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## Transformation in Children's Daily Routine, Attitudinal Traits and Behavioral Patterns during Covid-19: A Psycho-Social Study at Patgram Upazila in Lalmonirhat District

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### **Abstract**

*This study elucidates how COVID 19 affected the children's daily routines and how parental behavior was strategically altered. The continuing Novel Corona Virus COVID-19 pandemic has had a devastating detrimental impact on Bangladesh's rural children's quality of life. They were thought to be one of the most defenseless populations. Although, happily, kids have so far mostly escaped the direct health implications of COVID-19, the crisis is having a significant impact on their welfare. The socioeconomic effects and, in some situations, mitigating actions that could unintentionally cause more harm than good have an influence on all children, regardless of age or country. However, this study looks at a rural child's everyday life, changing pattern of behavior, attitude and psychological health both before and following COVID-19. Numerous youngsters in rural regions, particularly in villages, are dealing with a number of issues brought on by the COVID-19 epidemic. This is a worldwide concern, and some children will be affected for the rest of their lives. Additionally, the COVID-19 pandemic's spread, the partial lockdown, the severity of the disease, the healthcare system's poor governance, the lack of medical facilities, public ignorance, and the dissemination of false information in the media have all contributed to people's feelings of fear and anxiety. Both qualitative and quantitative approaches of data gathering and analysis are being used in this specific study. The main goal was to learn how children's routines changed throughout COVID 19 and to see how parents handled these changes. 33.33 percent of the study's respondents were between the ages of 15 and 17, while 45 percent of respondents were male and 55 percent were famous. Furthermore, the majority of responders (46.66%) had secondary educational status. Of the total respondents, 56.66 percent reside in extended families, compared to 43.33 percent who do so in nuclear families. According to the study, there are significant differences in pre- and post-COVID-19 routines, parenting, and mental health.*

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## **INTRODUCTION**

The unique Corona virus that causes Corona virus disease 2019 (COVID-19) is an infectious illness. On March 11, 2020, WHO issued a pandemic declaration. These viruses were initially discovered in Wuhan, Hubei, and China. For low-income employees, the loss of their employment and means of support was a significant economic blow. Within the first two months of the disease's start in Bangladesh, Rahman et al. (2020) observed a 62-75% loss in income and a 28% decline in consumer expenditures. This was especially disastrous for households in regions like northern Bangladesh who relied heavily on remittances and migrant income. We selected Patgram upazila in northern Bangladesh's Lalmonirhat area for our investigation. Schools in Bangladesh were shut down for more than two years. The influence of this new circumstance on parents is significant. They must adjust to this situation while putting aside their own emotional and financial challenges. Children's social interactions, home life, and extracurricular and extracurricular activities have all suffered greatly. Children have been cut off from all of their social and emotional interactions, as well as their educational, employment, and sporting opportunities. Parents were suddenly required to supervise their children at home from school 24 hours a day, while also starting to smart-work from home and continuing to fulfill their children's academic obligations. Many parents also dealt with the grief and suffering caused by sick or deceased family, pay decreases, and in some cases job loss. The absence of play areas and opportunities for social interaction has real effects on children's day-to-day lives. When other references and educational figures suddenly disappeared, parents were left as the children's only source of guidance. This article discusses how COVID 19 affects kids and how parents are modifying their parenting strategies to keep kids on task and establish new daily routines. This study aims to comprehend the daily activities of children during COVID 19.

## **OBJECTIVE OF THE STUDY**

Without targets, no project will be able to be done. For the same reason, a researcher must require study objectives. This study's main goal is to determine how much COVID 19 has altered Bangladeshi children's daily routines and the new parenting techniques that have emerged as a result. On the path to achieving this fundamental goal, it is anticipated that a number of challenges would also become apparent. They are also a focus of this study's examination. The objectives of this study are pointed out in the following way:

1. to identify the daily routine of child before covid-19
2. to know what's the daily routine of a child during covid-19
3. to explore how children maintained their learning, physical activity, and screen time routines during the period of covid-19 pandemic

## **RESEARCH QUESTION**

1. What are the effects on children daily routine during Covid-19?
2. Were there any changes in the child's mental state during covid19?
3. What was the parenting style like in rural areas of Bangladesh during covid-19?

## **RATIONALE OF THE STUDY**

COVID-19 increases the likelihood that children will experience maltreatment, domestic violence, and poor nutrition, and lockdown procedures lessen the chances that kids will engage in extracurricular activities, less or no interaction with caring adults at school and in the community. These problems overlap to varied degrees with financial poverty and substandard housing, with the unifying factor being that children from poorer homes are more vulnerable. Their daily schedule, study habits, emotions, social interactions, peer affiliations, mental and physical well-being, mood, and many other aspects are no longer the same as they were before the epidemic. Children who spent more time with multimedia content may have had unfavorable and more significant alterations in their behavior, as seen by their increased anxiety, fear, sensitivity, and uneasiness during COVID-19. Such findings support earlier research, which has shown that prolonged exposure to screens (such as watching television and movies) in children results in behavioral changes that show up as social problems, thinking problems, aggressive behavior, as well as social withdrawal and social isolation (in the case of video games). These kids also have less time for all other everyday activities the more time they spend in front of devices. Such routine childhood activities have a direct impact on lifestyle choices made later in teenage development. The Bangladeshi government did make efforts to lessen this situation's harmful effects, although they had limited success. In order to lower the risk associated with child development and everyday care, parents are seen to be the only one with the authority to take action. It is crucial for social science researchers to concentrate on research that can provide outcomes in light of this expanding concern. Outcomes that help policymakers plan successfully. Additionally, academicians will benefit much from this type of study in terms of scholarship. We also need to be aware of the coping mechanisms employed by parents in this new normal situation. How effectively they are able to maintain the mental health of youngsters in the midst of this tragic unexpected circumstance. Children in urban areas may have more advantages than those in rural areas. In general, most people hold to this presumption. However, the results of this study will paint a picture of the condition in rural regions. Considering all of the importance of this subject, I consider this specific study to be pertinent and current.

## **STATEMENT OF THE PROBLEM**

The ILO anticipated that more than 85% of Bangladesh's informal workers are severely vulnerable, affecting the low-income, marginalized individuals who work for themselves or as day laborers (Mohiuddin, 2020). Due to difficulties in finding employment, this issue mostly impacts urban

employment, which contributes to poverty, reverse migration, and inequality. Bangladesh is currently experiencing an unparalleled economic and social catastrophe because of the Novel Corona Virus COVID-19 epidemic. Additionally, it has had a terrible influence on Bangladesh's rural population's ability to support them. The prolonged epidemic has cost many people in the informal economy their jobs and money. Rural residents are experiencing higher rates of unemployment and poverty. The COVID-19 pandemic-related partial lockdown in Bangladesh enhanced community transmission, exacerbated the healthcare situation, and raised the cost on the economy. Due to the loss of lives and livelihoods, it has also led to emotional and socioeconomic instability among rural residents in rural society. On the other side, the epidemic has temporarily had some beneficial effects on the ecosystem. Pollution has slowed down while the area was under lockdown. In many parts of the world, the water and air quality had improved. The study's objective is to determine how a child's daily routine affected COVID-19, to learn about people's knowledge and opinions of COVID-19 in the study area, as well as any issues they may have encountered during the epidemic. Through a survey and questionnaire, informal interviews were conducted in the chosen research region. COVID-19 epidemic has significantly impacted the child's social and psychological development. This study has brought attention to the effects on psychological health of the most vulnerable populations, especially rural children who are more prone to post-traumatic stress disorder, anxiety, and depression.

## LIMITATIONS OF THE STUDY

- Because this is such an important matter, a startlingly large proportion of respondents showed reluctance to participate in the data gathering process.
- As the current study was conducted in only one village out of many others in Patgram upazila, it raises questions about how accurately it represents the current situation of rural children in terms of validity and dependability.
- This initiative may have been more effective with greater funding

## LITERATURE REVIEW

**Dana Alonzo, et al.** using data from Guatemala, looked at how the pandemic affected the mental health of parents in high-risk, low-income neighborhoods. Parental stress is a significant issue in high-risk neighborhoods that has the potential to worsen psychological discomfort and child abuse. Increased community capacity and the creation of a network rooted in the community that can act as a first line of support for parents and kids can result from training community healthcare workers to identify and treat parental stress. Interventions that increase parents' access to informal and formal support networks and inform them of available services could also help with better diagnosing and treating mental health problems while preventing escalation in "school from home" situations with complex emergencies under special circumstances.

**Dillon Thomas Browne et al. (2021)** published an article on "Refugee children and families during the COVID-19 crisis: a resilience framework for mental health." In order to construct a

developmental resilience paradigm that builds on the innate qualities of refugee children and families, this research analyzes elements that challenged and promoted resilience in refugee children and families during the COVID-19 crisis. Programs and policies that serve refugees are advised to preserve concerns of trauma, family systems, cultural sensitivity, and numerous levels of analysis, from individual to societal, and from preventative to responsive interventions. The process of building resilience in children and families should also be supported by interventions and policies that facilitate access to resources.

**Michelle Achterberg *et al.* (2021)** worked on "Perceived stress as mediator for longitudinal effects of the COVID-19 lockdown on well-being of parents and children". As a result of the COVID-19 shutdown, children in families that have a history of familial over-reactivity run the risk of developing bad coping mechanisms and experiencing higher levels of stress than usual. Additionally, parents and kids who had previously had comparatively worse mental health also had lower mental health during the COVID-19 circumstance. These findings emphasize the significance of controlling externally represented stress levels in families and encourage good coping mechanisms and resilience processes. They do provide valuable insights for family assistance programmers and for identifying which families may require additional assistance during the pandemic and afterwards.

**Brooks, *et al.* (2020)** have observed that, in addition to the upheaval of daily life, children who are removed from the school environment are at risk for poor mental and physical health. These were discovered to be significant stresses for the majority of children. Uncertainty about the illness itself, coupled with a lack of interpersonal interaction in the home and a culture of familial hostility, raises stress levels in the kid population.

**Khan *et al.* (2020)** find out- Educational institutions in Bangladesh were forced to close as a part of the effort to stop the spread of COVID-19 in its early months. As a result, students lost the sense of stability and stimulation that was provided by that community, as well as the chance to spend time with friends and receive the social support needed for good mental health (WHO 2020). On March 18, 2020, when there were just eight instances in Bangladesh that had been recorded, the government shuttered all educational institutions for the balance of the month, till further notice. For the protection of its tenants, public university dorms where spatial distance could not be maintained have stayed closed. Overall, it has been established that the pandemic's disruption of routine daily activities causes tension and anxiety, and college students are not exempt from these effects.

**Mamun *et al.*** worked on "The COVID-19 pandemic and serious psychological consequences in Bangladesh: A population-based nationwide study". Lockdown measures taken during the COVID-19 epidemic in Bangladesh, like in other nations throughout the world, were abrupt and unexpected and had the potential to have significant psychological repercussions. The current study looked at the COVID-19's psychological effects in Bangladesh during the lockdown. In

relation to COVID-19, the prevalence rates for depression and suicidal thoughts were 33% and 5%, respectively. Being young, female, smoking, having concomitant illnesses, scoring highly on the Fear COVID-19 Scale, and experiencing sleeplessness symptoms were all common risk factors for suicide thoughts and depression. In contrast to districts without any occurrences of COVID-19, GIS-based maps of Bangladesh's capital city and the districts nearby, as well as coastal areas, showed significant levels of depression and suicidal thoughts. The widespread psychological effects of COVID-19 in Bangladesh highlight the need for carefully placed psychological support measures and increased access to mental health services, particularly for women and younger people.

## **THEORETICAL FRAMEWORK**

### **Bowlby's Attachment Theory**

There is a great deal of research on the social development of children. John Bowlby proposed one of the earliest theories of social development. Bowlby believed that early relationships with caregivers play a major role in child development and continue to influence social relationships throughout life. Bowlby's attachment theory suggested that children are born with an innate need to form attachments. Such attachments aid in survival by ensuring that the child receives care and protection. Not only that, but these attachments are characterized by clear behavioral and motivational patterns. In other words, both children and caregivers engage in behaviors designed to ensure proximity. Children make an effort to be near and secure with their caretakers, who in turn offer a safe refuge and a stable foundation for exploration. Bowlby's initial research has been built upon by researchers, who contend that many attachment trajectories exist. A secure attachment style is more likely to emerge in children who get trustworthy care and support, whereas an ambivalent, avoidant, or disordered form may.

### **Vygotsky's Socio-Cultural Theory**

Lev Vygotsky, a different psychologist, put out a fundamental learning theory that has since grown to be highly important, particularly in the realm of education. Vygotsky shared Piaget's view that young children learn best via active engagement and practical application. In accordance with his sociocultural thesis, the development of higher-order cognitive abilities was the responsibility of parents, caregivers, peers, and the culture at large. According to Vygotsky, learning is a fundamentally social activity. Learning is assimilated into a person's view of the world via interaction with others. The zone of proximal development, which is the space between what a person can achieve with assistance and what they can do on their own, was another idea presented by this theory of developmental psychology. Individuals are able to gradually learn and broaden their knowledge through the assistance of others who are more knowledgeable.

### **Diana Baumrind's Parenting Styles**

A kid's future success in romantic, peer, and parental relationships will likely be influenced by the parenting style that was utilized to raise that child. Clinical and developmental psychologist Diana Baumrind created the parenting philosophies of authoritative, totalitarian, and tolerant. Later, the detached/negligent style was applied by Maccoby and Martin. It is helpful to assess a caregiver's

support and demands in order to ascertain which style is being employed and how to apply it successfully. A parent's level of warmth, sympathy, and compassion for their kid is referred to as their support. Authoritarian parenting style is a term that describes how much a parent manages their child's conduct. Preschoolers showed fundamentally diverse sorts of conduct, according to Baumrind. Each type of conduct was closely tied to a certain parenting style. According to Baumrind's idea, parenting practices and children's conduct are closely related. The development and results of children might vary depending on the parenting style used. Baumrind first distinguished between authoritative parenting, authoritarian parenting, and permissive parenting based on considerable observation, interviews, and analysis. While Maccoby and Martin (1983) used two different frameworks (which is cited in Abdul Gafor, K., & Kurukkan, A. 2014. Construction and Validation of Scale of Parenting Style. *Online Submission*, 2(4), 315-323) to enhance these three parenting-styles frameworks, Diana Baumrind is most recognized for her work on classifying parenting methods.

The four types of parenting styles are:

Authoritative

Authoritarian (or Disciplinary)

Permissive (or Indulgent)

Neglectful (or Uninvolved)

### **Contemporary Cognitive-Behavioral Models and Mental Health**

The current cognitive-behavioral models (Taylor and Asmundson, 2004; Asmundson et al., 2010) investigate the critical role of traits, triggering events, cognition, and behaviors in the development and maintenance of health anxiety and have the potential to evaluate mental illnesses during the pandemic period. According to Jungmann and Witthöft (2020), adaptive emotions serve as a barrier between viral worry and excessive internet information inquiry during the epidemic while unique clinical depression controls the link between the two. Role conflicts are examined in the "Role Tension" paradigm of mental health problems. It contends that people who play various social roles might become stressed out and suffers from poor mental health as a result of role conflicts. The more general behavioral antibody hypothesis (McKay et al., 2020) examines the particular route of illness anxiety and contends that the behavioral immune system includes tendencies toward and susceptibility to disgust as well as emotional responses.

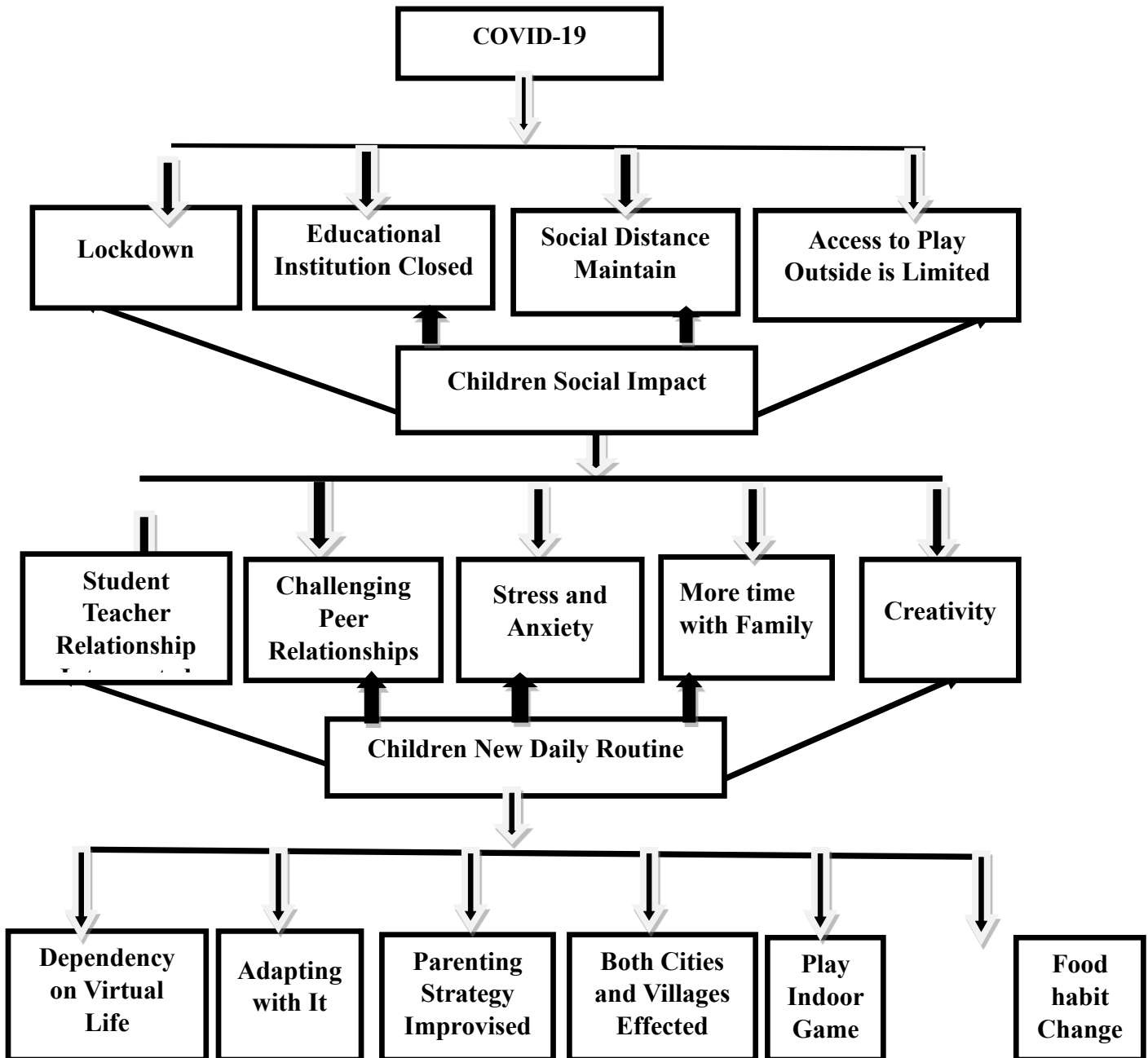
### **Bandura's Social Learning Theory**

Albert Bandura, a scientist, is the source of social learning theory. According to Bandura, the conditioning and reinforcement process cannot fully account for all of cognitive behavior. How, for instance, does the conditioning process explain taught actions that have not received classical conditioning or operant conditioning reinforcement? Observation and modeling are other ways in which behaviors may be taught. Children learn new skills and gain new knowledge through imitating the behaviors of others, such as parents and classmates. According to Bandera's thesis, observation is crucial to learning, but it need not include viewing a live model in order to be effective. As an alternative, in addition to seeing others, people can also learn through hearing vocal instructions on how to carry out a behavior.





# CONCEPTUAL FRAMEWORK



## RESEARCH METHODOLOGY

Methodology is the systematic way to complete a research study. Before planning for any research, the researcher must determine the process of data collection, data processing techniques, sampling techniques, reason for using particular method should be defined clearly. All these activities are methodological in sociological and scientific sense. Researcher should have clear idea about he is going to do and how. In this research we have mostly used survey technique to collect majority of the data. But it was not sufficient to explore the realities about the issue. So survey method was associated with case study method. While selecting study area a particular sampling procedure needs to be followed. In this study the area was selected purposively so that it can meet all the criteria required to undertake in the research. So, Patgram upazila in Lalmonirhat district was the study locale. I think most of the area there is rural in nature and I can easily find rural children there. This is why I have chosen this area.

## SAMPLING

Sample selection is also a significant task in a research. It was not possible to collect data from a large number of respondents during that unprecedented period. So I have selected 60 families as my sample. As I have worked on effect on children's daily routine during COVID 19, convenient sampling is better here. I have selected 60 families as my respondents through this technique. Family is the unit of analysis for this particular study.

## SOURCES OF DATA

A mixed approach of Qualitative and Quantitative methodology has been used in this research. Data has been collected from sources which are given below:

Primary sources of data

Secondary sources of data

**Primary sources of data:** Primary data have been collected from the research field. The methods are used for collecting primary data are-

Questionnaire

Face to face interview

Case Study

**Secondary sources:** Secondary data which was supplied by some books, journals, newspapers, websites, institutions, organizations, NGOS and other governmental agencies. Data was collected from these sources for better understanding and analyzing the problems.

## PROCESSING THE DATA

After collecting the raw data from the field, it was edited, coded, classified and cleaned.

Age (years)	No of respondents	Percentage
5-7(years)	10	16.66%
7-10(years)	14	23.33%
10-15(years)	16	26.66%
15-17(years)	20	33.33%
Total	60	100

## ETHICAL CONSIDERATION

An ethical guide was followed in this research. The confusing issue and harmful activities did not occur. Each participant was interviewed with their consent. The Respondents granted the interview willingly and comfortably. There was no kind of pressure or force on them and the entire respondent was unknown to the researcher. Therefore, the entire data collection procedure was unbiased. Participant information was not used for any other purpose without this research. Complete confidentiality was maintained.

## RESULTS AND FINDINGS

### Daily routine, attitudes, and behavior pattern of the children

The daily routine of children has been affected a lot due to COVID. The children who were school - going maintained a routine that is their time of sleep, time of study, time of leisure and so on. In the time of COVID, the school and college of students were closed. Children were in the state of confinement at home. They got lot of time to be at home. At that time their routine changed. Their time spending on study was declining. They were bored, so they used social media more than ever at the time of corona pandemic. The children were not allowed to contact with their friends and it made them feel lonely. Parents had also passed difficult time during corona. There are some parents who were job holder, both father and mother and in the pre COVID period they used to be outside home but during corona they had to spend much of their time at home. At this the children got to spend much time with their parents and at the same time there were negative effects too.

**Table 1– Outdoor physical Activities (physical exercise, playing outdoor games)**

Duration ( hours per day)	Pre COVID		During COVID	
	No of respondents	percentage	No of respondents	percentage
<b>0-1</b>	12	5%	100	41.66%
<b>1-2</b>	100	41.66%	48	20%
<b>2-3</b>	80	33.33%	56	23.33%
<b>3&lt;</b>	48	20%	40	16.33%
	Total=240	100%	Total =240	100%

[Source: field survey, October 2021]

In the above table we can see that the percentage of outdoor daily activities of children at pre COVID period and during COVID has huge differences. If we look at the table above, in the pre COVID period the percentage is only 5% who were involved in outdoor activities for 0-1 hour, while during COVID the percentage became 41.66% of outdoor activities for 0-1 hour.

In the pre COVID period percentage of children involves in outdoor activities for 1-2 hours is 41.66% but its percentage decreased during COVID period which is only 20 percent. During COVID 19, the percentage of children involving in outdoor activities more than 3 hours is negligible which is only 16.66%. So during COVID period children were not involved in outdoor activities as in pre COVID period.

### **Spending time on study:**

Spending time on study had decreased among the children who were school going during corona. As schools were being closed, so they lost their flow of study. They were losing their concentration in study due to boredom and loneliness. All kind of tuition and coaching were closed, and it leads to children to be less interested in study.

**Table 2. Spending time on study:**

Duration in hours	Pre COVID duration		During COVID period	
	No of respondents	percentage	No of respondents	percentage
<b>0-4</b>	60	25	140	58
<b>4-8</b>	80	33.33	52	21.66
<b>8-11</b>	52	21.66	36	15
<b>11&lt;</b>	48	20	12	5
	Total=240	100	Total=240	100

The above table shows that during corona the percentage of spending time in study had lessened. The percentage of studying 0-4 hours during corona was 58 percent, which in pre COVID period was 25 percent. During corona the percentage of studying 4-8 hours by children was 21.66 percent, but in pre COVID the percentage was 33.33 percent. Time spending in study for more than 11 hours among children was 5 percent during COVID

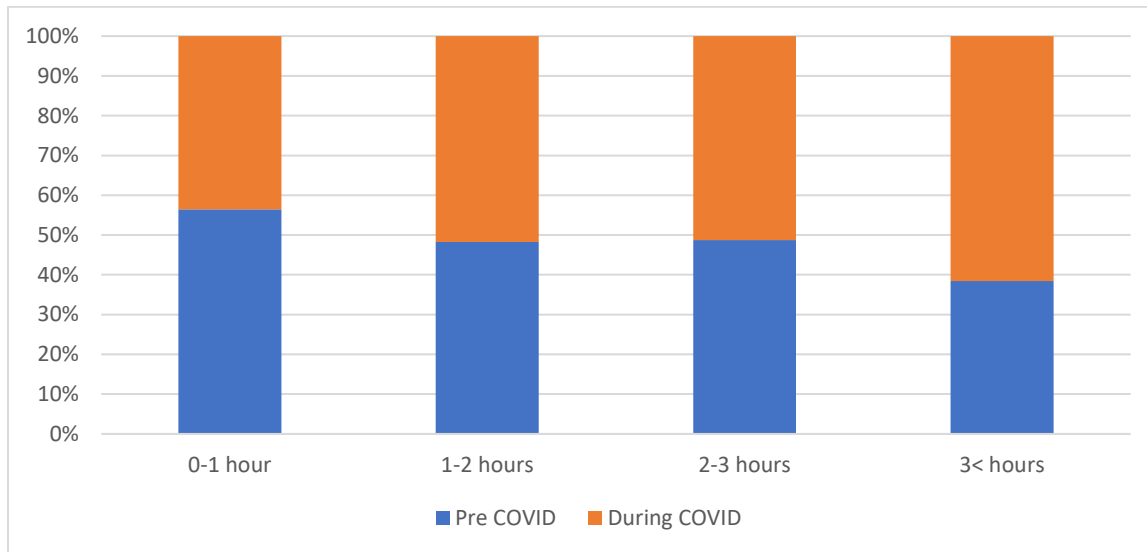
### **Time spent on social media**

When the pandemic hit strongly, the younger people along with children became dependent on social medial. The children who are 5 to 10 years old, they were mostly involved in watching cartoon and playing games in phone. The children, who had social media accounts, were dependent on it as they were confined at home. So during pandemic the time spent on social media was high than pre COVID period.

In this study we found that the number of children spending time on social media for 0-1 hour in the pre COVID 19 period is 41.66 percent, where the percentage is 33.33 percent during corona pandemic. The percentage got high in the time period (1-3) hours of using social media during pandemic which is 30 percent and in pre COVID 19 it was 28 percent. The percentage of using

social media for more than 3 hours is 30 percent among the children of pre COVID 19 period which increased to 36.66 percent.

**Figure 01: Assisting parents in the household chores**



Before corona pandemic, children used to go to school and they used to get less time to spend with their parents. They assisted their parents after doing study. During corona pandemic, all the schools and colleges remain closed. Parents and children got more time to spend together. In the above table we can see that the percentage of assisting parents for (0-1) hour before corona is 36.66 percent, where during corona the percentage became 28.33 percent. For (1-2) hours of assisting parents, the percentage for pre corona period is 23.33 percent, where during COVID the percentage become 25 percent. As we can see, the more the duration of time, the less is the percentage in pre COVID 19 period and more during COVID period. More than 3 hours the children assisted their parents before corona is 5 percent. Whereas is 13.33 percent during corona

### **Sleeping time**

When respondents were asked about their sleeping time they said that corona has changed their sleeping habits. They had a specific routine in their life. They used to sleep properly as they were involved in physical activities. They were more active in outdoor games and activities and used to get tired easily. Due to tiredness they fell asleep quickly and can have sound sleep. But due to

corona most of the time they stay at home. They are not involved in any kind of outdoor activities and so their sleeping schedule has changed.

**Table 3: Food habit (regular food)**

Times per day	Pre COVID 19		During COVID 19	
	No of respondents	percentage	No of respondents	percentage
<b>0-2</b>	60	25	68	28.33
<b>2-4</b>	120	50	136	56.66
<b>4-6</b>	56	18.33	36	15
	Total 240	100	Total=240	100

In the series of daily routine, food habit of children are also included. In the time of corona it is seen that most of the time, children stay at home. At this the numbers of eating foods were comparatively more than regular days. Again, as they were lonely and bored, they keep eating to avoid boredom. Parents said, how many times their children are taking food are depending on their mood. There are some time when their children are sleep deprived, at this time their times of eating food decreases. Again when they feel bore, they eat more than normal. From the above table, we can see that the number of respondents eating foods for (0-2) times in pre COVID period is 60 out of 240 respondents. The percentage of eating foods for 2-4 times is 56.66 percent during corona. In the pre COVID period it is 50 percent.

### **Behavioral changes and causes of depression**

COVID-19 has instilled a level of fear and anxiety in us all. As it has isolated us physically, we have felt isolated mentally. We have all felt feelings of depression as we missed friends, family and loved ones. Yet for many of us, these feelings are just a small glimpse into what it is like to be living with anxiety, depression or other mental health challenges. For many, these issues were a daily struggle before COVID-19 and they will be afterwards--perhaps made worse by the pandemic. The costs of COVID-19 lockdown and school closures on children's health, well-being

and learning have been devastating. Everyone has been affected by the pandemic, but for some children and adolescents, lockdowns and school closures have meant being subjected to violence, abuse and neglect at home. For others, increased time online, particularly unsupervised time for younger children, may have heightened the risk of being exposed to harmful content, cyber bullying and online sexual abuse and exploitation.

In the time of COVID 19, several behavioral changes have occurred in parents and children. When parents were asked about their children's; psychological state, the parents said that they are not behaving normally. Parents are noticing the changes and trying to maintain the mental stability of children

### **Some type of behavioral condition:**

#### **Aggression:**

In the time of COVID, children had to be at home. At this time, they sometimes got scolded by their parents for not behaving normally. Due to this, children behave more aggressively and become arrogant.

#### **Loneliness:**

Social distancing is one of the safety measures of corona pandemic. Children have forgotten to talk and behave socially due to this pandemic. So they face loneliness. They keep themselves away from others and enjoy being alone. They love to spend more time screening than with people.

#### **Depression:**

Depression is common for most of the people. Feeling of depression comes from various reasons. A child may also face depression. Parents have to notice carefully about child's mental health. They may not recognize but parents have to talk with their children politely and freely so that they can share how they feel.

**Table 4: Depression level of children:**

Level of depression	Frequency	Percentage
High	120	50
Low	68	28.33
Moderate	52	21.66
Total	240	100

From the above table it is seen that the 50 percent respondents feel high level of depression. It is among children who face this high level depression among 240 respondents. The percentage of low level of depression is 28.33 percent and the moderate level of depression is seen among 52 respondents which is 21.66 percent.



**Table 5: Causes of Depression:**

Reasons behind depression	No of respondents	Percentage
Unable to go to school	88	36.66
Limited access to go outside	40	16.66
Less opportunity to interact with friends	32	13.33
Uncertain about future	80	33.33
	<b>Total =240</b>	<b>100</b>

The above table represents the causes of depression that children face during corona pandemic. It is found that out of 240 respondents, 88 respondents were depressed due to unable to go to school which is (36.66) percent. Another major reason of depression for most of the respondents are seen due to uncertain about future which is (33.33) percent. The percentage of not interacting with friends is (13.33) percent. And limited access to go outside is 16.66 percent

## **PRESENTATION OF CASE STUDY**

### **Case study: 01**

Jahin is a student of class 10. She is SSC candidate. Due to corona her study has been slow down. She was taking preparations for board exam in her life first time. She was quite excited and scared. But corona has created massacre situation. For corona pandemic, the exams are uncertain and she could not concentrate in study properly. She was asked how she is taking preparations in corona and she replied,

“I’ve lost my flow of study. The exam dates are not given yet, so I along with my friend pass our time by gossiping. I want to reopen schools quickly and we want to get certain lives.”

The parents of Jahin are also worried about their daughter’s future. They think that due to this huge gap of study, the academic results of children will not be praiseworthy. They said that,

“Health is important part of every human being. But we have to admit that due to closure of schools, children’s are suffering more than anything.”

### **Case study: 02**

Retu is a student of college. She was a regular student in school. She was attentive and careful about her study. Her father is a businessman and mother is a housewife. They live in the city area of Rangpur.

During corona pandemic, her father’s business was not going well. He was upset and anxious. He got involved with dishonest people to do profit in business. He had a small business which was at risk due to pandemic. Retu’s mother was not supporting his activities. So she tried to stop him. But retu’s mother became the victim of domestic violence. Retu was in mental trouble after experiencing all these incidents. Retu said,

My whole family was in trouble. My little brother and sister also got affected by the behavior of our father. We really did not know where to go. My father gave divorce to my mother and our family scattered, she said by crying.

## **DISCUSSION ON THE MAJOR FINDINGS OF THE STUDY**

COVID 19 had spread all over the world since January 2020. When several suspicious cases started coming up in Bangladesh, the government announced that all educational institutions should be closed. All participants expressed that at first, they were unprepared and shocked by this abrupt announcement of closure, but later they understood the urgency of the decision in the COVID 19 crisis. Children daily routine are change due to the effect of COVID 19. Children of village areas face this pandemic in a different manner. They were in risk of being among its biggest victims. While they have thankfully been largely spared from the direct health effects of COVID-19, the crisis is having a profound effect on their wellbeing. All children, of all ages, and in all countries, are being affected, in particular by the socio-economic impacts and, in some cases, by mitigation measures that may inadvertently do more harm than good. This is a universal crisis and for some children the impacts are lifelong. Moreover, the harmful effects of this pandemic will not be distributed equally. They are expected to be most damaging for children in the poorest countries, and in the poorest neighborhoods, and for those reasons they are already in disadvantaged or vulnerable situations. The Novel Corona Virus COVID-19 pandemic has created an unprecedented crisis in Bangladesh. Also, it has created tremendous negative impacts on the livelihood of the rural children in Bangladesh. Many children couldn’t go to school due to the ongoing pandemic since the educational institution was being closed. Unemployment and poverty among the parents of children in rural areas increased significantly. The partial lockdown in Bangladesh due to the COVID-19 pandemic increased community transmission and worsened the healthcare crisis, mental disorder, depression of a Child. Basically, in rural society, it has created psychosocial and socio-cultural insecurity among rural children due to the loss of lives and livelihood.

Before COVID 19, the percentages of outdoor physical activities, time spent on study, assisting parents in household, spending time on social media, staying in the house for indoor games,

sleeping time are respectably 36.66% for 0-1hours, 38.33% for 1.3-2.3 hours, 41.67% for 1-2 hours, 45% for 1-2 hours, 46.67% for 0-1 hours, 51.67% for 1-3 hours and 66.66% children's have no knowledge about online class. Total respondents of the study are 240. According to the parents, it has become the new normal daily routine of their child. But the pandemic changed all routine of child because of stress, lockdown, school closing, illness, home quarantine, social distancing etc. Before Covid-19 most of the daily hours the children were involved with outdoor physical activities whereas after Covid-19 most of the daily hours the children were involved with indoor physical activities. Children used to spent time on studying is in the lowest percentage, most of children's have high knowledge about online (38.34%) , 33.33% children used to help their parents in household chores for 2-3 hours, most of the children's food habit also changes, internet connection level, participation in online class was also different than what it was before pandemic.

Stress was the most mentioned mental health problem by the respondent. They were found under a lot of pressure, not only thinking about COVID - 19 situations but also for their academic education. Along with the fear of being infected with COVID - 19, most of the respondent failed anxiety for the factors like being scattered, less motivated, unable to adapt new academic habits in this situation. Some of the respondents were frustrated thinking about their future. They felt anxiety and disappointment for not being able to complete their last year of graduation timely. The pandemic situation increases their stresses of getting jobs and being established. Due to the absence of school settings, teachers, and peer groups, children have been idle at home with their infinite vacation during the pandemic. To keep themselves busy, young people are dependent on the media and internet. Online classes permit them to use various media to obtain news, which then becomes their habitual way to stay connected with the wider society and to learn about culture and society through movies, cartoons, video games, and other sources of information. The internet provides them with a way to stay connected with their friends and peers. These sources become alternative agents of socialization in the absence of formal schools. Moreover, students do not have enough work to pass the time. Therefore, their parents allow them to use the internet for an unlimited time. This situation may make them vulnerable to being virtually abused by known or unknown sources.

## **CONCLUSION**

Bangladesh is one of the worst affected countries in COVID 19 pandemic. The adverse impact due to this pandemic has spilled over from the health care sector to the socio - economic and education sector of this country. Children were considered as target group for this study. Authentic knowledge, attitude, and practices are required to control the pandemics like COVID - 19 outbreaks. However, children can play crucial role here due to their educational connectivity and controlling adaptability for their family member and the community. They can apply the authentic knowledge, attitude, and practices to prevent their own infection. With their accessibility to information and better understanding capability toward COVID - 19, they can also act as vital hub to assist their family members and the community. Considering these, the present study was conducted to evaluate the adverse COVID 19 impact on the rural kids, specially school going students. It also measured the recent COVID 19 knowledge, attitude, and practices among these young participants. Children were found concerned and worried about the impact of COVID 19 on this present study. However, this study covers daily routine, parenting style, psychological well

being of rural children before and during COVID19. Many children in the rural areas were facing various problems that were created due to COVID-19 pandemic. Also, the spread of the COVID-19 pandemic, the partial lockdown, the disease intensity, weak governance in the healthcare system, insufficient medical facilities, unawareness, and the sharing of misinformation in the mass media has led to people experiencing fear and anxiety. In this very study, most of the respondent's age was between 10-15 years (26.66%), whereas, 45% of the respondents were male and 55% of respondents were female. Moreover, most of the respondents' educational status is secondary. 43.33% of the total respondents live in the nuclear family, and 56.66% of the respondents live in the extended family. The study shows that there are a lot of differences between the routine, parenting, and mental well being before and during covid-19.

## **RECOMMENDATIONS**

For the well- being of children and maintaining their routine some recommendations are given below:

### **To know children's demand:**

Parents should keep their eyes open regarding what their children are wanting from them. Parents have to decide how their children will grow. The child may ask for increasing duration in outdoor games, at this the parents have to handle it nicely so that the child don't get angry.

### **Taking care of mental health:**

Parents should think about child's mental health. Parents have to talk with them to know about their inner feelings. Otherwise, they will be more aggressive and feel lonely.

### **Create friendly environment**

The environment of home should be friendly. Parents have to spend more time with children. The moments that will be shared with their children should make them interesting not monotonous. Parents can play new games in every weekend or cook something special together. These will strength the bond between parents and children.

### **Family interactions**

Interactions between family members should be ensured. At this the child will not feel lonely. When the child will get someone to talk within family, they will not seek anyone from outside.

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