

Gender Issues in Adolescent Mental Health Post-Pandemic: Rehabilitation

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ABSTRACT

The COVID-19 pandemic profoundly disrupted adolescents' emotional, social, and academic lives, revealing clear gender-based differences in psychological experiences. This study explores how adolescents navigated the pandemic and identifies the kinds of support needed for recovery, with a focus on gender-specific support. Using a qualitative design, data were collected through focus group discussions and semi-structured interviews with 50 adolescents (25 boys and 25 girls), along with insights from five mothers and five female teachers.

Thematic analysis highlighted distinct gender differences in coping and emotional expression. Girls reported higher levels of emotional strain, academic pressure, disrupted friendships, and family-related stress and were more likely to seek emotional support. Boys, in contrast, often suppressed their emotions, withdrew socially, displayed irritability or aggression, and found it difficult to communicate their distress. These patterns were shaped by disrupted routines, reduced peer interaction, academic uncertainty, and sociocultural norms that discourage emotional openness in boys. The findings highlight the need for gender-responsive mental health support, including peer support, school counselling, family involvement, and healthier emotional expression. By addressing the unique needs of both boys and girls, such interventions can support adolescent resilience and facilitate recovery in the post-pandemic period.

Keywords: post-pandemic, adolescents, mental health, gender differences, rehabilitation.

1. INTRODUCTION

The COVID-19 outbreak was an unprecedented global public health crisis that affected people's lives in multiple ways—physically, intellectually,

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and socially. Adolescents, in particular, were at heightened risk, as this developmental stage requires time and opportunities for critical emotional, social, and cognitive growth. Adolescence is a transitional period marked by rapid physiological, social, and cognitive changes. During this time, social networks play a crucial role in building autonomy, self-identity, and coping strategies, enabling young people to navigate challenges and develop resilience.

The pandemic significantly disrupted daily life for adolescents. Traditional face-to-face education was replaced by online learning, interrupting instructional schedules and limiting access to leisure, extracurricular activities, and peer interactions. Many adolescents reported difficulties adapting to social isolation, changes in routines, and the loss of structured support systems such as after-school programmes or community centres. In addition, the pandemic amplified familial tensions, including parental stress, financial insecurity, emotional uncertainty, and, in some cases, exposure to domestic violence. These combined factors created an environment conducive to emotional and behavioural difficulties among young people.

Emerging evidence indicates that the mental health impact of the pandemic differed by gender. Male adolescents often exhibited externalising behaviours such as irritability, aggression, and social withdrawal, while female adolescents were more likely to present internalising symptoms, including anxiety, depressive moods, and psychosomatic complaints (Jones et al., 2021; Liu et al., 2022; Smith & Thompson, 2021). These differences reflect sociocultural expectations and developmental tendencies, where boys are often encouraged to hide vulnerability and express distress through action, while girls are more likely to process difficulties verbally. Understanding these gendered patterns is essential for developing effective, evidence-based interventions tailored to adolescents' specific needs.

Although some studies have explored the intersections of gender, social isolation, academic pressure, and family context (Ravindran et al., 2020), there is limited research on how these factors interact and influence adolescents' mental health outcomes. Previous research has shown increased anxiety, depression, and behavioural problems among children during the COVID-19 pandemic (Loades et al., 2020; Racine et al., 2021), highlighting the need for nuanced, heterogeneous interventions that address multiple dimensions of adolescents' well-being.

This study focuses on three key areas: the impacts of the Covid-19 pandemic on adolescents' emotional and behavioural health, the differences in responses between boys and girls, and gender-sensitive rehabilitation. The aims of the study are (1) to examine the psychological and behavioural

effects of the COVID-19 pandemic on adolescents, with attention to gender differences, and (2) to identify gender-specific challenges and propose feasible, evidence-based rehabilitation strategies. By addressing these objectives, the study seeks to contribute to both theoretical understanding and practical interventions to support adolescents' mental health in the post-pandemic era.

2. REVIEW OF LITERATURE

Adolescence is a critical developmental period characterised by rapid physiological, emotional, and social changes. Brown and Larson (2009) highlight that adolescents' mental health is strongly affected by factors such as family dynamics, school atmosphere, and peer connections. The COVID-19 pandemic introduced unprecedented disruptions to these developmental pathways, raising concerns about its long-term psychological impacts.

Emerging studies consistently report gender differences in pandemic-related mental health outcomes. Girls were generally more prone to internalising behaviours, such as anxiety, depression, and psychosomatic complaints, while boys tended to exhibit externalising behaviours, including aggression, irritability, and social withdrawal. This trend is well documented in previous research (Jones et al., 2021; Liu et al., 2022; Smith & Thompson, 2021). These differences are deeply rooted in sociocultural norms that shape emotional expression, coping strategies, and help-seeking behaviour (Courtenay, 2000).

Social isolation due to school closures and cancellation of extracurricular activities significantly affected adolescents' emotional regulation and identity development (Lee, 2020; Racine et al., 2021). Peer deprivation disrupted opportunities for practising autonomy, collaboration, and communication skills—key components for emotional resilience. While girls often sought social and emotional support to cope, boys were more likely to internalise stress or act out behaviourally (Magson et al., 2021; Barendse et al., 2021).

Academic stress intensified the mental health burden. Transitioning to online learning created challenges such as reduced teacher engagement, technical difficulties, and lack of structured learning environments (Di Pietro et al., 2020). Female adolescents, in particular, experienced heightened stress due to self-imposed perfectionism and fear of falling behind (Gonzalez-Carrasco et al., 2019; Ellis et al., 2020). Boys, on the other hand, exhibited disengagement and reduced motivation in response to uncertainty and disrupted routines (Luthar et al., 2021).

Family environments played a critical role during the pandemic. While

supportive families could buffer stress, adolescents exposed to parental anxiety, financial instability, or domestic conflict were at increased risk of emotional and behavioural problems (Golberstein et al., 2020; Bottiani et al., 2021). Gender differences in coping within the family context were pronounced: girls sought emotional expression and support, while boys often suppressed emotions, potentially escalating behavioural issues (Zimmermann et al., 2021).

While a few studies have addressed these individual factors, there is limited research examining the intersectionality of gender, social isolation, academic stress, and family dynamics in shaping adolescents' mental health post-pandemic. Understanding these interactions is essential for designing gender-sensitive interventions that promote resilience and recovery among adolescents (Loades et al., 2020; Racine et al., 2021).

3. RESEARCH METHODOLOGY

This study employed a qualitative research design to explore the gendered psychological effects of the COVID-19 pandemic on adolescents. A qualitative approach was chosen because it allows for an in-depth understanding of adolescents' lived experiences, emotional responses, and coping strategies, which cannot be fully captured through quantitative measures alone. This approach also facilitates exploration of complex interactions between social, familial, and academic stressors in shaping gendered mental health outcomes.

3.1 Participants

A purposive sampling method was used to select participants who could provide rich, detailed insights into the research questions. The study included 50 adolescents aged 13-18 years, with an equal distribution of boys (25) and girls (25), drawn from urban and semi-urban schools in Sivaganga District, Tamil Nadu. The participants were selected to ensure diversity in age, socioeconomic background, and academic performance, providing a comprehensive view of adolescent's experiences during the pandemic.

To complement the adolescents' perspectives, the study also included the views of five female teachers and five mothers, who were identified through snowball sampling. These adult participants provided contextual information on family and school dynamics and helped triangulate findings from the adolescents'.

3.2 Data Collection Methods

Data were collected using semi-structured interviews and gender-segregated Focus Group Discussions (FGDs). FGDs consisted of 5–6

adolescents' per group and were conducted separately for boys and girls to encourage open communication and reduce social desirability bias. Semi-structured interviews allowed participants to express their experiences freely while ensuring coverage of key topics such as emotional well-being, coping strategies, social isolation, academic stress, and family dynamics.

Interview and FGD facilitators were gender-matched with participants to increase comfort and promote honest disclosure of feelings. Data were collected either in person with COVID-19 safety measures or via secure online platforms. Each session lasted between 45 and 60 minutes, and all sessions were audio-recorded with participants' consent.

3.3 Ethical Considerations

The study adhered to strict ethical guidelines. Written informed consent was obtained from all participants and, in the case of minors, from their parents or guardians. It was clearly communicated to participants that their identities would not be disclosed, their information would be kept confidential, and participation was optional. They were informed of their right to withdraw at any stage without any consequences. To ensure psychological safety, facilitators provided information about mental health resources and support services to all participants.

3.4 Data Analysis

Verbatim transcriptions of all interviews and FGDs were subjected to thematic analysis following the six-step procedure outlined by Braun and Clarke (2006). This process involved familiarisation with the data, initial coding, searching for themes, reviewing and refining themes, defining and naming themes, and reporting findings.

Special attention was given to gender-specific patterns in emotional expression, coping strategies, and behavioural responses. Themes were identified inductively from participants' narratives, ensuring that the analysis remained grounded in lived experiences rather than pre-existing assumptions. Triangulation of data from adolescents', teachers, and mothers enhanced the validity and reliability of the findings.

3.5 Trustworthiness of the Study

To ensure credibility, the study employed multiple strategies. These included triangulation across data sources, peer debriefing with experts in adolescents' psychology and gender studies, and member checking with select participants to verify the accuracy of transcriptions and interpretations. Transferability was enhanced through detailed descriptions of the context, participants, and data collection procedures. Dependability and conformability were maintained by keeping an audit

trail of all methodological decisions and analytic steps.

4. RESULTS AND FINDINGS

The thematic analysis of interviews and focus group discussions revealed several interrelated dimensions of adolescents' experiences during the COVID-19 pandemic. These findings highlight how social isolation, academic pressures, and family dynamics uniquely affected boys and girls, shaping their emotional and behavioural responses. The analysis generated four overarching themes: social isolation, academic stress, family and domestic challenges, and coping strategies and gendered emotional expression.

4.1 Social Isolation and Peer Disconnection

Social relationships were a critical part of adolescents' emotional development, identity formation, and coping strategies. The sudden closure of schools and cancellation of extracurricular activities disrupted these networks, leaving many adolescents' feeling lonely, anxious, and uncertain.

Girls expressed a profound sense of loss related to friendships and social support. Many reported feeling emotionally drained due to the absence of regular peer interaction. One individual reported feeling as if they were mentally trapped. "I missed talking to my friends and sharing our problems. I kept thinking about school and exams alone." Female participants emphasised the emotional toll of isolation, including worry for family members, anxiety about the future, and the sense of being socially disconnected.

In contrast, boys often internalised their loneliness or expressed it through irritability, withdrawal, or disruptive behaviours. Some admitted to feeling restless or engaging in arguments with family members as a way to vent pent-up frustration. One male adolescents' noted, "I did not talk to anyone. I just stayed in my room and got angry at little things. It felt like I had no control over my life." Male adolescents' were less likely to verbalise feelings of sadness and more likely to express social frustration externally.

The absence of peer engagement also limited opportunities for interpersonal learning. Mid- to late adolescents', particularly, were deprived of practising teamwork, autonomy, and conflict resolution skills—key developmental milestones that normally occur in social contexts.

4.2 Academic Stress and Online Learning Challenges

The shift to online education presented significant challenges for adolescents', affecting their learning, motivation, and emotional well-being.

Girls were particularly vulnerable to academic pressure. High personal

expectations, perfectionism, and concern about falling behind intensified stress levels. Many reported experiencing anxiety during online classes due to unclear instructions, lack of teacher contact, and technical issues. According to one girl, she was always stressed about her assignments and tests. I felt I could not focus properly, and it stressed me out every day.” Girls often ruminated over academic difficulties, reflecting a pattern of internalising stress.

Boys, by contrast, responded to academic challenges by disengaging or showing reduced motivation. Several male participants reported avoiding online sessions or turning to entertainment to distract themselves. One participant expressed that he did not pay much attention to homework. I just wanted to get through the day without thinking too much.” This pattern of withdrawal reflects the externalising tendency of boys’ coping, where frustration is expressed through inaction or defiance rather than verbalising concerns.

Both genders struggled with the lack of structured learning and the absence of in-person teacher support, but the manner in which stress manifested differed according to gender norms and developmental tendencies.

5.3 Family Stress and Domestic Challenges

The pandemic intensified existing family tensions and created new stressors. Lockdowns often led to increased financial strain, parental stress, and, in some cases, domestic conflict.

Girls typically sought emotional support within the family or from trusted adults. They expressed concerns over family members’ health and their academic futures. A participant explained that they were in a constant state of worry about their mother. She seemed so stressed, and I felt I had to manage my own schoolwork while supporting her emotionally.” Girls’ emotional responses were characterised by rumination and worry, reflecting internalising tendencies.

Boys often displayed externalising behaviours in response to family stress. Reports included irritability, aggression toward siblings, or withdrawal from family interactions. One male adolescent noted, “I started fighting with my brother all the time. It made me feel like I could control something.” Boys’ coping strategies were shaped by sociocultural norms discouraging emotional expression, which led many to suppress vulnerability and rely on behavioural outlets instead of seeking help.

Family dynamics played a significant role in shaping both boys’ and girls’ mental health. Adolescents’ from unstable or high-conflict homes were more likely to experience emotional distress, highlighting the interplay

between domestic environments and pandemic-induced stress.

5.4 Gendered Coping Strategies and Emotional Expression

Coping strategies during the pandemic varied across genders, reflecting both socialisation patterns and developmental factors.

Girls tended to seek emotional support from peers, parents, or teachers. They used verbal processing, journaling, and reflective thinking to manage stress. Many engaged in structured activities like online study groups or creative hobbies to maintain a sense of routine. While this approach helped them cope, excessive rumination sometimes intensified feelings of anxiety and worry.

Boys often cope with physical activity, distraction, or withdrawal. They were less likely to verbalise emotions and sometimes engaged in risk-taking behaviours, such as staying up late, excessive screen use, or minor rule-breaking at home. These behaviours reflected externalised distress and a need to regain perceived control in a situation that felt uncontrollable.

The study found that both genders benefitted from peer support and structured interaction, but the modes of support differed. Girls responded well to emotionally expressive and conversational support, whereas boys benefited from activity-based engagement that incorporated emotional awareness in non-verbal ways.

5.5 Intersection of Social, Academic, and Family Stressors

The combination of social isolation, academic stress, and family tension created a multifaceted environment affecting adolescents' mental health. Adolescents' reported feeling overwhelmed by simultaneous pressures from school, home, and peer relationships. The pandemic acted as a stress multiplier, intensifying pre-existing vulnerabilities.

Gender differences were evident in how stressors were processed. While girls internalised stress and sought relational coping, boys externalised distress and often concealed emotional vulnerability. These differences underscore the importance of tailored, gender-sensitive interventions that recognise the unique challenges faced by each group.

6. DISCUSSION

The findings of this study illustrate the profound and gendered impact of the COVID-19 pandemic on adolescents' mental health. Adolescents did not experience the pandemic uniformly; their responses were shaped by biological, psychological, and sociocultural factors.

6.1 Gendered Emotional and Behavioural Responses

The study confirms previous research showing that female adolescents are more likely to internalise stress, exhibiting anxiety, depressive symptoms, and somatic complaints (Jones et al., 2021; Liu et al., 2022; Smith & Thompson, 2021). The emphasis on emotional expression and relational coping strategies among girls was evident in their reliance on peers, family members, and structured activities to manage distress.

Male adolescents, by contrast, demonstrated externalising behaviours such as irritability, aggression, social withdrawal, and risk-taking. Sociocultural expectations discouraging vulnerability in boys appeared to limit their verbal expression of emotions, aligning with Courtenay's (2000) framework on masculinity and health. These findings reinforce the importance of recognising gender norms when designing interventions, as boys' distress may be less visible but equally consequential.

6.2 Intersections of Social, Academic, and Family Stressors

Adolescents' mental health was influenced not only by social isolation but also by disrupted academic routines and family stress. Online learning challenges created anxiety and lowered motivation, with girls experiencing stress due to perfectionism and fear of falling behind, while boys exhibited disengagement. Family tensions, financial insecurity, and parental stress amplified emotional and behavioural difficulties. The intersection of these stressors highlights the complex environment in which adolescents navigated the pandemic.

6.3 Implications for Theory and Research

This study contributes to the theoretical understanding of adolescent development by emphasising the interaction of gender, social environment, and stress during a global crisis. It provides empirical evidence supporting the notion that interventions must address multiple domains—emotional, behavioural, academic, and familial—simultaneously.

7. PRACTICAL IMPLICATIONS

The findings suggest several actionable strategies to support adolescent mental health post-pandemic:

7.1 Gender-Sensitive Mental Health Interventions

- **Girls:** Programmes focusing on emotional literacy, cognitive-behavioural therapy, and structured peer support can help girls manage anxiety and rumination. Activities should encourage balanced reflection and reduce emotional overload.
- **Boys:** Interventions should address externalising behaviours,

normalise emotional expression, and provide activity-based, non-threatening avenues for processing stress. Skill-building in emotion regulation can improve resilience and coping strategies.

7.2 School-Based Programmes

- Schools should facilitate reintegration into social and academic routines through structured group activities, clubs, and mentorship programmes.
- Teacher training is essential to identify gendered signs of distress and implement supportive classroom practices.

7.3 Family and Community Engagement

- Parents and carers should be educated on adolescent mental health and encouraged to create open, non-judgemental communication channels.
- Workshops can challenge traditional gender stereotypes and provide strategies to support both boys and girls in expressing emotions safely.
- Collaboration among schools, mental health professionals, and families can create a cohesive support system for adolescents.

7.4 Policy Recommendations

- Governments and policymakers should invest in adolescent mental health services, particularly in schools, to provide timely support and early intervention.
- Mental health programmes should be adaptable, culturally sensitive, and consider gender-specific needs to enhance effectiveness.

8. LIMITATIONS AND FUTURE RESEARCH DIRECTIONS

8.1 Limitations

- **Sample Size and Scope:** The study included 50 adolescents, limiting generalisability. Urban and semi-urban schools were represented, but rural areas were not included.
- **Qualitative Design:** While rich in depth, the study does not quantify prevalence or causality of gendered effects.
- **Self-Report Bias:** Responses may have been influenced by social desirability, particularly among boys who were less inclined to verbalise emotions.

8.2 Future Research Directions

- Longitudinal studies are needed to track the long-term psychological

and behavioural effects of the pandemic on adolescents.

- Comparative studies across different cultural, socioeconomic, and rural contexts can provide broader insights.
- Mixed-method approaches combining qualitative depth with quantitative rigour can help identify prevalence patterns and inform intervention design.
- Research exploring the impact of digital learning environments and technology-mediated socialisation on gendered adolescent mental health is warranted.

CONCLUSION

The COVID-19 pandemic profoundly altered the emotional, social, and academic lives of adolescents, leaving lasting effects on their overall well-being. This study demonstrates that boys and girls experienced the pandemic in markedly different ways, shaped by their developmental stage, family expectations, and prevailing social norms that influence emotional expression, coping strategies, and help-seeking behaviour.

Female adolescents were more prone to internalising problems, including anxiety, mood swings, overthinking, fear of falling behind academically, and physical signs of stress. Their narratives revealed the depth of their emotional burden, arising from disrupted friendships, reduced peer support, uncertainty about schooling, and heightened familial pressures. Socialisation processes that encourage girls to be emotionally expressive and to avoid disappointing others further contributed to emotional overload. Discussions with students, parents, and teachers highlighted that girls often need structured emotional support, reassurance about academic progress, and opportunities to share their feelings in a safe and non-judgemental environment. These insights emphasise the importance of providing spaces where girls can openly discuss their challenges, develop stress-management strategies, and rebuild confidence.

Male adolescents, in contrast, tended to externalise their distress through behaviours such as irritability, withdrawal, anger, and risky actions. The lack of social interaction and disrupted routines made these behaviours more pronounced. Cultural expectations discouraging vulnerability often limited boys' verbal expression of emotions, causing struggles to manifest primarily through actions rather than words. Conversations with teachers and parents confirmed that boys often need activity-based interventions, structured peer engagement, and guided opportunities to recognise and articulate their emotions safely. This underscores the importance of programmes that help boys manage frustration, rebuild social connections, and strengthen adaptive coping mechanisms.

Family dynamics emerged as a significant factor affecting both genders. Financial strain, parental stress, and domestic conflicts intensified emotional and behavioural difficulties, although boys and girls expressed these challenges differently. Oral discussions with parents and carers revealed that many lacked awareness of the subtle signs of distress in adolescents, particularly in boys. Supporting adolescents, therefore, requires active family involvement, fostering sensitive communication, and enhancing parents' understanding of mental health issues. Collaborative engagement between families, schools, and mental health professionals can create a nurturing environment that addresses the unique needs of both boys and girls.

Reintegration into school and social life introduces additional gender-specific needs. Girls may benefit from emotional support, academic guidance, and opportunities to rebuild friendships, while boys may require help reconnecting with peers, maintaining routines, and managing pent-up emotions. Feedback from teachers emphasised the need for structured post-pandemic programmes that address both academic and psychosocial recovery. Collectively, these findings highlight the necessity for mental health interventions that recognise and respond to gendered experiences.

By encouraging emotional expression, gently challenging harmful stereotypes, and fostering shared responsibility among families, schools, and communities, adolescents are better positioned to recover, develop resilience, and navigate future challenges. Gender-sensitive approaches to rehabilitation are essential not only to address the immediate psychological consequences of the pandemic but also to strengthen adolescents' long-term emotional and social well-being. Integrating insights gained from oral discussions with students, parents, and teachers ensures that interventions are grounded in lived experiences, practical, and responsive to the real-world needs of adolescents.

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