition has long been a source of debate. Adolescence comprises biological growth as well as fundamental social role shifts, both of which have changed dramatically over the last century.

Adolescence is a special time of challenge and potential for positive growth. The adolescent transition, or the change from being a dependent kid to an independent and self-reliant adult, is one of the most dynamic, broad, and crucial periods of human development. The changes that occur over this period are extensive, affecting biological, physical, psychological, and behavioural functions. Because of the scope of these changes, the period is rather dangerous, since problems in one area may spill over and affect how other domains work.The transition, on the other hand, may be a good period for interventions, largely for the same reason. Small changes in one domain could have far-reaching, potentially long-term consequences in other domains. Identity discovery, increased autonomy from parents and reliance on friends, increased sensation-seeking and risk-taking, and the beginning of romantic and sexual relationships are all hallmarks of adolescence's developmental stage (Dahl et al., 2018).One of the most noticeable changes during adolescence is how and with whom teenagers spend their time. As children progress from childhood to adolescence, they spend more unsupervised time with peers (Lam et al., 2014), and peer relationships become increasingly crucial.Adolescents, for example, are acutely aware of peer status (e.g., their own and their peers' levels of popularity) and peer norms (e.g., peers' behaviors and attitudes), and they are more prone to engage in actions that result in social benefits such as higher popularity (Brechwald & Prinstein, 2011). Many individuals rely on romantic relationships as key attachment figures, whereas younger children rely more on their parents for behavioral decision-making and sense of self. Adolescents, on the other hand, base their self-concept mostly on their peers and friends (Harter et al., 1996). Parents may find adolescents' obsessive emphasis on friends to be extreme or perplexing, yet it has biological roots.Adolescents' pubertal hormones to social reward and rejection, as well as their probability to participate in risky behaviour in the company of peers, are influenced by pubertal hormones and brain development patterns (Schriber & Guyer, 2016). (Steinberg, 2008).Adolescence is also a time when girls are more likely to experience the development or development of mental health disorders. Depression rises rapidly during adolescence, with approximately 20% of adolescent girls reporting clinical depression by the age of 18. (Hankin et al., 1998).

The COVID-19 pandemic has disrupted the social lives of students profoundly. If families follow the Centers for Disease Control (CDC) recommendations and state laws, schools are now closed, extracurricular activities have been cancelled, and peer socialization has come to a standstill.Children and adults of all ages are involved. Feelings of loneliness during this period of physical separation, the effects of beingisolated from peers may be especially pronounced for teens (Laursen & Hartl, 2013) (Laursen & Hartl, 2013). The inability to see one's peers at school and other settings is a developmental challenge. This mismatch is likely to have an impact on adolescents' mood and overall well-being. Put simply, students are now forced to remain physically isolated with their families during the developmental period when they are biologically and psychologically driven to be with

peers. So how can students cope with this new reality? Understandably, many are turning to social media, which can allow them to remain socially connected while physically distant – and also present unique challenges for teens and their parents. During the developing stage, they are now physically secluded from their relatives.When they are physiologically and psychologically compelled to spend time with their peers. So, how can teenagers deal with this new reality? Many people, understandably, are turning to social media, which can provide various information. Adolescents can stay socially linked even when they are physically separated - which has its own set of challenges.

What is social media and how does it affect adolescents' mental health?

Websites, applications, and electronic tools that enable for digital social contact are referred to as social media. Although the words "social media" can create only an image of teenagers looking through Insta gram photos or snapping selfies on Snapchat, social media can be much more than that. YouTube is one of the most popular social media sites among teenagers today, allowing users to upload their own videos and comment on others' (Anderson & Jiang, 2018). Social gaming tools like Fortnite and Minecraft, as well as text messaging and messaging applications, may be called social media. Many of the most popular social media platforms among teenagers (such as Snapchat and Instagram) can be used for a variety of purposes. Teens can use social media to read or watch content, as well as post and share their own.Although "social media" can refer to a variety of things, most social media differs from traditional in-person interactions in numerous ways (Nesi et al., 2018a, 2018b). These aspects have crucial consequences for how teens interact online, as well as the consequences of these tools on teens' mental health, according to the transformation framework (Nesi et al., 2018a, 2018b). Social media, for example, is more public than face-to-face chats, allowing for simultaneous interactions with many individuals at once.

Prior research on the impacts of social media use on teenage mental health has often conflated these different sites, tools, and activities, measuring connections between overall "screen time" and happiness. Surprisingly, the results have been varied (Odgers & Jensen, 2020). While many studies have found significant, albeit small, links between screen time and depression, body dissatisfaction, disordered eating, and health-risk behaviours (Holland & Tiggemann, 2016; Twenge & Campbell, 2018; Vannucci et al., 2020), others have found no such links (e.g., Cohen et al., 2017; Jensen et al., 2019; Vannucci et al., 2020). Others have discovered the reverse effect: that social media, especially when utilised to allow direct social contacts with peers, can improve a teen's mental health (e.g., Clarke et al., 2018). A consensus is growing that the amount of time spent on social media by youth may be less relevant than the specific behaviors they engage in online.

With the COVID-19 pandemic isolating most teenagers from their friends, many are resorting to social media in greater numbers. As a result, it may be more vital than ever to look beyond simple "screen time" considerations to understand how, when, and for whom social media use has beneficial or bad consequences.

How might social media be helpful to adolescents during the COVID-19 pandemic?

Social media in recent days may provide youth with a key source of access to COVID-19 information and tools, as well as social connection, identity development, and creative expression, in the face of physical distancing practices and ambiguity regarding COVID-19 (Hamilton et al., In Press). For kids

who are living in an unhealthy or dangerous environment, social media can be a lifeline to a supportive communityand resources for understanding and coping with COVID-19.

2. RESEARCH METHOLOGY

2.1 Research Design

The research design adopted for the present study is descriptive research design. As the major purpose of descriptive research is to give a description of the state of affairs as it exists at present and the researcher has no control over the variables and can only report as to what had happened or what is happening. Therefore, for the purpose of the present study this research design is considered as the ideal design as this will help to understand and examine the impact of social media on students of Assam during the pandemic period.

2.2 Objectives

The present study has been taken with the following objectives in mind.

- To examine the impact of the Covid-19 pandemic on the education, health and lifestyle of respondents of different age-groups.
- To assess the significant difference in the time spent on the different activities like education, health and lifestyle among different age groups duringthe Covid-19 pandemic.
- To analyze the effect of multiple factors on the health of respondentsduring the Covid-19 pandemic period.
- To analyze the association between age categories and different variables such as change in weight, health issues faced, stress busters etc.

2.3 Sources of Data collection:

The data for the present study have been collected from both the primary and secondary sources. The Secondary data have been collected from books, journals, newspaper articles and internet. Primary data have been collected from by creating a 19-set questionnaire, which featured a range of multiple-choice questions, a Likert scale, and the ability for respondents to add free text for a few questions. The survey was conducted using the Google Forms platform, which required individuals to be logged in to an e-mail account in order to participate. Multiple entries from a single account were not permitted. The questionnaire was distributed using social media sites, e-mail, and regular messaging services. The google form has clear instructions to ensure that the response had to be a student.

From June 13 to June 17, 2020, a web-based survey was conducted with students using Google online platforms. There were four subgroups in the online survey questionnaire.

(a) Participants were asked to provide their general demographic information, such as their age and their region of residence.

(b) Information regarding daily online classes in educational institutions following the transition from offline learning: Average time spent on online study per day (hours); medium for online study; average time spent on self-study per day (hours).

(c) An assessment of the online learning experience to determine student satisfaction levels.

(d) Health assessment as a result of a change in lifestyle: average time spent on sleep (hours) per day; weight change; average time spent on fitness (hours) per day; number of meals/days; The present study addresses other issues such as the medium of stress relievers throughout the epidemic, as well as cohesion with family members etc. The purpose of this survey is to look into the influence of the COVID-19 epidemic on adolescents' education, health, and lifestyles.

2.4 Sample size

Across-sectional survey with 1182 students from various educational institutionsin Assam, including schools, colleges, and universitiestook part in the online survey.

3. STATISTICAL ANALYSIS & DISCUSSION

A cross-sectional survey with 1182 students from various educational institutions have been conducted for the purpose of this study. An overview of demographic data is provided in the form of tables and percentages. Confidence Interval limit was calculated for learning hours for online classes and self-study, duration of sleep, time spent on fitness and sleep. The Kruskal Wallis test, a non-parametric test, was used to determine whether there was a significant difference in the amount of time spent on the aforementioned activities across age groups. The differences between respondent's health and the variables of interest were assessed using Fisher's exact test. The Pearson Chi Square test was used to examine the relationship between age groups and various variables such as weight loss, health difficulties, stress relievers, and so on. A statistically significant value of $P < 0.05$ was considered.

3.1 Characteristics of Participants

A total of 1182 subjects from various educational institutions including schools, colleges, and universitiesin Assamtook part in the online survey.

Table 1 shows the demographic detail of the participants.The average age is 20.16 years (95) percent confidence interval (CI), 19.8–20.4), with a range of 7–59 years. The participants' ages were evenly spread. In between ('7–17' year old there were 303 participants; between '18–22' year old the number of participants is 694; and between '23–59' year old age the number of participants is 185. It has been observed that among the 1182 participants, 728 (61.62 percent) of the respondents lived in Kamrup Metro while the rest were from Kamrup Rural.

Table 1

Demographic data of the respondents to the online survey questionnaire

Variables	Number of Subjects (N = 1182)	Percentage (%) Age (year)
7–17	303	25.6
18–22	694	58.7
23–59	185	15.6
Region of residence0		
Kamrup Metro	728	61.6
Kamrup Rural	454	38.3

3.2 Assessment of Online Training

According to Table 2, the Kruskal Wallis test was used to assess the difference in the time spent by different age categories for daily routine activities. The average time spent on online classes for students was3.20 h/day (95% confidence interval (CI), 3.08–3.32). However, the average time spent on online classes was significantly higher for students with age group '7–17' years (3.69 h/day), and lower for students with age groups, '18–22' years (2.98 h/day) and '23–59' years (2.66 h/ day) ($P < 0.0001$*). Further, respondents were asked aboutthe timethey allot per day for self-study, however, there was no significant difference among different age group categories ($P = 0.106$).The average time spent on self-study was 2.91 hours per day (95 percent confidence interval: 2.78–3.03).According to the assessment of satisfaction level among students(see Fig. 1.a), 38.3 percent of students had a negative response to online classes (2.6 percent poor and 35.7 percent very poor), 33.4 percent thought it was average, and 28.4 percent (19.9 percent good and 8.5 percent excellent) thought it was excellent. Surprisingly, the in-depth analysis showed that levels of satisfaction differed significantly across age groups. There were 51.6% (48.6% very poor and 3% poor) negative online reviews from subjects in the '18-22' age group, compared to 31.5% (29.1% very poor and 2.4% poor) negative reviews from subjects in the '7-17' age group who spent more time on online classes. When questioned about the medium they used for online learning (see Fig. 1.b), 57.3 percent of students in the age group '7-17' said they used cell phones, while the majority of students in the age group '18-22' (56.4 percent) and '23-59' (57.8 percent) said they used laptops or desktops. However, just a tiny percentage of the students (3.1%, n=37) used tablets. There was a statistically significant difference between the various mediums employed in terms of time spent in online classes ($P = 0.0002$). Table 3 shows that the average time spent on online classes using tablets was 4.29 hours per day (95 percent confidence interval: 3.63-4.96), 3.43 hours per day (95 percent confidence interval: 3.25-3.61), and 3.06 hours per day (95 percent confidence interval: 2.90-3.23)

Table 2

Table showing how different variables (time spent on online class, self-study, fitness, sleep, social media) changes with different age distributions

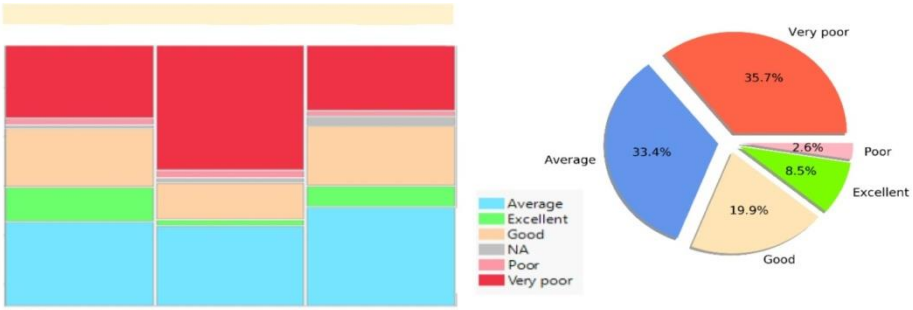
Age(year) Variables	**Time Interval (Hours/Day)**	**Total (N=1182)**	**7-17 Meantime (95%CI,h0urs/day**	**18-22**	**23-59**	**7-59,N=1182**	**P<value**
Online Class	0-2 2-4 4-7	271 381 458	3.69(3.50-3.88)	2.98(2.78-3.17)	2.65(2.42-2.88)	3.20(3.08-3.32)	P<0.0001
Self Study	7-10 0-2 2-5 5-9	72 273 711 173	2.74(2.58-2.91)	3.08(2.86-3.31)	2.95(2.68-3.23)	2.91(2.78-3.03)	P=0.106
Fitness	9-12 0-0.5 0.5-2	25 483 552	0.82(0.76-0.89)	0.73(0.66-0.81)	0.69(0.62-0.77)	0.76(0.72-0.80)	P=0.039*
Sleep	2-5 4-6 6-8 8-11	147 51 436 620	7.91(7.77-8.11)	7.94(7.82-8.06)	7.51(7.28-7.73)	7.87(7.77-7.96)	P=0.0007*
Social Media	11-15 0-0.5 0.5-1.5 1.5-3.5 3.5-6 6-10	75 46 380 519 171 66	1.68(1.52-1.85)	2.64(2.50-2.78)	2.37(2.14-2.61)	2.35(2.25-2.45)	P<0.0001

Kruskal Wallis test was used to produce a P-value that analyze significant difference between different age distributions. *Statistically significant (P<0.005)

3.3 Assessment of Health in Educational Institutions

Among the respondents from different age groups (see Fig. 2), 13.6% (n = 160) faced health-related issues during the period of nationwide travel restrictions. Further respondents were asked about the change in body weight within this period, 37.1% reported an increase in weight,

a)



b)

Fig.1. Visualizations demonstrate a) Likert analysis of Online classes for the sample and for different age categories b) Medium for the online classes b) Learning medium, used by different age categories

Weight loss was recorded by 17.7% of those surveyed, while weight gain was reported by 45.3 percent. When asked if they are satisfied with their time management, the majority of respondents (51.4 percent, n = 608) answered 'NO,' while the rest (n = 575) said 'YES.' In addition, 70.3 percent of the respondents said they were socially connected with their family members.

According to **Table 3**, respondents who were not socially connected and felt they did not utilize their time in lockdown had a substantial influence on their health. Table 3 also shows the Pearson Chi Square test for Likert analysis on 'time used' (P = 0.0001*), and 'health issue faced' (P = 0.001*) and 'socially connected' (P = 0.0002*) the null hypothesis was rejected and hence that there is no association between these variables with the different distribution of age groups. To maintain a state of health and well-being, it is necessary to perform a certain amount of exercise daily. The findings of **Table 2** showed that the time spent of fitness was statistically different for different age groups (P = 0.039*, Kruskal Wallis test). And, the average time spent on sleep was 7.87 h/day (95% Confidence Interval, 7.77-7.96).The differences between the age groups in terms of duration of sleep were statistically significant.

Further, respondents were questioned about the measures adopted to cope with the rising stress levels during the pandemic. According to the Pearson Chi Square test in Table 3, there was a significant difference in the measures used by the different age categories. Fig. 3 shows the detailed distribution

of different stress reliever activities used among different age categories. **Fig. 3** shows the detailed distribution of different stress reliever activities used among different age categories

Table 3

Fisher's exact test to analyze the effect of multiple factors on health.

	Fisher's Exact Test	P-Value	Alternative Hypothesis
Socially well connected	Left	0.0062*	Prob(Socially well connected=YES)is greater for Health issueduring lockdown=NO than YES
	Right	0.9963*	Prob(Socially well connected=YES) is greater for Health issueduring lockdown=YES than NO
	2-Tail	0.0095*	Prob(Socially well connected=YES) is different across Health issue during lockdown
Time utilized	Left	0.0007	Prob(Time utilized=YES) is greater for Health issue during lockdown=NO than YES
	Right	0.9996	Prob(Time utilized=YES) is greater for Health issue during lockdown=YES than NO
	2-Tail	0.0012*	Prob(Time utilized=YES) is different across Health issue during lockdown

Figure 3 shows that a large number of people of various ages used social media to relieve stress. The findings are shown in Fig. 4. a, which show the distribution of the sample for different platforms. Despite the fact that the majority of respondents used social media, 1.44 percent did not have an account on any of the platforms.Despite the fact that the majority of respondents used social media, 1.44 percent did not have an account on any of the platforms. The detailed distribution of platforms for age groups is shown in Fig. 4. b.

You Tube (39%) was the most popular platform among those aged 7-17, followed by Whats app (35%) and Instagram (17%). Most of the social networking sites in India restrict individuals below 13 years of age to have an account on their platforms. However, some of the individuals under 13 years of age used Instagram (n = 2), WhatsApp (n = 1). For the age group '18-22' years, Instagram (39%) was the most preferred networking site and the respondents in the age group '23-59' years preferred WhatsApp (38%)

As shown in Table 2, the average time spent on social media for the age-group '7-17' years was 1.68 h/day (95% Confidence Interval, 1.52-1.85), 2.64 h/day (95% Confidence Interval, 2.50-2.78) for the age-group '18-22', and for the age group '23-59', it was 2.37 h/day (95% Confidence Interval, 2.14-2.61)).The difference between the groups was statistically different (P<0.0001*).

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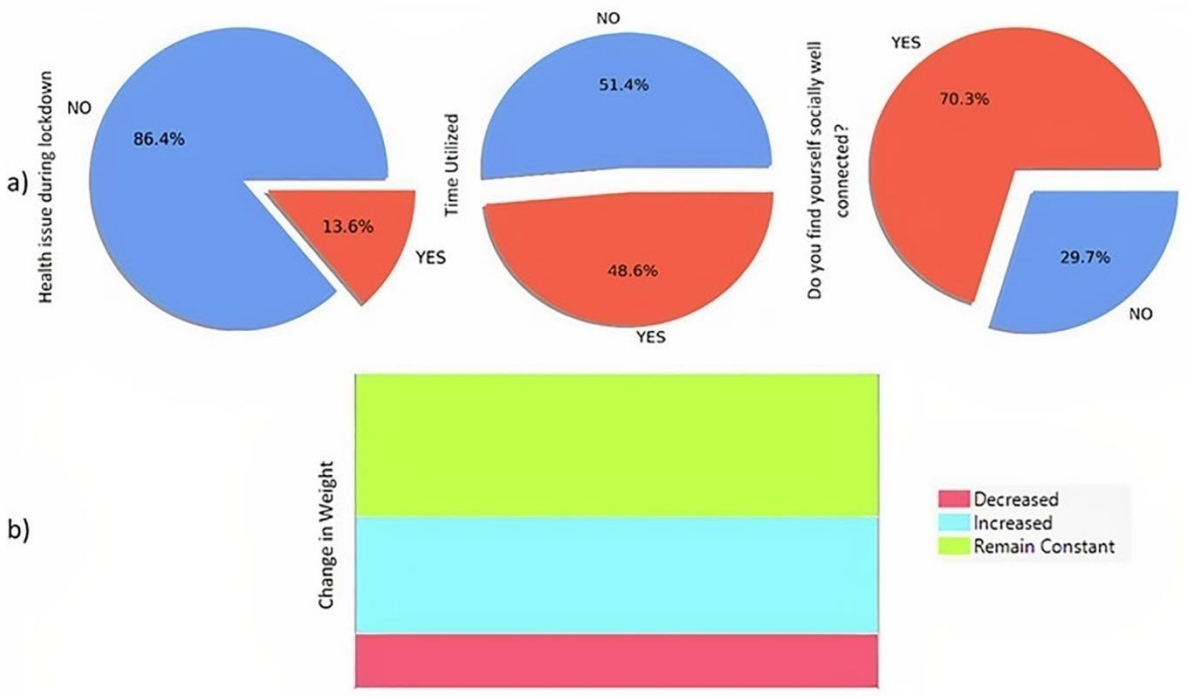

Fig.2. Visualizations demonstrate a) Pie Chart for Likert questions whether the respondents faced health issues; whether the respondents utilized time efficiently; whether the respondent is socially well connected. b) Stacked bar chart to analyze the change in weight during the period of lockdown.

Table 4

Pearson Chi square for the association between different variables and age distribution

Variables		Is there a change in your weight?	Did you utilize your time?	Any health issue faced?	Did you find yourself socially connected?	Stress busters
Age Distribution (year) (7-17,18-22,23-59)	Df P-Value	4 0.1045	2 <0.001*	2 <0.001*	2 0.0002*	44 <0.0001

*Statisticallysignificant(P<0.05).

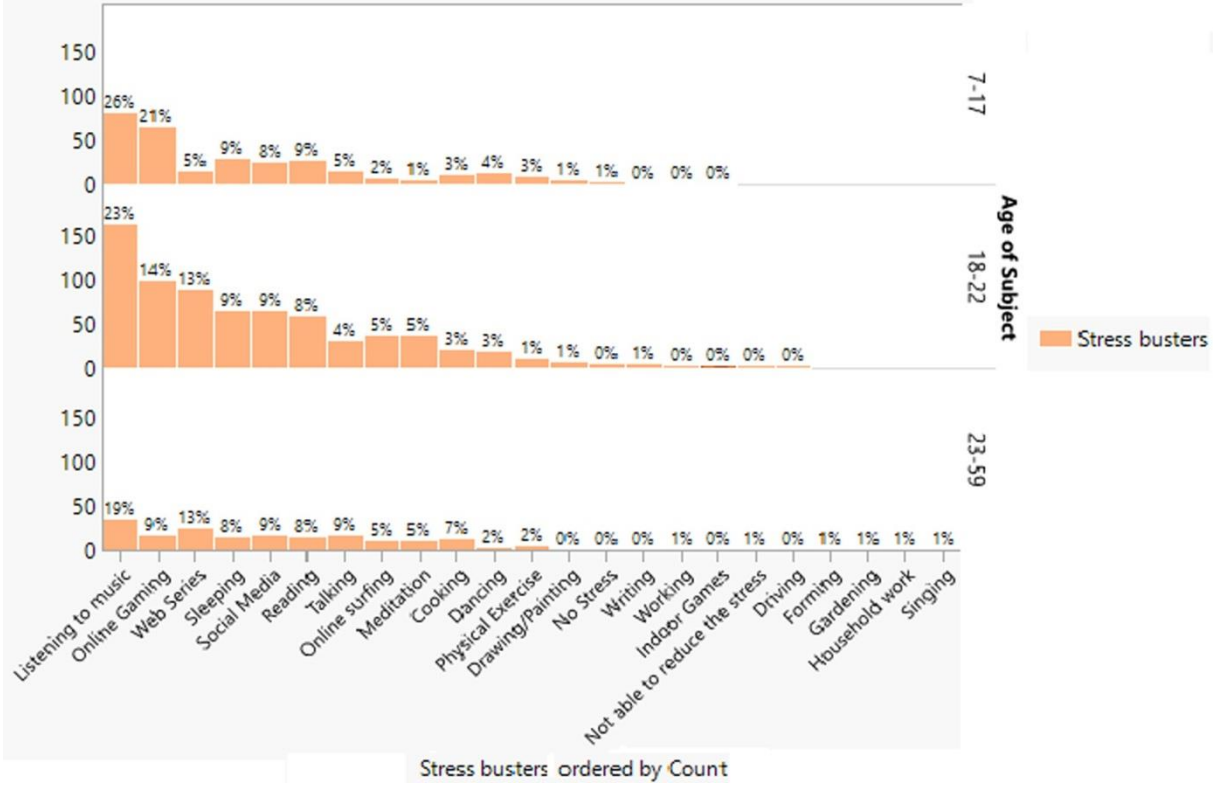

Fig.3. Visualizations demonstrate the distribution of stress relieving activities among different age categories

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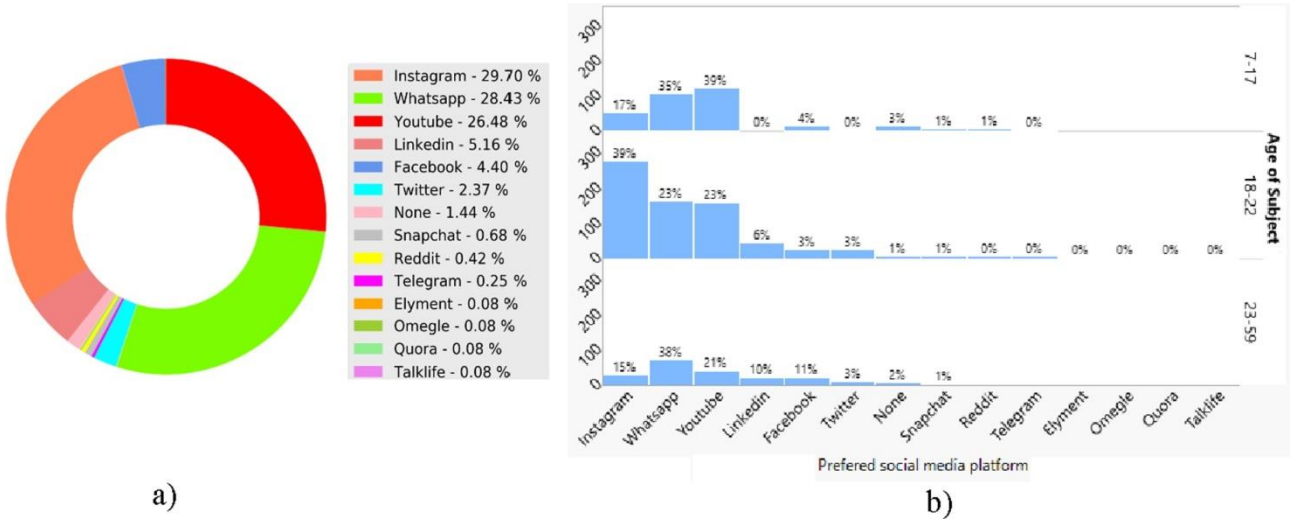

Fig.4. Visualization demonstrate the distribution of preferred social media platform for a) the sample and b) among different age categories

4. FINDINGS

- The Covid-19 pandemic had a tremendous psychological impact on the health, education and lifestyle of respondents of different age groups. The government agencies imposed measures such as social distancing and restrictions on travel but they did not take into account the health implications. Although, these measures are necessary to regulate safe conditions, there is no strategy to safeguard the psychological impact due to the Covid-19 pandemic.

- From the analysis, it was found that limited class interaction and inefficient time table significantly affected the satisfaction levels among students as peer-to-peer impact in the school environment motivates them to work hard and learn social skills which are not possible in online platform.

- It was also found that respondents who were not socially connected and who felt that they did not utilize their time in lockdown had a huge influence on their health. Also, irregular sleeping habbits, daily fitness routines and social interaction affected their health condition.

- Moreover, it was found that among the different coping mechanisms used by respondents of different age groups like listening to music, sleeping, playing online games, painting etc. majority of them considered listening to music as the best stress reliever tool followed by online gaming.

5. SUGGESTIONS

When the COVID-19 outbreak is over and educational institutions reopen, the responsible authorities should continue to invest in online education to improve student learning. They should thoroughly examine the challenges that arose as a result of the abrupt switch to online learning and be prepared for any future instances. Proper training of educators for the digital skills and improved student-teacher interaction must be conducted. For underprivileged students, availability of digital infrastructure with sufficient internet availability and access to gadgets must be ensured to avoid any disturbance to their education.

Many students are likely to experience stress, worry, and sadness as a result of the situation in Covid-19, so it is vital to give emotional assistance to pupils. Future research in this area could look into the effects of various stress relievers on students' mental health. Future work in this direction could be to analyze the association of different stress buster on the mental health of the students. Moreover, guidelines could be created to anticipate the needs of the vulnerable student population. Improved health care management would ensure the delivery of mental health support.

6. **LIMITATIONS**

The present study has significant limitations that should be noted. The sampling strategy utilized is the first constraint. It is based on digital infrastructure and voluntary involvement, both of which contribute to selection bias. Due to the imposed travel limitations, students who do not have access to online learning were not able to participate. Second, the research is based on one specific area, given the lockdown orders and the online medium of classes. We believe these results to be very generalizable for schools and universities across the country, given the lockdown orders and the online medium of classrooms. Another drawback of this study is that the survey was conducted in a cross-sectional manner with no follow up time for the participants.

7. CONCLUSION

The outcomes of this study revealed that the Covid-19 outbreak has had a substantial impact on students' mental health, education and daily routine. The Covid-19 disruptions bring to light critical issues and provide an opportunity to assess alternative methods in the education sector. The new policies and guidelines in this direction would help mitigate some of the negative effects and prepare educators and students for the future health crisis.

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