

Empowerment in the age of Covid-19

A mixed-methods study of voice and decision-making on four continents

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INTRODUCTION

Agency and empowerment – two often-conflated terms – are critical to understand and yet difficult to measure. A primary reason for this challenge is that agency can be considered as both a process and an outcome, with one form often facilitating the other (Narayan-Parker, 2005). As a process, agency includes both internal and external forces acting on the user that bring about a certain outcome. Alternatively, empowerment concerns the external forces that create an environment that is conducive to agency, and as such is often targeted as an intervention outcome (Zimmerman et al., 2019). Yet few of the myriad studies and programmes that focus on agency and empowerment address very young adolescents (aged 10–14), which is a critical time in which to develop the structures that foster agency.

Examinations of agency in the past have mainly targeted women's empowerment, as gender can play an important role in experiences of agency (Connell, 2005). Indeed, women are often more restricted in their ability to travel outside the household, control finances and effectuate desires

(van Eerdewijk et al., 2017; Malhotra and Schuler, 2005). However, research shows that gender norms and empowerment look quite different during very young adolescence. At this time of life, gender stereotypical traits and roles (such as toughness for boys or beauty for girls) start to be imposed on the adolescent (Kågesten et al., 2016). As a result, adults start to separate adolescents by sex so that ‘vulnerable’ girls are protected from boy ‘perpetrators’ of sexual violence (Mmari et al., 2017). These expectations are then capitalised upon by adolescents as they seek empowerment in new social spheres, leading to their endorsing gender norms that they believe are approved by adults around them (Zimmerman et al., 2021). This points to the complicated experience of very young adolescents, as they are still largely controlled by parents but seek more recognition from those outside the household, such as peers and their wider community (Blum et al., 2014). Thus, an examination of agency in this period merits looking at the spheres of influence acting on the adolescent – including the home, neighbourhood and education settings.

The Global Early Adolescent Study (GEAS) is a multi-country longitudinal examination of how gender impacts the health and well-being of very young adolescents as they go through older adolescence and into adulthood. Part of this study included developing new tools to answer the question of how existing frameworks of empowerment can be adapted to apply to younger adolescents and to a large global cohort. This case study will look at the methodology involved in developing these tools, as well as what assets, opportunities and resources are associated with each empowerment measure in five sites across four continents (Kabeer, 1999). It will also examine how the Covid-19 pandemic may have affected empowerment, given that adolescents were cut off from the social contact necessary for healthy development. Through this lens, we can gain a more in-depth understanding of how very young adolescents today are expressing voice and agency.

METHODS

Sample

The GEAS is conducted in urban poor settings in eight countries and ten sites across five continents, with more than 14,000 adolescents. Its longitudinal quantitative study design looks at how gender norms impact the health and well-being of very young adolescents aged 10–14 as they mature. The survey tool was created following a qualitative formative research phase (Phase I) conducted from 2015 to 2017 that included narrative interviews and focus group discussions with adolescents and parents. This data contributed to the

development of various survey modules, including measures on sociodemographic characteristics, education, relationships, health and gender norms. The longitudinal phase of the GEAS (Phase II) began in 2017 and now includes multiple waves of data from five sites and one wave of data from two sites. Data was collected on tablets using the SurveyCTO platform.

When the Covid-19 pandemic began in 2020, the GEAS partners realised the importance of capturing the effects of worldwide shutdowns on adolescents. A new mixed-methods sub-study was quickly developed to examine the impacts of pandemic restrictions on the socioeconomic status, education and mental health of its global cohort. The study was planned for three rounds of quantitative data collection and two rounds of focus group discussions conducted over 18 months. However, due to difficulties with remote data collection in multiple sites, data collection actually spanned a period of two years (Hunersen et al., 2021). This study puts the GEAS in a unique position to examine various health indicators at a globally representative level before, during and after the pandemic.

As the empowerment measures were not included in the Covid module, this study will look at pre-Covid data on empowerment collected at GEAS baseline and will use qualitative data from the sub-study to help assess the potential impacts on adolescent agency. Thus, the sites included in these analyses are those that have both sets of data and represent the geographical diversity of the GEAS: São Paulo, Brazil; Ghent and Antwerp, Belgium; Kinshasa, Democratic Republic of Congo (DRC); Shanghai, China; and Bandar Lampung, Semarang, and Denpasar, Indonesia. Sample sizes for the quantitative and qualitative components for each site are described in Table 4.1.

TABLE 4.1**Sample size for baseline survey and Covid focus group discussions**

Site	Year of baseline data collection	Quantitative sample	Year of Covid data collection	Qualitative sample
São Paulo, Brazil	2021	1,106	2021	10
Ghent and Antwerp, Belgium	2019	996	2020	34
Kinshasa, DRC	2017	2,842	2020	31
Shanghai, China	2018	1,793	2020	40
Bandar Lampung, Semarang, and Denpasar, Indonesia	2019	4,684	2020	59

Tools

To develop the GEAS empowerment tool, a non-systematic literature review was conducted to identify the conceptualisation of agency that is most applicable to this age group (adolescents aged 10–14¹). As most of the literature focused on women's economic empowerment, additional examination was undertaken to identify the domains most relevant to very young adolescents. After consultation with global experts in the field, the three domains now used in the GEAS were identified: movement (ability to move freely); voice (ability to articulate opinions and be heard); and decision-making (ability to make decisions without adult supervision). The questions that comprise these measures were adapted from validated survey tools used in previous studies and further examined during the GEAS formative research phase. Additional information on the development of the empowerment tool can be found in Zimmerman et al. (2019), with the stem questions and response options detailed in Table 4.2.²

As this case study examines the potential impacts of Covid-19 lockdown measures on adolescent agency, it will focus on the voice and decision-making domains only, as all adolescents faced severe restrictions on their free movement during the pandemic.

The independent variables chosen for this study are based on the literature on which assets and conditions affect adolescent experiences of empowerment (van Eerdewijk et al., 2017; Raj et al., 2021). The associated measures identified in the GEAS include age, sex, educational attainment, caregiver connectedness, friend structure, time spent with friends, school connectedness and neighbourhood safety, social cohesion and social control. The neighbourhood variables are composite indicators, details of which can be found in Table 4.3.

For the qualitative component, focus group discussion guides were developed to examine adolescent experiences with school closures, peer and family relationships and mental health. All guides were reviewed by local country partners and assessed for cultural relevance. Sites had the opportunity to add any questions that they deemed contextually significant (Table 4.4).

Analysis

Quantitative analysis was descriptive, using freedom of voice and decision-making as dependent variables and the measures identified in Table 4.3 as independent variables. The empowerment measures are analysed by summarising responses to the questions set out in Table 4.2 into a mean score, ranging from 1 to 4, which was then averaged across all participants and assessed with a 95% confidence interval. Independent variables were categorised

TABLE 4.2**GEAS survey question stems and response options by empowerment sub-domain**

Domain	Stem	Items	Response options
Freedom of movement	Can you tell me how often you are allowed to do the following alone (without an adult present)?	Go to after-school activities (like sports clubs) Go to a party with boys and girls Meet with friends after school Go to community centre/movies/youth centre Go to church/mosque/temple or religious centre Visit a friend of the opposite sex	0 – Never/rarely 1 – Sometimes 2 – Often 999 – Don't know 996 – Refuse
Voice	How often are the following statements true for you?	My parents or guardians ask for my opinion on things My parents or guardians listen when I share my opinion My friends ask my advice when they have a problem If I see something wrong in school or the neighbourhood, I feel I can tell someone and they will listen I can speak up in class when I have a comment or question I can speak up when I see someone else being hurt I can ask adults for help when I need it	0 – Never/rarely 1 – Sometimes 2 – Often 999 – Don't know 996 – Refuse
Decision-making	How often are you able to make each of the following decisions on your own without an adult?	What clothes to wear when you are not in school/working What to do in your free time What to eat when you are not at home How much education you will get Who you can have as friends Decide when to marry on your own Decide who to marry on your own	0 – Never/rarely 1 – Sometimes 2 – Often 999 – Don't know 996 – Refuse

TABLE 4.3**Variable composition of neighbourhood variable scales**

Domain	Question	Response options
Neighbourhood social cohesion	Agreement with the statement 'People in my neighbourhood look out for and help their neighbours'	4 – Very true 3 – Somewhat true 2 – Not very true 1 – Not true at all
	Agreement with the statement 'People in my neighbourhood can be trusted'	4 – Very true 3 – Somewhat true 2 – Not very true 1 – Not true at all
	Agreement with the statement 'People in my neighbourhood know who I am'	4 – Very true 3 – Somewhat true 2 – Not very true 1 – Not true at all
	Agreement with the statement 'People in my neighbourhood care about me'	4 – Very true 3 – Somewhat true 2 – Not very true 1 – Not true at all
Neighbourhood social control	Likelihood that 'An adult in my neighbourhood would intervene if teens were damaging property'	4 – Very likely 3 – Somewhat likely 2 – Not very likely 1 – Not likely at all
	Likelihood that 'An adult in my neighbourhood would intervene if teens were spraying paint on walls (graffiti)'	4 – Very likely 3 – Somewhat likely 2 – Not very likely 1 – Not likely at all
	Likelihood that 'An adult in my neighbourhood would intervene if teens were bullying or threatening another person'	4 – Very likely 3 – Somewhat likely 2 – Not very likely 1 – Not likely at all
	Likelihood that 'An adult in my neighbourhood would intervene if teens were fighting with another person'	4 – Very likely 3 – Somewhat likely 2 – Not very likely 1 – Not likely at all
Neighbourhood safety	Have you felt unsafe in your neighbourhood, on the way to school or in school?	4 – Often 3 – Sometimes 2 – Rarely 1 – Never

TABLE 4.4

Levels of freedom of voice and freedom of decision-making by site and independent variable

	Belgium		Brazil		China		DRC		Indonesia	
Mean score (95% CI)	Voice (N = 928)	Decision (N = 988)	Voice (N = 893)	Decision (N = 957)	Voice (N = 1,497)	Decision (N = 1,577)	Voice (N = 2,446)	Decision (N = 2,570)	Voice (N = 4,259)	Decision (N = 4,441)
<i>All sample</i>	2.91 (2.87– 2.96)	3.09 (3.03– 3.14)	2.93 (2.88– 2.97)	3.08 (3.03– 3.14)	2.88 (2.84– 2.92)	3.07 (3.03– 3.11)	2.80 (2.77– 2.83)	2.94 (2.91– 2.97)	2.86 (2.84– 2.88)	2.90 (2.88– 2.93)
<i>Age</i>										
≤12	2.86 (2.80– 2.93)	2.94 (2.87– 3.02)	2.80 (2.73– 2.86)	2.90 (2.82– 2.98)	2.83 (2.78– 2.88)	2.96 (2.90– 3.02)	2.74 (2.70– 2.78)	2.83 (2.79– 2.87)	2.85 (2.82– 2.87)	2.86 (2.83– 2.89)
>12	2.97 (2.90– 3.04)	3.24 (3.17– 3.32)	3.08 (3.01– 3.14)	3.30 (3.23– 3.38)	2.94 (2.88– 2.99)	3.20 (3.14– 3.26)	2.90 (2.86– 2.95)	3.12 (3.07– 3.18)	2.88 (2.84– 2.92)	3.00 (2.96– 3.05)
<i>Sex</i>										
Male	2.89 (2.82– 2.95)	3.09 (3.02– 3.16)	2.95 (2.89– 3.02)	3.11 (3.03– 3.18)	2.89 (2.83– 2.94)	3.05 (2.99– 3.11)	2.79 (2.75– 2.83)	2.90 (2.86– 2.95)	2.79 (2.75– 2.82)	2.88 (2.84– 2.91)
Female	2.95 (2.88– 3.02)	3.08 (3.00– 3.16)	2.89 (2.82– 2.96)	3.06 (2.98– 3.14)	2.87 (2.82– 2.92)	3.08 (3.03– 3.14)	2.81 (2.77– 2.85)	2.98 (2.93– 3.02)	2.93 (2.90– 2.95)	2.93 (2.89– 2.96)

(Continued)

TABLE 4.4 (Continued)

	Belgium		Brazil		China		DRC		Indonesia	
Mean score (95% CI)	Voice (N = 928)	Decision (N = 988)	Voice (N = 893)	Decision (N = 957)	Voice (N = 1,497)	Decision (N = 1,577)	Voice (N = 2,446)	Decision (N = 2,570)	Voice (N = 4,259)	Decision (N = 4,441)
Other	–	–	2.90 (2.15–3.65)	3.17 (2.46–3.87)	–	–	–	–	–	–
<i>Education attainment</i>										
Lower than age expected grade	2.64 (2.52– 2.75)	2.94 (2.82– 3.06)	2.76 (2.66– 2.86)	3.03 (2.92– 3.13)	2.54 (2.43– 2.64)	2.82 (2.70– 2.94)	2.58 (2.52– 2.64)	2.88 (2.81– 2.95)	2.40 (2.33– 2.47)	2.78 (2.70– 2.86)
Age expected grade or higher	2.99 (2.93– 3.04)	3.12 (3.06– 3.18)	2.99 (2.94– 3.05)	3.11 (3.04– 3.17)	2.93 (2.89– 2.97)	3.11 (3.06– 3.15)	2.87 (2.84– 2.90)	2.96 (2.92– 3.00)	2.91 (2.89– 2.93)	2.92 (2.89– 2.94)
<i>Caregiver connectedness</i>										
No caregiver or having caregivers but not feeling close	2.70 (2.57– 2.82)	3.05 (2.91– 3.20)	2.80 (2.67– 2.94)	3.13 (2.99– 3.27)	2.54 (2.44– 2.65)	3.01 (2.89– 3.12)	2.71 (2.63– 2.79)	3.01 (2.93– 3.10)	2.66 (2.60– 2.72)	2.87 (2.80– 2.95)
Feel close to caregiver	2.95 (2.90– 3.00)	3.09 (3.03– 3.15)	2.95 (2.90– 3.00)	3.08 (3.02– 3.14)	2.94 (2.90– 2.98)	3.08 (3.03– 3.12)	2.81 (2.78– 2.84)	2.93 (2.89– 2.97)	2.89 (2.86– 2.91)	2.91 (2.88– 2.93)

	Belgium		Brazil		China		DRC		Indonesia	
Mean score (95% CI)	Voice (N = 928)	Decision (N = 988)	Voice (N = 893)	Decision (N = 957)	Voice (N = 1,497)	Decision (N = 1,577)	Voice (N = 2,446)	Decision (N = 2,570)	Voice (N = 4,259)	Decision (N = 4,441)
<i>Friend structure</i>										
No friends	2.43 (2.16– 2.70)	3.05 (2.83– 3.28)	2.95 (2.74– 3.16)	3.14 (2.91– 3.37)	2.45 (2.23– 2.67)	2.95 (2.72– 3.18)	2.57 (2.44– 2.71)	2.89 (2.73– 3.04)	2.64 (2.50– 2.78)	2.64 (2.48– 2.79)
Same-sex friends only	2.82 (2.74– 2.89)	3.02 (2.93– 3.10)	2.79 (2.71– 2.87)	2.97 (2.88– 3.06)	2.79 (2.73– 2.85)	3.07 (3.00– 3.13)	2.71 (2.67– 2.75)	2.92 (2.87– 2.97)	2.74 (2.71– 2.78)	2.83 (2.79– 2.87)
Any opposite-sex friends	3.01 (2.95– 3.07)	3.13 (3.06– 3.20)	3.02 (2.96– 3.08)	3.16 (3.09– 3.24)	2.98 (2.93– 3.02)	3.08 (3.02– 3.13)	2.91 (2.87– 2.95)	2.97 (2.92– 3.01)	2.95 (2.93– 2.98)	2.97 (2.94– 3.00)
<i>Peer socialisation frequency</i>										
No friends or having friend but no socialisation with them	2.92 (2.81– 3.03)	3.22 (3.12– 3.33)	3.00 (2.91– 3.08)	3.19 (3.09– 3.29)	3.03 (2.95– 3.11)	3.26 (3.18– 3.33)	2.89 (2.81– 2.97)	3.08 (3.00– 3.17)	2.86 (2.80– 2.93)	2.94 (2.87– 3.01)
1–4 times a week	3.00 (2.94– 3.06)	3.13 (3.06– 3.21)	2.98 (2.91– 3.05)	3.10 (3.02– 3.19)	2.92 (2.87– 2.97)	3.08 (3.03– 3.14)	2.85 (2.81– 2.89)	2.93 (2.88– 2.98)	2.89 (2.86– 2.92)	2.89 (2.86– 2.93)
(Continued)										

TABLE 4.4 (Continued)

	Belgium		Brazil		China		DRC		Indonesia	
Mean score (95% CI)	Voice (N = 928)	Decision (N = 988)	Voice (N = 893)	Decision (N = 957)	Voice (N = 1,497)	Decision (N = 1,577)	Voice (N = 2,446)	Decision (N = 2,570)	Voice (N = 4,259)	Decision (N = 4,441)
Nearly every day	2.74 (2.65–2.83)	2.89 (2.78–2.99)	2.77 (2.68–2.87)	2.95 (2.85–3.06)	2.65 (2.57–2.73)	2.85 (2.76–2.94)	2.71 (2.67–2.76)	2.90 (2.85–2.95)	2.81 (2.77–2.85)	2.90 (2.86–2.94)
<i>School connectedness</i>										
No/being out-of-school	2.75 (2.67–2.83)	3.05 (2.96–3.14)	2.67 (2.57–2.77)	2.94 (2.83–3.05)	2.50 (2.42–2.59)	2.88 (2.78–2.98)	2.56 (2.51–2.61)	2.84 (2.78–2.89)	2.59 (2.55–2.64)	2.81 (2.76–2.86)
Yes	3.02 (2.96–3.08)	3.11 (3.04–3.17)	3.03 (2.98–3.08)	3.14 (3.08–3.21)	2.98 (2.94–3.02)	3.12 (3.07–3.16)	2.93 (2.89–2.96)	3.00 (2.95–3.04)	2.96 (2.93–2.98)	2.94 (2.91–2.96)
<i>Neighbourhood cohesion</i>										
Low	2.83 (2.77–2.89)	3.08 (3.02–3.15)	2.86 (2.80–2.92)	3.07 (3.00–3.14)	2.79 (2.74–2.84)	3.06 (3.00–3.11)	2.68 (2.64–2.71)	2.95 (2.90–2.99)	2.75 (2.72–2.78)	2.88 (2.84–2.91)
High	3.07 (2.99–3.15)	3.09 (3.00–3.18)	3.04 (2.96–3.12)	3.11 (3.02–3.20)	3.01 (2.95–3.07)	3.07 (3.02–3.14)	2.97 (2.93–3.02)	2.93 (2.88–2.98)	2.97 (2.94–3.00)	2.93 (2.90–2.96)

	Belgium		Brazil		China		DRC		Indonesia	
Mean score (95% CI)	Voice (N = 928)	Decision (N = 988)	Voice (N = 893)	Decision (N = 957)	Voice (N = 1,497)	Decision (N = 1,577)	Voice (N = 2,446)	Decision (N = 2,570)	Voice (N = 4,259)	Decision (N = 4,441)
<i>Neighbourhood social control</i>										
Low	–	–	2.99 (2.92– 3.05)	3.15 (3.08– 3.22)	2.78 (2.71– 2.85)	2.93 (2.85– 3.01)	2.80 (2.74– 2.85)	2.90 (2.83– 2.96)	2.83 (2.79– 2.86)	2.84 (2.80– 2.87)
High	–	–	2.85 (2.78– 2.92)	3.00 (2.92– 3.09)	2.92 (2.87– 2.96)	3.13 (3.08– 3.17)	2.80 (2.77– 2.84)	2.96 (2.92– 3.00)	2.88 (2.85– 2.91)	2.95 (2.92– 2.99)
<i>Safety</i>										
Unsafe	2.90 (2.80– 3.01)	3.04 (2.91– 3.17)	2.90 (2.78– 3.01)	2.95 (2.82– 3.08)	2.78 (2.68– 2.88)	2.90 (2.79– 3.01)	2.77 (2.70– 2.83)	2.86 (2.79– 2.93)	2.88 (2.84– 2.92)	2.90 (2.85– 2.95)
Safe	2.92 (2.86– 2.97)	3.10 (3.04– 3.15)	2.93 (2.88– 2.99)	3.12 (3.06– 3.18)	2.90 (2.86– 2.94)	3.10 (3.05– 3.14)	2.81 (2.78– 2.84)	2.96 (2.92– 3.00)	2.85 (2.83– 2.88)	2.90 (2.88– 2.93)

into dichotomous or categorical variables and cross-tabulated with the two empowerment measures.

All qualitative transcripts were transcribed and translated into English prior to analysis. Data was analysed using an inductive coding process to assess similarities and differences by site. Codes were grouped into thematic areas where appropriate. All analyses were conducted using Atlas.ti 9.1.

RESULTS

Quantitative

This section will outline the contextual factors shaping the environment of the adolescent as they experience agency. All quantitative results in this section are descriptive in nature and cannot be used to determine causation. However, they can provide helpful clues as to which factors were more closely related to freedom of voice and decision-making prior to the Covid-19 pandemic.

Starting with an overall examination of voice and decision-making in each site, adolescents appear to have stronger levels of agency when it comes to decision-making. This could be linked to the questions asked in relation to each measure, as decision-making focuses on adolescents' ability to act on their own will and desires, whereas voice is partially dependent on an interpretation of other people's receptiveness to their opinions. However, this highlights the importance of having supportive interpersonal relationships that foster opportunities to express one's opinions. When looking by site, adolescents in Indonesia and DRC have lower levels of decision-making power than adolescents in China, Brazil or Belgium. While this observation is again descriptive in nature, it could point to a more restrictive setting whereby adults might limit adolescent autonomy for their safety or fear of perceived social retribution for certain activities.

Age and sex were the primary demographic characteristics used in these analyses. Whereas agency was relatively equal by sex, older adolescents tended to have more agency than younger adolescents. This points to the shifts occurring within this developmental phase, as adolescents seek (and are granted) more freedoms as they age. Education also appeared to be an important factor in securing freedom of voice and decision-making, as adolescents with age-appropriate or higher education levels experienced more empowerment than their counterparts with lower age-for-grade educational attainment. Also, adolescents who felt connected to their school environment demonstrated higher scores in both empowerment sub-domains than

those who did not. These results identify the significance of education for agency during this life stage, both as a developmental asset and a platform for voicing thoughts and opinions.

When looking at adolescent relationships, the data elucidates the dichotomy of early adolescent development. The interpersonal variables used in these analyses of caregiver connectedness, friend structure and peer socialisation potentially show this shift occurring. Adolescents who feel close to their caregivers report having more freedom of voice, but not for decision-making. This disparity points to an interesting dichotomy for youth at this stage of development, whereby very young adolescents are gaining an ability to express themselves but still operate under the decision-making power of others (adults). Also, adolescents who have friends of both sexes tend to report higher levels of voice, but those who spend more time with friends do not. These contradictions point to how very young adolescents can derive agency from their peer relationships, though the complexity of these relationships is not yet well understood.

Finally, analyses looked at adolescents' neighbourhood experiences (Table 4.3). In Shanghai, adolescents who scored higher on neighbourhood measures also reported higher levels of empowerment. However, results in other sites were inconsistent. Neighbourhood safety indicated greater empowerment in DRC but contributed to little or no improvement in empowerment in other sites. Neighbourhood cohesion was correlated with greater freedom of voice but not decision-making. Social cohesion was correlated with a decrease in empowerment in Brazil but had little impact in other sites. These results highlight how the overall stability and reliability of an adolescent's lived environment can affect empowerment differently depending on the context of each site.

Qualitative

The qualitative data from the Covid-19 sub-study lends some insights into the effects of isolation measures (to prevent the spread of the disease) on the adolescent agency results above. As already noted, school is an important asset for adolescents as they move away from the influence of family relationships and move towards being more influenced by peers. The school environment is a key setting in which adolescents can express their independence while remaining in a setting that is trusted by parents. Thus, school closures posed severe risks to this nascent sense of freedom and independence. This is especially true for girls, who often experienced more severe parental restrictions. As one girl said:

I miss the school environment, with my friends, I miss hanging out with them. But now I can't hang out with them anymore, it's been rare, I've only met them twice now.

(Girl, Indonesia, August 2020)

School closures meant that adolescents lost connections not only with their peers but also with teachers, who often play a critical role of intermediary adult support in the place of parents. Indeed, the 'school connectedness' variable is informed by an adolescent's belief that someone at their school cares about them. Without their physical presence in a school environment, one adolescent in Belgium said that they lost that connection:

I actually just went to talk to my friend a lot and with her I could complain about what I don't like about [lockdown], and maybe even to my mom sometimes. But for the rest, I don't talk to a teacher or anything like that.

(Girl, Belgium, October 2020)

The lack of opportunity to voice such challenges to friends and teachers could lead to deteriorating mental health. Indeed, rates of anxiety, depression and loneliness have greatly increased since the onset of Covid in 2020 (Lee et al., 2020; Orben et al., 2020). This was also found to be true among participants in this study, as one adolescent in Brazil explained:

I think it was a time that awakened more this anxiety and depression thing, but it is also a time that taught many people to unite family and friends more, to value friendships more... but I couldn't stand it anymore. I had this thing I needed to leave home and I think that many people had this feeling of anxiety and depression.

(Girl, Brazil, September 2021)

Although some adolescents were excited by the opportunity of spending more time at home, that excitement quickly wore off, as an adolescent boy in Belgium noted:

Even if you would think that because you're at home now, you can do more... It was just the opposite. I was very unmotivated and sometimes I got, like, mental breakdowns all of a sudden and I thought it was really bad, I didn't like it very much.

(Boy, Belgium, October 2020)

While lack of access to the school environment during lockdowns could have a negative impact on voice and agency, both the quantitative and qualitative data point to a potential positive shift back towards parents and families.

As indicated in the quantitative data, positive relationships with caregivers can support freedom of voice. During the Covid pandemic, adolescents emotionally opened up to parents, possibly due to a stronger rapport gained from more time spent together during lockdown. In some cases, this was a stark change from the prior negative relationship, as one girl in Brazil explained:

Before I got involved in the relationship, I already treated my mother as an enemy because I was afraid of her. She didn't teach me to respect her, she taught me to be afraid of her, you know? So, for me, she was not a friend, she was just a mother and I didn't want to tell her anything... Now I tell her almost everything.

(Girl, Brazil, September 2021)

This connection could be supporting more freedom of voice; however, the quantitative data suggests that this will not necessarily lead to increases in other forms of empowerment. In other sites, adolescents expressed negative experiences of spending more time with family during lockdowns. This was mainly in China and DRC – settings in which adolescents experienced stricter parental oversight. In DRC, one adolescent described severe stress at being confined with her father:

On the contrary, when they say they want to reconfine, I am really upset because when dad leaves for work we're fine, but when he is here it's unbearable.

(Girl, DRC, November 2020)

In Shanghai, adolescents largely felt responsible for their own discipline. Although they expressed frustration that parents were not as understanding about their challenges, they also emphasised that self-regulation is critical. One adolescent even described a beating as being his own fault:

When you argue with your parents, you should first think about whether you did something wrong. If you made a mistake, don't talk back to your parents, otherwise you would be scolded or beaten since it is your own fault.

(Boy, Shanghai, June 2020)

In some sites, adolescents had other outlets for taking emotional control of their circumstances. In DRC, adolescents expressed the importance of prayer in voicing their concerns. Although they were cut off from religious groups in the church setting, they still felt that God was their main source of comfort:

Prayer really helped us because through social media we had established a system of prayers for the country. Personally I spent a night of prayer on the floor, I left my bed to implore the grace of God, and we saw that the cases were here, but it was not like in other countries we hear about.

(Boy, DRC, November 2020)

Very young adolescents in Shanghai even appreciated the opportunity for internal reflection. With intense school and extracurricular schedules, they did not have the time or space for freedom of voice or decision-making. However, the pandemic gave them the opportunity to reconnect with their needs:

I thought I had more time to think about some problems. We always did not have enough time to think about problems because of [being] busy study[ing], because we [had to] run back and forth between school and home every day. But it was different when we were at home during the epidemic, we could think more [about] problems in learning and life.

(Boy, Shanghai, June 2020)

Shanghai was the only site in the study where adolescents reported improvements in mental health overall. With school closures and the halting of extracurricular activities, they had more time to spend with their family and to prioritise the activities they enjoyed doing.

CONCLUSION

Empowerment during young adolescence is a complex concept that requires access to a broad network of assets, including parents, friends and school personnel. When the Covid-19 pandemic cut off physical access to most of those support systems, adolescents had severely limited arenas where they could express freedom of voice and decision-making. The tools used in the GEAS provide an opportunity to examine which contextual factors might be most influential in empowering VYAs, while the qualitative data allows a detailed examination of how those contextual factors were impacted by the pandemic.

The quantitative results point to the significance of relationships with parents and teachers in adolescents' freedom of voice and decision-making. A close relationship with a caregiver might create a more open environment in which adolescents can express their desires and opinions. However, they are not yet granted the capacity to act independently on those preferences (Blum et al., 2014). The school environment might be an optimal place

for this, as adolescents who felt connected to their schools also reported higher levels of empowerment. Data on neighbourhood connectedness gave rise to more inconsistencies, showing the importance of country context in creating opportunities for agency among adolescents. It also suggests that schools could be a universally protective place for expression of agency despite the community in which the adolescent lives. However, these results should be interpreted according to the specific location where the data was collected.

The role of peers is less clear, as gender diversity in friendships is associated with greater empowerment but not more time spent with friends. This could indicate that adolescents who are comfortable spending time with peers of the opposite sex might also feel more comfortable expressing their needs and acting on them. Even so, increased engagement with those friends does not necessarily provide more opportunities for empowerment. Also, the Covid qualitative data shows that adolescents are experiencing increased loneliness after being separated from friends during the pandemic. Such statements cannot be ignored, as the literature shows the negative impact of isolation on adolescent mental health (Lee et al., 2020; Orben et al., 2020).

Contrasting results between the quantitative and qualitative data suggest the Covid pandemic might have impacted, or even accelerated, the empowerment differences between boys and girls. Prior analyses from the GEAS demonstrate how adolescent empowerment shifts at puberty, with adults' restricting girls for their 'protection' from boy 'perpetrators' (Mmari et al., 2018). Fewer adolescents at baseline will have gone through puberty, which might contribute to the overall similarity in voice and decision-making by sex in these analyses. With heightened safety concerns during the Covid pandemic, many felt increased protection was necessary. However, the qualitative results in this study show girls might have been more restricted than boys. Such a relationship warrants further exploration as the effects of Covid restrictions continue to come to light.

With the unique combination of methodologies measuring empowerment among very young adolescents, this study has investigated how the Covid pandemic has impacted young people's expressions of agency in diverse global contexts. Results indicate that parents and schools play a critical role in providing opportunities for voice and decision-making. However, during the pandemic, adolescents relied increasingly on parents as they were removed from their peer and teacher support systems at school. Providing opportunities within the household for adolescents to express their needs can be critical in preventing negative mental health

outcomes. Also, the study finds that families and households that foster harmonious relationships between children and caregivers can support adolescents' freedom of voice and decision-making. Although empowerment is still nascent during very early adolescence, cultivating those assets and resources can support adolescents to increase their freedom of voice and agency.

NOTES

- 1 To protect participant identity, not every site was able to indicate the exact age of each participant on interview transcripts; therefore, participant ages are not included alongside quotations in the section on qualitative findings.
- 2 This table was acquired from a paper by Zimmerman et al. on measuring empowerment (Zimmerman et al., 2019).

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