

WEBINAR REPORT

Mental Health and Well-being in the Post-Covid World

20 July 2020



Department of Anthropology
In Association With Department of Psychology
University of Delhi

Mental Health and Well-being the in Post-Covid World

Webinar Report

20th July 2020

Patron

Prof. P.C. Joshi
Pro-VC University of Delhi

Organising Committee

Convener

Prof. Nandita Babu

Co- Convener

Dr. K. N. Saraswathy

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Dr. Avitoli Zhimo

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Dr. Chakraverti Mahajan

Rapporteurs

Session One

Ms. Shagufta Naaz Ansari & Mr. Sudipta Dutta

Session Two

Ms. Rashmi Patel & Mr. Nikhil Kaithwas

Session Three

Ms. Navjot Kamboj & Ms. Apoorva Sharma

Session Four

Mr. Shubradeep Pathak

Session Five

Mr. Sayak Chakraborty & Mr. Krishna Kant Yadav

Report Compiled by

Mr. Nikhil Kaithwas

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Mental Health and Well-being in the Post-Covid World

Mental Health is one of the key aspects of human well-being. Mental health encompasses subjective well-being, perceived self-efficacy, autonomy, competence, intergenerational dependence. Mental health enables people to realize their potential, cope with the normal stresses of life, work productively, and contribute to their communities. Mental health, like other aspects of health, can be affected by a range of social, cultural, economic, political and environmental factors such as national policies, social protection, living standards, working conditions, and community social supports. WHO estimates that one in four people in the world will be affected by mental or neurological disorders at some point in their lives and worldwide around 450 million people suffer from mental health issues. It is understood that depending on the local context, certain individuals and groups in society may be placed at a significantly higher risk of experiencing mental health problems.

Keeping in mind the recent COVID 19 pandemic, mental health and well-being assumes even greater importance. This sudden pandemic has brought life to a standstill and forced people to remain confined within spaces that they may or not have chosen. The phases of lockdown and unlock down are a difficult times for people as we continue hearing about the spread of COVID 19 all over the world, through television, social media, newspapers, family and friends and other sources. In addition, the absence of any vaccine and mounting number of deaths because of COVID 19 has instilled people with uncertainty, panic and fear.

The pandemic in itself has become an enabling environment for the manifestation of mental health issues. Physical isolation can push people into modes of anxiety and stress. Social distancing and lack of mobility might contribute to depression, anxiety and lack of self-esteem.

The rise in internet platforms to communicate as the new normal may impact natural abilities of human communication aggravating already existing problems of social anxiety and panic. Individuals who have suffered personal losses in terms of life will suffer through trauma of this time for the rest of their lives. In these times when people are dealing with various social, economical and medical challenges, we attempt to understand the widespread impact of Covid-19 on the psychological landscape of the individual and the society. This is an attempt to understand holistically how various sections of the society are coping with the effects of the lockdown and how a Postcovid world might look.

With the aim of understanding mental health and resilience in the times of Covid-19, the Department of Anthropology in collaboration with Department of Psychology, University of Delhi is organizing a Webinar on 'Mental health and Well-being in the Postcovid world'.



PATRON
PROF. P.C. JOSHI



CONVENER
PROF. NANDITA BABU



CO-CONVENER
DR. K. N. SARASWATHY



CO-CONVENER
DR. AVITOLI ZHIMO



ORGANISING SECRETARY
DR. CHAKRAVERTI MAHAJAN

ORGANISING COMMITTEE

Mental Health and Well-being in Post-Covid World

A Webinar



AN ANTHROPOLOGIST LOOKS
AT MENTAL WELL-BEING
DURING THE TIMES OF
COVID

PROF. VINAY SRIVASTAVA
DIRECTOR
ANTHROPOLOGICAL SURVEY
OF INDIA
KOLKATA



RE ENVISIONING THE
POSTCOVID ERA

DR. RANJIT POWAR
FOUNDER
NISHAN EDUCATIONAL TRUST
CHANDIGARH



COVID, PRODUCTIVITY AND
PATCHWORK METHODS

DR. SAIBA VARMA
ASSISTANT PROFESSOR
DEPARTMENT OF ANTHROPOLOGY
UNIVERSITY OF CALIFORNIA
SAN DIEGO



COVID AND BRAIN

PROF. M V PADMA SRIVASTAVA
HEAD
DEPARTMENT OF NEUROLOGY
AIIMS
NEW DELHI



AT THE STILL POINT OF THE
TURNING WORLD: REFLECTIONS ON
CULTURAL LOSS AND BREAVEMENT

DR. ALISON KAHN
DIRECTOR
OXFORD DOCUMENTARY FILM
INSTITUTE
OXFORD



BALANCING MENTAL HEALTH
DURING COVID TIMES

DR. RAYAN MATHIAS
MANIPAL ACADEMY OF
HIGHER EDUCATION MANIPAL
KARNATAKA



COVID, MENTAL HEALTH AND WELL
BEING: ANTHROPOLOGICAL
PERSPECTIVES

DR. R. P. MITRA
ASSISTANT PROFESSOR DEPARTMENT
OF ANTHROPOLOGY
UNIVERSITY OF DELHI



MENTAL HEALTH AND
SOCIAL SCIENCE RESEARCH
IN A POST COVID WORLD

DR. SHUBHA RANGANATHAN
ASSOCIATE PROFESSOR
DEPARTMENT OF LIBERAL ARTS
IIT HYDERABAD

20 July 2020



REGISTRATION, LINK:
[HTTPS://TINYURL.COM/Y
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ADOLESCENT MENTAL HEALTH
CHALLENGES IN COVID
PANDEMIC

DR. RACHNA BHARGAVA
ASSOCIATE PROFESSOR
DEPARTMENT OF PSYCHIATRY
AIIMS
NEW DELHI



COVID, GENDER AND MENTAL
HEALTH

DR. MEENU ANAND
ASSISTANT PROFESSOR
DEPARTMENT OF SOCIAL WORK
UNIVERSITY OF DELHI

DEPARTMENT OF ANTHROPOLOGY
IN ASSOCIATION WITH
DEPARTMENT OF PSYCHOLOGY
UNIVERSITY OF DELHI

Mental Health and Well-being in the Post-Covid World

20 July 2020

OPENING SESSION 10:00AM - 10:15AM

PROF. M. P. SACHDEVA
WELCOME ADDRESS

PROF. NANDITA BABU
INTRODUCTORY NOTE

SESSION 1 | 10:15AM - 11:35AM MODERATORS: PROF. M. P. SACHDEVA AND DR. VIPIN GUPTA

PROF. V. K. SRIVASTAVA
*AN ANTHROPOLOGIST LOOKS AT MENTAL WELL-BEING
DURING THE TIMES OF COVID-19*

DR. SAIBA VARMA
COVID, PRODUCTIVITY AND PATCHWORK METHODS.

RAPPORTEURS:
MS. SHAGUFTA NAAZ ANSARI AND MR. SUDIPTA DUTTA

SESSION 2 | 11:35AM - 12:55 PM MODERATORS: PROF. NANDITA BABU AND DR. MITASHREE SRIVASTAVA

PROF. M V PADMA SRIVASTAVA
COVID AND BRAIN

DR. SHUBHA RANGANATHAN
MENTAL HEALTH AND SOCIAL SCIENCE RESEARCH IN A POST COVID WORLD

RAPPORTEURS: MS. RASHMI PATEL AND MR. NIKHIL KAITHWAS

SESSION 3 | 12:55 PM - 1:35PM MODERATORS: DR. AVITOLI ZHIMO AND DR. SHIVANI CHANDEL

DR. ALISON KAHN

*AT THE STILL POINT OF THE TURNING WORLD: REFLECTIONS ON CULTURAL LOSS AND
BEREAVEMENT*

RAPPORTEUR: MR. SUBHRADEEP PATHAK

SESSION 4 | 2:00 PM - 3:20 PM MODERATORS: DR. P. R. MONDAL AND DR. M. KENNEDY SINGH

DR. RACHANA BHARGAVA
ADOLESCENT MENTAL HEALTH CHALLENGES IN COVID PANDEMIC

DR. MEENU ANAND
COVID, GENDER AND MENTAL HEALTH

RAPPORTEURS: MS. NAVJOT KAMBOJ AND MS. APOORVA SHARMA

SESSION 5 | 3:20PM - 5:20PM MODERATORS: DR. B. MURRY AND DR. N. KIRANMALA DEVI

DR. RAYAN MATHIAS
BALANCING MENTAL HEALTH DURING COVID TIMES

DR. R. P. MITRA
*COVID, MENTAL HEALTH AND WELL-BEING:
ANTHROPOLOGICAL PERSPECTIVES*

DR. RANJIT POWAR
ENVISIONING THE POSTCOVID ERA

RAPPORTEURS: MR. KRISHNA KANT YADAV AND MR. SAYAK
CHAKRABORTY

CLOSING SESSION 5:20 PM - 5:30 PM

DR. K. N. SARASWATHY
CONCLUDING REMARKS

DR. CHAKRAVERTI MAHAJAN
VOTE OF THANKS

OPENING SESSION: 10:00AM - 10:15AM

Welcome Address: Prof. M.P. Sachdeva

Introductory Note: Prof. Nandita Babu

The Department of Anthropology in association with the Department of Psychology, University of Delhi organised a webinar on 20th of July 2020. The webinar was titled, 'Mental Health and Well-being in the Post-Covid World' and aimed to build an interdisciplinary understanding of the issues of mental health and well-being challenges in the Post-Covid world. The webinar was conducted through Zoom cloud meeting App with Dr Chakraverti Mahajan (Assistant Professor at the Department of Anthropology) as the on-screen moderator and Dr Avitoli Zhimo (Assistant Professor at the Department of Anthropology) as the host of Zoom meeting. The webinar began at 10:00 AM with the formal inaugural speech by the head of the Department of Anthropology, University of Delhi.

Prof. P.C. Joshi

Inaugural address

The webinar was formally inaugurated by Prof. P.C. Joshi (Pro-Vice-Chancellor of University of Delhi and Head at the Department of Anthropology, University of Delhi). In his speech, he briefly talked about the concerns of Mental health and well-being issues among the students which are caused by the COVID and lockdown. In his address, he deliberated on the usefulness of such webinar for the welfare of the students and thanked the wide range of speakers, participants and faculty members for joining. He ended his note, by recommending the organisers to make a brief report of the proceedings in the form of a booklet so that the understanding of the concepts can be used in the future.

Prof. M. P. Sachdeva

Welcome Address

Following the inaugural note, Dr Chakraverti Mahajan invited Prof. M.P. Sachdeva (Professor at the Department of Anthropology, University of Delhi) to deliver the welcome note address. On behalf of the organising committee, Prof. Sachdeva warmly welcomed the speakers, faculty members and the participants to the webinar. He started his welcome address by introducing the Department of Anthropology to the audience. While introducing he also mentioned about the webinar series where the present webinar, unfolds itself as the second webinar of the four webinar series hosted by the Department of Anthropology, University of Delhi.

Laying importance on mental health and well-being concerns, Prof. Sachdeva highlighted the epistemological and methodological challenges posed by the COVID19 on the disciplinary nuances of Anthropology and advocated for the change in the paradigms of research, teaching and meaningful contribution of the Anthropologists to the society for a decent and respectable living of all human life. In his speech, Prof. Sachdeva made revelations about the lagging economy in the ongoing situation of the pandemic, resulting in homelessness, Psychiatric disorders and substance abuse. To this, he suggested that the cascade of such growing demands are likely to increase the mental health problems to which we must be prepared. Further, while talking about the uncertainty of its end. He added different nations have faced different scars in the form of Pandemic and war. As an anthropologist, he is more likely to be concerned for questions like, 'Are these scars transgenerational?' as seen in the case of Hiroshima and Nagasaki, Vietnam war and partition of the countries. While in such conditions, the poor have suffered the rich commit more suicides. Quoting Leo Tolstoy's Anna Karenina he deliberated on emotional disengagement. Which further posed the question, such as 'How the societies, communities, and nation face such calamities?' to which he added factors like collected gene pools? Collected psyche? Or the collective social and cultural modes? Does religion affect such interaction? With questions like these, Prof. Sachdeva asked the Convenor of the webinar, Dr Nandita Babu, to give her introductory address to the audience.

Prof. Nandita Babu

Introductory Note

Following the welcome note, Prof. Nandita Babu (Head at the department of psychology, university of Delhi) convenor of the webinar took on the screen. In her introductory address, she suggested that this pandemic situation can be seen in both a positive and negative manner. The present situation mainly manifesting itself as a great opportunity for collaborating in research and practices. She stressed the importance of cross-disciplinary studies to build a comprehensive understanding of the relationship between mental health issues and pandemic. She asserted, that the impact of the pandemic is multi-dimensional. Which is to say that the COVID led to distress, anxiety and depression are not linear. Its impact varies across societies, cultures and individuals. To understand the Corona led distress it is important to understand the cross-cultural vulnerability of communities. She also informed the participants that, keeping the cross-disciplinary understanding of the mental health as a priority the organising team can invite people from neurology, anthropology, psychology, social work and education. She also suggested, it as the most appropriate situation to have people from various disciplines and hoped to have participants from various disciplines and urged them to ask questions and wished success for the webinar.



IMAGE 1: PROF. P. C. JOSHI DURING HIS INAUGURAL ADDRESS



IMAGE 2: PROF. M. P. SACHDEVA DURING HIS WELCOME ADDRESS

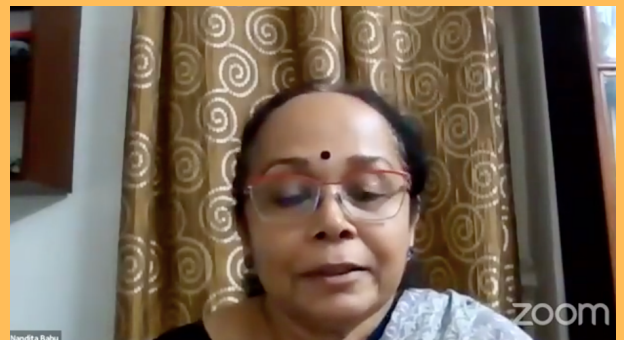


IMAGE 3: PROF. NANDITA BABU DURING HER INTRODUCTORY ADDRESS

SESSION 1: 10:15AM - 11:35AM

Moderators: Prof. M.P. Sachdeva and Dr. Vipin Gupta

Rapporteurs: Ms. Shagufta Naaz Ansari and Mr. Sudipta Dutta

This first session had two profound speakers. The first speaker was **Prof. Vinay Kumar Srivastava** (Director of Anthropological Survey of India, Kolkata) and the second speaker was **Dr. Saiba Varma** (Assistant Professor at the Department of Anthropology, University of California, San Diego). The session was chaired by **Prof. M. P. Sachdeva** (Professor at the Department of Anthropology, University of Delhi).



IMAGE 4: PROF. M.P. SACHDEVA, MODERATOR OF SESSION 1

Prof. Vinay Kumar Srivastava

An Anthropologist looks at Mental Well-being during the times of COVID

Prof. Srivastava has covered almost all the facets of anthropology in his talk. He started his talk by emphasizing that we should be interdisciplinary but at the same time we should not forget the central ideas of anthropology. He elaborated on the concept of mental health in anthropology.



IMAGE 5: PROF. V. K. SRIVASTAVA DURING HIS LECTURE

He pointed out the problem of generalization. He discussed how lockdown has affected every family differently. He shared few experiences of his scientific staff members. He has also discussed the funnel down and funnel up approaches in anthropology. He elaborated on how Marginalized people (tribal, denotified groups) are facing the problem of hunger virus rather than Coronavirus. He emphasized on the importance of fieldwork in anthropology, problem of medicalization. He mentioned a new term "Unknown-ness". Further he elaborated on the problem of stigma and how stigma affects differentially. He also argued that "Corona has no soul". It doesn't differentiate between poor and rich, ethnicity and gender. He further discussed the institution of fear. He observed that people hide their symptoms because they are afraid of what would happen to their family if they disclose the truth. Also, he pointed out how fear leads to a situation where you feel dejected.

He concluded his talk by motivating the audience to look at everything critically. He said we should look for the alternatives rather than sitting ideally. He said that we all are one; we all should fight the “syndrome of alien”. He emphasized on the importance of empathy and the love for others, especially at this time of pandemic.

Dr. Saiba Varma

COVID, Productivity and Patchwork method



IMAGE 6: DR. SAIBA VARMA DURING HER LECTURE AND COVER OF HER POWERPOINT PRESENTATION.

Her talk basically revolves around two central ideas. One was how this pandemic of COVID has exaggerated the existing vulnerabilities and second one, what are the various possible opportunities in the post pandemic era. She started her talk by giving the introduction of psychological anthropology. She further elaborated on the relationship between mind, self and emotion. She also talked about the “collective trauma” among the refugees and people of Kashmir. She has discussed the various challenges that are faced by the researchers, medical/ public health workers due to this pandemic of COVID.

She also elaborated on the challenges that are faced by the students of the USA, specifically on how students are not able to pay bills, tuition bills in this pandemic situation. She also highlighted that these situations are worse among those families who do not have stable income. She also pointed out that online education can be problematic for the underprivileged and marginalized population groups. Also, she highlighted that Social isolation is more problematic in countries like the USA where already people have issues with loneliness. She has elaborated on the shifts in gender relation, personal relation and professional relation occurred due to this COVID.

Further, she has talked on how the concept of time is changed, people facing problems to spend their day in the lockdown situation. She discussed the sense of unbroken time, people have no idea what we have done in the given day, the routine is hampered now in this

pandemic era. She has given the example of work of Robert DeJale, on how homeless people are facing the problem to spend their time.

She emphasized on the responsibility of the scholar to do online research and multi-sited ethnography in the post COVID era. Also, she has discussed that the emergence of social movements in the pandemic situation is not accidental, people now understand to stand together, and helping each other is important.

She also elaborated on the new methodological and theoretical approach to ethnography i.e., patchwork ethnography. She has discussed that the patchwork ethnography begins from the acknowledgement that recombination of “home” and “field” have now become necessities more so in the face of the current pandemic.

Also, she highlights how changing living and working conditions are profoundly changing knowledge production. She pointed out that Patchwork ethnography is not an excuse to be more productive. Instead, it is an effective, but kinder and gentler way to do research because it expands what we consider acceptable materials, tools, and objects of our analyses. She has offered it as a resource for a changed world after the pandemic.

After the talk two questions were asked from her-

Q1) What are the after effects of this pandemic that are seen among the people of the USA?

Answer- She explained that people are getting concerned about others now and also this time is great for any social movements. People are not scared; they are coming out of their houses and protesting. Many people now understand the need for each other.

Q2) How is your experience as a foreigner in the USA right now?

Answer- She said for two months she was in her house, it is kind of boring to her. But as she has a secured job, many increased responsibilities are on her. She also said there came a time when she was reminded of her insecurities as well. After the new law came for visa, there are now more complications in the USA. She pointed out that many foreign students, especially Ph.D. scholars are concerned about how to continue their research in the USA.

SESSION 2: 11:35AM - 12:55PM

Moderators: Dr. Mitashree Srivastava and Prof. Nandita Babu

Rapporteurs: Ms. Rashmi Patel and Mr. Nikhil Kaithwas

The second session of the webinar was chaired by **Dr. Mitashree Srivastava** (Assistant Professor, Department of Anthropology, University of Delhi) with **Prof. Nandita Babu** (Head of the Department, Department of Psychology, University of Delhi) as a discussant. The session had two speakers. The first speaker was **Prof. MV Padma Srivastava**, Head at the Department of Neurology, AIIMS, Delhi and the second speaker was **Dr. Shubha Ranganathan**, associate professor at the Department of Liberal Arts, IIT Hyderabad. Dr. Mitashree Srivastava welcomed the speakers and introduced them to the audience before they formally started their presentation.



IMAGE 7: DR. MITASHREE SRIVASTAVA, MODERATOR OF SESSION 2

Prof. MV Padma Srivastava

Brain and COVID

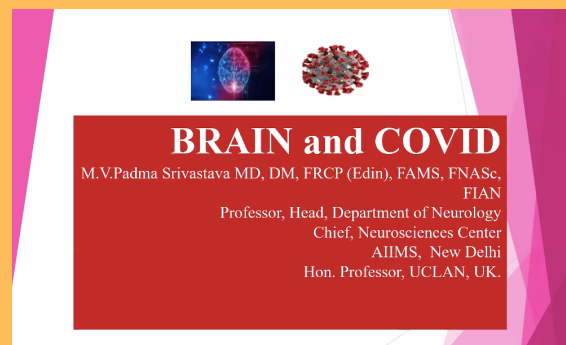


IMAGE 8: PROF. MV PADMA SRIVASTAVA DURING HER LECTURE AND COVER PAGE OF HER POWERPOINT PRESENTATION

The first lecture of the second session was taken by Prof. MV Padma Srivastava and the title of her lecture was COVID AND BRAIN. Before starting her lecture she pointed to the fact that the pandemic is still a recent phenomenon and everyday there is something new coming up thus the studies are at the learning curve. The main aim of her lecture was to broaden the understanding of the COVID as an infection of lungs to its emergence as a systemic disease causing neurological disorder and she further went into developing insights on the post COVID clinical mental health conditions of the survivors suggesting the brain impairment through the sheer infection. She started her presentation by elucidating the global distribution of the pandemic, the available testing methods and relating it with the physio-pathology of the SARS-CoV-2 at the level of its contraction.

She pointed out that COVID19 is markedly different from SARS, MERS and the Swine-flu as it enters the human cell through an ACE-2 receptor through a flaccid spike protein, which also makes the primary basis of the testing. Her lecture covered important points such as Neurological aspects of COVID 19; relation between cardiovascular disease, COVID19 and stroke, the neurological problems caused by the covid19, Multinational Cohort for the corona survivors, lab findings and findings from multiple contemporary research happening worldwide.

While discussing the neurological aspect of the COVID19, she quoted the case study of Wuhan, China where the epidemic emerged. It was found that among the initially admitted patients' neurological symptoms like headache, loss of smell and taste were common symptoms suggesting that the virus is entering the brain, which was supported by the autopsy studies. So the Sars-CoV-2 or COVID19 has a systemic disease with the involvement of the lungs, kidneys, gastrointestinal system with hypoxic conditions, along with the involvement of the brain. The clotting which may cause stroke, just inflammation or the infection of the brain causing encephalitis and in children develop something called Kawasaki-Like syndrome.

In the last part of her lecture, she discussed about COVID and stroke and how they are managing people who are coming in with COVID and non-COVID emergencies especially in the times when the whole hospital is turned into COVID only facility. To sustain the cases along with the exclusive COVID care, they have introduced telemedicine. She has used tele stroke because she is a stroke person and she has been running the tele stroke. This was done to connect with the patient to reach out through telephone, WhatsApp, video call and they have actually managed to see 80000 patients that way. These are the frameworks that have been invoked to deal with the non-COVID patients in all the units of the hospital. They have also managed to provide guidelines on the consensus statement of how to manage stroke and COVID in India.

She ended her presentation by saying, 'Have your antenna up, get your red flags and I think these red flags are now much more than what we needed back in the month of May 2020. And also the testing has been ramped up quickly so if there is some suspicion go get tested quickly. And never ever give up on anybody with a mental health problem'.

Dr. Mitashree Srivastava, moderator of the session remarked her presentation as a myths buster regarding COVID and comprehended it against the apathy media which focus more about the classical features rather than talking about the intersectionality between the cardiovascular problem and neurological problems. Later she summarised the comments and questions of the participants and ended the first part of the session.

Dr. Shubha Ranganathan

Mental Health and Social Science Research in the PostCovid World

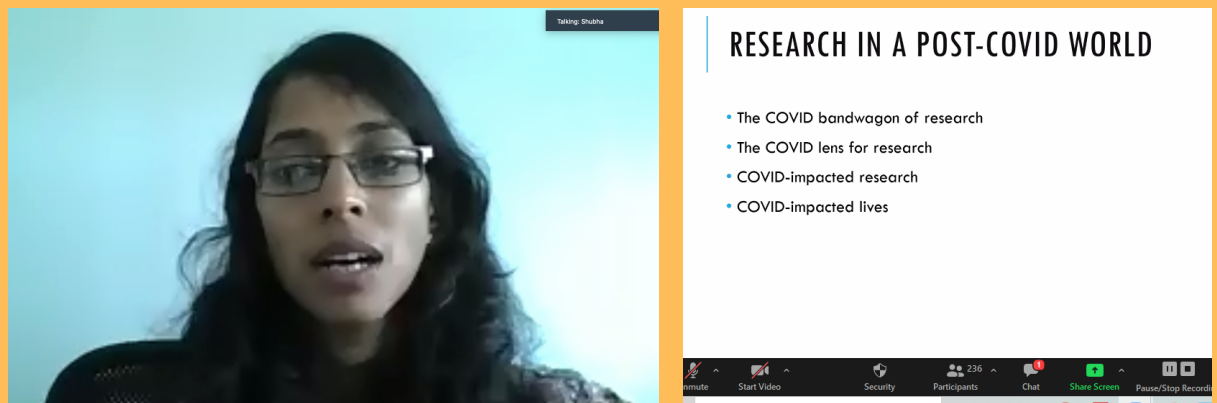


IMAGE 9: DR. SHUBHA RANGANATHAN DURING HER LECTURE AND EXCERPT FROM HER POWERPOINT PRESENTATION

Dr. Shubha Ranganathan began her lecture by commenting upon the term 'Post Covid World' and whether or not it is a right word to use as the present world is still dealing with Covid-19. She exclaimed how we are still unsure about what a post-covid world will really look like. She talked about research in a post-Covid world through four major subheads. The first point was 'The Covid bandwagon of research'. She elaborated upon this by pointing towards the rising amount of scholarship on Covid-19 and how researchers from every field, be it science or social science, are trying to make sense of the situation through their writings and work. Thereafter, she moved on to the second point where she discussed the 'The Covid lens for research'.

Within this, she spoke how the Covid-19 pandemic has made us, as researchers; question the established notions of how we understand the world around us. This pandemic has provided us with a lens through which we are looking at our everyday lives, work, families, and social relations in a new light. The Covid-19 lens also provides us a new look for social science research and its relevance in the post-covid world. Thirdly, she spoke about 'Covid impacted research' where she discussed in detail how the recent pandemic might affect fieldwork and data collection for social scientists. Within the context of Covid impacted research,

She further discussed the questions of exclusion and representation, questions of time, questions of impact and the questions of value. She elaborated that social science research during and after the pandemic should take into account above mentioned questions and be more relevant. The fourth component of research in post-covid world was 'Covid impacted lives'. Within this, she discussed how surviving and doing research in covid-world becomes a challenging task. Thereafter, she discussed the challenges for the researchers and challenges for the participants while conducting research. She once again questioned the impact and value of research conducted in such a setting.

Moving forward, Shubha introduced the term 'slow' science to her audience where she discussed Isabelle Stengers's work 'Another Science is Possible: A manifesto for Slow Science'. She defined 'slow' science as 'an alternative science', a science that is not afraid of public engagement and scrutiny and that resists conformism, competitiveness, and opportunism'. According to her, 'slow' science is socially and stands at the opposite end of a research culture where the focus is on rapid research on current topics, seeking to obtain quick findings of worldwide relevance. 'Slow' science is slow enough to understand the changing situation of Covid-19. Further describing 'slow' research, Shubha discussed Adams, Burke and Whitmarsh's thoughts from their research paper titled "Slow Research: Thoughts for a Movement in Global Health", wherein she quoted them saying that:

"In academic and activist fields of global health today, we are all being asked to be productive in ways that create a sense of having to do more and to do it faster, to multitask for survival in a global workplace, to always be thinking of the next big thing, to scale up and implement, often even before we have completed our tasks at hand. Our perception of normalcy in relation to the pace and vigor of our work seems governed by entanglements in anticipation, innovation, and speed.

These demands are not simply a result of how we conceptualize efficiency or capacity. Rather, they are directly related to problems of funding (capital), globalization (scale), and quality and focus (method). A call for slow research interrogates these demands. Slow research is not about doing less over time, although there is a temporal concern. Slow research is not necessarily opposed to 'fast' research, but it is opposed to what might be identified as a new normal.

Slow research is a response, addition, and possible alternative to the newest normative trends. It entails working with an ethic or set of values and strategies that valorize different things from the emergent norms".She concluded her thoughts on 'slow' research by discussing its four values. The first value of 'slow' research is that it focuses upon local contexts and particularities. She explained this by highlighting that the impact of Covid-19 has been significantly different across the global north and south. It is only through understanding the local context and particularities can we carry out relevant research. And this will require an emphasis on long-term and sustained engagement with the research, which is actually the second value of 'slow' research. The third and fourth values of 'slow' research are commitment to public engagement and insulation from global funding agencies respectively. She wrapped her lecture by quoting the 'The Slow Science Manifesto' that "Science needs time to think. Science needs time to read, and time to fail" and it is upon us whether we are willing to take out that time.

SESSION 3: 12:55PM to 1:35 PM

Moderators: Dr. Avitoli Zhimo and Dr. Shivani Chandel

Rapporteur: Mr. Shubradeep Pathak

The third session of the webinar was chaired by **Dr. Avitoli Zhimo** (Assistant Professor, Department of Anthropology, University of Delhi) with **Dr. Shivani Chandel** (Assistant Professor, Department of Anthropology, University of Delhi) as a discussant. The session had one speaker, **Dr. Alison Kahn**, Director of Oxford Documentary Film Institute, UK.

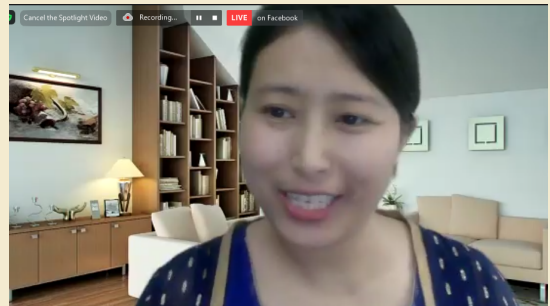


IMAGE 10: DR. AVITOLI ZHIMO, MODERATOR OF SESSION 3

Dr. Alison Kahn

At the Still Point of the Turning World: Reflections on Cultural Loss and Bereavement

Due to shortage of timing and the speaker's obligations to attend another webinar this session could not be held. Break was declared after which session four started.

SESSION 4: 2:00PM - 3:20PM

Moderator: Dr. P.R. Mondal and Dr. M. Kennedy

Rapporteurs: Ms. Navjot Kamboj and Ms. Apoorva Sharma

The fourth session of the webinar began with an opening address by **Dr. P.R. Mondal** (Associate Professor, Department of Anthropology, University of Delhi and **Dr. M. Kennedy Singh** (Assistant Professor, Department of Anthropology, University of Delhi). The Session had two speakers. The first speaker was **Dr. Rachna Bhargava** is an associate professor in the Department of psychiatry at AIIMS, New Delhi and the second speaker was **Dr. Meenu Anand** She is an assistant professor in the Department of Social work, University of Delhi and Dr. P.R. Mondal and Dr. M. Kennedy Singh welcomed them and introduced them before their presentations.

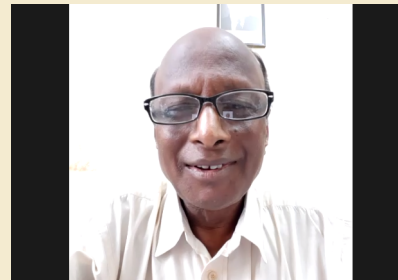


IMAGE 11: DR. KENNEDY SINGH AND DR. P. R. MONDAL, MODERATORS FOR SESSION 4

Dr. Rachna Bhargava

Adolescent Mental Health Challenges in COVID Pandemic

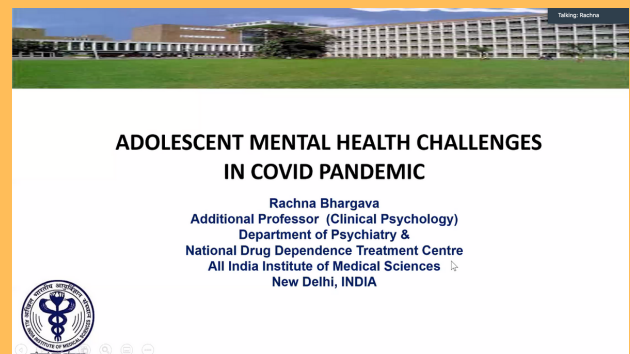
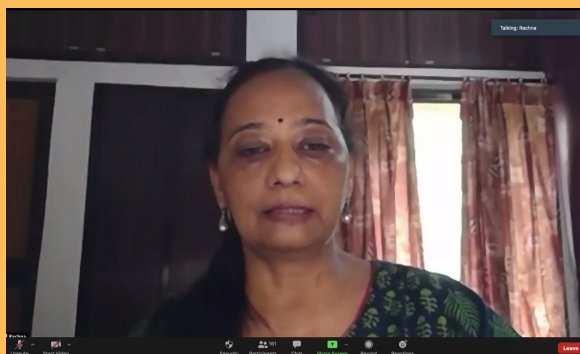


IMAGE 12: DR. RACHNA BHARGAVA DURING HER LECTURE AND COVER PAGE OF HER POWERPOINT PRESENTATION

Dr. Rachna Bhargava in her presentation on Adolescent mental health challenges in COVID pandemic, reflected upon adolescent mental health challenges in Covid-19 pandemic. She mentioned adolescents make up 16% of the population in the world and 21 % in India. Adolescents are characterized by Storm, Stress, Physical and Emotional & cognitive Growth, decision making time for moral and career growth. She reflected the half of all mental conditions start by 14 years of age but most cases are undetected or untreated and the depression is one of the leading causes of illness and disability among adolescents and suicide is the third leading cause of death in adolescents.

She talked about the poor help seeking behavior among adolescents in which she mentioned lack of motivation, depression, and low rate of mental health literacy, stigma, discrimination and embarrassment surrounding mental illness. She emphasized on the issues arising due to Covid-19 Pandemic and influencing mental health and these issues are School/College Closure, delayed entrance exams and Interviews, Online Classes, Access of internet and fear of academic failure, Family issues like domestic violence, Loss of job, financial crisis, Death, impact on social life and it has affected the work -life as well; now people use over internet for getting information.

Dr. Bhargava presented her latest paper “The impact of lockdown following covid-19 on the gaming behavior of college students” in which she focused to assess the gaming behavior of college students during the lockdown following Covid-19. She reported 50.8% participants had increased their gaming behavior, 14.6% reported a decrease in their gaming behavior during the lockdown period. She concluded in her study that in the lockdown period, increase in gaming behavior was associated with examination-related stress and believe that gaming helps combat stress. These observations highlight the need to focus on the coping style of the students to ascertain the likelihood of them engaging in gaming behavior as a coping mechanism against stress.

Dr. Bhargava also highlighted the recommendations for improving mental Health. She suggested that we should have a Balanced Diet, Structured routine, small goals, start to learn to cope with uncertainty, learn about cyber safety and learn about new normal: behavior change. She also said that we should spend quality time with our family, should start an open communication regarding worry, like dislikes and should maintain the social life through What's app, calls or other social media.

Lockdown and Covid 19 have impacted our mental and behavioral health; it has increased our adjustment and stress issues, also created the psychiatric disorders, depression, anxiety and grief. Further she talked about the preparation for post Covid Challenges, she raised the Question; Is it okay to be little stressed and is it easy to shift back to routine with mask and physical distancing. Further she talked about the psychological interventions and suggested the Cognitive behavior therapy (CBT) is most effective in common mental disorders. Bhargava also compared the conversation through digitalization and face to face with masks.

At the end she highlighted the role of teachers and Policy makers. Teachers have adapted the online mode of teaching but teachers should make online teaching interesting, conduct online examinations or weekly/monthly tests, taking time to know about student's issues and should join online teaching training courses. Policy makers should be prepared for understanding and resolving the issues and pros and cons of decisions and must be ready for cost effective actions.

In the Question and answer session, Shagufta Ansari asked "Does the genetic makeup of the patients affect the efficacy of the intervention? To this Dr. Bhargava answered No, as far as no hardcore data available for this. Patients behavior or nature (Shy or expressive) may affect but not the genetic.

Dr. Meenu Anand

COVID, Gender and Mental Health

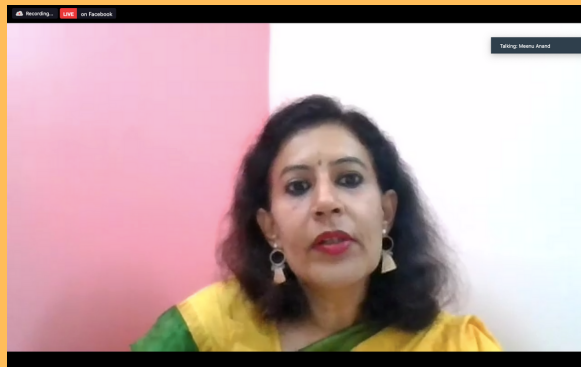


Image 13: Dr. Meenu Anand, during his lecture

Dr. Meenu Anand discussed thoroughly on COVID, Gender and Mental Health. She initiated her discussion with describing mental health. She explained mental health as a sense of belonging, as a journey from isolation to fulfilling and purposeful life ways.

The introduction lays the theoretical foundation for the theme COVID, Gender and mental health' in the contemporary socio-cultural scenario in India. It attempts to present the need to discuss why gender matters in mental health and more during COVID and it explains the relationship between gender and health-seeking behaviors. It presents the diverse approaches related to mental health while thrusting on the significant socio-cultural determinants including gendered socialization of boys and girls, expected roles and responsibilities, behavioral traits and access to resources. The discussion seeks to interlink the issues of mental health with an attempt to develop a deeper understanding of micro-level issues within the overall context of the perpetuating nature of inequities from a gender lens during the COVID times.

She focuses on various aspects of gender and mental health. Drawing on multidisciplinary perspectives and scholarship, it summarizes the complex intertwining of illness and culture in the context of the rising frequency of mental disorders and various aspects related to COVID. She divided her discussion into three sections, the first of which examines the fundamental and conceptual underpinnings of mental health, well-being and wellness from a COVID and gender perspective, in order to present an overview of mental health through a holistic lens. The second section focuses on the mental health scenario in India, examining the epidemiological data and etiology of mental illness from a psycho social standpoint. Lastly, the third section shares field-based narratives that reflect the multifaceted challenges related to the treatment of mental illness, inclusion and the promotion of positive mental health.

Mental health is understood as 'a state of well-being in which every individual realizes his or her own potential, Can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community'. It is the capacity of the individual, the group, and the environment to interact with one another in ways that promote subjective well-being, the optimal development and use of mental abilities (cognitive, affective, and relational). The achievement of individual and collective goals consistent with justice and the attainment and preservation of conditions of fundamental equality (WHO 2001, 2013). Positive mental health includes self-realization.

Mastery of one's environment, and having autonomy. Mental health is therefore fundamental to good health and quality of life and a resource for every-day life and an essential component of social cohesion, productivity, and peace and stability in the living environment, contributing to social, capital and economic development in societies. Understood as critical to ensuring healthy transitions to adulthood, positive mental health has implications for overall well-being, growth and development. Self-esteem, positive educational outcomes, social cohesion and resilience in the face of future health and life changes. Mental health is determined by biological, psychological, social, economic and environmental factors which interact in complex ways, so identifying direction of causality is rarely straightforward.

She discussed the holistic approach not just bio medical, psychological or social ways of living. She discussed about 4 lockdown and 2 unlock downs in respect to the grieve they brought along, describing through the covert and overt ways.

Her focus went on the gender disparity and how this COVID affects the life of women from increased domestic responsibility to loss of personal space and time, triple the amount of unpaid work hours to the mental, physical and abuse in many cases. She discussed a few points related mental health of women:-

- Issue of increased domestic responsibility.
- Unpaid work for women has increased to a great extent.
- Caregiving role has also increased without any help from outside.
- Work from and job losses for women has also increased comparatively.
- Homework and assignments of children.
- Personal space and me-time is completely lost for women.
- Mom's guilt i.e., when women feel they are not fulfilling the needs and care giving for their children is also increased.
- Various cases about the abuse and domestic violence have increased.

She concluded by focusing on the normalization of mental health problems and less stigmatized aspects for all men, women and transgender. She also discussed various ways for sharing workload, decreasing pressure for women in her work front, taking care of children, and other household responsibilities. Having different counselling sessions for everyone in the family and sharing care orientation of domestic workers and technical skills.

She was later thanked by Dr. Kennedy and lots of appreciation messages were received. Session was concluded by DR. M. Kennedy Singh by talking about the speaker's Dr. Rachana Bhargva's Adolescence study and Dr. Meenu Anand's Covid, Mental Health and Gender study. And thanking all the participants and audience for the session.

SESSION 5: 3:20PM - 5:20PM

Moderator: Dr. B. Murray and Dr. N. Kiranmala Devi

Rapporteurs: Mr. Sayak Chakraborty and Mr. Krishna Kant Yadav

The Fifth and final session of the webinar began from around a quarter past three in the afternoon. The session began with an opening address by **Dr. B. Murray** (Assistant Professor, Department of Anthropology, University of Delhi), who was one of the moderators for the session, along with **Dr. N. Kiranmala Devi** (Assistant Professor, Department of Anthropology, University of Delhi). The session had three speakers. **Dr. Rayan Mathias** (Students Counselor, Manipal Institute of Higher Education), **Dr. R.P. Mitra** (Assistant Professor at the Department of Anthropology, University of Delhi and **Dr. Ranjit Powar** (Founder Nishant Trust, Chandigarh). Dr. Murry welcomed them and introduced each of them before each of their presentations.



IMAGE 14: DR. B. MURRAY AND DR. KIRANMALA DEVI, MODERATORS FOR SESSION 5

Dr. Rayan Mathias

Balancing Mental Health during the Covid Times

Dr. Rayan Mathias was the first speaker of the session. He started his presentation by mentioning the initiation of the lockdown and the initial steps undertaken by the government and how the initial stages of lockdown created a sense of uncertainty and bewilderment among the people since they were unsure about how to deal with the lockdown. There were mainly three areas of lockdown: first was the restriction of people's movement outside their homes which involved complete lockdowns and ban on people venturing out along with transport bans and transport system shutdowns, second was the restriction in availability of essential resources so as to curb the communication chains so that more people cannot get affected, with only the availability of absolute essential commodities and products, and lastly, how this lockdown created a sudden, drastic change in the lives of the people with, in many cases, stranding people or isolating people, even away from their near and dear ones along with the fact that this took a severe toll on the economics of livelihood and individual earning.

This created a deep sense of concern among the people which made them worry about the lockdown itself and how they will handle it and what they will do about it. In the beginning, when the number of cases of Covid-19 was low, people did not understand clearly as to why the lockdown was necessary, even though they were aware of the virus. So the lockdown itself was not a clear concept to the people. It was also because these people had not faced something like this ever before. It was a chaotic situation with people failing to understand what was going on how things will turn out to be through this lockdown. As the lockdown progressed, it had a severe negative impact on the people. Their daily lives were affected. The normal life that they led, their regular schedules, habits, etc. everything changed and they had to adapt to this new way of living.

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This was when Dr. Mathias, being a mental health expert and counselor himself, received a lot of communication from people who told him that they were having a tough time adjusting to this lockdown and they were not being able to feel normal as they used to. Though the lockdown was necessary at this point but it also led to these people and their mental health to be “messed up”.

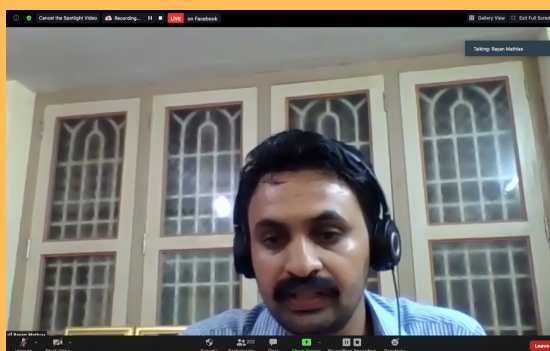


IMAGE 15: DR. RAYAN MATHIAS DURING HIS LECTURE AND AN EXCERPT OF HIS POWERPOINT PRESENTATION

Dr. Mathias mentioned that the most common feeling shared was “fear”, as seen among these people, which brought anxiety, fear of the virus, unemployment, loneliness, stress, mild depression, etc. People felt a sense of hopelessness and it was proving stressful towards their mental health. But family members were also restricting people to communicate with others outside the family by dismissing their problems. Family members tend to think that talking about such unpleasant feelings and feelings of mental stress with people outside the family is something that should not be done, making it sort of a tabooed practice. They forget or ignore the fact that talking about all this with an expert on mental health or a counselor is not the right thing to do. Rather such a condition can be overcome easily and is overcome gradually through time. There is a constant barrage of news via media across platforms. It seems relentless and ever-present. This constant discourse and reporting on Covid-19 also takes a great toll on the mental health of the people. People feel surrounded only by the virus. They feel that the world has plunged into uncertainty. Furthermore, this pandemic has called for isolation, work from home and other such settings which are new to us. The physical activities of interaction and working in a shared environment has been lost. This results in enhancing feelings of isolation, thus accelerating the deterioration of mental health.

Mental health influences how we think, feel and behave in our daily life. It also helps one in dealing with stress, overcome challenges, recover from setbacks and hardships. Dealing with the negative aspects of our daily being seems to be easier if we have a sound mental health. The deterioration of mental health also influences physical health and a negative impact on one can impact the other in the same way. Negative thoughts can give rise to problems in mental health. Strong mental health is more than merely absence of mental illness. Strong mental health also involves a sense of positivity. It leads to the clarity of understanding and dealing with the problems. In this situation, strong mental health is very important. How we deal with this entire situation, matters a lot.

Some people are privileged and can enjoy the lockdown given that they have easy access to all the resources that they need to survive. But the reality at the ground level, for the majority of the population, is very different. It has taken a great toll on the economically impoverished classes. There has been a sharp increase in the rates of unemployment and also of suicide. People who are stressed are unaware of who to approach or whom to talk with in order to resolve mental health issues. Most of the population is still unaware about counselling. So we see a gradual deterioration of mental health. If we see all this continuing, then we will have many problems in the future. This lockdown will take the greatest toll on the ones living alone or have mental illness because neither will they have access to the people with whom they communicate well nor will they be able to access proper healthcare services.

In order to improve your mental health some steps may be followed. Communicating and maintaining connection with friends and family is very important. Staying active and keeping our minds occupied and times busy will help us a lot to pass the time and increase our productivity. Our minds will not remain idle this way. A healthy diet is equally important for a balanced mental health. Having proper sleep and resting also contribute a great degree towards a balanced mental health. Research has shown that multitasking helps a great deal in these situations we are facing now. So, it is obviously advisable to engage in activities involving multitasking and it will result in the development of a productive and positive attitude.

We must do our best to minimize the influence of social media on our daily lives, especially when we compare what we do with the social media posts of others. Many people are doing many activities, such as travelling, artistic works, etc. during this lockdown. But we must not let other people's activities make us feel that their lives are better than us and that they are happier than us. This creates a great problem for mental health. Instead we must take a look at our own selves and try to do something on our own that can help us. One should enjoy these posts but not compare themselves with it. It is better to take away some positives from it. This is where Dr. Mathias also added that we should map our screen time, i.e. how much time we spend in front of screens. Since it is also a time of when we are stuck in a work-from-home culture and we spend a lot of time on the internet and social media as well, we must keep an eye out for how much time we spend online. We need to take breaks in between and balance our work with rest in between. This will certainly help us in not getting stressed out.

Dr. Mathias also advises on not completely trusting the media. Fake messages and fake news are abound nowadays, especially on social media. Keeping aware of such messages and news and researching and authenticating each before believing in them is key towards not stressing out. Restrictions on news consumption is very important. Such kinds of news mainly involve the pandemic, its prevention measures and treatments. Such fake news can really create problems, especially for our mind and mental health. We also need to accept this situation rather than denying it. This is the “new normal” or the “new reality” which we all must face. The sooner we accept it, the better. Accepting always helps in adjusting.

In conclusion, Dr. Mathias emphasizes that taking care of our body, staying in connection with good people (who have a positive impact on us), nurturing positivity, learning to deal with stress, consulting counselors and experts and seeking help whenever you need are they key acts that we can undertake to ensure a better mental health for all of us. In the Q&A session, Dr. Mathias was asked what we should do in a trauma situation. To this, Dr. Mathias replied that when we see trauma, there are different ways for people to analyze it. A situation of trauma is very difficult to deal with. That is when we need to consult people. We think we can live with it and not consult others, but that is not always the case. The type of trauma we face is also important. It is crucial that we think of the situation, analyze it and talk to experts. We may consult the wrong people around us, who may advise us wrongly or not be able to advise us at all, which will not help us. But if we consult a proper expert who understands the situation and knows the ways to deal with that traumatic situation, it will be therapeutic and helpful.

Dr. R. P. Mitra

Covid, Mental Health and Well-Being: Anthropological Perspectives

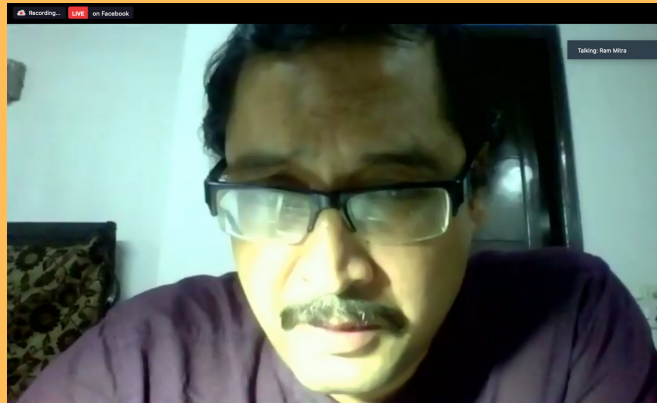


IMAGE 16: DR. R. P. MITRA DURING HIS LECTURE

The next speaker, Dr. R. P. Mitra began his lecture by stating that he would try to connect four things through his lecture. Beginning with what mental well-being is and how it is conceptualized in anthropology and then speaking on the Covid-19 pandemic and looking at its distinctive features. Next, he shall scrutinize the adversity and crisis the pandemic had brought on the people, before finally referring to the coping mechanisms towards the pandemic and the opportunities that have come up during the pandemic.

It is a culture oriented concept as to how mental well-being is seen in a community. In the folk culture of Bengal, there is a term for “insanity” which is “paglamo”. According to the cultural beliefs, there are 108 types of insanity. The more kinds of insanity one has, the more highly pronounced insanity they exhibit. On the contrary, the concept of being sane is abnormal. The belief is that everyone is insane to some extent with all of them having varying degrees of the 108 types of paglamo. Mental health is all about how we cope with adversity. Whenever we meet stress or adversity we react in a way and the reactions show the state of our mental well-being and this reaction has three components: social functioning, productive functioning and inner functioning. The part of social functioning deals with how we interact in a social setting and how we maintain our social connections and relations. Productive functioning relates to our productivity, i.e. our ability to do something creative or productive which contributes to our own growth and development and also possibly towards the society, at large. So, this is the part of utilizing our own talents for our own benefit. Inner functioning involves how we deal with our emotions and expressions and how we emote ourselves or express ourselves in front of others. All of this is central to the idea of being a human. These three components must be looked at from the perspective of the ongoing pandemic and how they are changing.

This Covid-19 pandemic is not the first pandemic which we humans are encountering. Even within the past hundred years or so, we have encountered many such pandemics such as the Spanish Flu during the First World War, and very recently the, in the 21st century itself, SARS (Severe Acute Respiratory Syndrome) Bird Flu, Swine Flu pandemics. Our experience of it has been markedly different as compared to the previous pandemics. In the previous cases, we encountered the pandemics physically first, even before there was much influence of it via social media or the internet.

Previously, it was much more of a lived experience rather than an online, virtual, felt experience. But now when the Covid-19 pandemic struck, people were well aware of it even before the pandemic struck and they felt burnt of it even before encountering it physically. The pandemic spread like wildfire over the internet long before actually physically spreading globally. This has been an unprecedented phenomenon. Added to that, the high mortality rate has caused a great deal of stress when it comes to hospital capacities as well as funerary capacities. Hospitals are overcrowded, and so are burial grounds, crematoriums and other places of disposing off the dead. None of the infrastructure at either place was prepared to deal with such a situation.

That is why governments and authorities are running helter-skelter to prevent any kind of infrastructural collapse, even though the system is not functioning properly. Overcrowded hospitals are not being able to deal with the pressure of admitting and treating patients everywhere, all the time. Burial grounds and crematoriums are running out of space to dispose of the dead and many are turning towards mass burials in mass graves or mass cremations. This pandemic has suddenly emerged as the worst case scenario. A scenario which none ever expected but all should have been prepared for. Our resources, people and our capabilities have been pushed to the edge. This has resulted in the rise of the fear of the pandemic and its consequences. People are afraid of many things, especially two of those: the fear of contracting the virus and the fear of the loss of economic strength. Together, the fear is affecting people's mental health to a great extent. People, from across the world, have probably never encountered such a phenomenon. It is a collective event with a collective experience spread across the world.

The virtual pandemic or the virtual presence of this pandemic, emotionally has driven us to being overwhelmed. In a way it has affected how we have reacted to this pandemic. If we had not had this worst case scenario, if we were not overwhelmed with fear, then we could have reacted in a more focused way which in turn may have helped us to deal with the situation better. This pandemic will go down in history as a “massive social disruption”. It will also go down in the history of humankind as to how it has challenged most ideas we have in terms of public health, sanitation, hygiene, etiology, medicine, etc.

Further, the adversity of the situation along with the crises faced during this pandemic is also an important issue that must be addressed which Dr. Mitra explains by breaking it up into several sub-parts. Economic adversity is the first part. The cause of this social suffering does not lie in the disease itself. Rather it lies in the cure of the virus. Scientists and people are running around in hope of finding some form of cure for the virus, especially a vaccine.

It is like a war against the virus where the viruses are the enemies of the society and the individuals. Studies have shown that the virus does not itself kill the individual but causes other symptoms within the body which are deadly, such as an immune response, organ failure, etc. That is where the question arises as to what the cure we have. Potentially, we have three such preventive measures: social distancing along with lockdown.

Mapping the spread of the disease and finding the people who are affected and further isolating them. This lies at the core of the economic adversity. The cure of some has resulted in the suffering of others. A greater section of the society has to pay for this situation by the collapse of their economic security. Another part of it lies in social adversity. Whenever we face a problem, we resort to our social support network, i.e. our friends, family and others whom we know. But such people cannot readily come to our aid unless we approach them and let them know what problems we are facing. Thus these people and these social processes help us to deal with this stress. They give us the strength to bear with this stress. Because the inability to bear stress does not cause problems. This social support network, which kind of works through actual physical networks, is more important. There is also an occupational or work related adversity in which the working culture has shifted to working from home. But this work-from-home has rendered many people without any work or employment despite their urge to work and need to work.

While speaking on the coping mechanisms that we have developed towards this pandemic, Dr. Mitra referred to Frank Snowden's statement that epidemics are mirrors of societies. They expose the vulnerability of societies and this pandemic has done exactly that. Our vulnerabilities have been exposed. We need to address these problems as quickly as possible. How we define these vulnerabilities will be very significant when we plan different aids, strategies and policies further on in different worst case scenarios, including pandemics. It is time for people to be diligent. We have now seen how individuals have come out to help each other. Charity works, aids, community kitchens have sprouted across the world in order to help people. When we return to a "new normal", can these social and individual aids be institutionalized? That is a question we need to ask ourselves now. Pandemics are not only threats but also opportunities to recap what is wrong with our societies, understand its flaws and come up with new and better ways of living. Bruno Latur has said that this pandemic has shown how it can influence the world and the lives of people and if we can take forward these new helpful strategies into the "new normal" and use them to deal with our future problems. Ulrich Beck has explained that our society needs to become a "rich" society, in which we handle all ecological and environmental problems with the same efficiency by using the lessons learnt during this pandemic. There was not any Q&A session after Dr. Mitra's lecture.

Dr. Ranjit Powar

Envisioning the Post-Covid Era

The last speaker for the session was Dr. Ranjit Powar who covered a range of aspects in her lecture including social and economic inequalities, poor conditions of our education system, population control, domestic violence child abuse and the cultural fallout during the pandemic. She began



IMAGE 17: DR. RANJIT POWAR DURING HER LECTURE

her presentation by highlighting the lack of doctors and other medical infrastructure per population across Indian, shedding light on the national average of 1:11000 of doctors to patients and also the figures of states such as Bihar and Uttar Pradesh whose numbers of doctors to patients ratio are strikingly lower than the national average.

The most striking concern of her presentation was the widening gap between the rich and the poor in the country where the elites can afford everything including medical facilities and the poor are deprived of basic needs. The social elites travel abroad for treatments and can afford high-end remedies but due to the pandemic and the lockdown, they are stuck at home, in their palatial mansions and have been subjected to the same state as the people who they employ in their circles, the people who belong to the larger section of society who are impoverished and without access to basic medical and healthcare facilities. These people are also confined to their homes and both these sections of societies are in this together. But still the rich can afford many amenities and have a better financial security than the poorer people. Dr. Powar stated that besides being a health crisis, this pandemic is also a humanitarian crisis in which the poor and the marginal have to suffer the most and they end up getting marginalized further.

Migrant workers who provide labor force to the metropolitan cities, did not get accommodation in such a crisis and were compelled to undertake large scale migration during the pandemic, mostly on foot since no transport was available to them, let alone adequate ones. Dr. Powar questioned the idea of social distancing in the country where a large number of the population lives in slums like Dharavi in Mumbai and travel in congested public transports. The capitalist nature of society has resulted in 1% of the population holding 90% of the nation's wealth which has been responsible for rising social and economic inequalities in our country.

The issue of education in the country is also something which should come under scrutiny where literacy rate is roughly around 74% with a severe lack of scientific temperament and rationale. Theological discourses and myths have always prevailed over science. That is why the development of a scientific temperament is essential with an elevation in literacy and standards of education. Similarly, people all over have blatantly flouting the norms of social and physical distancing. The exploding population of our nation has also contributed towards the spread of the pandemic. Population control may also prove to be necessary in coping with such pandemics. Initiating proper population control measures is something that should be a priority of the government.

Domestic violence has always been a great human rights violation and its incidents have increased during the pandemic. Sexual and reproductive health of women have been affected due to the pandemic. Psychosocial support towards women is required during these times and incidents of violence against women must be controlled. When the domestic environment becomes toxic, child abuse also becomes rampant. This is also highly undesirable. It is also an unpleasant time for the ones who lose their near and loved ones during the pandemic, either due to the virus for some other reason. A great sense of loss and bereavement overcomes the sufferers in such testing times. Continued social distancing and the isolation has resulted in the increasing number of people suffering from anxiety and distress. It has brought on the feeling of alienation and loneliness among people. Such alienation has had a hand in the increase of cases of depression, suicide and self-harm. It remains to be seen how social and emotional skills are affected by this kind of distancing. Dr. Powar told how she is encountering many such cases in her counselling sessions with people. These two norms of social distancing and isolation have impacted the ability to express ourselves and will also impact the mental health of children who require regular interaction with their peers which in turn contributes towards their mental development. The idea of home schooling has brought distress to the families who do not have the adequate infrastructure and space in the house, since a student requires a peaceful setting for having online classes and also adequate privacy. However, not all Indian homes have such a spatial geography. The pandemic has restricted the provisions of extra-curricular activities of the people, especially children. Such activities are very important for children's growth and well-being. Tremendous financial losses have been caused due to the collapsing economy in terms of unemployment, shutting down of businesses, and loss of resources.

Another important factor she highlighted in her presentation was about the cultural fall out in the society. Social and cultural life has taken a hit as gatherings of all kinds, religious and cultural activities, etc. have been barred. We, the humans, are a social animal and we thrive in social settings. Meetings, processions, activities done together, audience gatherings, etc. have been, even if done, done in a very minimal way causing dissatisfaction among people.

There has been an encouragement of going online and having virtual gatherings and meetings. We as a society are turning more towards technological and mechanical ways of life, thus causing the lessening of empathy and feelings for others. This can cause severe mental health issues. Yet, one creditable thing that the pandemic has done is that it has shown us the ugly side of the system that we are living in. It has exposed the flaws and fallacies that we have. The huge and persistent discrepancies within our society have been laid bare.

We could have saved the lives of hundreds of migrant workers if we had sufficient housing and medical infrastructure and if there were things like universal healthcare and housing for them. If the economically weaker sections had better education with a more scientific and rational mind instead of one based in mythological and religious beliefs, the situation may have been different. The continuing pandemic and its resulting can affect at individual and group levels leading to further crises such as food riots and socio-cultural conflicts within the society. Those in seats of power will have to work much harder to improve our society. At the end, she reiterated the reality about the rising social and economic inequalities and its consequences during and after the pandemic. The after-effects of the pandemic will persist for long and we need to take forward our new learnings and understandings to work for a better future and improve our society.

At the very end, Dr. Powar remarked that the choices we make now shall determine our future. In the Q&A session, she was asked that how can hygiene prudence be complied in a society like ours, to which she answered that it is possible only if we provide basic amenities to everyone abundantly and adequately, thus resulting in the reduction of the gap between the haves and the have-nots. The bridging of this gap is very important because given the present trends the gulf cannot be removed if we do not do what is necessary. And if we do not do it then, at the end, it may result in further socio-cultural problems in the future.

The session concluded with a closing address by Dr. B. Murry, where he thanked the speakers for their wonderful and learned insights, with one of the rapporteurs, Mr. Sayak Chakraborty, presenting a brief summary of the session.

CLOSING SESSION: 5:20PM- 5:30PM

Concluding Remarks: Dr. K.N. Saraswathy

Vote of Thanks: Dr. Chakraverti Mahajan

The Webinar was brought to its conclusion, following the closing session. It has concluding remarks from the Co-convenor of the webinar, Dr. K. N. Saraswathy (Assistant Professor at the Department of Anthropology, University of Delhi). Her address was followed by the vote of thanks from the organisational secretary of the webinar, Dr. Chakraverti Mahajan (Assistant Professor at the Department of Anthropology, University of Delhi).

Dr. K. N. Saraswathy

Concluding Remarks

In her concluding remarks, Dr. Saraswathy congratulated Dr. Mahajan for his idea of having a webinar on the issue of Mental health and well-being. She also acknowledged the idea of Prof. Joshi, for converting the proceedings of the webinar into an e-book and added this responsibility of doing the same to Dr. Mahajan. She also applauded her Ph.D. supervisor, Prof. Sachdeva for introducing the Department of Anthropology in his introductory address and commended Prof. Babu's idea of building interdisciplinary solidarity by conducting more and more collaborative research projects. In her address, she also mentioned the ongoing collaborative research project for NCW on 'Infertility and Mental Health', a joint venture between the Department of Anthropology (D.U.), department of Psychology (D.U.) and Lady Hardinge medical college.

She further congratulated the speakers for their wonderful presentations and imparting the conceptual understanding of terms such as Mental Health and well-being to the participants. She recapitulated the presentations of the nine speakers, which are as follows;

- Starting with Prof. V. K. Srivastava, she expressed her admiration for his eloquent speech and his effective choice of words. Highlighting his use of the word, 'Unknownness' (which he used in the context of a problem with the tendency of being unknown in earlier times). She also took a note on the differential effects of COVID19 used by Prof. Srivastava and suggested it to be an important aspect of COVID research for the Anthropologists.

- For Dr. Saiba Varma's presentation, she acknowledged the fact that COVID aggravates the effect of existing problems, the effect of COVID19 is everywhere but if it attacks a person in Kashmir when compared to somewhere else there is a difference. Suggestively, pointing to the already existing mental health and well-being issues on the rise due to complete year-long lockdown.
- For Prof. MV Padma Srivastava, she mentioned that she is listening to her for the first time. Till now, we were in an impression that the COVID19 is an infection of the pulmonary and cardiovascular system. Her presentation was a revelation as she mentioned that it also affects the neurological system and further affects the mental health in the post-infection stage. She applauded Dr. Padma for her extensive literature review and bringing the same into her lecture.
- Dr. Shubha Ranganathan who talked about the media and the WHO stand on the media for dissemination of news related to COVID. She recapitulated her presentations into the themes of uncertainty and fear. And most importantly she discussed the pointed the feasibility of the traditional research in anthropological studies like fieldwork, in-depth interviews, and their possibilities after the pandemic.
- Dr. Rachna Bhargava highlighted that Corona is dangerous to both elderly and the young. The youngsters are not exclusively at the threat of death but have shown an increase in mental morbidities. Through consequences like lockdown, mask-wearing, physical distancing, online lectures, and online exams are affecting the mental health of the adolescents, and its effects were highlighted in her presentation.
- Dr. Meenu Anand talked about the intersubjective issue of gender and mental health problems causing distress among the females due to lockdown. She not only described mental health in terms of biology only but also in terms of power, status, and position of the female in the household.
- She congratulated, Dr. Ryan Mathias for his talk on 'Balancing mental health in COVID times' which invited lots of comments from the Ph.D. Scholar and applauded him for giving some suggestions to the young participants for balancing their mental health in the lockdown. She also acknowledged Dr. Mathias's comment that Mental health does not mean you do not have anxiety and stress. One should deal with them with a positive mindset.

- She commented on Dr. R.P. Mitra's lecture as an excellent anthropological conceptualisation of mental health with distinctive features of the pandemic, adversities of COVID pandemic, and coping mechanisms and opportunities. She also linked some portions of Dr. Mitra's presentation with Dr. Mathias and suggested if one can advertise the road rages as mentally ill actions, people might start controlling their rage during road accidents.
- Turning to the last presentation of the session, Dr. Saraswathy remarked Dr. Ranjit Powar's presentation as outstanding. She further deliberated on the themes of her presentation, which included; statistics of demography, public health issues, and the problems faced by the migrant populations.

While concluding she added, that as a Co-convenor of this webinar she is both proud and happy. She hoped that all the participants have thoroughly enjoyed and learned something and urged the participants to join a webinar for knowledge instead of receiving a certificate for attending a webinar.

Dr. Chakraverti Mahajan

Vote of Thanks

In his address, he first thanked Dr K. N. Saraswathy. he commanded her as being a wonderful person with whom he used to discuss his ideas. He also made mention of the NCW project, which gave him the space to talk and discuss ideas about mental health issues. He gave the credit to Dr Saraswathy and Prof. Nandita Babu who weaved his idea of organising this webinar. He further added that this lockdown has been a journey from the past four months. When the lockdown was announced, Prof. Joshi has asked the department to go online. Which made him mitigate his experience with the social media which he has left long back in 2011.

He explained that through such webinars we are negotiating our realities and this is the best that we can do at the moment. In his address, he also mentioned about the tendency to miss our classrooms and workspace. This webinar was an attempt in this way to create a Mauhol (atmosphere), for building solidarity and getting in touch with each other in our busy schedule at the home.

He made a special mention of Dr Avitoli Zhimo and thanked her for helping him with the technical knowledge and emotional support. He thanked Prof. Joshi, without whom this webinar would not have been possible. He thanked the whole team which includes, his colleagues and the team of rapporteurs, most of whom were his PhD students and researchers from the NCW project. He thanked the vibrant panel of speakers for taking time from their routines to make this webinar a success. And last but not the least, the audience without whom this webinar won't have been the same. With his vote of thanks, the webinar was concluded.



IMAGE 18: DR. K. N. SARASWATHY DURING HER ADDRESS



IMAGE 19: DR. CHAKRAVERTI MAHAJAN DURING HIS ADDRESS

Screenshots of the Participants



IMAGE 20: SCREENSHOT OF THE PARTICIPANTS (1/6)

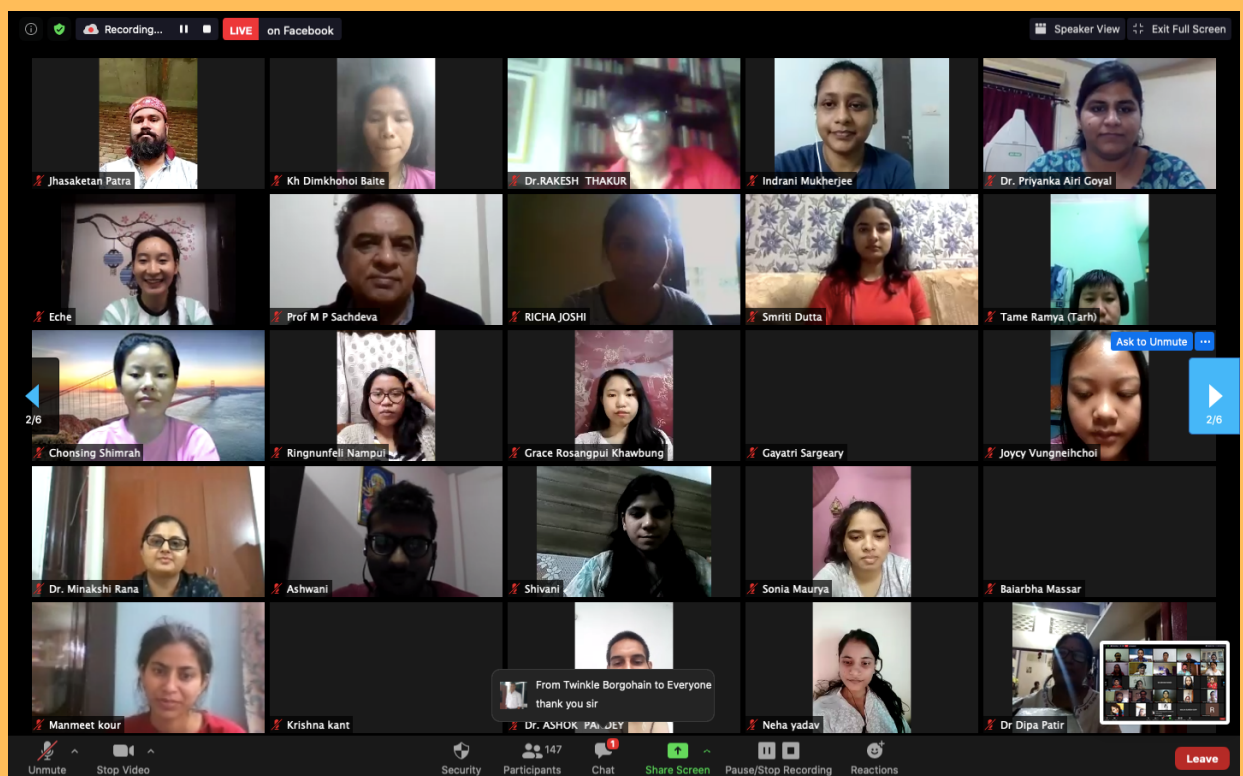


IMAGE 21: SCREENSHOT OF THE PARTICIPANTS (2/6)

Screenshots of the Participants

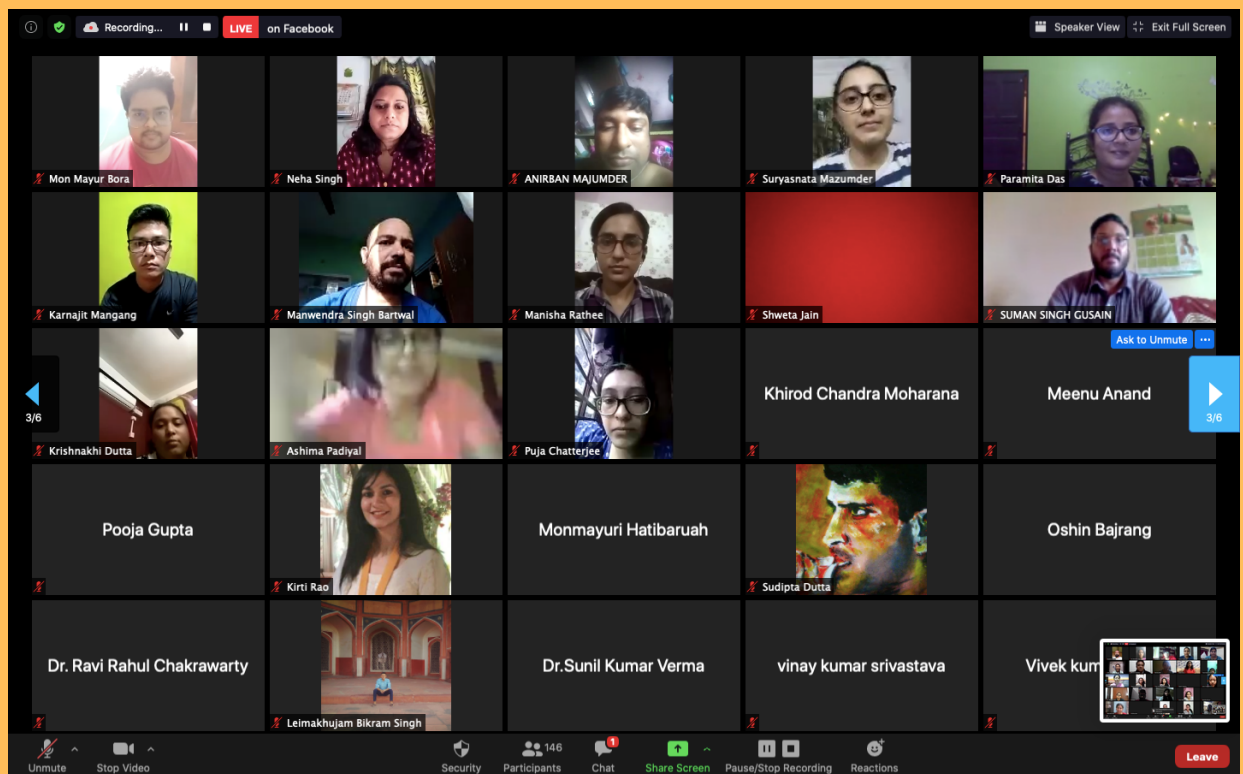


IMAGE 22: SCREENSHOT OF THE PARTICIPANTS (3/6)

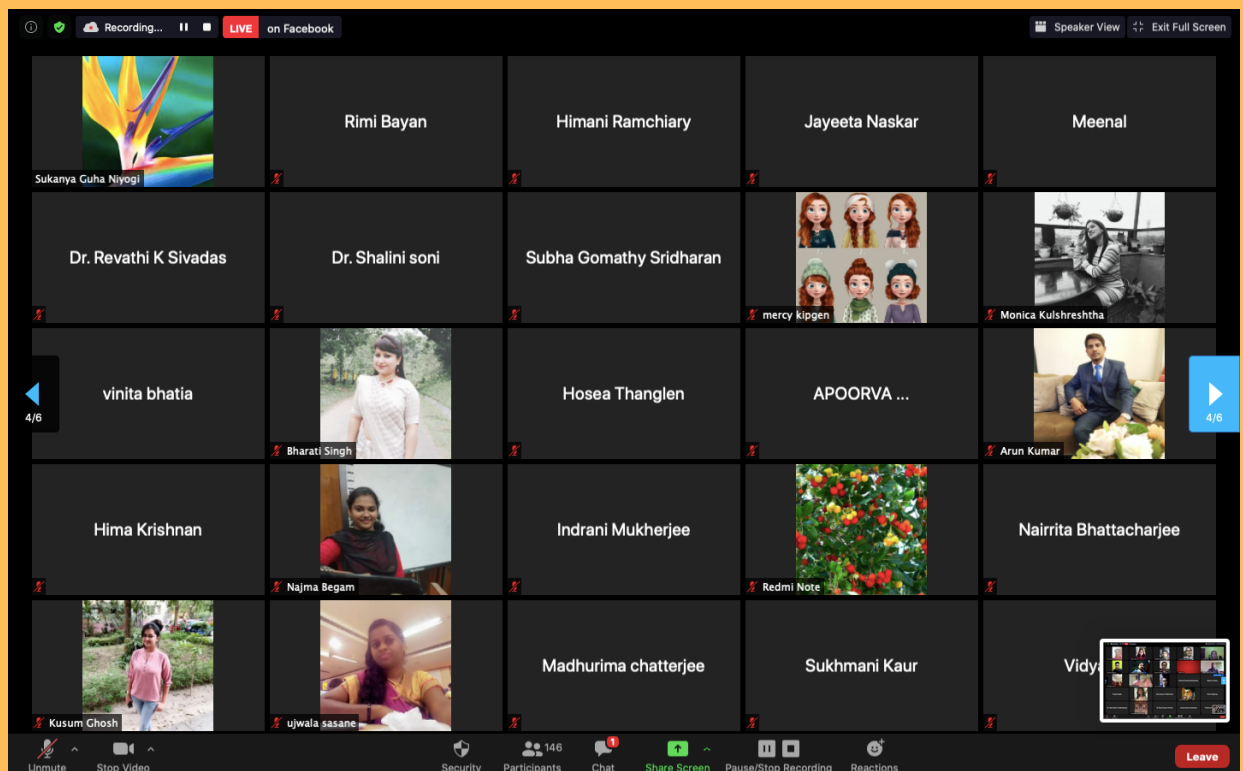


IMAGE 23: SCREENSHOT OF THE PARTICIPANTS (4/6)

Screenshots of the Participants

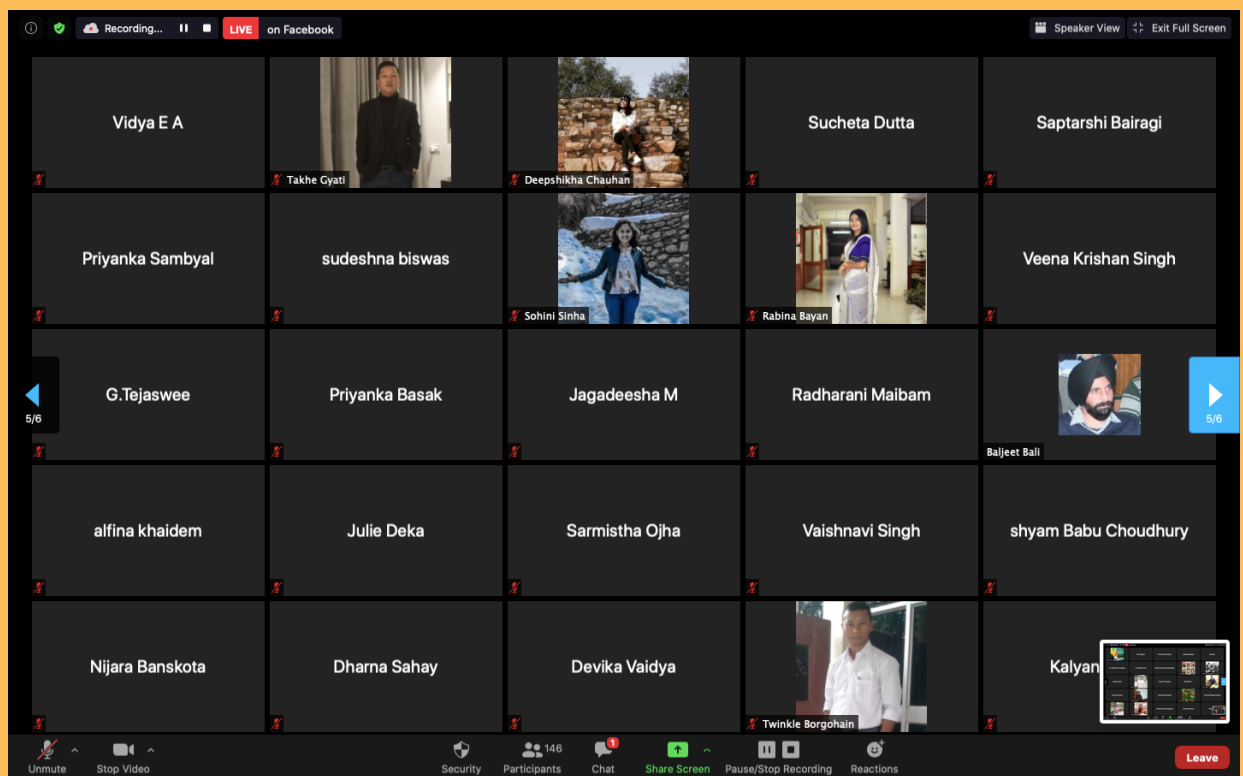


IMAGE 24: SCREENSHOT OF THE PARTICIPANTS (5/6)

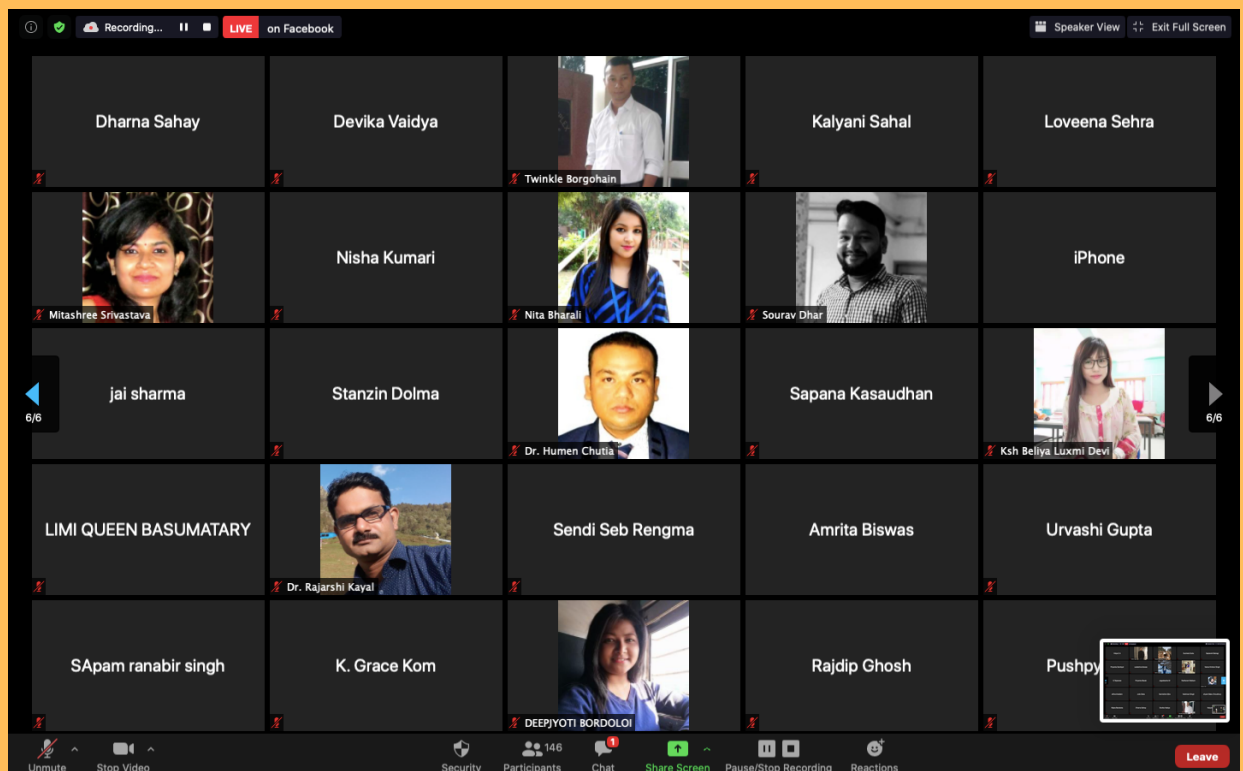
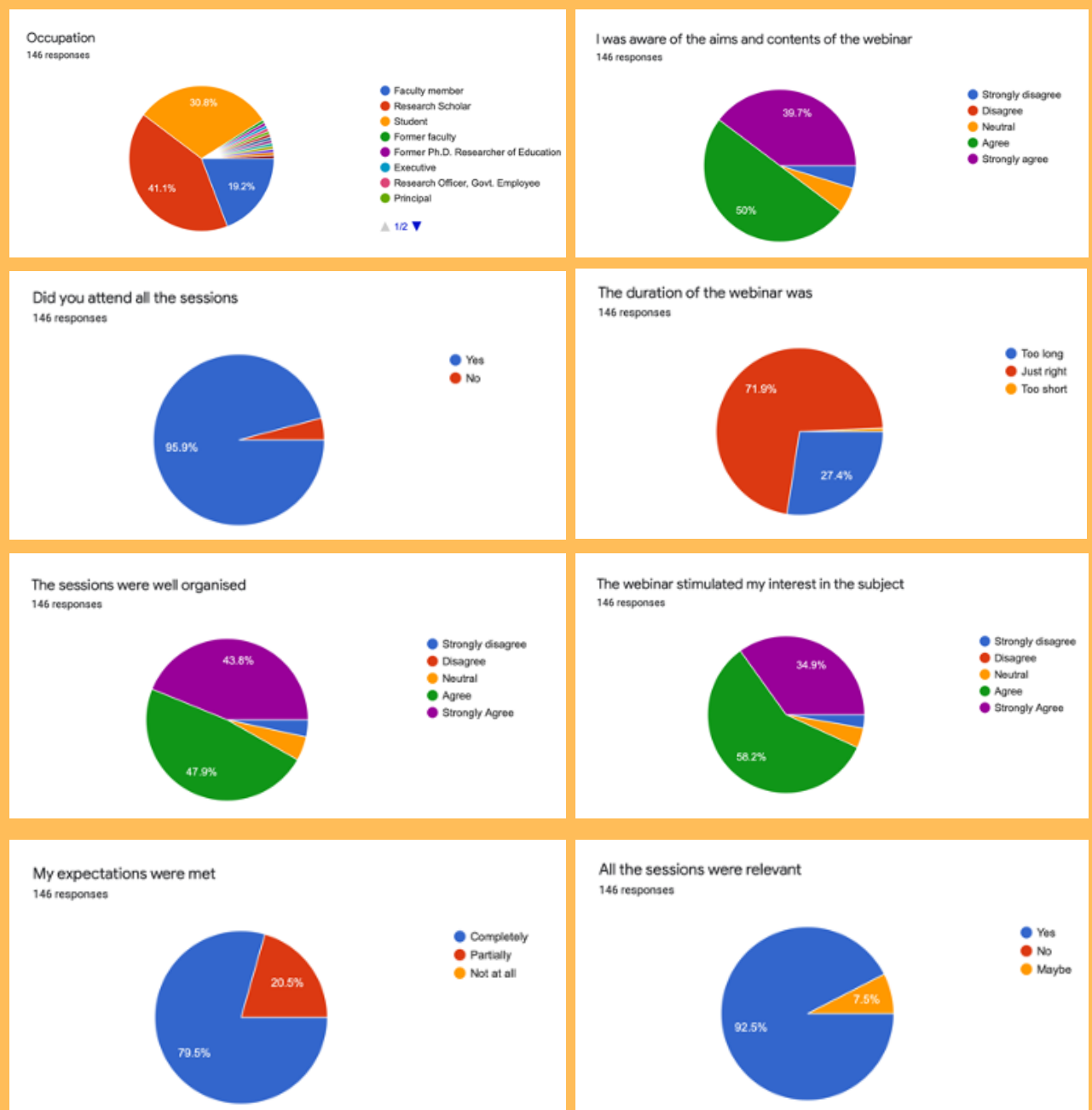


IMAGE 25: SCREENSHOT OF THE PARTICIPANTS (6/6)

Feedback

After the final session, participants were given an online feedback form. Filling the feedback form was voluntary. Total of 146 participants filled and submitted the feedback form. The feedback form had 12 questions. Out of which 8 were multiple choice questions and 4 subjective questions. Following are the questions and their responses.



Comments

Wonderful webinar, organised well...looking forward to much more !

More this type of webinar need to arrange

Mental health is an important issue which is ignored most of the time, be it pre-covid or post-covid time. So it is really important to highlight all the aspects of mental health & well being to better cope with this difficult time. So I would appreciate this kind of webinar which will help us to understand the ongoing situation and ofcourse keep us updated about the ongoing researches about the covid 19.

The webinar was highly relevant and interesting.

Well organized sessions and wonderful team work

The theme mental health and well being of a post covid world is the recent knowledge which all of us have to be aware of and I am so happy that the dept of Anthropology , Delhi University have come up with a relevant topic ,meeting the needs of the present society. I am grateful to be apart of it and would love to attend more of the webinars organised by the Dept of Anthropology , Delhi University.

Insightful sessions by eminent personalities. Gained knowledge on various dimensions. Webinar was well organised. Wasn't tiring at all. Looking forward for more.. :)

Grateful to the entire organizer and team for the wonderful webinar, all the topics were well delivered without any problem and making sure we had the best experience

*One of the best webinar I have attended so far during this Pandemic!
I am very thankful to all of you!*

I thank the organisers for such a well planned webinar.

About the Department

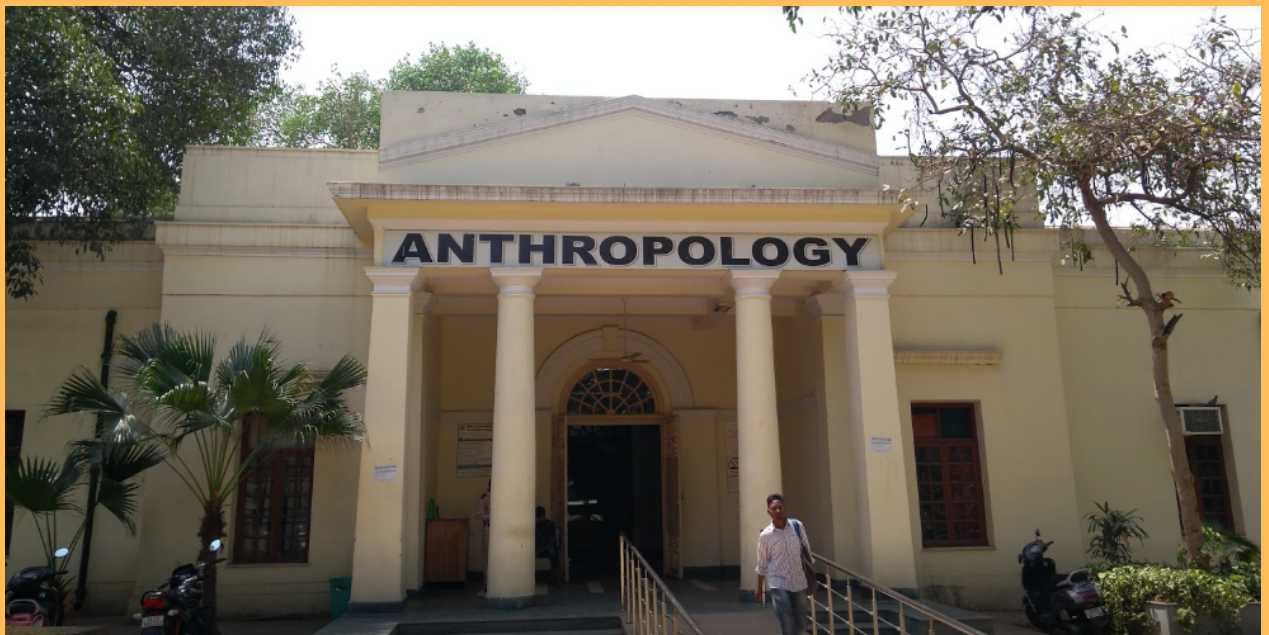


IMAGE 26: ENTRANCE GATE OF DEPARTMENT OF ANTHROPOLOGY, UNIVERISTY OF DELHI. (SOURCE: GOOGLE IMAGES ©ASHISH JOSHI, APRIL 2017)

The Department of Anthropology at the University of Delhi was founded in 1947 with the sole aim of undertaking holistic research and teaching in different aspects of human living. The first batch of students, admitted a year later, produced some of the finest anthropologists of international repute, who also contributed significantly to the administrative and corporate life of the University of Delhi. Students trained in our department diffused to other universities, founding academic departments and centres, carrying forward the exemplary tradition of the University of Delhi therein. It was not only that the Delhi Department of Anthropology flourished, moving from one success to the other, but was also instrumental in the spread of anthropology to other parts of the country. In other words, our department has always been the leader, declaring the agenda of research and teaching for others to have a close and learning look; and with the efforts of the twenty-five scholars who constitute the teaching faculty, the glorious status of the department continues and will continue to be so in future.

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