Pediatric Mental Health & COVID-19

Melissa Hopper, PsyD, LP, CEDS Kelli Netson-Amore, PhD, LP, ABPP-CN

Disclosure

- We have no relevant financial relationships with the manufacturers(s) of any commercial products(s) and/or provider of commercial services discussed in this CME activity
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Learning Objectives

- Review emergency response to COVID-19 by KCWK and mental
- Present the latest research on the impact of COVID-19 on pediatric mental health
- Provide strategies for screening and treatment of mental health symptoms in primary care
- Discuss the long-term impact of COVID-19 on educational and emotional outcomes

Response to COVID-19

- Multi-region, multi-disciplinary team of volunteers
- · Sponsored by KUSM-W Pediatrics
- Free consultation and collaboration with school districts, pediatric specialists, and other community agencies
- Written guidance for school re-opening
- Task force of mental health professionals published guidelines to address early mental health concerns

Mental Health Impact of COVID-19

- Complaints of depression and anxiety have increased worldwide1
 - Over half of adults in some countries report moderate to severe problems
 - Over one-third of adolescents report high levels of loneliness²
- Social isolation and loneliness in youth can lead to depressive (girls) and anxious (boys) symptoms that may persist²
 - Mandated quarantine may afford some protection against feelings of loneliness because it is more universal and not based on social factors²
- COVID-19 magnifies racial and economic disparities³
 - Barriers to digital healthcare may delay or prevent mental health services

Mental Health Impact of COVID-19

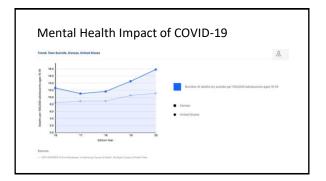
- According to a recent survey of high school and college students:
 - · More than half (56%) were "moderately", "very", or "extremely" worried about their mental health
 - 50% of all students reported experiencing anxiety

 - 35% of students reported experiencing depression 25% know of someone with suicidal thoughts since the beginning of the
 - pandemic 5% of college/high school students have made a suicide attempt during the pandemic, with Black students reporting slightly higher than average

Mental Health Impact of COVID-19

- Children's mental health emergency visits are up 30% from 2019 in 12-17 year-olds¹
- Teen suicide is up from 8.4 deaths per 100K in 2016 to 11.1 in 2020^{2}

¹ 2020 State of the Student: COVID-19 & Mental Health. (n.d.). Chegg.Org, https://www.chegg.org/covid-19-mental-health-2020
² America's Health Rarkings analysis of CDC WONDER Rolline Database, Underlying Cause of Death, Multiple Cause of Death files, United Health Foundation, Americas Health Rankings or accessed 2021



Frequent Complaints

- Life disruption
- Loneliness
- Economic impact
- Fear of disease
- Panic spending
- Online gambling
- Increased alcohol intake
- Weight gain

- Domestic violence
- Online victimization
- · Loss of family members
- Lack of "milestone" events
- Disrupted face-to-face care
- Delayed developmental care
- Skill regression
- Academic impact

Mental Health Care

- Improved telehealth access
- Altered (?) threshold for inpatient psychiatric hospitalization
- Residential availability limited due to quarantine
- Learning from SARS (2002-2004)
- Protracted mental health care needs
 - Multi-agency collaboration
 - Housing
 Education
 - Employment services
 - Mobilized social support networks

Mental Health Impact of COVID-19

- What we don't know1
 - How many children were depressed/anxious before COVID-19
 - Presence of symptoms may not indicate a clinical diagnosis
- The effect of COVID-19 on mental health workforce
 - Burnout
 - Economic factors
 - Educational factors

¹ Ra cineet al., 2020; ² Zhou et al., 2020; ³ Jiao et al., 2020; ⁴ Freeman, 20

Screening for Mental Health Concerns

- Primary care visits are ideal for screening
 - Routine discussion alleviates stigma
 - Opportunity for holistic care
- Have a standard procedure
- Create a plan of action for positive screens
 - In-office intervention
 - Referral to community
 - Acute hospitalization

Condition-Specific Resources

- Separation Anxiety
 Mayo Clinic Fact Sheet: s-conditions/separation-anxiety-disorder/symptoms-causes/syc-
- Suicide Prevention
 National Suicide Prevention Lifeline:
 suicidepreventionlifeline.org/

 - National Sociate Prevention Lineline.

 1.000-73-825

 Crisis Text Line

 www.cristsettine.org/

 Text HOME to 741741

 Virtual Hope Box

 www.research.va.gov/research in_action/Virtual-Hope-Box-smartphone-app-to-prevent-sucide.cri.

Maybe Not All Bad

- · Protective factors
- Understanding and awareness of COVID-19¹ Entertainment, reading, physical exercise²
- Building resilience in youth is important³
 - · Talk honestly with children
 - Problem-solve strategies to feel better
- Mental health literacy may improve
- Emphasis on mental health in the media
- · Encouragement to check on your friends
- · Normalization of struggles

Steps Forward

- Acknowledging & addressing inequity magnification
 - · Ensuring access to quality care
 - Targeting underserved populations
 - Providing culturally-sensitive interventions
- Assessing educational gaps
 - · Testing in a practical way
 - Using project-based learning to cover broad-based skills

Caring for Vulnerable Populations

- Children who identify as LGBTQI+
 Some youth view an extended absence as an opportunity to transition and start fresh
 May experience bullying as they transition back to in-person schooling in the Fall
 Promote safe online activities through GLSEN or local agencies (e.g., TheCenterofWichita.org)
 - Facilitate care for emotional, social, and physical needs
 Ask about well-being and family support
- Encourage safe in-person learning for students with IEPs
 Emotional and behavioral needs may have been neglected during disruption and may need more intensive attention when school resumes.
- · Develop daily routines/habits for kids with ASD
- Consider naming a point person in each school who maintains regular communication with parents

Anxiety & Depression

- Separation fears
- Return to school after being home with parents for several months
- · Risk of family illness and potential loss
- · Fear of personal illness
- · Family economic struggles
- · Extended grief from personal loss/disappointment
- •Reality that school can still be a challenging place to be

Social Anxiety

- · "Social atrophy"
- Youth became accustomed to virtual meetings
- · Anxiety about in-person social interactions
- · In those with pre-existing social anxiety, symptoms have been much worse
- · Encourage those with social anxiety to begin exposure before school starts in August
 - · Small, safe group
 - May need to work with a therapist to reduce intense fears of returning to inperson schooling

Behavior Management

- · Behavioral challenges may be more prevalent
- \bullet Children may struggle for control and appear more defiant
- ${\boldsymbol{\cdot}}$ Classroom expectations may feel foreign as they adjust back to routine
- May see an increase in ADHD evaluations now that children are asked to sit for longer periods of time without electronic distractions (i.e. tablets, phones, etc.)

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