

Letter to Editor

COVID-19, lockdowns and internet access: Is it pushing adolescents towards suicide?

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To the Editor

A teenager ended his life in a remote district of Odisha when his father reprimanded him for playing online games on a mobile phone. The boy had lost about INR 1 lakh during online gaming/gambling using his parents' online banking details. The boy's father had given him a mobile phone to attend online classes [1].

Local governments had enforced lockdowns to contain the virus. Schools were closed, and classroom learning has ceased. Online classes were imposed across the world. The digital divide is glaring; there are reports of students climbing rooftops and going to distant areas to access the internet. There is a definite increase in internet use by children and adolescents. Parents are concerned about the psychological and behavioural impact of internet use on their children and adolescents [2]. Available research has shown the association of suicidal behaviours with internet use [3].

Adolescents worldwide are bearing the pandemic's brunt in terms of psychological distress, worries; child protection services have been suspended, schools and therapy centres have been closed. Access to sports and physical activity has been suspended. In developing countries, school closure has ended the only opportunity for nutritious food for children and adolescents. Adolescents are sharing family stress, anxiety, and troubles. Adolescents are confined to homes, exposed to domestic violence, and have no access to a support network. Limited opportunity for peer support and long hours on the internet might escalate the pre-existing mental health problems and turn into a crisis. COVID-19 situation has enhanced the risk factors

for adolescent suicide. Adolescents having a predisposition towards experiencing mental distress, loneliness, impulsivity, and adverse family experiences are increasingly using the internet and, as a result, are being exposed to websites supporting self-harm. The combination of social distancing increased internet access and self-harm content might push teenagers towards self-harm behaviours [3].

Lockdowns have been documented to increase internet use in children and adolescents with resulting increase in psychological distress [4]. A hospital-based cross-sectional historical chart review has reported COVID-19 has increased rates of suicide in vulnerable adolescents [5]. There are various risk factors for adolescent suicides, including personality traits of impulsivity and neuroticism, psychological factors like anxiety, depression, drug and alcohol use, previous suicide attempts, and stressful life events [6]. Internet access exposes children to harmful content shown in various advertisements on social media sites, YOUTUBE and multiple websites with an apparent detrimental impact on tender developing minds. Increased internet access has promoted social isolation and exposure to stress-inducing contents, with a potential of growing self-harm behaviours in adolescents during enforced lockdowns [7]. It is time to address adolescent suicides systematically; document the rates of self-harm behaviours, risk factors, and factors enhancing resilience in this population. Existing health systems need to be strengthened to reach the intended objective. Various stakeholders, including parents, teachers, community leaders, and frontline health workers, need sensitization and training in adolescent mental health to help the vulnerable ones. Telepsychiatry has been improvised for addressing adolescent suicides and is already proving a valuable tool [8]. There is a need to research adolescent suicides during the COVID-19 pandemic. Research should focus on novel interventions for this difficult to engage population.

Conflict of interest: None declared

References

1. <https://timesofindia.indiatimes.com/city/bhubaneswar/teen-ends-life-after-father-chides-him-for-playing-online-games/articleshow/78468581.cms>. Accessed on 29th Dec 2020.
2. Patra S, Patro BK, Acharya SP. COVID-19 lockdown and school closure: Boon or bane for child mental health, results of a telephonic parent survey. *Asian J Psychiatr*. 2020, 54:102395.
3. Marchant A, Hawton K, Stewart A, Montgomery P, Singaravelu V, Lloyd K, et al. A systematic review of the relationship between internet use, self-harm and suicidal behaviour in young people: The good, the bad and the unknown. *PLoS One*. 2017, 12(8):e0181722.
4. Chen IH, Chen CY, Pakpour AH, Griffiths MD, Lin CY, Li XD, et al. Problematic internet-related behaviors mediate the associations between levels of internet engagement and distress among schoolchildren during COVID-19 lockdown: A longitudinal structural equation modeling study. *J Behav Addict*. 2021, Feb 10. doi: 10.1556/2006.2021.00006.
5. Thompson EC, Thomas SA, Burke TA, Nesi J, MacPherson HA, Bettis AH, et al. Suicidal thoughts and behaviors in psychiatrically hospitalized adolescents pre- and post- COVID-19: A historical chart review and examination of contextual correlates. *J Affect Disord Rep*. 2021, 4:100100.
6. Carballo JJ, Llorente C, Kehrmann L, Flamarique I, Zuddas A, Purper-Ouakil D, et al STOP Consortium. Psychosocial risk factors for suicidality in children and adolescents. *Eur Child Adolesc Psychiatry*. 2020, 29(6):759-776.
7. Deslandes SF, Coutinho T. The intensive use of the internet by children and adolescents in the context of COVID-19 and the risks for self-inflicted violence. *Cien Saude Colet*. 2020, 25(suppl 1):2479-2486.
8. Szlyk HS, Berk M, Peralta AO, Miranda R. COVID-19 Takes Adolescent Suicide Prevention to Less Charted Territory. *J Adolesc Health*. 2020, 67(2):161-163.

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