

HOT TOPICS IN Pediatric Nursing

Impact of the Covid-19 Pandemic on Mental Health of Children, Adolescents, and Young Adults

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s the Covid-19 pandemic drags on indefinitely, there are concerns about risks for and exacerbation of mental health conditions. A recent study (Czeisler et al., 2020) found that in a national sample of adults, 40.9% reported experiencing at least one adverse mental health or behavioral health condition during the last week of June 2020. Young adults, ages 18 to 24 reported the highest levels of anxiety or depression (62.9%); 74.9% reported having at least one adverse pandemic-related mental health condition. In this age group, 24.7% indicated that they had started or increased substance abuse to cope with pandemic-related stressors (Czeisler et al.). In 2021, The New York Times reported 25% of 18- to 24-year-olds in the United States have been considering suicide during the pandemic. Concerns for and increased prevalence in mental health conditions have been reported worldwide. Concerns over the future, social isolation and loneliness, a sense of limbo, and lack of control all contribute to what one London-based psychotherapist coined a mental health pandemic (Kwai & Peltier, 2021).

In a recent review of international articles and advisories on mental health concerns for children and teens during the Covid-19 pandemic, Singh et al. (2020) summarized 22 studies into thematic categories related to impacts on: children, school and college students, children and adolescents with special needs, lock-down of underprivileged children, and children quarantined or separated from their parents. They then used advisory documents from the World Health Organization and made recommendations for parents,

teachers and school counselors, pediatric and mental health providers, and policy makers. Highlights of their findings are as follows (Singh et al., 2020). For younger children, the impacts of the pandemic and subsequent lock-downs manifest in increased clinginess, fears, sleep disturbances, poor appetite, agitation, inattention, and separation disorders. In school- and college-aged children, disruption in a structured school setting often result in boredom, inattentiveness, social isolation, lack of ability to play outside and enjoy extracurricular activities, increased use of social media, and lack of legal and preventative services that can prevent violence, abuse, and harm at home. Longterm effects are not known but are thought to increase risk for increased stress, anxiety, and a feeling of hopelessness. For children with special needs, intolerance for uncertainty and lack of a normal routine is exacerbated and can trigger emotional outbursts and increased parentalchild conflicts. Risks for children from underprivileged homes as well as for those children who may be separated from their parents secondary to quarantine include victimization, forced labor, and increased fear and anxiety. Risks for detrimental effects on psychological well-being and development are increased for all age groups (Singh et al.).

Recommendations for pediatric providers include mental health screening at every patient contact to include an assessment of predisposing factors (temperament, adjustment, school functioning, peer interactions; psychosocial and medical determinants and stressors of mental health in the family; physical manifestations of stress and emo-

tional health; and mental well-being (changes in behavior, anxiety disorders, depression, intention for self-harm, and suicidal ideation). Use of standardized screening tools, tele-health, and online consultations is critical to the success of these interventions (Singh et al., 2020). Pediatric nurses are their best at assessment and education and can be critically supportive to parents in understanding the developmental needs of their children and the need for hypervigilance around signs of emotional distress. •

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The author declares no conflicts of interest.

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