Effect of Long-Term Quarantine on Mental Health Practices

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Author's contribution

The sole author designed, analyzed, interpreted and prepared the manuscript.

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During times of uncertainty and distress, mental health issues can become more apparent among various individuals. In a recent Kaiser Family Foundation poll, almost half (45%) of adults in the U.S reported that worry and stress related to the COVID-19 virus have negatively impacted their mental health [1]. A separate study found consistent evidence linking social isolation to worsened mental and cardiovascular health, illuminating that the impacts of social isolation impose challenges [2]. Even if students are starting to go to school in waves, the access to proper mental health treatments to alleviate the worsening symptoms is still low. Additionally, the social distancing policies in place right now continue to amplify the social isolation felt by numerous adolescents throughout the nation.

Experts stress that COVID-19 may worsen existing mental health problems and even lead to more cases among adolescents and children. Additionally, the National Survey of Drug and Health Use (NSDUH) found that 35% of adolescents from 2012 to 2015 received their sole mental health services from school [3]. This problem becomes even more necessitated when some of the typical indicators that professionals use to identify students with mental health problems may not be available virtually or under a mask. The American Psychological Association shows that the identification of mental health difficulties is the biggest step to actually address the problem [4]. However, with difficulties with online learning, current screening practices throughout the nation have become difficult to actually implement.

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An area that needs more attention is prescribing mental health disorders in an online setting and ensuring that every student has equitable access to these resources. Research done by the University of Berkeley explains that often, cultural viewpoints on mental health disorders shape the way students approach treatment to these disorders [5]. Often, students have direct access to their teachers and counselors if they need help, but this has been heavily hindered with virtual education [6]. Thus, outside cultural influences from parents and guardians are limiting more people from obtaining proper treatment and screening practices.

A decline in mental health screenings may lead to more depression rates for adolescents. A recent study showed that mental health screenings are often the very first step in adolescents getting help, especially as only about a third of those suffering from depression seek treatment from a mental health professional [7]. This number is even exacerbated by adolescents, who don’t know how to get proper access to these resources in the first place. Coupled with how depression rates are increasing right now in the pandemic, additional screening mechanisms are essential to help alleviate these symptoms for students [8]. With the lack of in person services due to the pandemic, school boards have started to turn to online platforms and indicators to screen students.

The biggest concern so far with these online screening mechanisms have been the lack of privacy for students. Students, parents and teachers are incredibly worried that online quizzes and indicators don’t provide the same level of ethical confidentiality that in person screening provides [9]. Even if this may not be a problem, this is the primary reason many students do not fill out online indicators truthfully. Thus, any data that school professionals acquire is not always helpful for them to help screen students in an online setting. New and innovative approaches are necessitated to help promote confidentiality in an online setting and to ensure that everyone has equitable access to resources that will help screen mental health disorders early in the process. With this information, it is becoming essential that psychologists and mental health professionals work to provide cheaper ways to increase access to Telemedicine to school districts throughout the world. As the Centers for Disease Control and Prevention found, students are more likely to convey information about their mental health in the pandemic if they know confidentiality is guaranteed [10]. By increasing access to more school psychologists who work directly with students on a daily basis, schools can tackle mental health disorders at their root. However, many schools do not have access to enough trained psychologists to screen all the students on a regular basis. This can be solved by educating enough teachers about mental health screening and giving them the tools to report potential mental health disorders. Proactiveness has always been the key to prevention and this is especially true regarding protecting the health of students nationwide.

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COMPETING INTERESTS

Author has declared that no competing interests exist.

REFERENCES

1. Kearney A, Kirzinger A. Kaiser Family Foundation health tracking Poll – Early april. The impact of Coronavirus on life In America; 2020. (Retrieved March 15, 2021) Available:https://www.kff.org/coronavirus-covid-19/report/kff-health-tracking-poll-early-april-2020
2. National Academies of Sciences, Engineering, and Medicine. Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System. Washington, DC: The National Academies Press; 2020. Available:https://doi.org/10.17226/25663
3. Golberstein E. COVID-19 and mental health for children and adolescents; 2020. Retrieved March 15, 2021. Available:https://jamanetwork.com/journals/jamapediatrics/fullarticle/2764730
4. American Psychological Association. (n.d.). Student mental health during and after covid-19: How Can SCHOOLS identify youth who need support?; 2020. (Retrieved March 15, 2021)
5. Andrade S. Cultural influences on mental health; 2017. (Retrieved March 15, 2021) Available: https://pha.berkeley.edu/2017/04/16/cultural-influences-on-mental-health/

6. Wake Forest University. Role of a School counselor: Wake Forest University; 2020. (Retrieved March 15, 2021) Available: https://counseling.online.wfu.edu/blog/helping-students-thrive-role-school-counselor/

7. Wood P, Burwell J, Rawlett K. New study reveals lack of access as root cause for mental health crisis in America; 2018. (Retrieved March 15, 2021) Available: https://www.thenationalcouncil.org/press-releases/new-study-reveals-lack-of-access-as-root-cause-for-mental-health-crisis-in-america/

8. Ducharme J. Depression has skyrocketed during the covid-19 pandemic; 2020. (Retrieved March 15, 2021) Available: https://time.com/5886228/depression-covid-19-pandemic/

9. Marques G, Drissi N, Díez I, D De Abajo, BS Ouhbi S. Impact of covid-19 on the psychological health of university students in Spain and their attitudes toward mobile mental health solutions. International Journal of Medical Informatics. 2021;147: 104369. DOI: 10.1016/j.ijmedinf.2020.104369

10. Center for Disease Control and Prevention. Confidentiality and Consent; 2020. (Retrieved March 26, 2021) Available: https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/Confidentiality-Consent.html

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