

Children face added mental health struggles during pandemic

20 May 2021, by Sandhya Raman



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Psychiatrist Tami Benton was recently called to the emergency department about a child whose family had concerns about the girl's suicidal threats to run into traffic and end her life.

The child was only 5 years old.

Both of the child's parents had lost their jobs. The mother was struggling with depression, stressed by the demands of the pandemic.

"I asked her what she thought would happen when she died. She responded that I will come back tomorrow and I'll be a good girl and my parents will be happy again," Benton, who leads the Children's Hospital of Philadelphia child and adolescent psychiatry and behavioral sciences department, testified to Congress in April.

"Even more disturbing to me was my inability to provide an appropriate avenue for care for this youngster and her family. The option that I provided for her maintained safety but did not provide the care she needed and prevented other children from having a medical bed that was

desperately needed during that time," Benton said. "I wish that I could say that this story was an uncommon one, but it's increasingly common in our emergency departments."

The COVID-19 pandemic has taxed the nation's [mental health](#) system, and youth have been harshly affected. Children have been impacted by social restrictions, school closures, parental health and family financial stressors. Experts also worry about reduced availability to school-based resources and limited access to outdoor activities.

"Children are uniquely suffering in ways we have barely begun to grasp. Isolation, depression, loss of sleep, loss of appetite, the rise in self-harm," Michelle A. Williams, dean of the faculty at the Harvard T.H. Chan School of Public Health, said at a briefing. "This is nothing less than a crisis."

Growing problem

Hospitals saw a 24% increase in mental health [emergency department](#) visits by kids who were 5 to 11 years old between April and October of 2020, according to Children's Hospital Association data. For children who were ages 12 to 17, that number rose 31%.

A separate poll that the American Psychiatric Association, or APA, released on May 2 found that 48% of parents said the pandemic contributed to [mental health problems](#) for at least one of their children. About half of surveyed parents said their child had some care from a mental health professional, and 26% said the [mental health care](#) was specifically due to the pandemic.

More than 1 in 5 of the parents surveyed had trouble finding an appointment with a mental health practitioner such as a psychiatrist or social worker.

"This poll shows that even as vaccines become more widespread, Americans are still worried about

the mental state of their children," said APA President Jeffrey Geller. "This is a call to action for policymakers, who need to remember that in our COVID-19 recovery, there's no health without mental health."

Amy Knight, president of the Children's Hospital Association, said the pandemic exacerbated an already growing problem.

"Many kids that may have been coping, or appeared to be coping, during normal times, the pandemic just exacerbated feelings they were having," she said.

A study in the March edition of the American Academy of Pediatrics' journal compared suicide ideation rates and attempts among young people ages 11 to 21 from January to July 2020 and in the same period the previous year.

"Months with significantly higher rates of suicide-related behaviors appear to correspond to times when COVID-19-related stressors and community responses were heightened, indicating that youth experienced elevated distress during these periods," the study reads.

"They're no longer having those normal interactions, so by the time it becomes an issue, it's a significant issue," said Knight. "And kids shouldn't be seen in an emergency room for those kinds of things, you know. We should be intervening much earlier."

Policy proposals

Lawmakers have introduced a number of mental health proposals but have been largely focused on adults, who may have different needs.

Knight said she hopes the Biden administration's infrastructure plan being debated in Congress will include workforce development and loan forgiveness funding to enhance children's mental health care.

"We are pressing forward so that it will be included," she said, adding that previous legislation had "vague opportunities" for funding but "not a lot

of direct funding for pediatric behavioral health."

Health and Human Services Secretary Xavier Becerra cited a "historic investment in behavioral health" while speaking before the House Energy and Commerce Health Subcommittee last week.

"We want to make sure we do everything that we can to address the stresses that our children have been facing," he said.

During a House Labor-HHS-Education Appropriations Subcommittee hearing in March, Appropriations Chair Rosa DeLauro, D-Conn., said while the committee has made some strides, like funding the National Child Traumatic Stress Network, more should be done.

"We need to be thinking on a more long-term scale," she said.

Lisa Amaya-Jackson, co-director of the UCLA-Duke National Center for Child Traumatic Stress, touted six priorities to the Appropriations subcommittee: ensuring that families have basic resources; supporting evidence-based services; helping schools implement programs on trauma; supporting systems that serve youth, such as juvenile justice and foster care; funding research; and prioritizing the needs of at-risk youth.

Last week, both chambers took a step toward addressing mental health needs by passing legislation.

The House passed a series of mental health bills last week en bloc by voice vote, including one to reauthorize and expand grants for school-based mental health programs at \$130 million per year for five years. Another bill would implement student suicide awareness and prevention training policies in schools. Another would improve research and outreach efforts and develop training for culturally competent providers to address mental health disparities among minority youth.

The House on May 13 also passed, 323-93, a bill to require HHS to develop guidelines for behavioral intervention teams in schools.

The Senate on May 12 passed by voice vote a bill to require schools to include phone numbers for crisis resources on student identification cards or the school's website.

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Other bills specifically address children's mental health needs.

Still awaiting action is bipartisan legislation that would examine the mental health impact of the pandemic on children and health care workers and authorize \$100 million per year for five years for the National Institute of Mental Health.

Lifelong effects

Andrea Smyth, executive director of the New York State Coalition for Children's Behavioral Health, said if disruptions to children's mental well-being aren't addressed, they can affect a person's entire life.

"Having the right interventions at the right moment can have a positive impact for years and even generations to come," she said in March while advocating for the bill.

Sen. Maggie Hassan, D-N.H., also hinted in April that she plans to introduce a bipartisan bill to expand access to suicide awareness and prevention training for students to address rising youth suicide rates.

The expansion of telehealth helped many individuals seeking mental health care during the pandemic, and advocates want to make it easier for states to permanently implement tele-access to behavioral health even after the public health emergency ends. The scope of telehealth coverage in Medicaid varies by state.

"While most people, including most children, will likely adapt and recover well as we emerge from the pandemic, we know from previous research that for some, the mental [health](#) impacts of this trauma and distress will continue to have repercussions into the future," said APA CEO and Medical Director Saul Levin. "We need to be prepared to help those who need it in the coming months and years."

APA citation: Children face added mental health struggles during pandemic (2021, May 20) retrieved 30 June 2022 from <https://medicalxpress.com/news/2021-05-children-added-mental-health-struggles.html>

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