




## "Butterflies in a jar": How girls and young women conceptualise wellbeing in conflict-affected Myanmar

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### ABSTRACT

Since the 2021 coup in Myanmar, the country has been driven into further social, political and economic turmoil. The United Nations estimates that 18.6 million people need humanitarian support. Among those most affected are adolescent girls aged 10–19 years who, as adolescents and young women, face unique risks to their health and wellbeing and require tailored interventions to promote their health and wellbeing both now and in the future. Supporting adolescent girls and young women during conflict means addressing their increased risk of gender-based violence, forced marriage, disrupted education, and access to health services. There is limited evidence on the effects of Myanmar's current political situation on adolescent girls and young women, and even less on what can be done to support their health and wellbeing during this period of protracted instability. In this qualitative study, we used the capabilities approach to conceptualise wellbeing from the perspectives of adolescent girls and young women in Myanmar. Collaborating with four young female peer-researchers, we conducted 12 participatory focus group discussions with 73 girls from Yangon, Sagaing and Mandalay. Our findings identified key themes of wellbeing that were prioritised by our study population: education, agency, hope and happiness, which were being undermined by gender inequality and the ongoing conflict. This study highlights the benefits of the capabilities approach in identifying the complex wellbeing needs of adolescent girls and young women in crisis settings as a basis for programme design and implementation.

### 1. Introduction

On February 1<sup>st</sup>, 2021, the Myanmar military staged a coup, triggering a violent political, socioeconomic and humanitarian crisis across the country (Kipgen, 2021; Thein-Lemelson, 2021). Prior to the 2021 coup, the United Nations (UN) identified one million people in Myanmar in need of humanitarian support, a figure that has since risen to 18.6 million people, with almost half of the population driven into poverty and 2.6 million people displaced (UNOCHA, 2023). This crisis compounds Myanmar's history of protracted conflict, severely limiting young people's access to education, safe work, social networks, and critically affected their physical and mental health (Mendelson, 2021). Targeted military violence against opposition forces and non-Burmese ethnic nationalities has fuelled widespread humanitarian emergencies, exacerbated by strict limitations on humanitarian response access (Shalash, Me Abu-Rmeileh, Kelly, & Elmusharaf, 2024; UNOCHA,

2024c). By 2024, an estimated 23 million—43% of the population—are exposed to the conflict, ranking Myanmar's crisis as the world's second most violence conflict (ACLED, 2024).

Adolescence, defined by the UN as between the ages of 10–19 years, is a period when children face complex changes physically, cognitively, sexually, and emotionally as they navigate the transition into adulthood (UNDESA, 2022). This transition can look very different across contexts, where adolescents have varying societal and familial roles, including as students, employees, caregivers or even parents, all whilst undergoing internal and external physiological changes (Patton et al., 2016; Ross et al., 2020). Because of the instability and violence in Myanmar, some adolescents are experiencing individual and family safety risks related not least to their political opinions, religion and/or ethnicity (Shoib et al., 2021; UNHCR, 2022). Moreover, many adolescents' support systems, such as those provided through school, communities and religious groups have broken down, restricting them from safely pursuing their

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personal, civic and political interests (Mendelson, 2021; Thant, 2021). Likewise, essential health services and supportive non-governmental organisations (NGOs) have been restricted or withdrawn, significantly reducing available assistance (UNOCHA, 2024a). This has left many adolescents without adequate health care and social support, with far-reaching implications for future generations (Loy, 2022). In early 2024, the military imposed national conscription, forcing many young people to either join the military or attempt to flee the country, further intensifying their precarity (ISP, 2024, UNOCHA, 2024b).

The WHO defines wellbeing as *a positive state experienced by individuals and societies*, and health as *a complete physical, social and mental wellbeing, and not merely the absence of disease or infirmity* (WHO, 2021). Wellbeing, like health, is influenced by social, environmental and economic conditions (WHO, 2021). As governments pursue the 2030 Sustainable Development Goals, the health and wellbeing of adolescents has gained increasing attention (Laski, 2015). In health research, the concept of wellbeing is used to expand our understanding of health beyond the physical and mental burdens of disease, to consider both objective quality of life and social attributes, as well as an individual's subjective perspectives of life satisfaction and happiness (Western & Tomaszewski, 2016). That said, although wellbeing is a widely referenced concept, its specific dimensions remain unclear, not least for adolescents living in contexts of complex crises. (Newby et al., 2022). Given the recent calls for greater investment in adolescent wellbeing in humanitarian crises, it is important to work with adolescents to understand what their wellbeing priorities are and how to best support these priorities (Singh et al., 2023).

When studying adolescents' wellbeing, it is necessary to take account of how wellbeing is shaped by intersecting inequalities related to, for example, gender norms, ethnicity, class, caste, indigeneity and sexual orientation and identity (Crenshaw, 1989). Notably, gender norms are social rules and expectations that—in a particular culture—determine what are appropriate masculine and feminine behaviours and play a dominant role in an individual's life course (Cislaghi & Heise, 2020). How societies and communities have internalised these norms is apparent in the ways in which girls and young women are viewed and treated, which also underpins many of the risks to their wellbeing (Blum et al., 2017). Gender-based violence (GBV), forced marriage, limited access to education and risk of sexually transmitted infections disadvantage girls' health and wellbeing compared to their male peers, perpetuating ongoing cycles of inequality (Amin & Chandra-Mouli, 2014; Heise et al., 2019). Furthermore, the impact of these inequalities on the wellbeing of girls and young women are exacerbated in contexts of humanitarian crises, where there are greater risk of malnutrition, poor sexual and reproductive health, physical injuries, infectious diseases and mental health concerns (Bendavid et al., 2021).

Despite these conflict-related risks, few studies have specifically investigated girls' wellbeing in low-income conflict-affected settings, especially using qualitative methods and participatory approaches. A recent global review of qualitative literature on adolescent girls' wellbeing found ten studies, of which only three were conducted in low- and middle-income countries and none in South-East Asia or conflict-affected settings (Bilbao-Nieva, 2021). To date, there is limited evidence on the effects of the ongoing conflict on the wellbeing of girls and young women in Myanmar and, to the best of our knowledge, no recent studies in Myanmar have sought to incorporate a participatory approach. Nonetheless, recent reports indicate that women and girls in Myanmar make up an estimated 52% of those classified as in need of humanitarian assistance due to the effects of the crisis on healthcare, education, displacement, food insecurity, forced recruitment and mental distress (UNOCHA, 2023).

### 1.1. Methodological approach: the capabilities approach and participatory methods

Drawing on psychology research, there are two main approaches to

understand wellbeing. First, subjective wellbeing seeks to consider both wellbeing's emotional and evaluative dimensions and identify experiences of people's lives based on their personal beliefs or feelings (Das et al., 2020). Second, objective wellbeing seeks to measure how a person's needs are being met in terms of their quality of life and their material living conditions, based on observable factors (D'Acci, 2011). In health research, both the subjective and objective approaches are needed to consider someone's mental and physical health and their environmental, societal and individual influences. One approach that considers both aspects is the capabilities approach (CA) introduced by Amartya Sen (1985) who, along with prominent scholars such as Martha Nussbaum, developed the CA as a framework for studying wellbeing (Nussbaum & Sen, 1993). The CA is comprised of two key relations: capabilities and functionings (Sen, 1985). Capabilities are *"the substantive freedoms [someone] enjoys to lead the kind of life he or she has reason to value"*, which links to functionings as *"the various things a person may value doing or being"* (Sen, 1999). Functionings are what someone might seek to achieve that may be valuable both objectively and personally, and capabilities are the freedoms and ability to achieve these functionings, that can be somewhat subjective (Sen, 1999). Effectively, the CA offers an approach to understanding wellbeing that accounts for the various characteristics of individuals and the social contexts that influence their ability to achieve certain outcomes. This approach challenges those seeking to measure wellbeing to consider not just what someone has, but also the freedoms they have to live the life they desire, making it an ideal framework for making sense of what wellbeing means from the perspectives of girls and young women in Myanmar and other conflict affected settings (Sen, 1985, 2005).

This study forms the first stage of a research project seeking to evaluate the wellbeing of girls and young women in Myanmar, against a backdrop of instability and insecurity. The purpose of the qualitative study presented here is to strengthen our theoretical understanding of what wellbeing means to our study population and develop a normative framework for wellbeing in our study population. We chose the CA to help frame this study as it allows for a more nuanced understanding of wellbeing that recognises that different capabilities are relevant and important to different populations in different settings (Sen, 2005). The CA has been extensively used to study wellbeing among children and adolescence, sometimes also employing a participatory approach (Domínguez-Serrano & del Moral-Espín, 2022). For example, by Biggeri et al. (2006) who conducted participatory FGDs with former child labourers from South Asian countries, or by Chakraborty et al. (2024) who developed a capability framework for child growth in Bangladesh. Chase and Allsopp similarly applied the CA to build an understanding of Afghan youth's wellbeing among unaccompanied migrants in the UK (Chase, 2020; Chase & Allsopp, 2021). In contrast to other CA studies, we sought to try and identify women and girls' capabilities through a gendered lens, by utilising FGDs as a safe space for girls and young women to share their experiences and identify the capabilities most important to them. Furthermore, we wanted to meaningfully include young women in the conceptualisation of their wellbeing to ensure that we could arrive at a contextually and culturally relevant conceptualisation of wellbeing. In this vein, we employed a participatory approach in this study (through our collaboration with young peer-researchers), to help strengthen the CA by helping us to avoid identifying capabilities based on implicit or explicit assumptions of what we felt girls and young women *should* value in their lives. This approach helped us to avoid perpetuating any inaccurate and potentially harmful ideologies as researchers (Alkire, 2007; Ballet et al., 2011).

This study draws on participatory methodologies by collaborating with four young women peer-researchers. Participatory research encompasses a group of methods and frameworks where research is conducted in collaboration with individuals who are among the target population of the study, recognising the value of engaging the target audience throughout the research process (Cargo & Mercer, 2008; Vaughn & Jacquez, 2020). The cornerstone of participatory methods is

that they challenge the traditional power relations between the researcher and the researched, as summarised by Cornwall and Jewkes (1995) as being carried out “with and by local people rather than on them”. Therefore, this study aimed to use the CA in a participatory way to meaningfully explore which dimensions of wellbeing are relevant and important to girls and young women living in low-income settings in Myanmar. Unlike similar studies in the wellbeing literature, we did not seek to identify an exhaustive list of wellbeing indicators. Instead, we focused on taking a holistic approach to identify a non-definitive list of capabilities, prioritised by our participants. In this publication, we present findings from our focus group discussions with adolescent girls and young women about their wellbeing. Specifically, we 1) explore how adolescent girls and young women conceptualise their wellbeing; and 2) examine how they perceive their wellbeing is influenced by cultural and environmental factors.

## 2. Methods

### 2.1. Study collaborators: Girl Determined

This qualitative study was conducted in collaboration with Girl Determined (GD), a Myanmar-based organisation supporting girls and young women aged 11–25 years from low-income rural and urban settings across Myanmar since 2010. The core programme, *Circles*, is an in-person weekly girls empowerment programme in which girls are enrolled for two years, and learning is facilitated by women hired and trained from local communities. The *Circles* curriculum includes content on self-esteem and assertiveness, religious and ethical discrimination, trafficking and safe migration, stress, romantic relationships, friendships, drugs, goal-setting, and sexual and reproductive health. GD focuses on involving hard-to-reach girls by recruiting them through sites such as camps for internally displaced people, churches, Buddhist monastic schools and dormitories for girls from rural areas. This study was developed from discussions with Girl Determined staff who highlighted the need for an in-depth understanding of the conflicting pressures on adolescent girls enrolled in the *Circles* programme given the current context in Myanmar.

### 2.2. Study design and population

Focus group discussions (FGDs) were used as the method of data collection to accommodate the participatory arts-based methods. The study population comprised girls and young women aged 12–20 years enrolled in GD’s *Circles* programme. For this research we chose safely accessible townships in and around Yangon, Mandalay and Sagaing, and participants were recruited using convenience sampling. It is important to note that around 50% of GD’s cohort live away from their parents, mostly in Buddhist nunnaries or boarding houses to help them access education (provided free of charge by nunnaries and many boarding houses) and/or escape conflict and security issues in their hometowns.

### 2.3. Research team, peer-researcher training and topic guide development

Alumni of *Circles* are eligible to apply for GD’s peer-research training programme, during which they undergo training in research methods and contribute to Girl Determined’s ongoing research and advocacy initiatives as paid peer-researchers. Our research team included four of GD’s alumni peer-researchers aged 18–25 years old (EES, KLO, NDO, ZMH), a British doctoral student (IP) and a research assistant from Myanmar (CVK). IP led the study and created the training and co-production workshop materials that were translated by CVK, who facilitated the peer-researcher training and co-production workshops. The entire research team contributed to the development of the topic guide and the peer-researchers facilitated the FGDs. Furthermore, the entire research team was involved in project leadership and methodological design decisions to help mitigate some of the power imbalances

of traditional research methods. Peer-researchers received training from IP and CVK on FGD planning and facilitation, wellbeing concepts, and research ethics and safeguarding.

The FGD topic guide was co-developed by the research team through training and co-production workshops conducted in Yangon during November 2022 and inspired by similar studies in the literature that conducted focus group discussions to apply the CA to conceptualise wellbeing with young people (Biggeri et al., 2006; Crivello et al., 2009) and also using the concept of “a good life” to structure wellbeing discussions (Crivello et al., 2009; Greco et al., 2015). Iterations of the topic guide were piloted with groups of adolescent girls aged 12–18 years. Overall, six pilots were conducted within Yangon Region, and two in Mandalay Region, including a total of 48 girls and young women. Between each pilot, debrief workshops were held with the research team to improve the topic guide.

### 2.4. Data collection

Twelve FGDs were conducted during February and March 2023. Each FGD was led by two peer-researchers with the support of CVK, and each lasted 2 h (including a 10-minute break) and took place within a private room. Refreshments were provided, however participants did not receive any monetary compensation for attendance, as the sessions were conducted within their regular *Circles* schedule.

The FGDs began with an ice breaker activity, then participants drew images of what ‘a good life’ meant to them. The phrase ‘a good life’ was selected during co-production workshops because it was deemed the simplest way to understand and explain ‘wellbeing’ (which has no specific term in Burmese) that would be understood by all participants, and in pilot sessions, this approach successfully captured different dimensions of wellbeing, including mental health, access to education and social support. Participants were given time to present and explain their drawings of ‘a good life’ to the group, after which peer-researchers led a discussion on the barriers and opportunities to achieving a good life.

FGDs were recorded using encrypted audio recording software on mobile phones. The audio was then transcribed and translated into English. Transcripts were transcribed by CVK and translated by external translators.

### 2.5. Data analysis

Analysis of transcripts use reflexive thematic analysis (Braun & Clarke, 2006), led by IP with extensive input from the rest of the research team. English transcripts were coded by IP and some randomly selected Burmese versions were coded by CVK, they then discussed their codes to triangulate results and ensure details and nuances were not missed during translation. Codes were further discussed and developed into themes with the peer-researchers during in-depth data validation and analysis workshops in September 2023.

### 2.6. Ethical considerations

Informed assent was obtained from each participant, along with either parental or trusted adult consent. The procedures for obtaining assent and consent were developed during the co-production workshops to ensure that information sheets were appropriate and comprehensible. All participants were invited to take part based on their enrolment to *Circles*, which also meant that safeguarding and support systems were in place should they require a referral. Ethical approval for this research was received from the London School of Hygiene and Tropical Medicine ethics committee and a local research ethics committee in Myanmar.

### 3. Findings

#### 3.1. Participant demographics

We completed twelve focus group discussions (FGDs) comprising 6–7 participants, totalling 73 girls in Yangon, Mandalay and Sagaing Regions. Participant demographics are presented in Table 1. Most participants were aged 12–18 years, giving a median age of 15 years, most participants were Buddhist (80.82%) and 53.42% were ethnically Burmese (Bamar).

Almost all participants were currently enrolled in education, either through state or monastic schools. Monastic schools are free and popular with lower income households (Lall, 2020). Both systems often provide boarding facilities for students from low-income and/or conflict-affected areas, which is why a high percentage of participants (56.16%) were living away from families.

The findings section first describes two core themes (gender inequality and Myanmar’s ongoing conflict), which participants highlighted in their descriptions of a good life. These core themes help interpret participants’ comments and drawings and represent what they believed undermined a good life. We then describe the themes that emerged through the analysis when participants defined a good life: a) education for self-worth and social acceptance; b) agency; c) seeking sources of happiness; and d) hope as a positive coping mechanism.

#### 3.2. Gender inequality constraining girls’ wellbeing: “boys have priority”

When asked to define a good life, participants frequently reflected on the implications of being young women and viewed their gender—or more specifically, society’s reinforcement of unequal gender norms—as a hindrance to wellbeing. They considered how inequalities shaped their interactions with their families, communities and society.

Participants reflected on women’s lower social and economic status and limited societal power. For example, one 16-year-old participant explained how inequitable gender norms were being upheld and reinforced across generations:

*In our village, when we think about the position of a village leader or superintendent, we couldn’t see the names of girls in the nomination list,*

**Table 1**  
Participant demographics.

Demographic variables	Yangon	Mandalay & Sagaing	Total
Number of participants	37	36	73
Median age (years)	14	15	15
Ethnicity	Frequency (%)	Frequency (%)	Frequency (%)
Bamar	16 (43.24)	23 (63.89)	39 (53.42)
Palaung	5 (13.51)	9 (25.00)	14 (19.18)
Mro	5 (13.51)	0 (0.00)	5 (6.85)
Shan	3 (8.11)	2 (5.56)	5 (6.85)
Other <sup>a</sup>	8 (21.62)	2 (5.56)	10 (13.70)
Religion	Frequency (%)	Frequency (%)	Frequency (%)
Buddhist	23 (62.16)	36 (100.00)	59 (80.82)
Christian	11 (29.73)	0 (0.00)	11 (15.07)
Other <sup>b</sup>	3 (8.11)	0 (0.00)	3 (4.11)
Living situation	Frequency (%)	Frequency (%)	Frequency (%)
With family	20 (54.05)	12 (33.33)	32 (43.84)
Away from family	17 (45.95)	24 (66.66)	41 (56.16)
Boarding house	6 (16.22)	20 (55.56)	26 (35.62)
Nunnery	6 (16.22)	3 (8.33)	9 (12.33)
Refugee house	5 (13.51)	0 (0.00)	5 (6.85)
Orphanage	0 (0.00)	1 (2.78)	1 (1.37)

<sup>a</sup> Ethnicities with <5 participants include Shan-Palaung, Chin, Hindu, Muslim, Lisu, Rakhine (Hindu and Muslim describe both ethnicities and religions in Myanmar).

<sup>b</sup> Includes Muslim and Hindu-Buddhist.

*but only boys [...] Since we can’t see females in those high positions, next generation’s girls automatically assume and believe that this position is not related to them.* (P5, FGD12)

When discussing their position in the community, participants described times they felt judged, which was mostly when they were enjoying activities that were not typically considered girl-appropriate, such as sports. Participants’ comments suggest how they felt disempowered by their communities and wider society. Yet, despite the discriminatory views of the people around them, the girls repeatedly indicated that they valued themselves, believed in their rights, and were confident in their ability to lead, for example, “*Our society should give space to girls even in leadership positions [...] our society should have trust upon girls too*” (P4, FGD12).

One particularly emotional topic was the gender inequality participants experienced in their families. Specifically, participants were frustrated by highly gendered parenting, described as the preferential treatment of brothers or male relatives. Among those who had brothers, the consensus was that brothers were granted a higher status and were prioritised within their families. For example, one 15-year-old girl explained how her parents gave her brother more money, and another participant commented that this treatment made her think that her parents loved her less: “*When my brother asks for money, they would give it to him. When I ask for money, they would say they don’t have money. They love my brother very much*” (P2, FGD1). Participants’ comments around gendered parenting were often coupled with expressions of sadness, feeling unloved and undervalued, and an overall sense of frustration at this injustice. In some cases, girls reported that gendered parenting even resulted in violence, for example, “*It’s like this in my family. My older brother also hangs out with his girlfriend. But my parents do nothing to him. But when I hang out with my friend, my parents ask me questions and beat me*” (P2, FGD3), suggesting that parental restrictions and punishments were often harsher for daughters versus sons.

Participants also discussed how gendered parenting affected their education, as parents prioritised boys to attend school, which was especially common when parents could only afford to send one child to school. For example, one participant explained: “*people accept the reality that girls should not have priority over boys in terms of education and if they can read and write, that’s enough. Housework and chores are especially the responsibility of girls*” (P6, FGD12).

As many girls shared, the gendered divisions of labour in their families—and the social norms that directed the behaviour of women more generally—burdened them with stereotypical housework and caretaker roles and constrained their own ambitions for education and future careers. Participants were frustrated with how their own families were reinforcing inequitable gender norms, and how this was having immediate and long-lasting impacts on their lives and wellbeing.

#### 3.3. Myanmar’s conflict: “whatever we do, we are insecure”

Myanmar’s ongoing conflict was a core theme throughout FGDs. Generally, the conflict seemed to be causing an enduring sense of insecurity, as one participant summarised, “*Like the present moment, our political situation is not stable. If the political situation is unstable, whatever we do, we are insecure. That’s why we can’t achieve a good life*” (P# unclear, FGD5). Some participants were from areas with ongoing active conflict, and this led to persistent fear for their safety, as one 14-year-old girl described:

*Ahh, the battles are really happening in our village with air strikes, and [we] can’t go to school well. Because of the wars, sometimes, there are gunshots on the street, and I am so afraid.* (P4, FGD6)

One extreme impact of the conflict was on family separation. As noted over 50% of our FGD participants were living away from home either to escape conflict or access education (in most cases, both). Although we did not ask directly about the reasons for their living

situations, many implied that it was in some way conflict related. Despite the benefits to education and safety of moving away, girls spoke with deep sadness when discussing separation from their families, as demonstrated by this exchange with a 15-year-old participant:

Participant: *The happiest moment is when I can stay with my family happily*

Interviewer: *Right now, are you staying away from your parents? Am I right?*

Participant: *Yea ... [with a small voice]. (P3, FGD5)*

The distress and desolation related to family separation was compounded by the feelings of shame and stigma that participants attached to their living situations, as indicated by some who lived at boarding houses (referred to as the “centre”), for example:

*Ahh, like at school, some people disparage us as we live in the centre [...] I wanted to explain to them, ‘We are like family, and it is different from other dormitories’, but what they think is we are living in an orphanage. In fact, we have parents and we just come here for education as we have difficulties. So, sometimes, [we] don’t feel good because of the words of people around us. (P3, FGD6)*

Participants perceived that living away from home lowered their status in society and highlighted their family’s financial insecurity and the stigma associated with poverty. Others who were living at boarding houses discussed feeling guilty about their relatively good fortune to be in school. For example, one 12-year-old girl described feeling misunderstood by family at home:

*I am here to study while my siblings and cousin are in the village. I also want them to go to school, but at the moment, the [political] situation is not good, and they sometimes have to flee to another place. I feel sorry for them. But I am quite busy with my studies and cannot communicate with them via phone for information. They thought that I became arrogant as I am in the city. It is not true actually; I just do not have time. (P2, FGD8)*

However, others felt the conflict was hindering their education and many said their family’s financial situation had become more precarious. As a result, girls were often being encouraged to earn money to help their families, “*Instead of going to school, I am asked to sell something for my parents. Because of political instability, it is hard to make money and [they] don’t want me to continue my education*” (P2, FGD4). The participants spoke despondently about missing school, and the long-term effects on their ability to build a good life, “*In terms of finance, at the moment, money is very scarce, and my parents need it, and ask us to work outside. That delays our education and negatively affects the way to a good life*” (P7, FGD4). Feelings of fear, sadness, shame and guilt affected their daily lives and mental health. This participant in particular, also recognised the larger implications for gender inequalities—and potentially for her own future.

### 3.4. The meaning of a ‘good life’

When asked to define a good life, four key themes emerged: a) education for self-worth and social acceptance; b) agency; c) seeking sources of happiness; and d) hope as a positive coping mechanism.

#### 3.4.1. Education for self-worth and social acceptance: “if we are educated, our words are powerful”

Education was consistently described as fundamental for a good life, most notably through the relationship between education and power. Participants linked education to power in two ways. First, they suggested that education was an important resource to cultivate power within themselves because it promoted feelings of dignity and self-worth. Second, education was considered a way of gaining social power, in terms of social acceptance, status and respect—especially where there is widespread gender inequality.

When discussing the link between education and feeling powerful within themselves, the term ‘dignity’ and the concept of not wanting to ‘feel small’ arose frequently. For example, one participant explained that the reason education was a source of such great pride was because obtaining an education is challenging for girls in Myanmar: “*there are so many young girls who do not have a chance to have proper education. Though it is not so crucial for them to earn so many degrees, they should have basic knowledge to live their life with dignity*” (P# unclear, FGD5). Participants emphasised that girls who are educated, even to a basic level, have a right and a reason to feel pride in themselves. Others echoed this, emphasising the need for education for future work, which would promote self-worth, respect, and help resist prescribed gender roles:

*People say that girls are supposed to only enter the kitchen [...] not every housewife is supposed to enter the kitchen. They can work and earn money as well. They can earn their own money. So, they don’t have to feel small in front of their husbands. (P5, FGD1)*

Similarly, when discussing social power, the notion of not wanting to ‘feel small’ and gaining respect also applied. As one participant explained, “*Girls are not only for household chores, but education is also needed for better outcomes in the family as well. If we are educated, our words are powerful*” (P# unclear, FGD10). Moreover, participants repeatedly highlighted that women are responsible only for household chores, demonstrating their awareness that society undervalues their education. This helps explain why education was so highly valued by the girls, and how they embrace it as an important tool to help change society’s perception of them; as young women, they acknowledge that they have to work harder for social acceptance than their male counterparts.

All study participants were among the lowest socio-economic quintile in Myanmar, so comments often emphasised the links between education, financial security, and social acceptance, so—when financially insecure—education was an alternative path to social acceptance: “*I have no parents, no money, nothing. A person who has only education, if they are educated, is supported by everyone. The importance of education lies in this fact*” (P# unclear, FGD6).

Social acceptance was a priority because it influenced participants’ ability to feel good about themselves, with education serving as a means to gain status and self-confidence. This triad of education, self-worth and social acceptance emerged as core tenets of how girls perceived a good life. Being educated—plus the social acceptance acquired from others acknowledging their education—were fundamental aspects of the participants’ self-worth and ultimately, their perceptions of their wellbeing.

#### 3.4.2. Seeking sources of happiness: “You can’t do anything without being happy”

Participants referenced ‘being happy’ as both a necessary requirement for a good life, and as a key indicator of one, and they frequently linked happiness to the integrity of their family. The participants described happiness as a multidimensional construct—something they sought out at both the individual and familial levels and in terms of present and future contentment.

When discussing wellbeing at the individual-level, seeking both current and future happiness were priorities for a good life. For example, one 16-year-old participant stressed the need for day-to-day enjoyment, “*we need to enjoy our present life happily in any condition. I’d like to mention that if we can practise so, happiness isn’t rare at all*” (P# unclear, FGD10), seemingly indicating that she herself had responsibility for her happiness, whatever her situation. When looking to the future, a happy life was frequently cited as something participants aspired to, although what constitutes a happy life was not well explained. For example, one 14-year-old girl described “*For me, I would like to reach my goal and I also would like to have a happy life. I want to have both [...] Some people need to lose happiness in order to achieve their goals*” (P1, FGD12). The peer-researchers clarified that when discussing “*losing her happiness*”, she was likely referring to her sadness when moving from home for an

education. Her comments also emphasise the evolving nature of happiness, and girls' awareness that happiness could be lost and even de-prioritised whenever circumstances change.

Happiness at a family level was often depicted in participants' drawings of smiling faces, joyful families and sunshine. More specifically, family happiness was regularly described as something that occurred in the absence of parental conflict, as one 15-year-old participant explained, "When it comes to a happy family [it] is one where there are no fights between mom and dad" (P1, FGD8). Another 15-year-old explained that parental conflict was a common source of her stress: "if Mom and Dad have quarrels, I don't feel good" (P5, FGD10). Family conflict was regularly lined with sadness and distress, suggesting the substantial mental health implications of instability at home.

Family togetherness was also associated with happiness. In their 'good life' drawings, participants frequently depicted families living, eating, and playing together. They emphasised that the ideal situation was to have "a family with all family members", with some specifically highlighting the value of having both parents, for example "The backbone is the parents [...] if we have both of our parents, father and mother, we have a good life. Our life is complete" (P2, FGD3). The preference for two parents was juxtaposed with some participants' feelings of stigma of not having parents, for example, "if we have parents, we don't feel inferior. Some people don't have parents ... um ... we don't feel weak like them if we have parents" (P6, FGD11). Throughout the FGDs, the participants regularly referred to their family relations as a source of happiness or distress, suggesting that their family relationships affected their happiness, making both fundamental aspects of a good life. Unsurprisingly, this desire for a united family was particularly pertinent to the girls who were separated from their parents.

3.4.3. Agency: "I would like to choose what makes me happy"

Many 'good life' drawings suggested the importance of having goals. Goals were illustrated, for example, by images of desirable careers or future aspirations for homes and cars. Yet, when participants described these drawings, the goals themselves were rarely the focus of their explanations. Instead, they emphasised having agency to set and choose goals for themselves, mirroring *Kabeer's (1999)* definition of Agency as "the ability to define one's goals and act upon them". For example, one 15-year-old participant (P1, FGD12) described her drawing (Fig. 1), which depicted herself at the bottom of a flight of stairs, leading upwards to a sign which translates to "the goal". She explained, "for me, how should I say ... I would like to choose what makes me happy". When asked what her goals were, she continued,

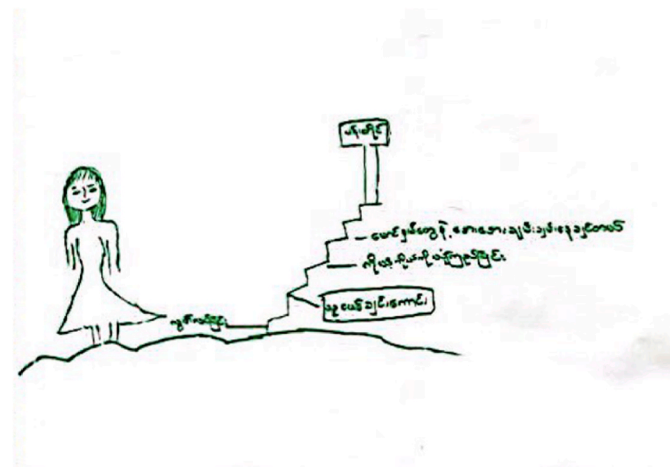


Fig. 1. A 'good life' drawing by a 15-year-old participant from FGD12, Mandalay Region.

"My goal is to become a doctor. But, the reason why I want to become a doctor is ... how should I say ... not by the suggestions of others but I would like to choose what I enjoy".

She emphasised that choice was fundamental to her happiness and the overall idea of a good life. Similarly, many others emphasised the importance of being able to decide one's own future, for example: "When it comes to our dreams, it should be independent of others [...] It should be based on our own decisions and decisiveness, which I believe is freedom" (P3, FGD10).

Choice was also important to decisions about confronting gender norms. For example, one 15-year-old girl's 'good life' drawing depicted her and her friends playing volleyball and included a vest and a pair of shorts. She explained, "This is my picture. There is no restriction on how I wear clothes. I can wear clothes freely" (P1, FGD1). Later in the FGD she referred back to the topic of clothing:

Since my childhood, I wear clothes that I like [...] And as how I wear clothes is different from others, people talk about it. Even my relatives are one of them. They say that girls have to stay at home. They report it to my parents when I go out and play. I don't like it. (P1, FGD1)

Evidently, choosing her own clothes was integral to her sense of self and she was upset that even her relatives were passing judgement on how young women should dress. She also described her desire to play sports freely, something for which some girls are still judged in Myanmar. This desire for behavioural autonomy was reiterated by many others, particularly around sports and socialising.

Overall, participants expressed frustration about restrictions on their freedom, choice and decision-making power. Yet, frustration contrasted with their strong sense of self, as they confidently outlined their life goals. This juxtaposition was aptly captured by one 14-year-old participant who, in her 'good life' drawing, depicted an image of butterflies escaping from a glass jar (Fig. 2), explaining: "They are escaping from the glass jar meaning that even though they are in the trap, it's hard work and unity that help them to fly with freedom" (P1, FGD6). This image highlights the girls' sense of self-worth, represented by the escaping butterflies who are trying to fly beyond the jar, but their freedom is hindered by the glass.

3.4.4. Hope as a positive coping mechanism: "Holding firmly our wishes and dreams"

Hope was a common theme in participants' drawings. Their descriptions aligned with *Snyder's (1995)* definition of hope as "a positive goal-related motivational state". Whilst navigating 'the good life' amidst their reality, participants indirectly referenced two dimensions of hope:



Fig. 2. A 'good life' drawing with text reading: "A good life is being able to bravely overcome and do what we would like to do without fear, regardless of what kind of difficulties and obstacles there are to our goals" (P1, FGD6).

doing and being. Essentially, hope as a state of doing reflected the participants' pragmatic setting and revising of goals, which seemingly fostered a sense of positivity and possibility amidst their uncertain future. As a state of being, hope was represented by participants' ability to cope with continued instability and uncertainty by nurturing daily optimism. In this regard, hope was an important coping mechanism, as summarised by one participant, "by holding firmly our wishes and dreams, I think one day we will surely reach the goal" (P6, FGD5).

As a state of doing, the participants often linked hope with goal setting. As one 15-year-old girl explained,

*In a good life, we need to find and attain our life goal. Our life goal is not something that we need to force ourselves to do. Am I right? But it is something that we enjoy doing daily and feel happy. That's our life goal. That is our hope.* (P2, FGD12)

This quote suggests that participants were setting goals to help them focus on the future, which seemed particularly important to participants amidst the uncertainty of the ongoing conflict, particularly when considering how the situation was impacting their access to education. For example, another 15-year-old participant explained how being forced to halt her education made her lose sight of her goals, so, to cope, she adapted and found another way to continue learning:

*At the moment, I couldn't continue my learning. Umm ... that's why I feel like I almost lost my goal. But umm ... [...] I read some books and magazines from the big sisters. After reading those books, I am searching again for my goals and purposes. Later, I have decided to try my best to reach the goal. I still have that kind of hope.* (P3, FGD12)

This quote illustrates how one participant was coping with a changing reality—that is, she sought new information and guidance from the GD facilitators (the "big sisters") to help refocus on her goals and avoid feelings of despair.

Hope as a state of being, e.g., nurturing optimism, was also demonstrated as an important coping mechanism by participants, who implemented emotion-focused coping mechanisms to maintain some level of hope amidst ongoing personal and contextual challenges. Most notably, participants applied positive self-talk to reframe situations in a more positive light. For example, when talking about unsupportive family members, one 13-year-old girl stated, "No matter how they want to hinder our ways, if we trust in ourselves, we have that qualification to be able to reach our goal and achieve our purposes" (P6, FGD3) and, when discussing financial difficulties, another 14-year-old girl defended, "If there is no money, we don't need to feel bad [...] we have to continue trying to reach our goals" (P4, FGD6). Positive self-talk commonly emerged across the FGDs and exhibited how, despite being aware of how their situations may be perceived and stigmatised by society, the participants preferred to present a positive mindset. Positive self-talk appeared to build self-confidence, which itself was viewed as extremely important. For example, one 16-year-old participant explained, "I think we need to have self-confidence [...] if we take a steady step with the right manner by having self-confidence in the midst of difficulties and challenges and trying our best, we may surely reach the goal" (P1, FGD5).

However, in contrast to the hopefulness expressed by some participants, others seemed to struggle to maintain hope. When reflecting on the conflict and its impact on her education, one 16-year-old girl described, "the disturbance of our education makes me really sad. I felt that I lost my hope and goals" (P4, FGD12), and another 13-year-old girl echoed this sentiment, "Currently, with the evil political situation, we are losing our future" (P3, FGD4). Some participants also seemed to exhibit negative coping mechanisms, such as emotional isolation. For example, one 15-year-old girl explained:

*I am hardly open about my feelings as I don't want to share them with others ... [participant crying] ... I overcame the difficulties by myself and encouraged myself. I don't even tell my feelings even to my parents as*

*I don't want to see them upset with me. So, I challenge every difficulty alone without any help* (P3, FGD8).

This participant seems to wish to avoid burdening her parents with her sadness and fears. For many, the conflict and their current circumstances sometimes left them to struggle alone with their emotions. Participants suggested the impermanent nature of hope, indicating that hope can evolve alongside changing personal and contextual circumstances. Further, participants indicated that their perceptions of their future can be especially transient in times of prolonged and stressful uncertainty. Still, hope appeared to be something that participants may be losing, or fighting to maintain, rather than something lost completely. In general, hopeful statements and positive coping mechanisms far outweighed any displays of despair.

For most young women, their hope was more than just a state of optimism; it was also a pragmatic positive coping mechanism. They regularly demonstrated their awareness of the value of hope and emphasised that they were "holding firmly our wishes and dreams".

#### 4. Discussion

This study examined how adolescent girls and young women define their wellbeing amidst protracted conflict and instability. Using the capabilities approach (CA) to understand what girls in our study population most value highlighted that agency, happiness, access to quality education and hope were core intersecting components of their wellbeing and operated among complex contextual factors. Interestingly, unlike similar studies that this research draws from (See Greco et al., 2015; Biggeri et al., 2006), physical wellbeing was not highlighted as a priority by participants, and there was no reference to illness or physical capacity. There was, instead, a much greater focus on emotional wellbeing and mental health. This could be because participants considered physical health a mainstay of wellbeing and perhaps not necessary to emphasise, or it could reflect that the participants' felt that their emotional wellbeing was under greater threat amidst ongoing insecurity and instability.

Similarly to other CA studies with young people, such as Biggeri et al. (2006) and Chase (2020), freedom of choice and agency were prioritised. In our study, the girls discussed their agency as central to the other components of education, happiness and hope. For example, when discussing education, the participants' asserted their agency by resisting family pressures to drop-out of school and pursue the future that they had hoped for themselves. Similarly, participants demonstrated agency as they expressed their desire to choose what makes them happy.

The capabilities approach has illuminated the importance of both agency and hope as important considerations for studies and interventions looking to support girls' wellbeing. Previous studies have tended to omit discussions of hope due, in part, to the overlapping nature of hope with agency and the blurring of these concepts. For example, Kabeer (1999) defines agency as the ability to define goals and act upon them. Whereas, when discussing hope, Snyder explains that the cognitive process of hope can be broken down into two components: agency and pathways. He describes hope as "the process of thinking about one's goals, along with the motivation to move toward (agency) and the ways to achieve (pathways) those goals" (Snyder, 1995). Snyder's definition includes agency and is conceptually similar to Kabeer's concept of agency. In our study, however, when participants discussed aspects of wellbeing, they seemed to separate these concepts, with each having somewhat distinct applications. When referring to hope, participants described hope as what motivates them to work for their future goals, especially happiness and a good education. When participants talked about agency, they frequently discussed their agency in reference to their freedom—or lack thereof—to make decisions about their daily lives, particularly pertaining to their education. This finding supports similar findings by Gillespie et al. (2022) who conceptualised that both practical agency and a context-dependent "sense of agency" were

important considerations for young women, particularly in contexts of disadvantage.

Wellbeing studies that focus on agency without acknowledging the role of hope may fail to capture the protective pathways between hope and mental health, which are especially relevant in conflict settings such as Myanmar. For example, our participants discussed nurturing hope alongside trying to avoid feelings of despair, suggesting that by cultivating feelings of hope, they can try to pursue happiness amidst the stress of personal and contextual crises. This finding complements the work of [Graham \(2024\)](#), who emphasises that hope may be the most important dimension of wellbeing. In her wellbeing research, Graham, similar to Snyder, describes hope as more than just a state of optimism and explains that it also includes having belief in one's own agency to improve their life. As Graham and others have discussed, hopelessness is a predictor of both depression and suicide, and conversely, hopefulness is associated with lower levels of depression and anxiety ([Folkman, 2010](#); [McMillan et al., 2007](#)). Interestingly, studies suggest that in situations of extremely constrained agency, hope is something that remains relatively stable and nurturing it may provide a sense of security amidst uncertainty. For example, in a study of refugee children living in temporary transit camps in Greece, hope scores were similar to children living in less precarious situations ([Ben Asher et al., 2021](#)). Likewise, among children affected by armed violence, [Cortes and Buchanan \(2007\)](#) found that child soldiers in Colombia managed to maintain hope despite their adverse experiences of armed conflict. Moreover, various hope-focused programmes have shown successful results in decreasing depressive symptoms among children, highlighting the relevance of this finding for adolescent girls and young women in conflict-affected settings ([Ghazali et al., 2021](#); [Kirby et al., 2022](#)).

Our participants' recurring reference to—and emphasis on—maintaining hope suggests that their involvement in the *Circles* programme, which emphasises gender equity, self-efficacy and expectations for future empowered positions, may be nurturing a hopeful state. In addition to *Circle's* course content, girls are likely benefitting from interacting with the Girl Determined peer-researchers (ages 18–25), as they can envision their future selves reflected in these independent young women. Ultimately, it seems that fostering hope is an important aspect of girls' empowerment programmes, which may comprise an important resource to protect young people's mental health during periods of high stress, such as conflict and political instability.

Nonetheless, the ongoing conflict and systemic gender inequality create constraints and anxieties that are largely beyond the scope of what interventions like *Circles* can control. Yet, for some challenges like access to education, participant discussions indicated they were more concerned about the impact of negative gender norms on their education than they were about the conflict preventing them access. Furthermore, participants emphasised that these gender inequitable views came from both their own families and their communities, perspectives that rarely aligned with their own more progressive views. Ultimately, the young women believed that these philosophical divisions constrained their agency and thus their potential happiness.

While there is no end in sight to the current political unrest, or improvements in gender inequalities in Myanmar, our findings suggest that young women and girls may benefit from empowerment tools that help them negotiate important life decisions with their parents or guardians ([Ashraf et al., 2020](#); [Edmonds et al., 2023](#)). While not tested in this study, our study findings about the importance of girls' relationships with their family indicate that some parental or guardian engagement in empowerment-focused interventions might strengthen participant's agency and hopefulness regarding their pathways to achieving their goals. Further research that centres the voices of young women and girls in Myanmar will help foster desired and feasible interventions in such complex settings.

#### 4.1. Benefits and limitations

The main study limitation is that the participants were all enrolled in GD's *Circles* programme and, due to logistical restrictions, it was not possible to explore the situations of individuals outside of *Circles*. So, while participants are from some of the most marginalised groups in the country, they have likely benefited from ongoing GD support. Participants' involvement in *Circles* has already provided them opportunities to reflect on and engage with wellbeing-related concepts, as was reflected in the participants' substantial understanding of negative gender norms and their stated desire for equality. Furthermore, unlike capabilities studies of similar demographic groups, we did not observe adaptive preferences; that is, our participants did not appear to be accepting or adapting to unfavourable circumstances ([Teschl & Comim, 2005](#)). Similar to participants' awareness of inequality, the absence of adaptive preferences is likely linked to their ongoing engagement with the *Circles* curriculum. However, without a comparison group, it is not possible to determine exactly how *Circles* has shaped their views and ambitions. Furthermore, due to logistical challenges, we were unable to conduct FGDs separately with early and older adolescent groups, this means that we were unable to investigate interesting and important distinctions between younger adolescents versus older adolescents with regards to their wellbeing.

Importantly, participatory methods were used to help conceptualise wellbeing from the perspectives of the study population, and the peer-researchers were integral in guiding the study design, and conceptualising and interpreting the findings. However, this research was led by a researcher from the UK, which will have affected some interpretations of the findings. Among the reasons the CA and participatory methods were chosen for this research was to avoid imposing any specific view about what wellbeing is, or should be, and instead allow the study population to define their wellbeing themselves. However, reflexive thematic analysis is inherently subjective, and therefore will have incorporated perspectives beyond those of the study population.

Nonetheless, we found that our study benefited from both the co-production elements of working with the peer-researchers, and also the use of participatory arts-based methods during the FGDs. For example, FGDs facilitated by peer-researchers seemed to provide a sense of security and familiarity for the participants, evidenced by their willingness to engage and share personal views and anecdotes, and was reflected in the rich qualitative data. Likewise, the peer-researchers' perspectives were integral to constructing the wellbeing themes and understanding how these themes were shaped by the participants' society, culture and environment. These findings support the notion that the CA is inherently agency-centred, and thus meaningful participation should be central to its application ([Martinez-Vargas, 2022](#)). Further, we believe these findings demonstrate how a participatory application of the CA can be used to help understand how wellbeing is shaped by complex contextual factors such as conflict.

#### 5. Conclusion

Ultimately, this research highlights the multidimensional nature of wellbeing, especially for girls and young women in complex, conflict-affected settings. By following their priorities, we were able to identify potential support pathways during a stressful and uncertain time. In this way, this study illustrates how the capabilities approach can be adapted to complex settings where resource and time limitations often require listening to individuals' priorities. Considering the multifarious nature of this particular setting, where participants are navigating the psychological burden of family separation versus access to education, and the responsibilities to their families versus their own hopes and dreams, there are many benefits to agency-centred programmes like *Circles*. In particular, for maintaining hope, creating communities of mutual support and encouraging girls and young women to pursue their goals, which in turn work to protect and promote their wellbeing.



## CRedit authorship contribution statement

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## Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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