

Editorial

Steps to mitigate the immediate and long-term consequences of COVID-19 pandemic on children and adolescents

Naresh Nebhinani

Address for correspondence: Dr. Naresh Nebhinani, Department of Psychiatry, All India Institute of Medical Sciences, Jodhpur, Rajasthan. Email: drnaresh_pgi@yahoo.com

Children and adolescents contribute two-fifth of the world population. COVID-19 pandemic has influenced their lives in an unprecedented manner and affected their biological, social, and psychological development. Therefore, rising mental health issues and concerns are termed as “second pandemic” for children and adolescents. This editorial focuses on the possible initiatives to address the consequence of pandemic on our children and adolescents.

In this difficult time most of us have number of questions like how to help quarantined children in presence of abuse at home? How to provide online education to children in absence of internet/ technological support? How to motivate children who have lost significant peer/family member or income source in this pandemic? How enormous will be the impact of this pandemic on their biological, psychological, and social development? [1]

A systematic review by Nearchou et al. on 12,262 children & adolescents reported worries about being infected in 62.2%, emotional reactions: 22% to 62.2%, depression in 22.6% to 43.7% and anxiety in 18.9% to 37.4% of children & adolescents [2]. However, children with perceived benefit from home quarantine and parent-child discussions on COVID were found to have lesser psychological symptoms [3].

Schmidt et al studied the age related effects of COVID pandemic on 5823 children and adolescents from Austria, Germany, Liechtenstein and Switzerland and found significantly increased oppositional defiance in 1-6 years' age group, increased aggression in 7-10 years

old children and increased anxiety/depression in 11-19 years' adolescents. They reported psychological problems among 15.3% to 43.0% children and adolescent, while between 2.0% to 9.9% reported clinically significant emotional and behavioral problems during COVID-19 pandemic [4].

Strategies to mitigate the immediate and long-term consequences of COVID-19 pandemic

Young children demand more attention, therefore parents should devote more time to provide care, preventive measures and awareness about COVID-19 in age appropriate manner, daily schedule with consistent routine and reinforcement for desirable behavior. Adolescents should receive parental support for learning life skills, decision making, responsibility, accountability, and appropriate knowledge about COVID-19 [5].

Screen use has also increased significantly in this pandemic era, which has contributed to rising pathological internet use, gaming disorder, digital addiction and associated behavioral problems. To obviate another epidemic in form of behavioral addiction, we need to seriously accept this as a serious problem, identify the triggers, track the screen time, with educating our children and adolescents, scheduling their screen time and approach, with promoting outdoor games and other extracurricular activities for reinforcing the behavioral change and to nurture the real-world connection [6].

Parents should also focus on the work life balance, with equal division of parenting roles, adding new perspective with learning new skills and healthy habits, increasing family time, and quality time with children and adolescents [7]. In addition, parents should plan active daily routine, healthy eating habits, sleep hygiene practice, validation of their concerns and proactively addressing their mental health concerns [8].

Schools and teachers play a significant role in promotion of psychological wellbeing among children and adolescents. School should design blended learning paradigms for effective learning through offline and online medium. They should incorporate basic mindfulness

exercises to inculcate self-regulation skills, to develop self-driven children with empowering parents through regular interaction and facilitation of mental health awareness activities. There is vital need for active collaboration of schools with mental health experts and other health professionals to screen the children and adolescents and timely intervene at various levels [7].

Social touch is essential for holistic development of children and adolescents. Therefore, several initiatives have been taken such as Singapore school mental health response and Response, early intervention and assessment in community mental health (REACH) service in Singapore [9], Building back better (BBB) program pioneered by United Nations for postdisaster recovery approach to encourage resilience and to promote wellbeing, Marshall plan for child mental health [10], Multi-tiered system of supports (MTSS) framework in United States with tier-1 support for all the students by school teachers, tier-2 support for students needing support beyond tier-1 by school counselors or community health professionals, and tier 3 support for individual students needing support beyond tier-1 and 2 and it includes more intensive tailored services by mental health professionals etc. [11].

There are several priority areas, such as remote, technology-based interventions are urgently needed, especially for vulnerable children and adolescents as many of them don't have access to internet and equipment. Therefore, civil society, government and non-government organizations should support for digital literacy, reliable internet services and technological equipment to remove this barrier. Free resources and psychoeducation material should be available to parents, teachers and general public to identify mental health issues and early warning signs in children and adolescents. There must be active focus on recognizing the pathways to resilience and positive mental health, along with timely dissemination of such knowledge to support the parents and professionals.

There is vital need for high quality, longitudinal studies, and evidence based action plans to cater the needs of the vulnerable children. We need to devise innovative ways to deliver mental health services by joining hands with other stakeholders like teachers, pediatricians, social organizations. Active collaboration at multiple levels, i.e. parents, school and society is required for effective prevention, promotion and timely intervention and making our children and adolescents better equipped for the present needs and future demands. At the governmental level, children and adolescents should be included in all the policies for better emphasis and collaboration.

To conclude, pandemic has affected the life of everyone, but effect on psychological wellbeing of children and adolescents is enormous. The nature and extent of impact depend on their vulnerability factors, developmental stage and available support. As Anthony Robbins stated “it's not what we do once in a while that shapes our lives. It's what we do consistently.” Therefore, we must seriously treat this as public health issue, not just as short lived illness, with proactively following the innovative strategies to mitigate the immediate and long-term consequences of COVID-19 pandemic.

Acknowledgment: None declared

Conflict of interest: None declared

References

1. de Figueiredo CS, Sandre PC, Portugal LCL, Mázala-de-Oliveira T, da Silva Chagas L, Raony Í, Ferreira ES, et al. COVID-19 pandemic impact on children and adolescents' mental health: Biological, environmental, and social factors. *Prog Neuropsychopharmacol Biol Psychiatry*. 2021, 106:110171.
2. Nearchou F, Flinn C, Niland R, Subramaniam SS, Hennessy E. Exploring the impact of COVID-19 on mental health outcomes in children and adolescents: A systematic review. *Int. J. Environ. Res. Public Health*, 2020,17: 8479

3. Tang S, Xiang M, Cheung T, Xiang YT. Mental health and its correlates among children and adolescents during COVID-19 school closure: The importance of parent-child discussion. *J Affect Disord.* 2021, 279:353-360.
4. Schmidt SJ, Barblan LP, Lory I, Landolt MA. Age-related effects of the COVID-19 pandemic on mental health of children and adolescents. *European J Psychotraumatology* 2021, 12:1901407.
5. Singh S, Roy D, Sinha K, Parveen S, Sharma G, Joshi G. Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations. *Psychiatry Res.* 2020, 293:113429.
6. Gupta T, Swami MK, Nebhinani N. Risk of digital addiction among children and adolescents during COVID-19 pandemic: Concerns, caution, and way out. *J. Indian Assoc. Child Adolesc. Ment. Health* 2020, 16(3):199-208.
7. Gupta T, Nebhinani N. Impact of COVID-19 Pandemic on Child and Adolescent Mental Health. *J. Indian Assoc. Child Adolesc. Ment. Health* 2020, 16(3):1-16.
8. Bartek N, Peck JL, Garzon D, VanCleve S. Addressing the clinical impact of COVID-19 on pediatric mental health. *J Pediatr Health Care* 2021, 35:377-386.
9. Renjan V, Fung DSS. Debate: COVID-19 to the under 19 - a Singapore school mental health response. *Child Adolesc Ment Health.* 2020, 25(4):260-262.
10. Hoagwood KE, Gardner W, Kelleher KJ. Promoting Children's Mental, Emotional, and Behavioral (MEB) Health in All Public Systems, Post-COVID-19. *Adm Policy Ment Health.* 2021, 48(3):379-387.
11. Hertz MF, Barrios LC. Adolescent mental health, COVID-19, and the value of school-community partnerships. *Inj Prev.* 2021, 27(1):85-86.

Dr. Naresh Nebhinani, Additional Professor, Department of Psychiatry, All India Institute of Medical Sciences, Jodhpur, Rajasthan.