COMMENTARY

Mental health risk among children during COVID-19 lockdown

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Abstract
The COVID-19 pandemic has created a hugely detrimental impact on the psychological health of people around the world. Children are extremely vulnerable; therefore, it is of utmost importance to discuss the prevalence of the symptoms, their associated risk factors, and the strategies to identify and understand their deteriorating mental health (MH) before it leads to disastrous outcomes. Hence, parents and schools should come together in devising modes to create an environment in which children can easily tackle the lockdown periods which have become the new reality. Negative effects on MH have long-term consequences, therefore necessary interventions must take place.

KEYWORDS
child health, children, coronavirus, COVID-19, mental health

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World Health Organization declared coronavirus disease 2019 (COVID-19) as a pandemic and, hence, widespread social isolation was necessary. Public health measures had an insidious effect on the mental health (MH) of people globally. Children being vulnerable were particularly affected by the social measures, such as school closures and lack of outdoor activities, with increasing stress levels, anxiety, and depression. In recent studies, along with the implemented social measures, the inability to meet loved ones, fear of being infected, parents’ job losses, and inability to afford the technological means and the ways to navigate such means, have been found as risk factors affecting mental well-being (Magson et al., 2021). Therefore, dramatically changing lifestyles during the pandemic poses a significant risk to the MH of children. A review on the COVID-19 pandemic’s impact on the MH of children and teenagers summarized 22 international articles, highlighting the significance of understanding the psychological consequences on children, particularly countries where lockdown has become the norm every few months (Beal, 2021).

We should know that manifestations of deteriorating MH in children are often subtle and may not be the same as in adults. Impatience, irritability, boredom, and clinginess are rare new ways of presentation of depressive symptoms (Panda et al., 2021). The severity of symptoms may not only vary in comparison with adults, there may also be atypical presentations with not having full-blown depression or anxiety, rather disturbances in sleep and appetite and inability to interact in social gatherings with withdrawn behavior (Imran, Aamer, et al., 2020; Imran, Zeshan, et al., 2020). Young children cannot understand the toll of the pandemic, but their parents’ stresses regarding it makes them anxious and increase their worries. Children can exhibit their anxiety in manners of temper tantrums, misbehaving, and defiant behavior which parents cannot understand as a negative psychological impact (Imran, Aamer, et al., 2020; Imran, Zeshan, et al., 2020). The disastrous impact of widespread social isolation and loneliness varies not only between parents and children but also children of various ages, with younger children exhibiting regressive behavior of thumb sucking and nocturia. Older children might exhibit frustration and nervous behavior (Imran, Aamer, et al., 2020; Imran, Zeshan, et al., 2020).

It has been accepted that COVID-19 necessitated social measures have adverse consequences to the MH of children. Deteriorating MH has long-term consequences, the impact of which has yet to be determined. During periods of school closures, the loneliness along with the disrupted routine results in high levels of mental stress (Ullah et al., 2021). Uncontrolled stress during childhood...
causes dysregulation of the hypothalamic–pituitary–adrenal axis, which predisposes children to the development of pathophysiological conditions in adulthood. Persistent mental stress can damage the developing nervous system, particularly the prefrontal cortex, amygdala, and hippocampus. These particular brain areas are responsive to stress and their response can impact the ways glial cells react and affect the metabolism of monoamines, causing cell death and psychological health disturbances (de Figueiredo et al., 2021). Screen time may increase, which leads to physical inactivity and disturbed sleep, due to suppressed melatonin production (Imran, Aamer, et al., 2020; Imran, Zeshan, et al., 2020). Such health disturbances contribute to many adverse outcomes ranging from obesity, elevated blood pressure, and higher cellular aging, which in turn increases the incidence of metabolic syndrome in adolescents and children, increasing the risk of heart diseases, stroke, and type 2 diabetes in this age group. Despite vaccine availability, evolving mutant strains have led us to the realization that social distancing measures are here to stay.

MH issues must be effectively addressed, and emotional and psychological support must be provided by different interventions. Parents should apply positive parenting methods and reinforce routine order with limited screen time and emphasize physical exercise, nutritious eating, and healthy sleeping patterns (Imran, Aamer, et al., 2020; Imran, Zeshan, et al., 2020). The limited screen time can be used positively with emphasis on online exercise classes and as a means to connect with friends through online games (Nagata et al., 2020). Parents should encourage children to discuss their worries and be able to pick upon sudden mood changes. To decrease their dependability on adults, children can also be taught to regulate their own emotions through behavioral activation, in which children participate in enjoyable activities. Modes of telehealth should be used early on if children exhibit distressed psychological health (Shah et al., 2020).

Schools should educate students regarding emotional and psychological health. Recruiting MH counselors, who can provide support to children and prevent them from internalizing their distress is of utmost importance (Shah et al., 2020). The MH counselor can also assess by comprehensive means, students at increased risk of worsening MH and help them cope with uncertain periods of lockdown. Schools should also have informative discussions on the pandemic and discuss any incorrect information. Through this, children can knowledgeablely tackle the impact of the pandemic, while staying positive. Online classes can be done in engaging ways so that students look forward to them. The difficulties faced in converting to this new era of the technological medium should be tackled by the school by providing proper help (Magson et al., 2021). Teachers and parents both should encourage social interactions with peers through online means for the emotional health of children.

It should not be ignored that negative and stressful childhood experiences often have an impact on adolescents and adult stages of an individual. Therefore, now is the right time for us to take action before it is too late. MH can be impacted by governments’ policy stringency, which is measured by Oxford Stringency Index, hence careful regulation must be undertaken (Wang et al., 2021). Governments should develop a network of MH services and provide national guidelines to meet the need of their people. Due to the lack of awareness on MH in our country, public service messages must be given through paper, electronic, social media, necessitating the importance of realizing children’s emotional distress and that social distancing does not mean that children must be socially isolated. Dealing with stigma relating to MH and ways to approach and understand the psychological impact of COVID-19 should be at the forefront, while we deal with the ongoing crisis brought on by the pandemic. Parents and schools play a pivotal role and should be encouraged to create a positive and supportive environment for children, which will lead them to tackle uncertain periods of lockdown, with ease.

CONFLICT OF INTERESTS

The authors declare that there are no conflict of interests.

DATA AVAILABILITY STATEMENT

Data are available from the corresponding author upon reasonable request.

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