Letter to Editor: Supporting Children With Autism Through the Coronavirus Crisis

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Dear Editor

Coronaviruses are a large family of viruses that have endangered the lives of many people with several outbreaks throughout history. The Coronavirus Disease 2019 (COVID-19) recently caused a pandemic [1]. It began in China from December 2019, and by now it has affected 201 countries, more than 37,423,660 people worldwide, and claimed the lives of more than 1,074,817 people [2].

The pandemic of COVID-19 has a devastating effect on the physical and mental health, besides the social life and world economy; therefore, to improve the post-disaster status, maintaining mental health is essential. In any biological crisis, the most probable people’s emotional responses would be themes of fear, uncertainty, and stigmatization and these factors may impede suitable medical and mental health interventions. In addition, fear and distorted perception of risk will result in negative societal behaviors. The intensity of negative societal behaviors increases with the prolongation of the quarantine period [3]. As a result, it is possible that individuals experience a wide spectrum of general mental health concerns, such as distress reactions (anger, extreme fear of disease, and insomnia), health risk behaviors (social isolation, and the increased use of tobacco and alcohol), and mental health.

By learning from the past global outbreaks, like novel pneumonia and considering the psychosocial effects of a viral pandemic, the improvement of psychotherapy, support, assessment, and providing the services to affected people seem very necessary for the mental health response to the COVID-19 outbreak [4].

In all quantitative studies on quarantine effects, a high prevalence of distress and mental disorder has generally been reported. They have reported the highest prevalence of general psychological symptoms, like affective disorder, stress, low mood, depression, anger, posttraumatic stress disorder, irritability, and insomnia. The results of a study suggested that quarantine can have long-term consequences, which affect not only quarantined individuals but also politicians, public health officials, and the health care system. This compulsory quarantine will only have less destructive effects if sufficient and comprehensive information is given to the people and a strong government support system is in place to expand empathy [4].

Moreover, the effects of quarantine on children should not be ignored, which not only drives them away from education but also increases the severity of psychological symptoms, as they may find it difficult to comprehend the necessity of compulsory quarantine and may find it more difficult to endure [5]. Children with autism spectrum disorder are more affected because they not
only miss training but also cannot continue their rehabilitation exercises and all this requires much more time to compensate. This epidemic will lead to huge unexpected changes and disruptions in daily life that will be extremely difficult for many children and adults with autism. Cancellation appointments, empty shelves, or the closure of a local café can only be a nuisance for ordinary people, but we know that for people with autism at any age, this condition can cause severe stress and lead to an intense feeling of failure and restlessness [6].

For parents of children with autism who are constantly trying to prevent the child from harming themselves, speculating about the child’s needs, and searching for ways to prevent the child’s withdrawal, life can be exhausting and accompanied by insomnia. Delaying parental support can lead to frustration, increase psychological pressure, and reduced quality of care for a child with autism. Therefore, expanding the cooperation of specialists with parents and coordinating between different types of service agencies to meet the needs of parents and other family members requires time and planning [7].

The following seven-step support strategy is designed to meet the unique needs of people with autism during this period in America:

1. Explaining the problem with simple, clear, and tangible literature;
2. Providing opportunities to express their feelings;
3. Prioritizing coping and relaxation skills;
4. Maintaining a life routine and engaging children in daily activities;
5. Making new chores;
6. Keeping in touch with people (Remotely with video call apps and other apps);
7. Being aware of changing child behaviors.

To implement this strategy, it is necessary to educate the families of children with autism as quickly as possible because of the irreversible consequences for this group [8].

The COVID-19 epidemic has created a new pattern of psychological crisis intervention using the Internet. This new model from Western China Hospital integrates doctors, psychiatrists, psychologists, and social workers into online platforms to provide psychological interventions to patients, families, and medical staff [9]. Therefore, designing and developing short-term and online psychological interventions and protocols for different community groups and specialists in other fields is essential and should be accessible [10]. The key idea is to provide the Internet for the autism spectrum disorder’s families with the necessary training and combine the entire intervention process as well as the combination of the initial intervention with subsequent rehabilitation.

Ethical Considerations

Compliance with ethical guidelines

The Ethical Codes and standards of this article are based on the Declaration of Helsinki.

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Authors’ contributions

Conceptualization: Seyyed Mohammad Hossein Javadi, Akram Ahmadzadeh; Methodology: Akram Ahmadzadeh, Fatemeh Maleki; Funding acquisition, writing – review & editing, & investigation: All authors; Writing – original draft: Fatemeh Maleki; Supervision: Seyyed Mohammad Hossein Javadi.

Conflict of interest

The authors declared no conflict of interest.

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