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Emerging evidence

Coronavirus and children and
young people's mental health

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Brief summary

Background

There are concerns about the potential impact of the coronavirus pandemic on children's mental health. Researchers are trying to use existing evidence to understand what this potential impact is and how best to support young people at this time, but the conditions are so unique that it can be hard to find past research that feels relevant enough to the current context. We searched for evidence from around the world carried out during the current pandemic that might help us to begin to explore some specific questions:

1. What are the key mental health challenges for children and young people during the coronavirus pandemic?
2. Are there any particularly vulnerable groups?
3. What might help children and young people to manage these challenges?

This review (Issue 1) was carried out between January 1st 2020 and May 4th 2020 but given that this is a rapidly growing area of research, we will be providing regular updates through future issues to ensure we share the evidence with as wide an audience as possible in a timely fashion.

Key Findings

Key mental health challenges for children and young people during the pandemic:

- The pandemic can influence many different aspects of mental health.
- In addition to impact being seen in the short-term, this pandemic may have longer-term consequences for mental health.
- Higher than usual levels of stress, anxiety, depressive symptoms and fear have been found in children and young people.
- Mental health challenges during the pandemic have been attributed to several events or conditions including school closures, increased time away from peers, health concerns, and media over-exposure.

Vulnerable groups:

- The disruption to routine may be particularly challenging for young people with additional support needs such as Autism Spectrum Condition (ASC) and Attention Deficit Hyperactivity Disorder (ADHD).
- Existing mental health conditions can make some young people more vulnerable to the stay-at-home measures.
- Difficulties are likely to persist as adjusting back to school and uncertain futures pose further challenges.
- Ethnic minority groups may face stigma and/or find it harder to access support.
- Children in temporary or residential care are at greater risk of distress caused by sudden, relocation or difficult housing situations.
- Levels of domestic violence and reported child abuse have risen during school closures, further increasing mental health risks for these young people.

Support for children and young people's mental health and wellbeing:

- Parents can help children manage by promoting healthy habits such as sleeping well and daily exercise, recreating routines at home, and having clear and honest conversations about their child's worries.
- Small, daily acts can help promote health and emotional wellbeing in the home.
- Teachers play a vital role in care and advocacy of positive mental health.
- In terms of support for those with mental health conditions, the most effective support will be adaptable and responsive to the evolving stages of the pandemic, and will involve a collaborative network which includes families, education, social care and health.

We also reflect on positive findings about opportunities to build stronger family bonds and relationships, the vigorous response of professionals, and the growing pool of shared learning and resources as caring communities mobilise to support young people's mental health.

Background

The current outbreak of the coronavirus has spread rapidly across the world and while it seems children and young people may be less adversely affected physically by contracting the virus,¹ they are vulnerable to the psychological fallout of this period of lockdown and uncertainty.

Educators, practitioners, families and young people themselves have been raising concerns about the mental health impact of the pandemic on children and young people, and researchers across the world have started to investigate what the psychological impact might be. We have therefore begun rapid reviews of what we are learning about the impact of the coronavirus on children and young people's mental health.

The aim of our rapid reviews is to provide accessible summaries about the key mental health challenges for children and young people during the pandemic, and how parents, carers, and professionals can help them to manage and minimise these challenges. These summaries will be published regularly. This is the first of these reviews and covers evidence found from 1st January 2020 to 4th May 2020.

Methods

We were interested in evidence that answered three key questions:

1. What are the key mental health challenges for children and young people during the coronavirus pandemic?
2. Are there any particularly vulnerable groups?
3. What might help children and young people to manage these challenges?

To answer these questions, we carried out a rapid review of research published in academic articles or 'grey literature'ⁱ since January 2020.

As this was a rapid search, a small number of search terms were used that were about coronavirus, children and young people, and mental health. We limited searches to reports available in the existing literature on the topic, and English-language only articles were chosen for efficiency. No evidence was quality assessed and no studies were excluded on the basis of quality.



i. Grey literature refers to research that is either unpublished or has been published in non-commercial form. For example, government reports, policy statements and issues papers.

Findings

What are the key mental health challenges for children and young people during the coronavirus pandemic?

The coronavirus presents an unprecedented challenge, with no parallel or comparison in most of our lifetimes. The immediate threat is the direct risk to health posed by the virus itself, but there are also a range of complex challenges associated with the measures put in place to limit transmission and protect health.

Governments worldwide have introduced emergency measures to minimise the spread of the coronavirus. These include physical distancing, school and workplace closures and restrictions in public activities. With prolonged school closure and home confinement during the outbreak of the coronavirus, there is growing concern over the mental health and wellbeing of children and young people.² What may have started as immediate challenges are now, several weeks in, culminating into chronic stressors. Such stressors include, frustration and boredom, uncertainty, lack of face-to-face contact with peers and teachers, lack of personal space at home and family financial loss.^{3, 2, 4}

The evidence suggests that there will be considerable psychological impact, which is why even early on in the crisisⁱⁱ it is being referred to as a "mass trauma".⁶ Research from across different timepoints of the outbreak show how these stressors have continued to build, leading to mental health challenges for children and young people.

Adolescents in China reported psychological symptoms of stress, anxiety and depression two weeks after the outbreak was declared a health emergency (January 2020).⁵ Of the 130 young people (14-20 years old) involved in this study, 14.4% showed signs of post-traumatic stress (PTSD), and it was these individuals or those who had general difficulty with coping that were particularly affected.⁵ A month later, another study showed that mental health challenges had sustained, with 22.6% of sampled students showing symptoms of depression and 18.9% showing anxiety symptoms.⁷ Similar levels of anxiety have since been found in other studies in China.³ While there isn't yet evidence for

longer term effects, findings from the 2003 SARS outbreak lead researchers to expect that mental health challenges will increase as the pandemic continues.^{5, 7, 2, 4}

Parents, children and young people are currently living with increased stress and fear,^{8, 9, 10} which reduces their capacity for tolerance and long-term thinking.¹¹ These characteristics, which normally help protect against mental health difficulties, are further affected by lockdown measures.¹¹ This combination may aggravate mental health challenges for children and young people.²



ii. During the first-level response in China at the beginning of the outbreak when concerns over human-to-human transmission were just beginning to mount.

Young people who worry a lot about contracting the coronavirus show higher depressive symptoms.⁷ This has in part been attributed to the high level of media coverage of highly emotive, severe cases and the health risks of the virus.¹² While communication of the virus' risks to the public is appropriate,² excessive focus on risk information can be harmful.⁶ Unlike previous social crises, the current outbreak has happened at a time of peak social media and smartphone usage, with information rapidly and readily available across the world. This means that the current pandemic has received unprecedented levels of media coverage and public exposure.^{6,11}

Adolescents, and increasingly younger children, are the biggest consumers of social media.¹³ This may place them in a particularly vulnerable position, as repeated exposure to the highly emotive and anticipatory virus news can be psychologically harmful.^{6,14} Media over-exposure can cause an increase in health anxiety to the extent that it may become disproportionate to actual need.¹² For example, excessive media coverage of panic buying may lead to the worry that there is an actual scarcity of resources.

However, others are faced with the immediate concerns of having loved ones affected by the virus, which has been a key source of worry among young people³ and parents and carers.¹⁵ Young people facing bereavement or separation from parents and carers because of the virus, unsurprisingly, tend to show signs of substantial grief and fear.^{16,17} The impact of lockdown conditions on finances and parental employment has also been a major source of worry.^{16,2}

Previous research on the effects of quarantine and isolation have led some researchers to voice concerns about children directly and indirectly exposed to the coronavirus developing mental health conditions such as acute stress disorder, adjustment disorder, and post-traumatic stress disorder (PTSD).^{18,6} Consistent with these earlier findings, a significant proportion of children who have contracted the coronavirus have subsequently experienced symptoms of PTSD.¹⁷

1.27 billion

Estimated number of children worldwide who are currently out of school or childcare¹⁹

72%

Percentage of world's pupil/student population currently out of school or childcare¹⁹

At the time of writing, it is estimated 1.27 billion children worldwide are out of school or childcare,¹⁹ and that closures have impacted over 72% of the world's pupil/student population.¹⁹ While these closures are vital public safety measures, they have caused disruption to the lives of students and their families, who are now tasked with home-schooling as well as childcare. While most children and young people will manage under these conditions, there is concern about the consequences this will continue to have for some children and young people's physical and mental health.²⁰

Key school events can act as anchors in a child's world, and the current uncertainty and disruption in relation to these can be a great source of worry. For example, not knowing when or if exams will take place and not having graduation ceremonies to mark the end of a school year.¹⁶ The reduction in outdoor activities has been linked to increases in depressive symptoms,⁷ stress and anxiety.² Extended home confinement is also likely to exacerbate sleep problems in young people,^{2,21} perhaps a result of decreased physical activity, disruption to daily schedules usually provided by school, and feelings of loneliness.^{22,14}



Are there any particularly vulnerable groups?

Young people with existing mental health conditions may experience more distress during the pandemic.²⁰ A YoungMinds survey reported that 83% of young people with diagnosed mental health conditions said the pandemic made their conditions worse.¹⁶ For example, children with depression may find it difficult to complete schoolwork, to find meaningful activities, and may experience considerable difficulties readjusting once school resumes.¹⁶ Researchers suggest that this might be because of the combined effects of a public health crisis, social isolation and economic pressures.^{20, 11} Furthermore, the stability provided by schools has been taken away.^{11, 16} As well as academic and social education, schools provide routine (which ordinarily acts as a valuable coping mechanism),^{23, 16} food security for some children, and the delivery of healthcare in the form of school nurses and school counselling services. These wider school functions, particularly for these more vulnerable groups, are often overlooked.²⁰

The disruption to normal routines may be particularly felt by children with additional support needs. For example, young people with Autism Spectrum Condition (ASC) may have had regular contact with special therapists or services and the framework of school. These structures will either no

longer be in place or will be significantly disrupted.^{24, 25, 26} The withdrawal of this support may elevate stress levels, causing an increase in sensory difficulties or self-endangering behaviours (e.g., running away from home).^{24, 25} Although some video games offer opportunities to network with friends, there is a worry that for some children with ASC, uninterrupted access to video games and the internet whilst staying at home could become isolating.²⁵ Being able to support individualised communication needs might be particularly challenging if a child with ASC has to be hospitalised or quarantined because of the coronavirus.²⁵ Young people with ADHD may also experience high levels of distress during the pandemic⁴ which in turn could make ADHD symptoms more difficult to manage.^{7, 4}

Under normal conditions, children and young people in ethnic minority groups are more likely to receive mental health services solely from school settings, but they also suffer the most stigma when accessing community services. As such, they may find it particularly challenging to access support at this time.²⁰ Young people of Chinese ethnicity may be experiencing particular stigma during the pandemic, with studies reporting that media headlines in some countries may perpetuate stereotypes and prejudices about Chinese people in relation to this pandemic. These attitudes can result in experiences of alienation and discrimination, leading to worry, fear and stress.²⁸

Children in residential care or temporary accommodation may be at particular risk of mental health challenges as they may be forced to relocate or return to households without adequate supports as a result of the coronavirus.²⁹ Sudden unplanned relocation may increase health risks and cause significant emotional stress for these young people.²⁹

Children in unsafe home environments are also potentially at higher risk of multiple mental health problems, which is particularly concerning as reported rates of domestic violence and child abuse increase across the world.^{30, 16, 31}

Young people's dispositions can also play a role in how adversely affected they are by the current conditions. For example, those who struggle to feel hopeful or optimistic appear more susceptible to depressive symptoms than those who are able to feel at least some degree of optimism about the pandemic.⁷ Other research notes that young people who are normally very emotionally expressive or those with poor belief in their own capacities might be particularly affected.¹⁴



What might help children and young people to manage these challenges?

Despite the complex and far-reaching mental health challenges children and young people are currently facing, it is expected that most young people will navigate this period without any long-term difficulties. There are various supports that can be put in place to help children and young people to manage during this period, and this support can come from a range of sources.

The evidence in this section addresses a) how to support those experiencing worries, low mood and stress; b) how to support those who have significant mental health problems (either a pre-existing problem, or one that has emerged during the pandemic) in terms of at home support; and c) a joined-up approach to supporting children and young people.

a) How to support those experiencing worries, low mood and stressⁱⁱⁱ

With increased time being spent together in the family home at this time, parents and carers are perhaps the best placed to identify concerns and support the mental health of their children.¹⁷ Parents can look out for early warning signs of anxiety, stress and low mood, for example difficulty sleeping, excessive worrying and loss of appetite, and can take steps to address concerns if they arise.¹⁷

Supporting good sleeping habits in children can help reduce the mental health consequences of poor sleeping. This might involve encouraging children to sleep independently, home-based physical activity, maintaining a comfortable bedroom temperature (about 19 degrees) and lighting, as well as using repetitive reassurance for anxious sleepers and implementing no-screen time and winding-down activities before bed.²² Maintaining schedules and routines throughout the day can help promote positive mental health and sleep behaviour in young people.^{32, 22} For some, this may be taking a family run or doing an online exercise class.²⁶ Developing an activity schedule with a child, allowing them a choice of daily activities and when they happen, can help to build independence, provide a sense of control, and reduce anxiety.¹⁶

iii. The suggestions in this section are also applicable to those with more severe difficulties.

Sustaining contact with friends and family members during the period of isolation is important for children who are experiencing worries, low mood and stress. Social relationships are an important source of support for moderating stress³³ for those who may be feeling isolated.⁴ Encouraging children and young people to keep in touch (for example digitally and by phone) with friends and acquaintances they usually see in social settings can help foster a sense of normalcy and connection.¹²

Children are very perceptive of the world around them so it is important to use age appropriate information to help them understand the coronavirus and the huge changes to daily life happening as a result.^{2, 17, 23} Parents might take advantage of evidence-based resources such as storybooks targeted for primary school age children^{iv} and expert advice on topics such as managing children's worries about the coronavirus.^v Having clear, honest, direct, and emotion-focused conversations about issues relating to the pandemic could alleviate children's anxiety and avoid panic.^{2, 23} Honesty about some of the uncertainty and current challenges can help create a safe space to discuss difficult feelings and provide adults with an opportunity to offer more coherent explanations for issues that children might be struggling to understand.²³ It is also important to respect children's identity, personal space and individual abilities when finding ways to cope with the challenges of the current pandemic.²

Parents and carers should remember that even if some of their child's behaviours change during this time, most of this is a normal response to the changing world around them.²⁵ For both parents and carers and children of all backgrounds, it is helpful to remember that things will not stay this way forever.

b) How to support those who have a significant mental health problem (either pre-existing or emerging during the pandemic)

Other research focuses on advice and guidance that parents, particularly those of vulnerable groups such as those with ASCs, might find useful. While many of the strategies described above could be used to support children and young people who are feeling worried, low or stressed, evidence also suggests recommendations that may be particularly beneficial for those managing mental health conditions at this time. Evidence from behavioural research

has identified key strategies which can help these families in lockdown.³²

Maintaining a predictable routine or schedule is particularly helpful for children and young people with ASC.^{25, 17} To minimise excessive video game or internet use for children with or without ASC, establishing a rule where the video game or device is shared with the whole family may help prevent it from becoming an isolating activity.²⁵ Subdividing activities at home, for example allocating different rooms in the house a different activity, may help to rebuild a sense of structure and could involve the whole family.²⁵ One study suggested framing positive behaviours as 'superpowers'.³² Every family has their own 'superpowers,' in the form of small heroic actions which can help parents and children thrive, even in lockdown. One example is showing a child that pausing before reacting can be a small heroic act which might help to manage conflicts at home.³² Behavioural approaches can be used by any family and take into account the specific skill sets that each family possesses.

Maintaining contact, for instance over the phone, with family members from whom children are currently separated¹⁷ is particularly important for many vulnerable children. This includes those whose parents are unwell, children in care, and those whose housing situation has been disrupted or who are being relocated because their home environment is unsafe. Supporting the early identification of any warning signs or worrying behaviour in these young people, for example changes in appetite, increased irritability and difficulty sleeping, is key. Parents and carers may wish to consider increasing the support around these children and call upon professional guidance if they are concerned about a child.¹⁷

It is a good idea for parents and carers to familiarise themselves with the kinds of support available to them, as well as support that children and young people can access directly. These types of support include community CAMHS outreach services and crisis intervention, local charities and helplines such as [Childline](#) and the [Samaritans](#), and any existing contacts within a regular service the child may have been accessing prior to the pandemic.¹⁸

iv. 'My Hero is You'; a result of an international collaboration of mental health experts³⁸ and 'Coronavirus: A book for children'.³⁹

v. Anna Freud Centre support for parents: <https://www.annafreud.org/coronavirus-support/support-for-parents-and-carers/>



c) A joined-up approach to supporting children and young people

Teachers and school staff play a vital role in education about the coronavirus,²⁸ identifying any early mental health concerns,¹⁷ and in care and advocacy of positive mental health.²⁸ Schools might also expand their remote counselling services by collaborating with local counselling training clinics to reduce waiting times and support the mental health response for children and young people.^{28, 20} Maintaining contact with school, classmates and teachers during this time will support mental health and wellbeing and contribute to child learning.^{25, 2} It might be helpful to promote a health-conscious learning schedule or to integrate health promotion materials into the curriculum, to check workloads so as not to overburden students when schools return.²

From a broader perspective, the wider community network around the child will be critical in supporting the mental health of children and young people through this ever-evolving public health situation.^{3, 23} Where possible, regular therapies that were attended by children and young people should be continued in an online format^{27, 25, 34} and different ways of providing mental health support should be made available irrespective of financial barriers.³⁵ Online therapy sessions may also be important to help parents and carers manage their stress at this time.^{20, 2} Having an allocated space to share concerns, receive guidance and express their own

feelings is likely to be a helpful outlet, especially now when parenting is a 24/7 at-home occupation for many, and the support of family, school and the community is not physically present. Virtual mental health services are found to be similarly effective as face-to-face services.²⁰ Rapid assessment and referral systems to support the timely identification of mental health concerns should be established in primary and outreach services.^{17, 35}

Support for children and young people with additional support needs must be maintained as far as possible, including access to regular medication^{27, 29} and the provision of alternative supports where available, for example telephone or e-counselling.²⁷

To enhance the wider support network around the child, psychological services should be adaptable and responsive to the evolving stages of the pandemic.⁴ This should draw upon a range of expertise and build collaborative networks including parents, clinicians, researchers, volunteers, educators and social workers^{17, 20, 2, 33, 4} who might form a 'social safety net' for particularly vulnerable children and their families.² These networks might also focus additional efforts on children and young people who may be orphaned, relocated or homeless as a result of the pandemic²⁹ and looked after children in residential institutions, the safeguarding of whom is paramount.

Positive steps towards supporting children and young people's mental health

A positive final piece of learning from this review is that times of hardship can also provide opportunities to build stronger family bonds² and relationships with our children and young people.¹¹ These will be vital now as we move through the next stages of the pandemic and into the uncertain future. There is a growing online international library of resources (a few of which are listed below) to help parents and carers build positive relationships, manage challenging behaviour and cope with parenting stress,¹¹ and there has been a vigorous response from the psychiatric health care community.^{33, 36} With help and guidance from the community and from the existing, and commendable, skills families possess, together we can respond, care for and protect the mental health needs of children and young people.

Resources

Anna Freud Centre resources: <https://www.annafreud.org/coronavirus-support/>

NSPCC resources: <https://www.nspcc.org.uk/keeping-children-safe/coronavirus-advice-support-children-families-parents/>

WHO Healthy Parenting resources: <https://www.who.int/news-room/campaigns/connecting-the-world-to-combat-coronavirus/healthyathome/healthyathome---healthy-parenting>

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The Evidence Based Practice Unit (EBPU) is a child and youth mental health research and innovation unit based at UCL Faculty of Brain Sciences and the Anna Freud Centre. Founded in 2006, this collaboration bridges cutting-edge research and innovative practice in children's mental health. We conduct research, develop tools, provide training, evaluate interventions and disseminate evidence across four themes: Risk | Resilience | Change | Choice

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The Child Outcomes Research Consortium (CORC) is the UK's leading membership organisation that collects and uses evidence to enable more effective child-centred support, services and systems to improve children and young people's mental health and wellbeing. We have over 15 years' experience in bringing together theoretical knowledge on outcome measurement and relating this to the insights and expertise developed by practitioners working with children and young people on the ground.

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