

Stress and mental health problems during first COVID-19-lockdown

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Many people in Switzerland experienced considerable psychological distress during the first COVID-19 lockdown from mid-March to the end of April 2020. Researchers from the Department of Child and

Adolescent Psychiatry and Psychotherapy at the University Hospital of Psychiatry Zurich (PUK) and the University of Zurich in collaboration with the La Source School of Nursing have now examined the most common sources of stress among children, adolescents, their parents and young adults. For their study, the researchers used representative samples in Switzerland of 1,627 young adults aged 19 to 24 as well as 1,146 children and adolescents between the ages of 12 and 17 and their parents.

Uncertainty, disruption, postponement

"Uncertainty during last year's lockdown was considerable and had a [negative impact](#) on [mental health](#)," explains Meichun Mohler-Kuo, professor at PUK and La Source. Children and adolescents felt most stressed by having to change, postpone or cancel important plans or events and being unable to participate in [social activities](#) and normal routines during leisure time and at school. The main sources of stress for adults were not knowing when the pandemic will end, coping with the massive disruptions to social life and having to reorganize work and family life.

Mental health problems of young adults

The study found that many [young adults](#), and [young women](#) in particular, experienced symptoms of mental illness during the first lockdown. More than half (54%) of young women and 38% of young men reported mild to severe symptoms of depression. Almost half of young women (47%) and one-third (33%) of young men experienced mild to severe anxiety. "In general, these results are quite similar to the results from a representative study carried out in 2018," Mohler-Kuo says. "It's notable, however, that monthly risky alcohol use decreased dramatically during lockdown, from 34% to 21%. This decrease was more pronounced in

women than in men."

Mental health problems in over one-third of kids

Overall, more than one-third of the [children](#) and adolescents screened positive for one of the [mental health problems](#) assessed in the study. More than 20% of boys and girls showed symptoms related to attention deficit hyperactivity disorder (ADHD). 18% of girls and 11% of boys displayed unruly and angry behavior and thus symptoms of what is known as oppositional defiant disorder (ODD). "This came as a surprise, since these symptoms had previously been observed less frequently overall, but significantly more often in boys than in girls," says Susanne Walitza, last author of the study. In addition, 14% of girls and 13% of boys experienced anxiety symptoms, while symptoms of depression were reported by 10% (girls) and 5% (boys). "Our findings show that children and adolescents are particularly at risk of developing mental disorders," says Walitza.

One-fifth with problematic internet use

For both children/adolescents and young adults, the median time spent on the internet per day was 240 minutes during lockdown. More than 40% of men and 35% of women used the internet for more than 4 hours per day, while about 8% of children, adolescents and young adults were online for more than 6 hours a day. Overall, 30% of children and 21% of young adults met the criteria for problematic internet use.

More help for kindergartens, schools and sports clubs

The findings demonstrate how important it is to maintain routines, schedules, social contacts and support structures during lockdown. The authors of the study thus recommend that health and education

authorities should provide more support to institutions, such as kindergartens, schools, and sports organizations, to avoid the detriments of lockdowns.

More information: Meichun Mohler-Kuo et al, Stress and Mental Health among Children/Adolescents, Their Parents, and Young Adults during the First COVID-19 Lockdown in Switzerland, *International Journal of Environmental Research and Public Health* (2021). [DOI: 10.3390/ijerph18094668](https://doi.org/10.3390/ijerph18094668)

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