



Jamie D. Aten Ph.D.  
Hope + Resilience

# COVID-19 Mental Health Effects on Children and Adolescents

Ideas for increasing mental health support and advocacy for minors.

Posted May 22, 2020



Source: Photo by Alex Motoc on Unsplash

By Stella Otai

It's May 2020 already. The COVID-19 global pandemic has led to global mental health issues with well-resourced and under-resourced economies alike continuing to face these similar needs. The world's sense of peace and security continues to erode. Today, a total of **4,996,463** reported cases have been diagnosed with COVID-19 with 328,113 reported deaths. Where's thou sting, O you, virus?

By early this April, over 188 countries worldwide suspended schools countrywide in [response to suggested measures](#) of physical and social distancing in order to mitigate person-to-person transmission. However, with the school closure, **90 percent** (1.5 billion) of registered learners are young people and 72 percent have been impacted. Studies show that the effects of school closure during COVID-19 have exacerbated negative effects on children and adolescents. For instance, in Hong Kong and Singapore, candidate final exams were canceled and university entry exams were suspended or canceled. Twenty percent of the young people affected were [anxious](#) and worried if they would ever go back to school.

[Research](#) shows that children and adolescents are experiencing mental distress due to the disruptions of the closure of schools, activities, and maintaining social and physical distancing. Schools hold a lot of resources, especially for children and adolescents with special mental health needs. For example, children with [autism spectrum disorder](#) are at high risk. Their routine has been disrupted. Research shows that they easily get irritated, frustrated, and short-tempered. Not being able to do their routine activities has greatly impacted our children and young people. Suspension and cancellation of [speech therapy](#) sessions and social skills groups stalls the progress among children and adolescents who have been in therapy during school time pre-COVID-19.

In the UK, 83 percent of the adolescents attribute exacerbating conditions to COVID-19 and 26 percent are unable to access mental health support, peer support groups, and face-to-face services that have been canceled. Moreover, research indicates that social/physical distancing has short- and long-term effects on children and adolescents. Many children and adolescents are suffering from anxiety, worry, depression, and living without internet services all while not being able to know when schools will reopen. Some children and adolescents have been exposed to [child abuse](#) and isolation and all they have is home containment. How can you help the children and adolescents in your neighborhood maintain good mental health in the middle of the virus that has robbed us of so much?

As research continues, schools will soon reopen. But [UNESCO](#), WHO, and Ministries of Health and Education worldwide should work together and plan ahead of time before the reopening of schools. Some plans to consider include psychosocial support, [counseling](#), and guidance for children and adolescents, families, and schoolteachers, so that there's a general understanding between them. The governments should put in place mass sensitization campaigns to increase awareness before schools reopen and should consider providing subsidized specialized services such as mental healthcare before the learners go back to school. It's important that the methods of reaching the children, adolescents, and their families with appropriate interventions are agreed upon and communicated during mass campaigns before the reopening of schools.

ARTICLE CONTINUES AFTER ADVERTISEMENT

Special guidelines for early interventions before reopening of schools should be issued to parents and guardians with special needs children and adolescents. This can be done by providing the public with access to virtual or online support systems. Parents or families can also provide supportive interventions such as psychoeducation in order to promote wellness in family settings. For instance, parents can take the initiative to create schedules for their children and keep them busy in order to reduce anxiety during this time of uncertainty.

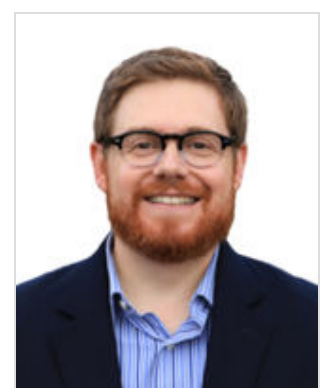
In countries that are well-resourced, mental health service providers should come up with e-platforms for their clients to access services so that the children and adolescents on speech therapy and social skills are not stalled by the disruptions.

Parents should be encouraged to make use of their existing networks—coordinate, collaborate, and communicate. For instance, they can form afternoon Zoom calls, virtual game nights, virtual prayer groups, virtual religious services, and more to provide peer social support. While the professionals are scaling up mental health services, it's very important that everyone keeps interested in the basic psychosocial support to promote wellness and maintain hope in our communities. Children and adolescents are our responsibility.

*Written by Stella Otai, a master's student at Wheaton College (IL) studying [Humanitarian and Disaster Leadership](#).*



## About the Author



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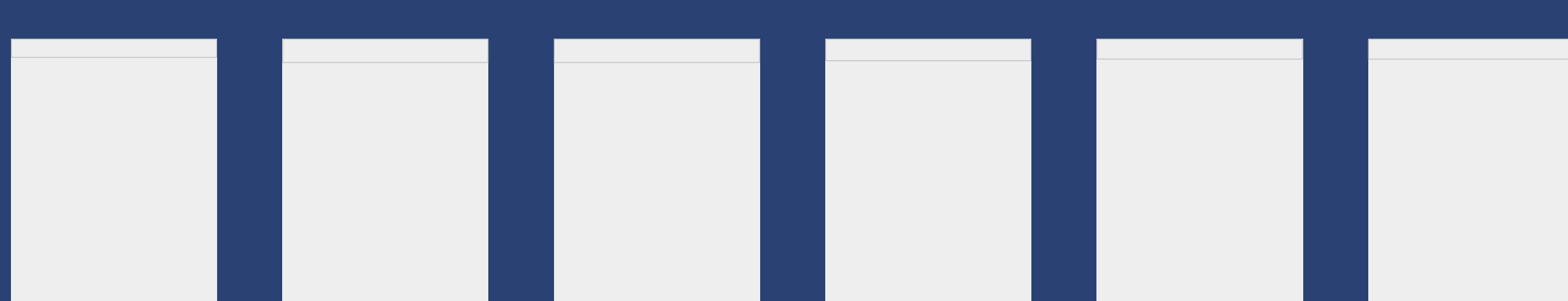
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