




THE OUTLOOK FOR CHILDREN POST-COVID

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DISCLOSURES

I have no conflict of interest to disclose.



LEARNING OBJECTIVES

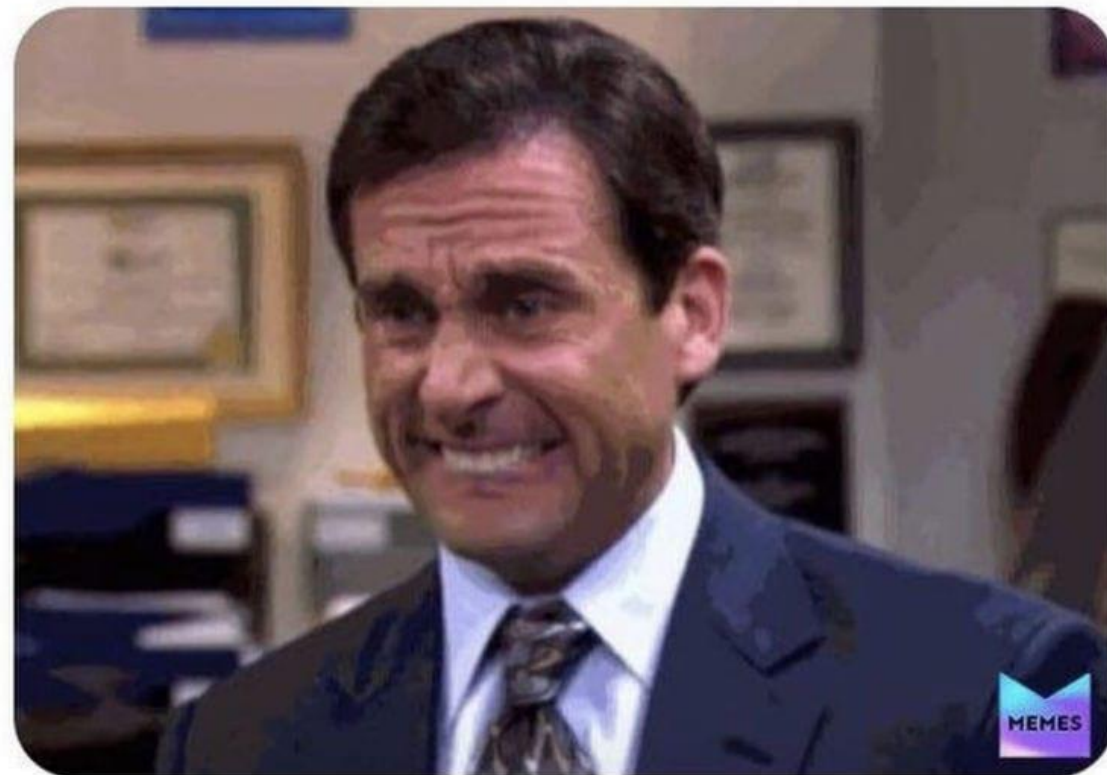
Review the effects of the coronavirus pandemic on the mental health of children and adolescents

Discuss the mental health needs of children going forward, after the state of emergency is lifted

Time traveler: What year is it?

Me: 2020

Time traveler:



SO IT BEGINS...2020 – TO MASK OR NOT?

Feb 2020 – Surgeon General stated on Twitter - "STOP BUYING MASKS" because they were "NOT effective in preventing general public from catching #Coronavirus." (has now reversed position)

March 2020 – CDC guidance - "CDC does not recommend that people who are well wear a facemask to protect themselves from respiratory illnesses, including COVID-19. You should only wear a mask if a healthcare professional recommends it. A facemask should be used by people who have COVID-19 and are showing symptoms."

Navy captain fired after pleading help for sailors who tested positive for coronavirus

Capt. Brett Crozier sent a letter to the Navy, seeking to evacuate his crew as cases of coronavirus infection increased on the USS Theodore Roosevelt. *USA TODAY*

April 3, 2020

WASHINGTON – The Trump administration is advising people to start wearing face masks in public to stop the spread of the coronavirus, a reversal on previous guidance that urged people not to wear masks.

President Donald Trump said at a White House news conference Friday that the Centers for Disease Control and Prevention guidelines are strictly voluntary. “You can do it – you don’t have to do it. It’s only a recommendation.”

Trump repeatedly stressed it is voluntary. “I don’t think i’m going to be doing it,” he said.

Trump stressed that the CDC is not calling for Americans wear medical-grade masks. Medical protective gear must be preserved for health care officials who are on the front lines treating coronavirus patients, he said.

For months, the federal government has recommended that the general public not wear masks, in part to help preserve them for health care workers. Guidance from the Centers for Disease Control and Prevention until now has said the general public did not need to wear masks unless they came into contact with coronavirus patients or if they were sick.

CORONAVIRUS IN NY: NEW YORKERS must wear masks or cover face in public, Cuomo says



David Robinson
New York State Team

Published 1:49 p.m. ET April 15, 2020 | Updated 8:24 p.m. ET April 15, 2020

[View Comments](#)

The video player shows Governor Andrew M. Cuomo speaking at a podium. An overlay titled "Stop the Spread" lists the following requirements:

- All people in public in New York must have mask or mouth/nose covering
- Must wear it in situation where you are not maintaining "social distancing"
 - Mask, cloth covering
 - Public transit, busy streets, etc.
 - 3-day notice to allow compliance

At the bottom of the overlay, it says: **STAY HOME. STOP THE SPREAD. SAVE LIVES.**

The video player interface shows a play button, a volume icon, a progress bar at 3:08 / 3:33, and share and full-screen icons.

Cuomo announces all New Yorkers must wear masks in public

On Wednesday, April 15, 2020, NY Gov. Andrew Cuomo announced all New Yorkers must wear a mask or a face covering of some sort while in public. *Provided*

April 15, 2020

SCHOOL CLOSINGS

Most started on March 13, 2020

A list of Mass. school closures amid coronavirus outbreak

Some schools in Massachusetts are closing their doors because of the novel coronavirus, joining others around the country and the world.

By **Globe Staff** Updated March 13, 2020, 3:11 p.m.



LOCKDOWNS

PRESS RELEASE

Governor Charlie Baker Orders All Non-Essential Businesses To Cease In Person Operation, Directs the Department of Public Health to Issue Stay at Home Advisory For Two Weeks

Updates Assembly Order to Limit Gatherings to 10 people

FOR IMMEDIATE RELEASE:

3/23/2020

Office of Governor Charlie Baker and Lt. Governor Karyn Polito
Governor's Press Office
Department of Public Health
Executive Office of Health and Human Services

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Coronavirus \(COVID-19\) →](#)

CHILDREN/ADOLESCENTS IN THE PANDEMIC

Let's start with some general pre-existing factors:

- Mental Health Diagnoses, including depression, anxiety, trauma
- Special Learning Needs, often requiring in-person support (for example, occupational therapy)
- Family system issues, including violence and abuse
- Poverty
- Poor access to mental health services



CHILDREN/ADOLESCENTS IN THE PANDEMIC

Direct Health Risks

COVID-19 infection

Multisystem Inflammatory Syndrome in Children (MIS-C)

A small study done at Rady Children's Hospital in San Diego found a 57% higher incidence of type 1 diabetes in children from March 19, 2020 to March 18, 2021



CHILDREN/ADOLESCENTS IN THE PANDEMIC

Social Isolation/Quarantine

Higher levels of cortisol

Worse cognitive development

Pandemic-related stressors can affect sleep and physical activity that influences development processes, including brain plasticity

Loneliness/depression/anxiety, fear, helplessness

Increased risk of PTSD

Vilma*, 10 from Mexico



*Before the virus, I went to school, everything was happy.
Now I see people with face masks and few cars
but I am happier to have more time with my mom and I have more
days to play.
I'm afraid that my family and friends will get sick.
I miss playing with my friends at school.
I miss visiting my grandparents at their house.
I dream about seeing my best friend and then us going to the beach.
While this [lockdown] happens, I draw pictures, I play and I do
homework.
I hope that this ends so I can go back to seeing my friends.
When all this ends, I will go to the park to skate.
All this will pass, we will be fine, if we take care of ourselves [and]
wash our hands, the virus will die.
Stay at home so we can go out.*

CHILDREN/ADOLESCENTS IN THE PANDEMIC

Social Isolation/Quarantine

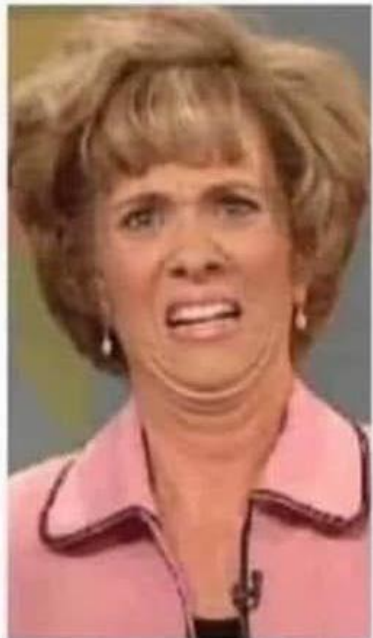
“the period that corresponds to childhood and adolescence is essential for the development of the individual's physical and mental aspects. Therefore, during the pandemic, the growth of children in different areas, such as cognitive, physical, and mental, is extremely worrying. In this context, psychological assistance and the monitoring of the physical and mental health of children and adolescents is essential to reduce the damage that may be caused by social isolation.”

Almeida, I., Rego, J. F., Teixeira, A., & Moreira, M. R. (2021). Social isolation and its impact on child and adolescent development: a systematic review. *Revista paulista de pediatria : orgao oficial da Sociedade de Pediatria de Sao Paulo*, 40, e2020385. <https://doi.org/10.1590/1984-0462/2022/40/2020385>

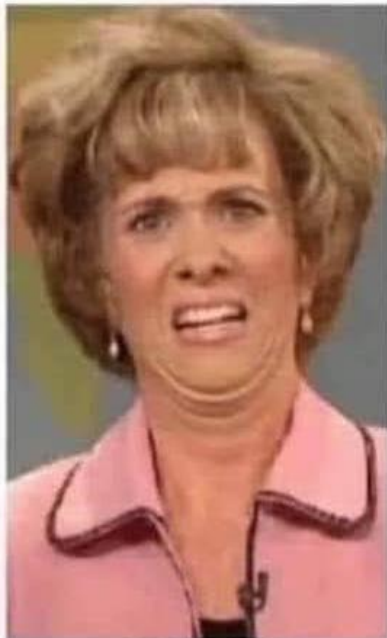
SCHOOL CLOSURES

Every parent right now

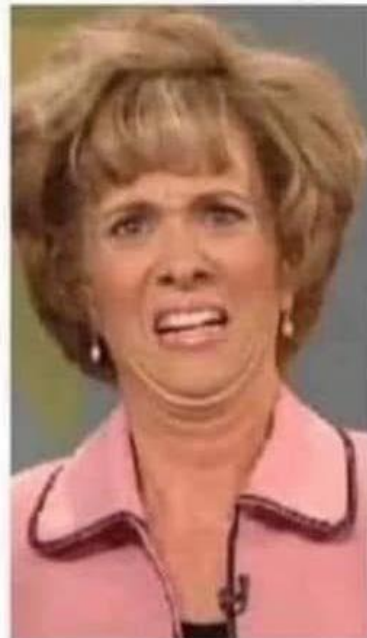
POLL



STARTING SCHOOL
IN PERSON



STARTING
SCHOOL ONLINE



HOMESCHOOLING

- A. We returned to in-person schooling too early in the pandemic
- B. We should have returned to in-person schooling earlier
- C. We never should have closed schools during the pandemic.

CHILDREN/ADOLESCENTS IN THE PANDEMIC

School Closures

- Interrupted learning
- Nutrition
- Effect on educators
- Parent-facilitated education
- Economic implications
- Drop-outs
 - Child Development
 - Preschool - *“Losses were uneven across developmental areas with the largest deficits being in motor, language and logical-mathematical skills.”*
 - Attitudes towards learning

- Identification of signs of maltreatment
- School-Based Health Centers



CHILDREN/ADOLESCENTS IN THE PANDEMIC

Children with Disabilities

“Owing to the COVID-19 pandemic, K-12 education in New York City quickly transitioned to remote learning. We performed a structured interview with 50 consecutive families of children with developmental disabilities about their experience with remote learning 2 months after COVID-19 lockdown. We observed that setting up the remote learning system was challenging for families who were born outside of the United States, spoke limited English, or had a lower level of education. Though some special education supports were in place, remote learning for children with developmental disabilities led to gaps in their therapeutic services. Children with more severe developmental disabilities joined less than 2 hours of remote learning per day and had a decrease in their therapeutic services. Most children (80%) relied on their parents for education. Additionally, for low-income communities, with families who spoke languages other than English, remote learning revealed a new barrier to access: technology.”

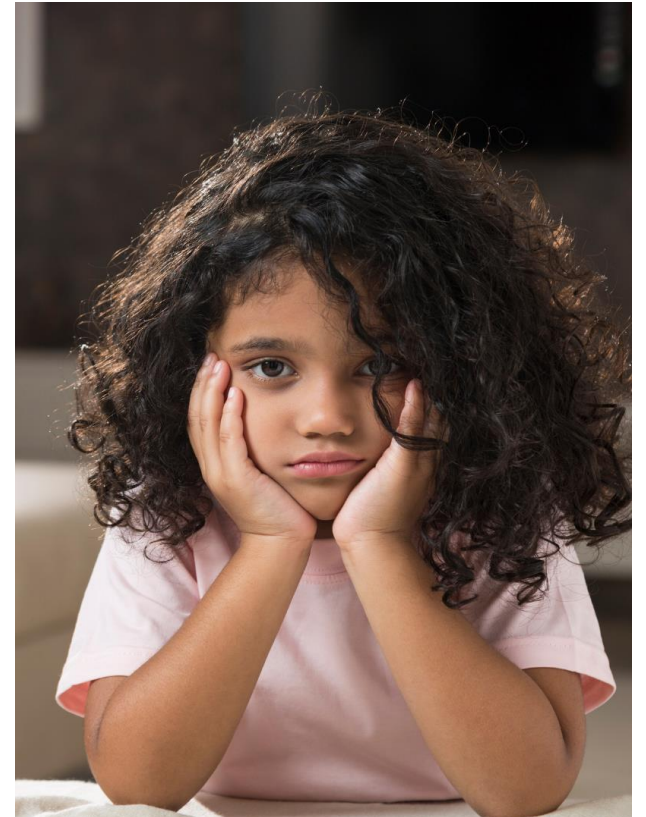
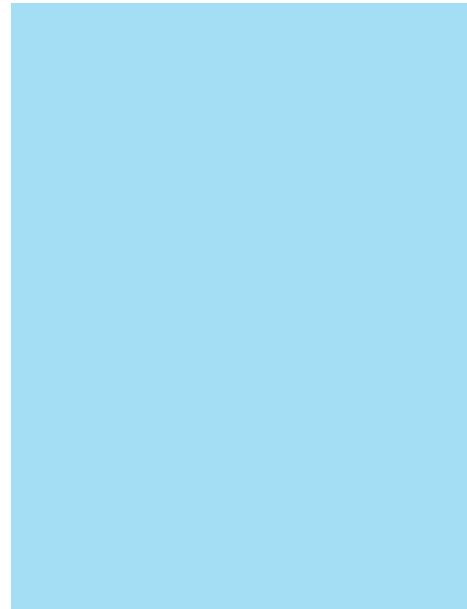
CHILDREN/ADOLESCENTS IN THE PANDEMIC

Missed significant life events

- Prom
- First year of high school/college
- Senior Trip/Pranks
- Birthday parties
- Graduation

Grief/Loss

- Depression, anxiety, helplessness
- Loss of parents, siblings, other relatives and family friends
- Uncertainty about self/safety



CHILDREN/ADOLESCENTS IN THE PANDEMIC

Prolonged Stress

- Sense of safety and security
- Physical Health
- Irritability/Disruptive Behaviors

Food Insecurity

- 1 in 5 Black and Latino adults (unknown number of children)
- According to the Urban Institute, one in four families with children ages 6-18 reported living in food-insecure households in September 2020.



CHILDREN/ADOLESCENTS IN THE PANDEMIC

Substance Use Disorders

- Parental Substance Use
- Adolescent Substance Use
 - Alcohol and nicotine use more common
 - Relative increase in use of nicotine products and prescription misuse found in the first NIDA survey after the pandemic compared to information before the pandemic.



CHILDREN/ADOLESCENTS IN THE PANDEMIC

Did child abuse increase during the pandemic?

- JAMA Pediatrics (Dec 2021) reports that there is no data to prove an increase.
- The total number of child abuse reports to state child welfare agencies decreased to close 70% during the pandemic.
- They feel that the decreased reporting by closed schools does not account for such a large difference.

Emergency department visits also declined.

- Did the fear of going to the ED for medical attention account for this high number?

Difficult to tell what accounts for the numbers

- Study authors suggest that we may be overlooking that family support systems could have been protective as well.

CHILDREN/ADOLESCENTS IN THE PANDEMIC

Another study from Oct 2021, a systemic rapid review, showed mixed results:

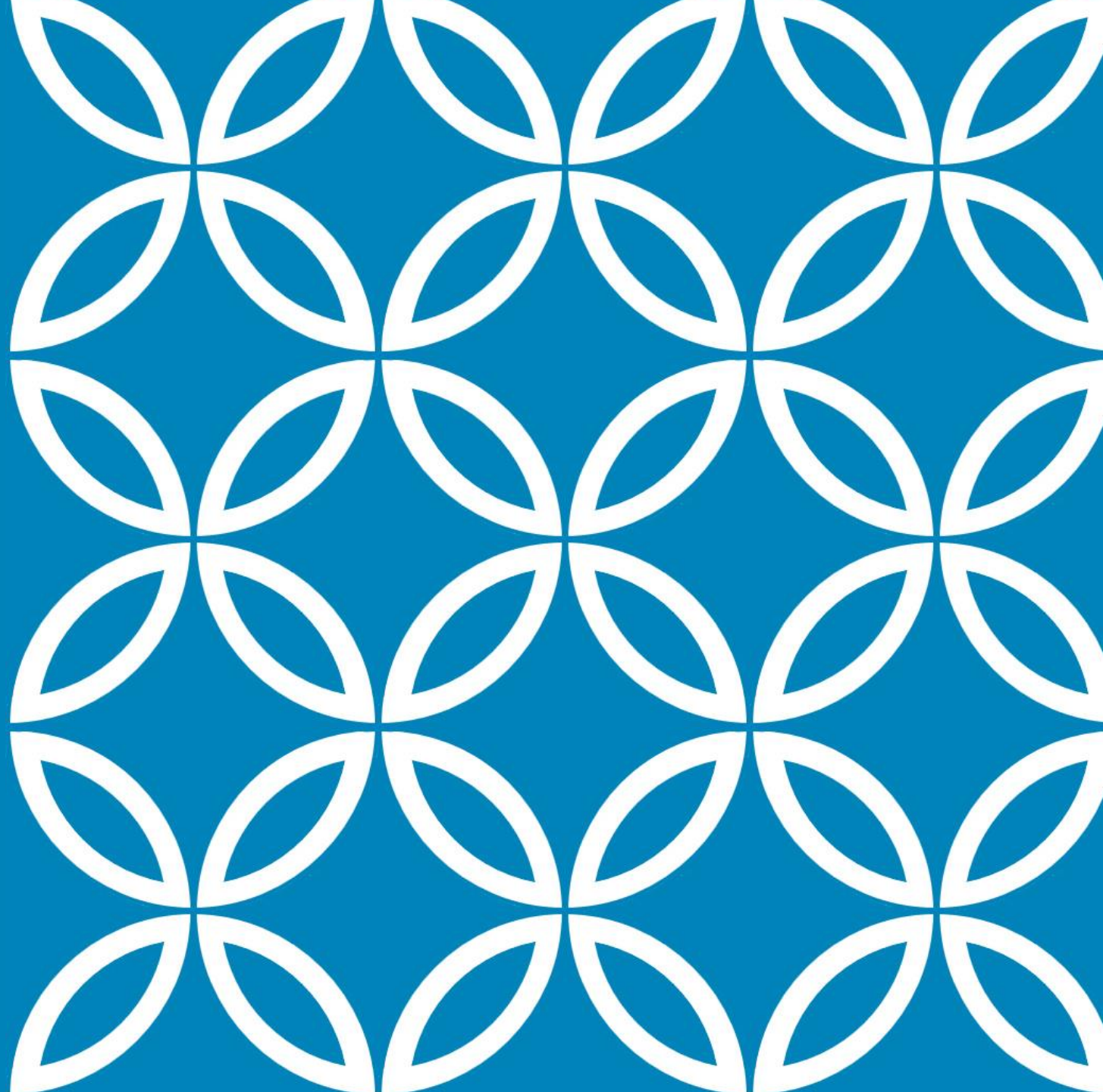
- Findings of the included articles are mixed; 5 articles documented an increase in child maltreatment, 6 articles documented a decrease, and 1 study found no significant difference in child maltreatment rates
- Of the included articles, rates of child maltreatment reports decreased while hospital cases of child maltreatment increased, calling the accuracy of reporting during the COVID-19 pandemic into question

Are you still watching "2020"?

Continue watching

No, take me to "2021"

WHAT HAS ALREADY
BEEN DONE?



RESPONSE TO THE CHILD MENTAL HEALTH CRISIS

State of Emergency of Children's
Mental Health

The American Rescue Plan Act
(ARPA)

COVID-19 Mental Health Research
Act

Families First Coronavirus Response
Act/P-EBT

Build Back Better

STATE OF EMERGENCY OF CHILDREN'S MENTAL HEALTH

American Academy
of Pediatrics



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AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health

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A declaration from the American Academy of Pediatrics, American Academy of Child and Adolescent Psychiatry and Children's Hospital Association:

As health professionals dedicated to the care of children and adolescents, we have witnessed soaring rates of mental health challenges among children, adolescents, and their families over the course of the COVID-19 pandemic, exacerbating the situation that existed prior to the pandemic. Children and families across our country have experienced enormous adversity and disruption. The inequities that result from structural racism have contributed to disproportionate impacts on children from communities of color.

This worsening crisis in child and adolescent mental health is inextricably tied to the stress brought on by COVID-19 and the ongoing struggle for racial justice and represents an acceleration of trends observed prior to 2020. Rates of childhood mental health concerns and suicide rose steadily between 2010 and 2020 and by 2018 suicide was the second leading



STATE OF EMERGENCY OF CHILDREN'S MENTAL HEALTH

Calls for:

Increased federal funding

Increased access to telemedicine

Effective models of school-based mental health care

Effective models of integrated care

Suicide prevention programs

Increased access to stabilization programs and community-based response teams

Funding for trauma-informed care services

Strategies to recruit underrepresented populations into the mental health professions + attention to well-being of current providers

Advance policies that enforce parity laws

THE AMERICAN RESCUE PLAN ACT (ARPA)

Increase the value of Supplemental Nutrition Assistance Program (SNAP) benefit by 15% through Sept 2021

Increase the Child Tax Credit from \$2000 to \$3000 per child

Additional Tax Credit for expenses for children under age 13

Distribute emergency funding to states which states can use towards mental health

- States can use for school-based mental health services, increasing providers, trainings, etc

AMERICAN
RESCUE PLAN

The American Rescue Plan

The COVID-19 pandemic and the corresponding economic crisis have undermined the health and economic wellbeing of American workers. Millions of Americans, many of whom are people of color, immigrants, and low-wage workers, continue to put their lives on the line every day to keep the country functioning through the pandemic. And more than 9.5 million workers have lost their jobs in the wake of COVID-19, with 4 million out of work for half a year or longer. Without additional government assistance, the economic and public health crises could drag on and our national vaccination program will be hobbled at a critical moment.

FEDERAL RESPONSE

COVID-19 Mental Health Research Act

- Bill introduced in the Senate in March 2021 that would authorize \$100 million per year for 5 years to NIMH to fund targeted research on the mental health consequences of the coronavirus pandemic
- No updates on this

A BILL

To direct the Secretary of Health and Human Services, acting through the Director of the National Institute of Mental Health, to conduct or support research on the mental health consequences of SARS-CoV-2 or COVID-19, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “COVID-19 Mental Health Research Act”.

SEC. 2. RESEARCH ON THE MENTAL HEALTH IMPACT OF COVID-19.

(a) **IN GENERAL.**—The Secretary of Health and Human Services (in this section referred to as the “Secretary”), acting through the Director of the National Institute of Mental Health, shall conduct or support research on the mental health consequences of SARS-CoV-2 or COVID-19.

(b) **USE OF FUNDS.**—Research under subsection (a) may include—

(1) research on the mental health impact of SARS-CoV-2 or COVID-19 on health care providers, including—

(A) traumatic stress;

(B) psychological distress;

(C) psychiatric disorders; and

(D) longer-term stress, including burnout;

(2) research on the impact of SARS-CoV-2 or COVID-19 stressors on mental health over time;

(3) research to strengthen the mental health response to SARS-CoV-2 or COVID-19, including adapting to and maintaining or providing additional services for new or increasing mental health needs;

(4) research on the reach, efficiency, effectiveness, and quality of digital mental health interventions;

(5) research on the effectiveness of strategies for implementation and delivery of evidence-based mental health interventions and services for underserved populations.

PANDEMIC ELECTRONIC BENEFIT TRANSFER — P-EBT

Extension of the Families First
Coronavirus Response Act of 2020

Food assistance program that helps families with children who are unable to access free or reduced-price meals at school when they are not physically present because of COVID.



BUILD BACK BETTER

Promises:

Universal and free preschool for all 3-4 year olds

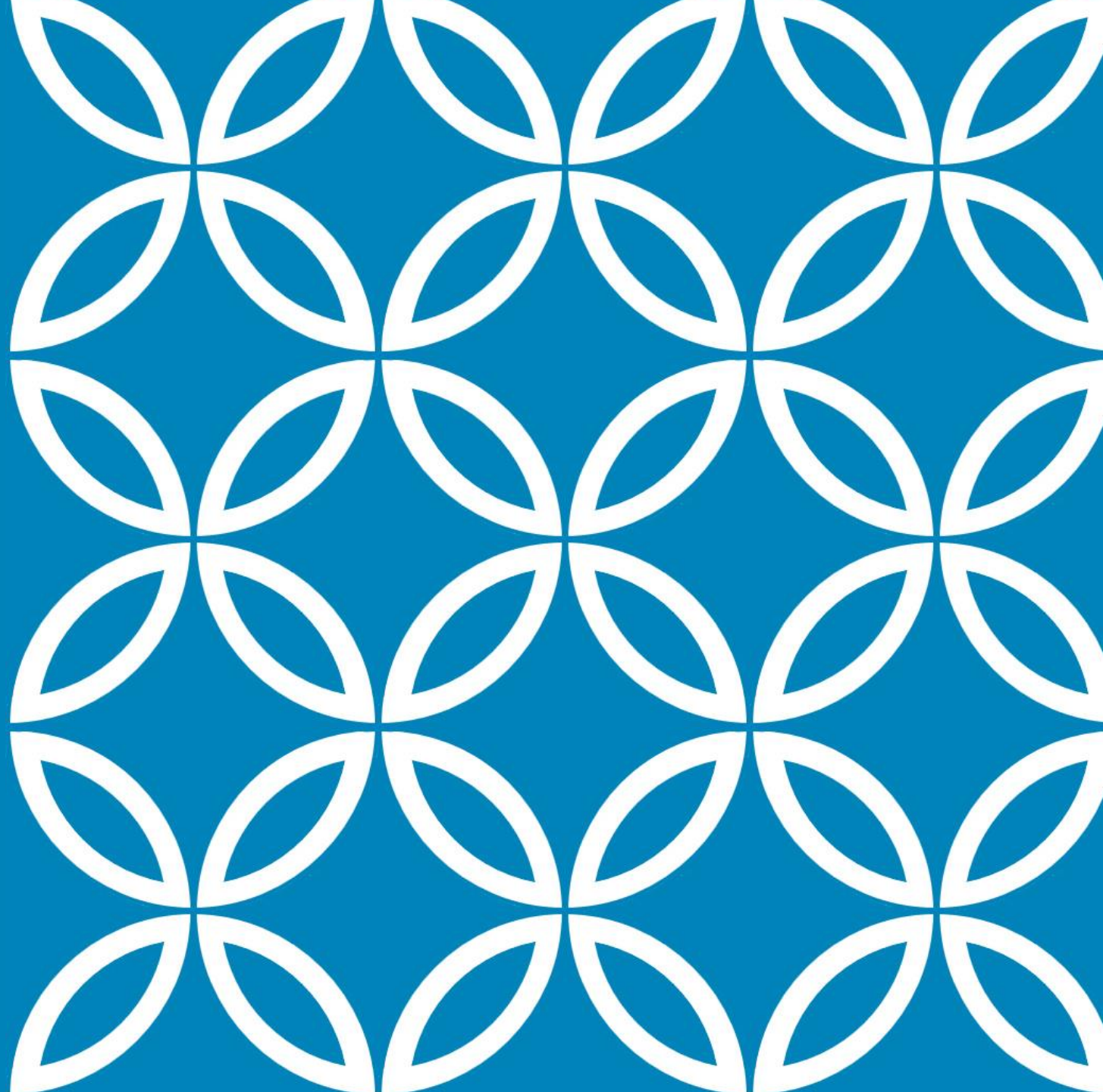
Extends ARPAs child credit tax

Reduce prescription drug costs

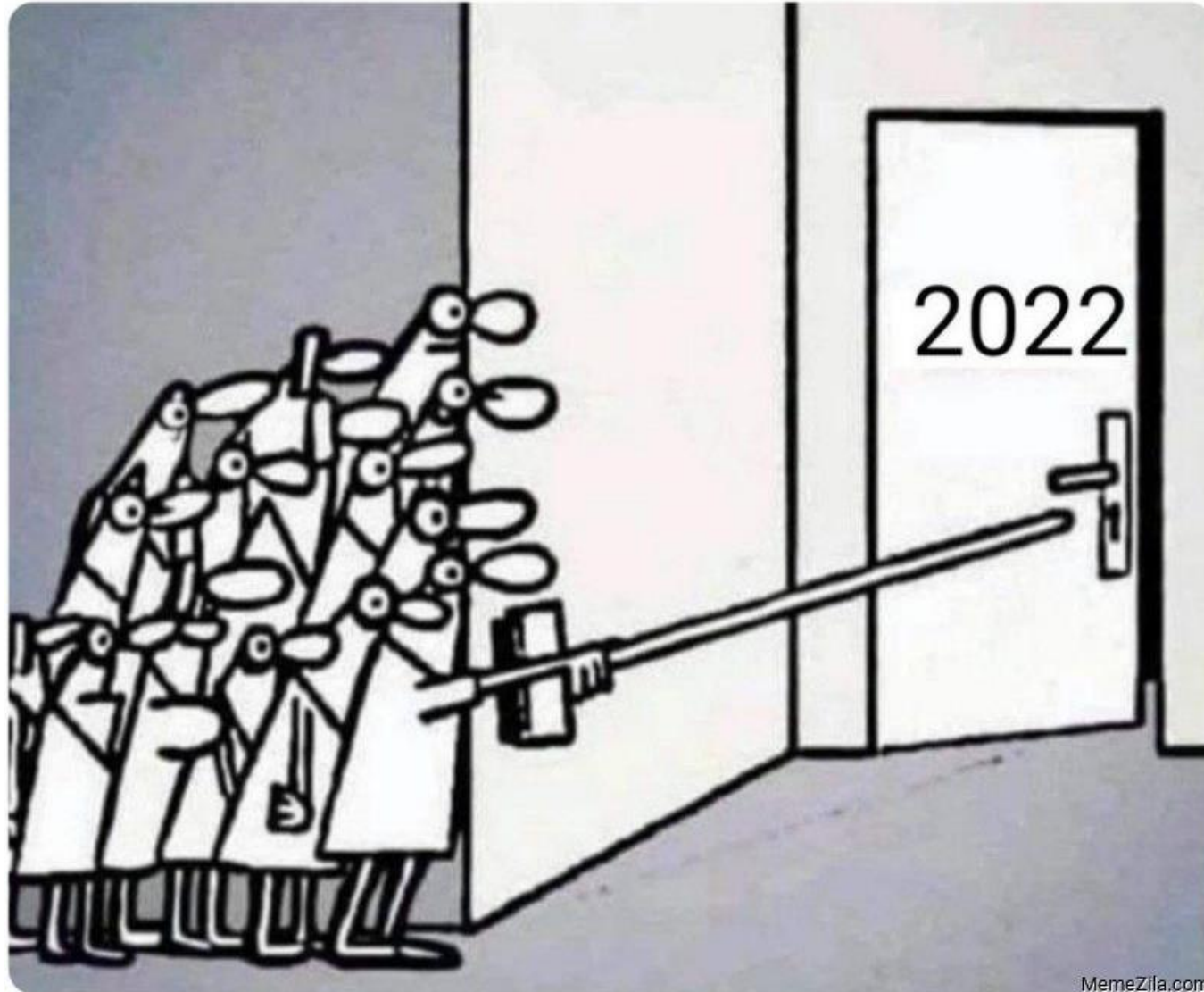
Expands insurance coverage and reduce premiums



LOOKING AHEAD



Apparently it will be 2020 too



LOOKING AHEAD

Access to Care

- Services – school-based mental health centers, community-based teams, emergency services, increasing number of beds for hospital and step-down programs, increasing access to other specialty mental health programs
- Providers – fund training of/recruitment of diverse mental health professional to educational programs, hire more mental health professionals in school
- Insurance – federal plans for prescription benefits, premiums, etc
- Telehealth – reduces barriers related to transportation, geographic shortage of providers, helps specialists like child psychiatrists to provide consultation to teams/staff
- Integrated Care – access to mental health providers via the primary care/medical setting

LOOKING AHEAD

Health Considerations

- Risk related to COVID infection
- Accessibility of vaccine currently restricted by age

Grief/Loss

- Re-frame experiences during the pandemic in terms of loss
- Individual/group therapy
- Family therapy
- Families also adjusting to deaths of loved ones

Trauma

- Experiences held in the body as trauma
 - Trauma-informed counseling
 - Sensory interventions guided by a professional
 - Movement-based activities
 - Collaborative activities
 - Forming social connections and building supports

LOOKING AHEAD

Substance Use

- Conduct regular screenings in appointments
- Provide education

Suicide Prevention

- Zero Suicide – framework with goal of preventing death by suicide for individuals under the care of the health and behavioral health system
- <https://zerosuicide.edc.org/>

Family changes

- Economic
- Parent employment
 - Working from home
 - Job loss/transitions
- Moves
 - Some families moved to a different location during the pandemic

LOOKING AHEAD

Post-Traumatic Growth?

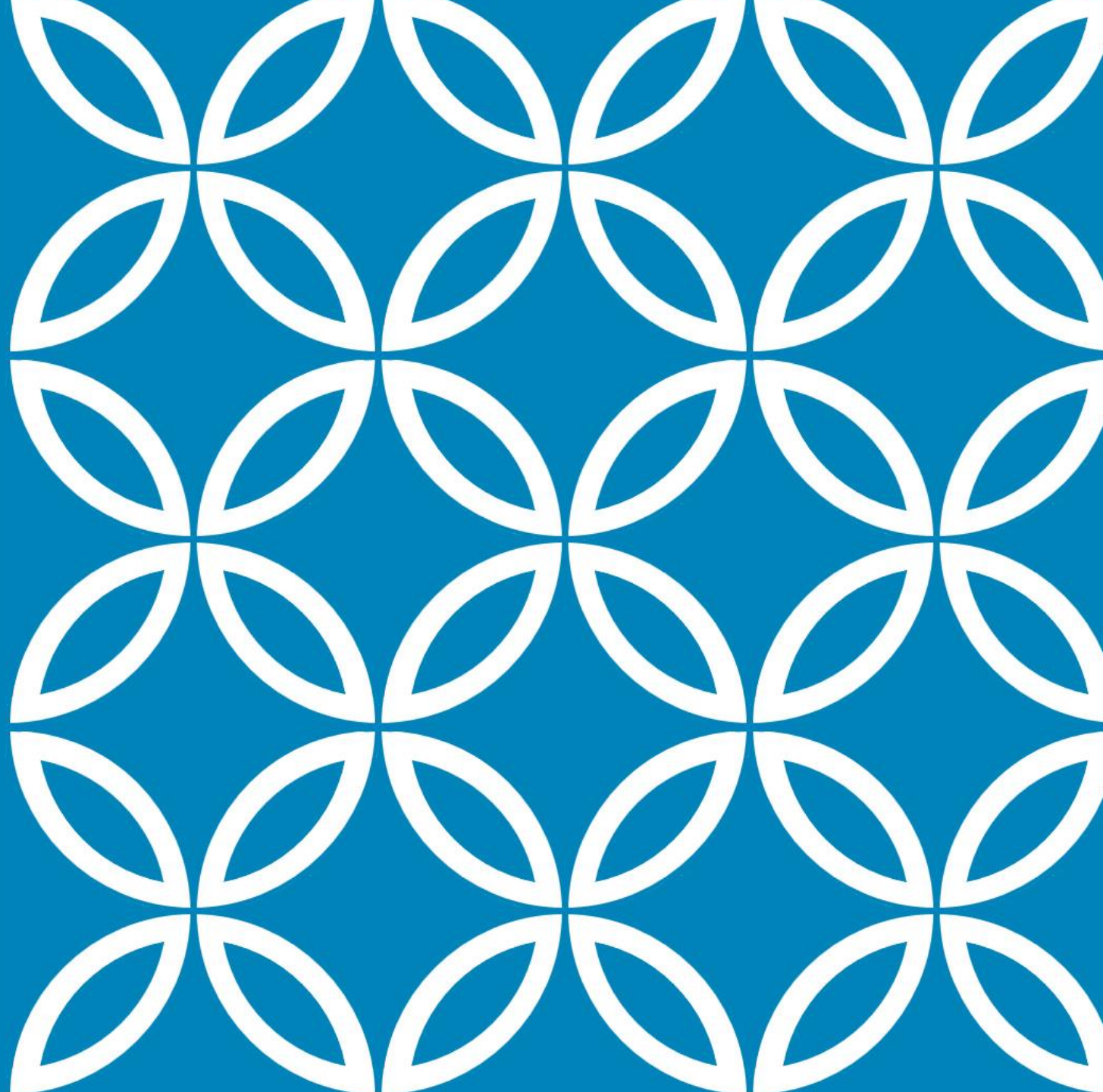
- Phenomenon of personal transformation after a traumatic experience that affects five domains:
 - New Possibilities
 - Relating to Others
 - Personal Strength
 - Spiritual Change
 - Appreciation of Life

Supporting Racial Equity

- The experience of minoritized populations during the pandemic was compounded by racial disparities – this affected multiple racial groups
- Open dialogue, frequent reassessment of systems, policies, language, and organizational culture

PANDEMIC POSITIVES

What are you grateful for?



PANDEMIC POSITIVES...WHAT ARE YOU GRATEFUL FOR? (PUT YOUR ANSWER IN THE CHAT BOX)

Here are some of mine...



Talk show hosts recording from home gave an interesting perspective



What it means to be anti-racist

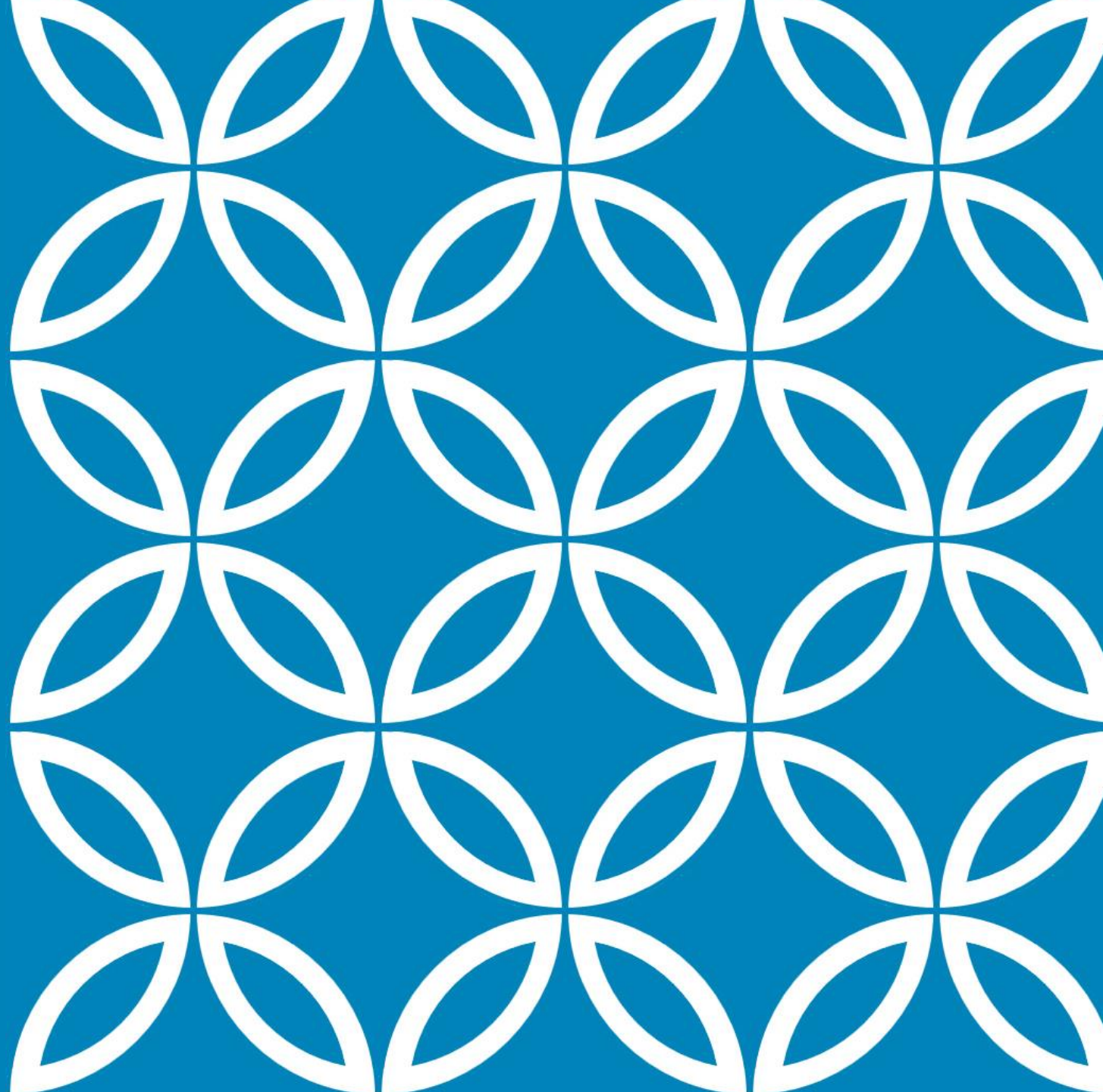
It's not enough to be "not racist," experts and educators say.

Though borne out of tragedy, there was transformation in the dialogue regarding race in America.



Hybrid virtual and in-person work

QUESTIONS?



RESOURCES

COVID-19 Parental Resources Kit:

<https://www.cdc.gov/mentalhealth/stress-coping/parental-resources/index.html>

Project Bread - <https://www.projectbread.org/hunger-by-the-numbers>

Grief Programs

- Good Grief Program, Boston Medical Center - <https://www.bmc.org/programs/good-grief-program>
- Children's Room – Arlington, MA
- Jeff's Place – Framingham, MA
- Louis D Brown Peace Institute – Boston, MA