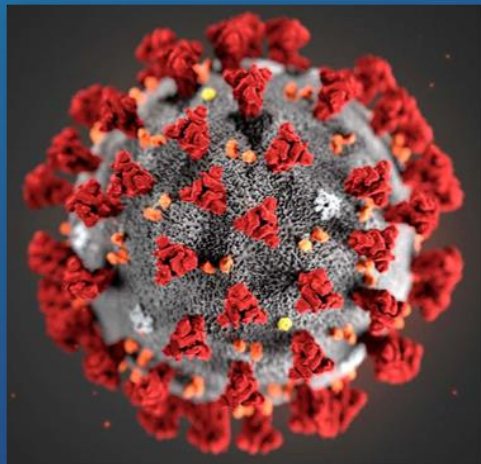


The Mental Health Impacts of COVID on Children, Youth, Families...and Us

Gillian Abbotts Memorial Lecture
Pediatric Grand Rounds

V. Fan Tait, MD, FAAP
Chief Medical Officer

February 18, 2021



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CONFLICT OF INTEREST STATEMENT

No conflict of interest to disclose



OBJECTIVES

- Describe stages of recovery from disasters/pandemics.
- Understand the impact of the pandemic on the mental health and wellbeing of children, youth, families *and* physicians.
- Identify strategies and resources for intervention.



COVID: ONE YEAR LATER...

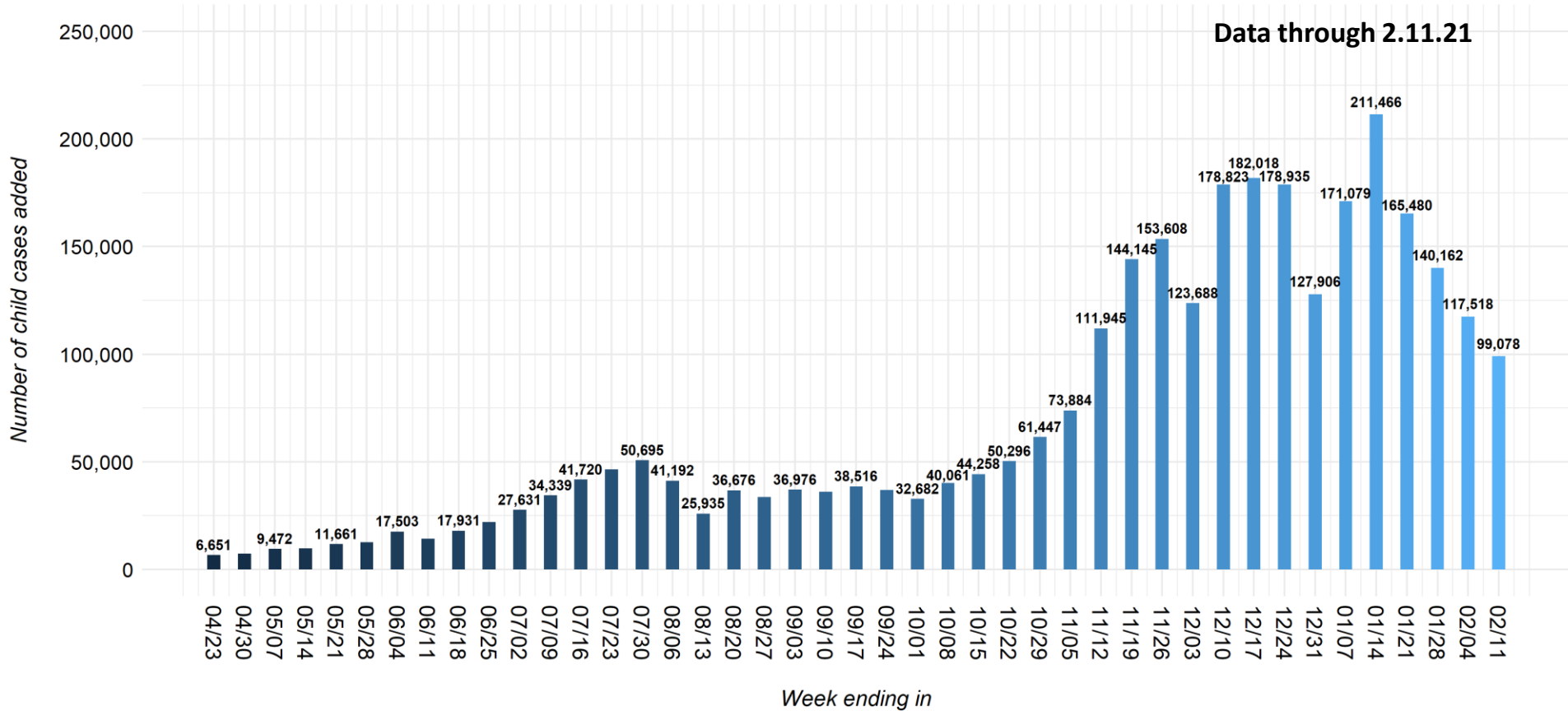
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United States: Number of Child COVID-19 Cases Added in Past Week

Data through 2.11.21



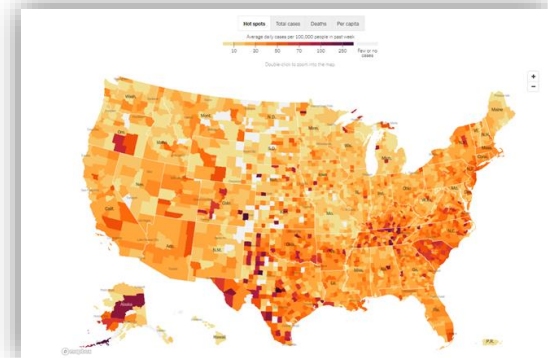
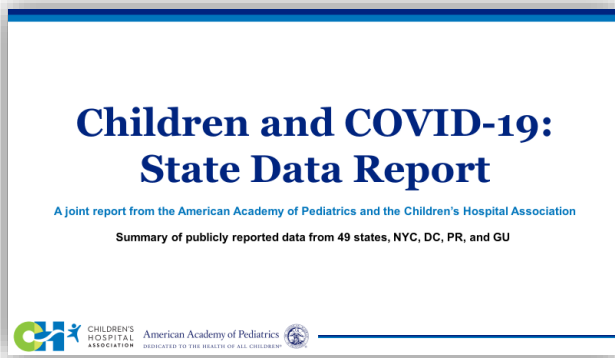
Source: AAP analysis of publicly available data from state/local health departments

*Note 4 states changed definition of child cases: AL as of 8/13, HI as of 8/27, RI as of 9/10, MO as of 10/1 TX reported age for only a small proportion of total cases each week (eg, 3-20%)

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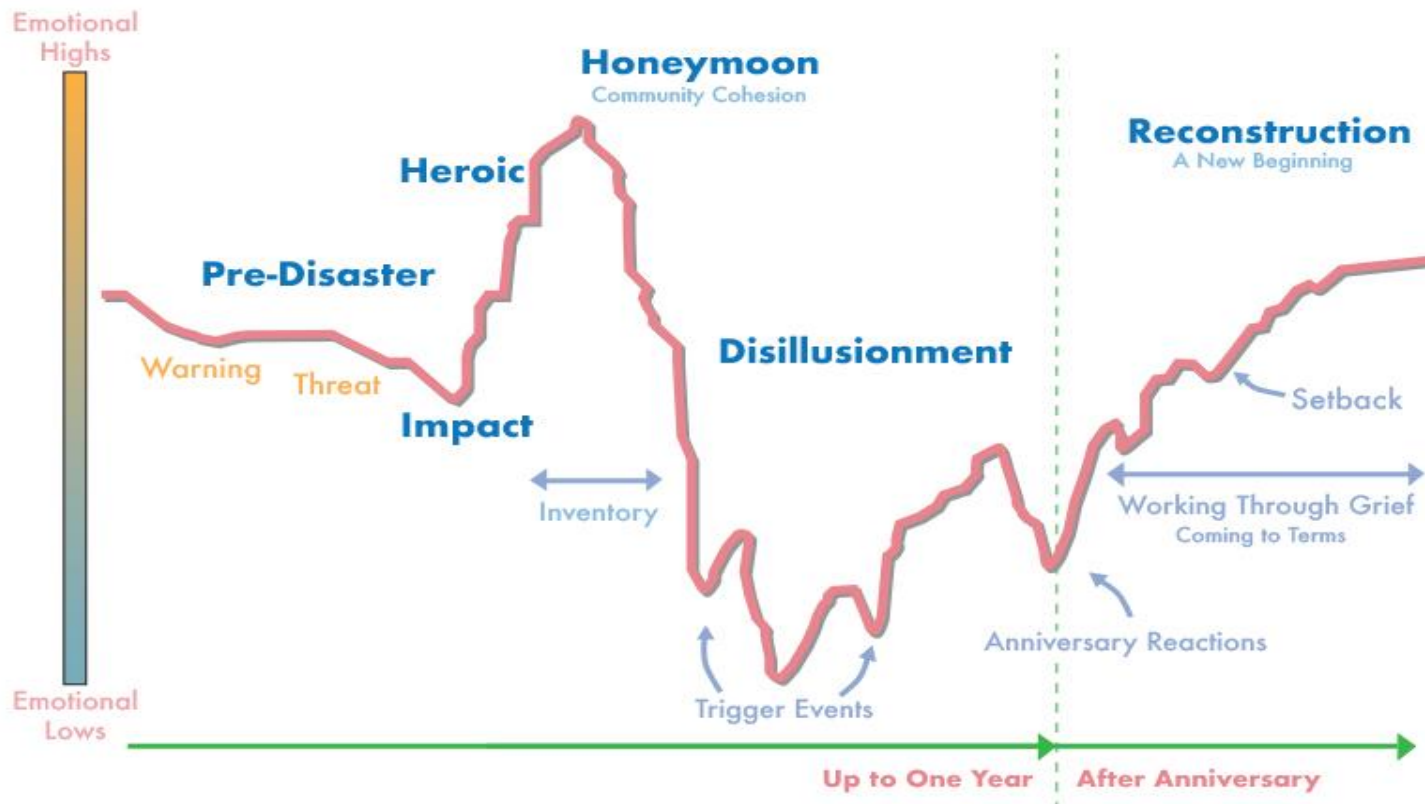


NYT 2.14.21 all ages

As of 2/11/21 –3,033,370 cumulative child COVID-19 cases

- **An increase of about 99,000 new cases in the past week**
- **An increase of about 216,600 new cases in the past 2 weeks**
- **At this time, it appears that severe illness due to COVID-19 remains rare among children**

MENTAL HEALTH IN THE CONTEXT OF COVID-19



Adapted from Zunin & Myers as cited in DeWolfe, D. J., 2000. [Training manual for mental health and human service workers in major disasters](#) (2nd ed., HHS Publication No. ADM 90-538). Rockville, MD: U.S. DHHS, SAMHSA, Center for Mental Health Services. Available at: <https://www.samhsa.gov/dtac/recovering-disasters/phases-disaster>



A Shared Vision- Optimal Health and Wellbeing for all Children, Adolescents and Young Adults

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The Basics of Early Childhood Brain Development



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Early Childhood Development— A Conceptual Model

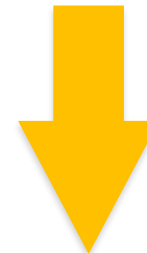
Healthy Developmental Trajectory



- Supportive Relationships
- Stimulating Experiences
- Health-Promoting Environments



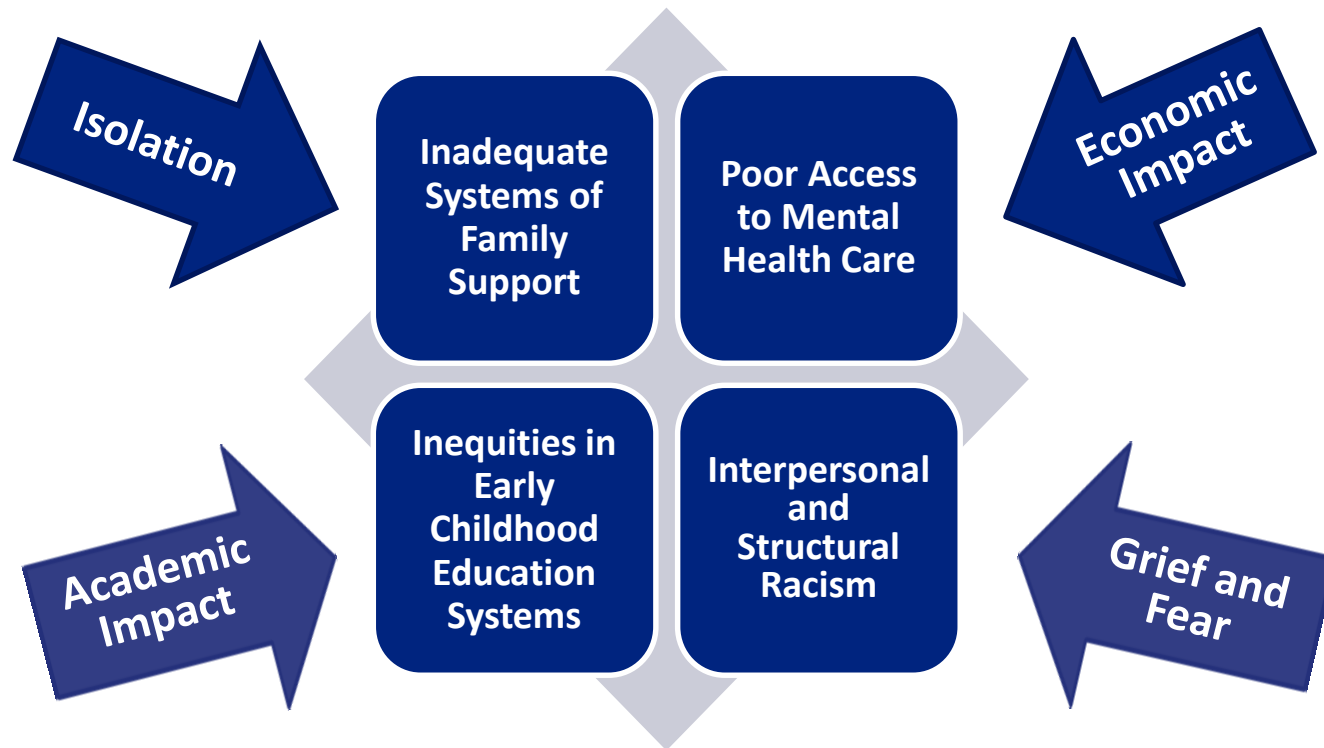
Significant Adversity and Toxic Stress



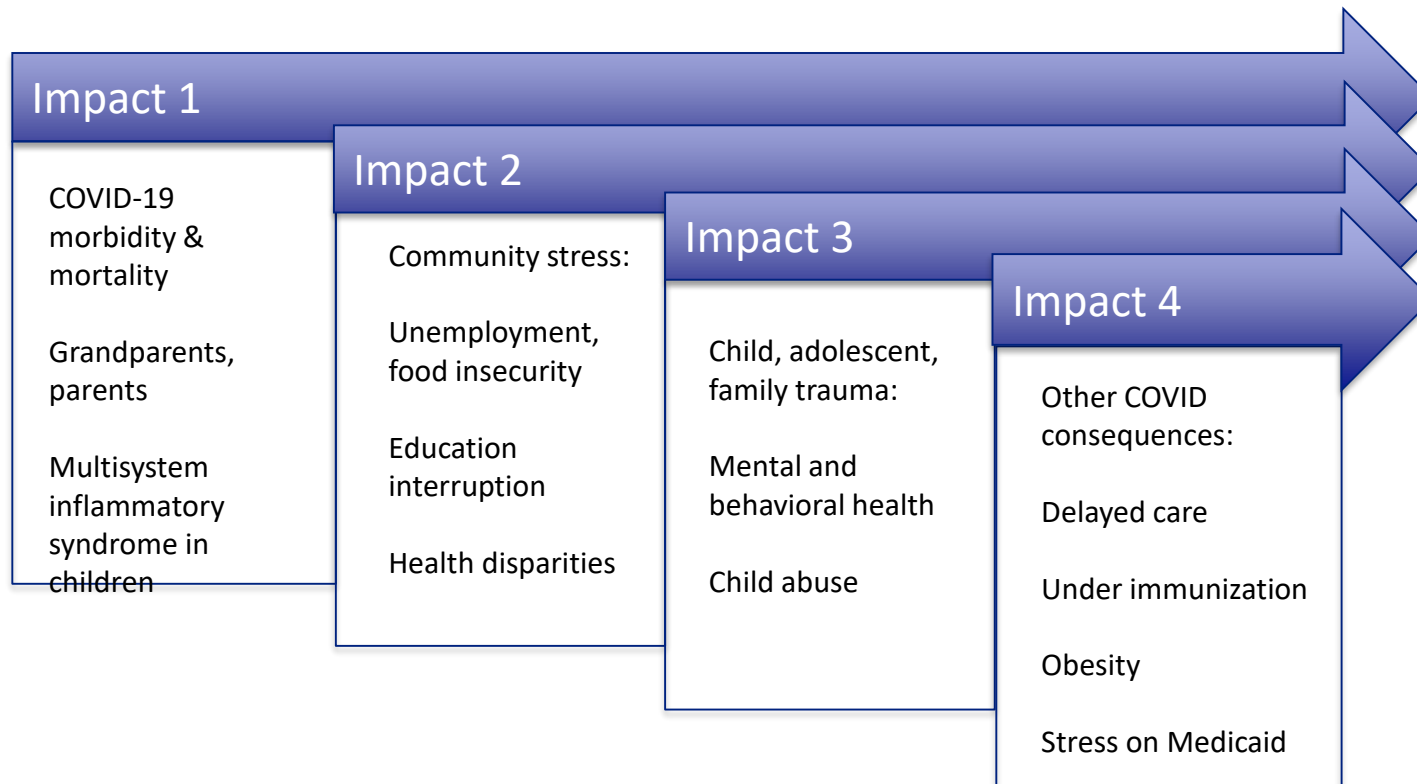
- Impaired Health and Development
- Lifelong impacts

Adapted from: Shonkoff JP. Translating the Biology of Adversity Into More Effective Policy and Practice. Presented at Pediatric Academic Societies Annual Meeting; May 6, 2013; Washington, DC. www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/EBCD/Documents/Shonkoff_PAS_Plenary.pdf





COVID19 IMPACT ON CHILDREN AND ADOLESCENTS



Source: Shoring up the safety net for children in the COVID-19 pandemic, Tina L. Cheng 1,2, Margaret Moon¹ and Michael Artman³ and On behalf of the Pediatric Policy Council
Pediatric Research (2020) 88:349–351; <https://doi.org/10.1038/s41390-020-1071-7>

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Rapid Systematic Review: The Impact of Social Isolation and Loneliness on the Mental Health of Children and Adolescents in the Context of COVID-19

Maria Elizabeth Loades, DClinPsy, Eleanor Chatburn, MA, Nina Higson-Sweeney, BSc, Shirley Reynolds, PhD, Roz Shafran, PhD, Amberly Brigden, MSc, Catherine Linney, MA, Megan Niamh McManus, BSc candidate, Catherine Borwick, MSc, Esther Crawley, PhD



Objective: Disease containment of COVID-19 has necessitated widespread social isolation. We aimed to establish what is known about how loneliness and disease containment measures impact on the mental health in children and adolescents.


Method: For this rapid review, we searched MEDLINE, PsycInfo, and Web of Science for articles published between January 1, 1946, and March 29, 2020. Of the articles, 20% were double screened using predefined criteria, and 20% of data was double extracted for quality assurance.

Results: A total of 83 articles (80 studies) met inclusion criteria. Of these, 63 studies reported on the impact of social isolation and loneliness on the mental health of previously healthy children and adolescents ($n = 51,576$; mean age 15.3 years). In all, 61 studies were observational, 18 were longitudinal, and 43 were cross-sectional studies assessing self-reported loneliness in healthy children and adolescents. One of these studies was a retrospective investigation after a pandemic. Two studies evaluated interventions. Studies had a high risk of bias, although longitudinal studies were of better methodological quality. Social isolation and loneliness increased the risk of depression, and possibly anxiety at the time at which loneliness was measured and between 0.25 and 9 years later. Duration of loneliness was more strongly correlated with mental health symptoms than intensity of loneliness.

Conclusion: Children and adolescents are probably more likely to experience high rates of depression and most likely anxiety during and after enforced isolation ends. This may increase as enforced isolation continues. Clinical services should offer preventive support and early intervention where possible and be prepared for an increase in mental health problems.

Key words: loneliness, pandemic, COVID-19, disease containment, mental health

J Am Acad Child Adolesc Psychiatry 2020;59(11):1218–1239.  



**YOUR IMPACT
ON KIDS
WITH TOXIC STRESS
WILL BE
MEANINGFUL
TANGIBLE, AND FOREVER.**



THE RESILIENCE PROJECT

We can stop Toxic Stress.

It's been conclusively determined by a 15 year body of research. Toxic Stress is detrimental to brain architecture, disrupting the developing brain, and damaging lifelong health. For your patients, this means, as adults, they're more likely to experience not just depression, drug abuse, and alcoholism—but diabetes, cancer, and heart, lung, and liver disease, among other major health problems. More often than not, your patients' parents are living examples of this.

Yet, there is also significant evidence that certain treatments can reverse the neurological and psychological effects of toxic stress. But first, you

need to know what to look for. Enter Adverse Childhood Experiences (ACEs). ACEs have served as a critical measure of the lifelong impact of toxic stress. Remarkably, ACEs scores have a proven dose-response relationship with the onset of adult illness.

You have both the science and the solution to make a significant, unprecedented, lifelong impact on your patients—and their parents. The kind of impact we've all dreamed of making.

To learn what you can do to identify and reduce toxic stress, visit aap.org/theresilienceproject

This content was produced by the AAP and the authors under award #302-11-GI-K01, awarded by the Office for Victims of Crime, Office of Justice Programs, US Department of Justice. The opinions, findings, and conclusions or recommendations expressed are those of the contributors and do not necessarily represent the official position or policies of the US Department of Justice.

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WELL-BEING OF PARENTS AND CHILDREN DURING COVID-19

- National survey in June 2020
- 50 % completion rate with 1011 responses
- Since March 2020
 - 27% of parents worsening mental health
 - 14 % worsening behavioral health for children
 - 24% loss of regular child care
 - 8% report food insecurity

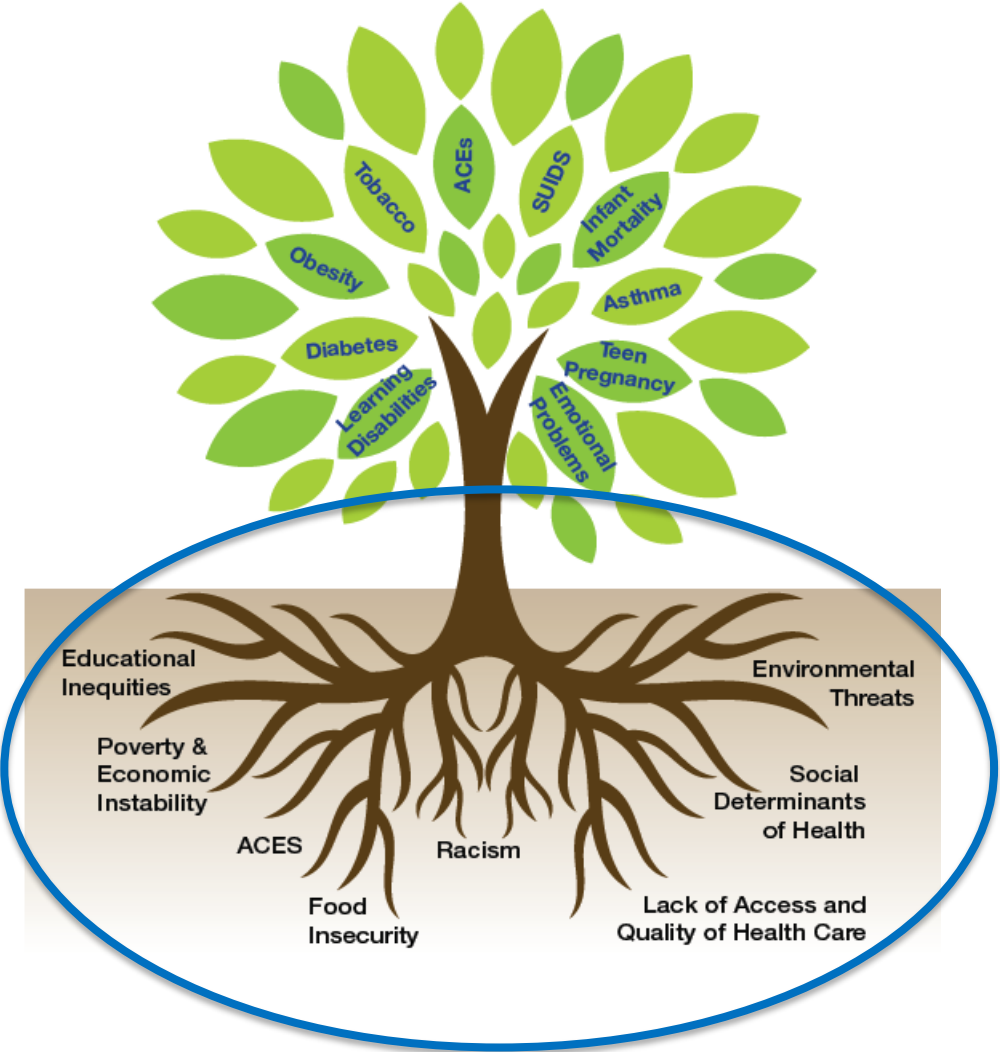
Source: “Well-being of Parents and Children During the COVID-19 Pandemic: A National Survey,” (Patrick SW, et al. *Pediatrics*. July 24, 2020, <https://doi.org/10.1542/peds.2020-016824>).

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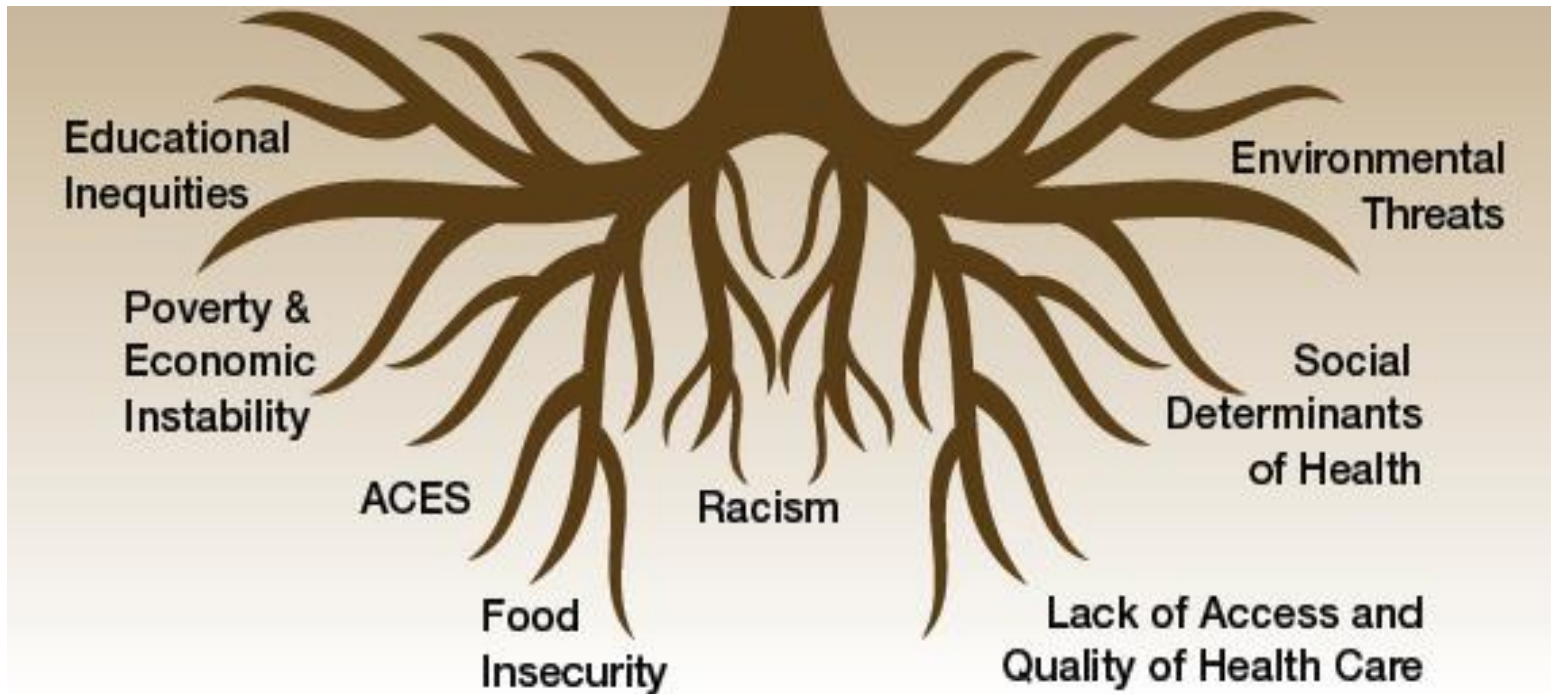
Child Health Disparities



Opportunities for impact



OPPORTUNITIES FOR PREVENTION AND IMPACT



OUR IMPORTANT ROLE DURING CRISES

- Provide support to children and families
- Share advice and strategies on supporting children's adjustment, coping, and resilience
- Provide timely triage for children who may need additional support
- **Build a therapeutic alliance**



STARTING THE CONVERSATION

- Ask about:
 - Basic needs
 - What caregivers or children are worried about
 - What is working well for families
- Examples of questions to ask:
 - This can be a stressful time. What are the problems you are dealing with now?
 - Where do you (your child) look for strength during this time?



**AAP INTERIM GUIDANCE ON
SUPPORTING THE EMOTIONAL AND
BEHAVIORAL HEALTH NEEDS OF
CHILDREN, ADOLESCENTS AND FAMILIES
DURING THE COVID-19 PANDEMIC**

JANUARY 2021

[Click here](#) to access interim guidance

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EMOTIONAL AND BEHAVIORAL RESPONSES AMONG CHILDREN AND ADOLESCENTS

- Range of signs and symptoms
- Severity of symptoms
- Factors influencing impact and manifestations



EVALUATING THE IMPACT

- Screening including SDOH
- Parental/caregiver well-being
- Remote learning
- CYSHCN
- Child welfare and juvenile justice systems



ADVICE, EDUCATION AND ANTICIPATORY GUIDANCE

- General anticipatory guidance: structure for toddlers; developmental regression; feelings of isolation
- Surveillance and screening
- Communication: open and honest conversations with children, adolescents and families
- Promote resilience



COMMON SOCIAL, EMOTIONAL, AND BEHAVIORAL RESPONSES

- Anxiety
- Behavioral challenges
- Low mood
- Grief



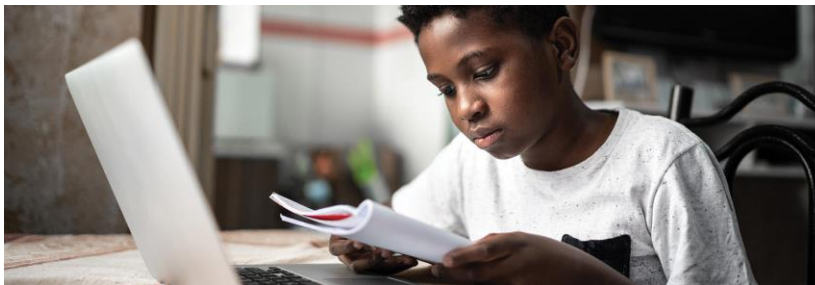
RESOURCES

- Common Social, Emotional, and Behavioral Responses
 - Anxiety
 - [Initial Approaches to Addressing Behavioral & Emotional Concerns in Primary Care: Anxiety](#)
 - [Understanding Childhood Fears and Anxieties](#) (HealthyChildren.org)
 - Behavioral challenges
 - [Addressing Early Childhood Emotional and Behavioral Problems Policy Statement](#)
 - [Addressing Early Childhood Emotional and Behavioral Problems Technical Report](#)
 - [Parenting in a Pandemic: Tips to Keep the Calm at Home](#) (HealthyChildren.org)
 - Low mood/depression
 - [Guidelines for Adolescent Depression in Primary Care \(GLAD-PC\): Part I. Practice Preparation, Identification, Assessment, and Initial Management](#)
 - [GLAD-PC: Part II. Treatment and Ongoing Management](#)
 - [Adolescent Depression: What Parents Can Do To Help](#) (HealthyChildren.org)
 - Grief
 - [Supporting the Grieving Child and Family Clinical Report](#)
 - [Childhood Grief: When to Seek Additional Help](#) (HealthyChildren.org)



CONSIDERATIONS FOR REFERRAL AND FOLLOW UP

- Primary care interventions
- Mental health provider referral
- Telehealth services
- Risk factors for child abuse and violence
- Loss and grief
- Depression and suicide screening and prevention



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RESPONDING TO CONCERNS

- Pediatricians and health care providers do not need to have all the answers
- Help parents to:
 - Be gentle with themselves and their children
 - Understand the importance of managing and acknowledging fears and stress
 - Realize they do not need to have all the answers, too
- Crisis dynamics change quickly; follow up is critical



WHEN IMMEDIATE FURTHER ACTION IS NEEDED

- What to listen for:
 - Concerning behaviors in children or caregivers
 - Lack of access to basic needs
 - Potential for abuse/neglect
- What to do:
 - Connect with community resources (eg, food banks, local shelters)
 - Connect with mental health providers when possible
 - Connect with emergency services (eg, crisis lines, emergency department)



VIRTUAL SUMMIT MEETING ON YOUTH SUICIDE PREVENTION

Virtual Summit Meeting on Youth Suicide Prevention

Hosted by:
American Academy of Pediatrics
American Foundation for Suicide Prevention
National Institute of Mental Health

February 4 – 11, 2021



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FACTORS WHICH PREDISPOSE CHILDREN TO POSITIVE OUTCOMES IN THE FACE OF ADVERSITY

- A sense of self-efficacy and perceived control
- Opportunities to strengthen adaptive skills and self-regulatory capacities
- Ability to mobilize sources of faith, hope, and cultural traditions



The single most common factor for children who develop resilience is at least one stable and committed relationship with a supportive parent, caregiver, or other adult



INFORMATIONAL RESOURCES FOR PEDIATRICIANS AND FAMILIES

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Bright Futures™

prevention and health promotion for infants,
children, adolescents, and their families™



healthychildren.org

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CELEBRATING 10 YEARS



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PEDIATRICS®

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RESOURCES

- HealthyChildren.org
 - [Tips for Coping with a New Baby During COVID-19](#)
 - [Getting Children Outside While Social Distancing \(here in Spanish\)](#)
 - [Simple Ways to Entertain & Boost Your Baby's Development at Home](#)
 - [Positive Parenting & COVID-19: 10 Tips to Help Keep the Calm at Home \(here in Spanish\)](#)
 - [Social Distancing: Why Keeping Your Distance Helps Keep Others Safe \(here in Spanish\)](#)
 - [Working and Learning from Home During the COVID-19 Outbreak \(here in Spanish\)](#)
 - [Co-Parenting Through COVID-19: Putting Your Children First](#)
 - [COVID-19: Information for Families of Children and Youth with Special Health Care Needs](#)
 - [Teens & COVID-19: Challenges and Opportunities During the Outbreak \(here in Spanish\)](#)
 - [Caring for Children in Foster Care During COVID-19](#)

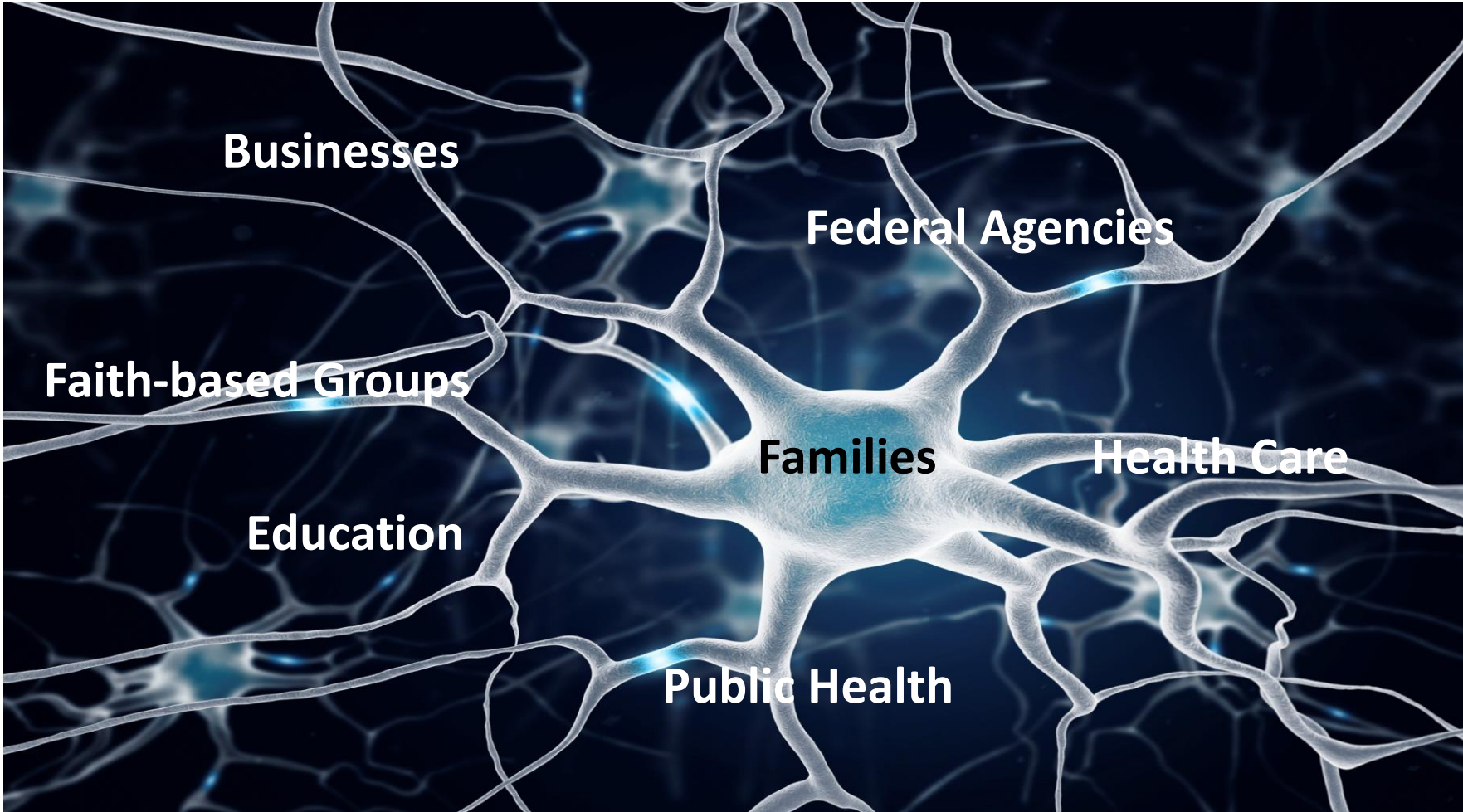


PEDIATRIC MENTAL HEALTH MINUTE SERIES

- New Video Series on Mental Health: quick but in-depth videos
- Designed to provide real-time education to support you as you care for children and youth with mental health disorders.
- To access visit: <https://services.aap.org/en/patient-care/mental-health-minute/>
 - Some topics included:
 - Screening Tools
 - Mental Health in Infants and Children
 - Trauma Informed Care
 - Anxiety



Community Synapses



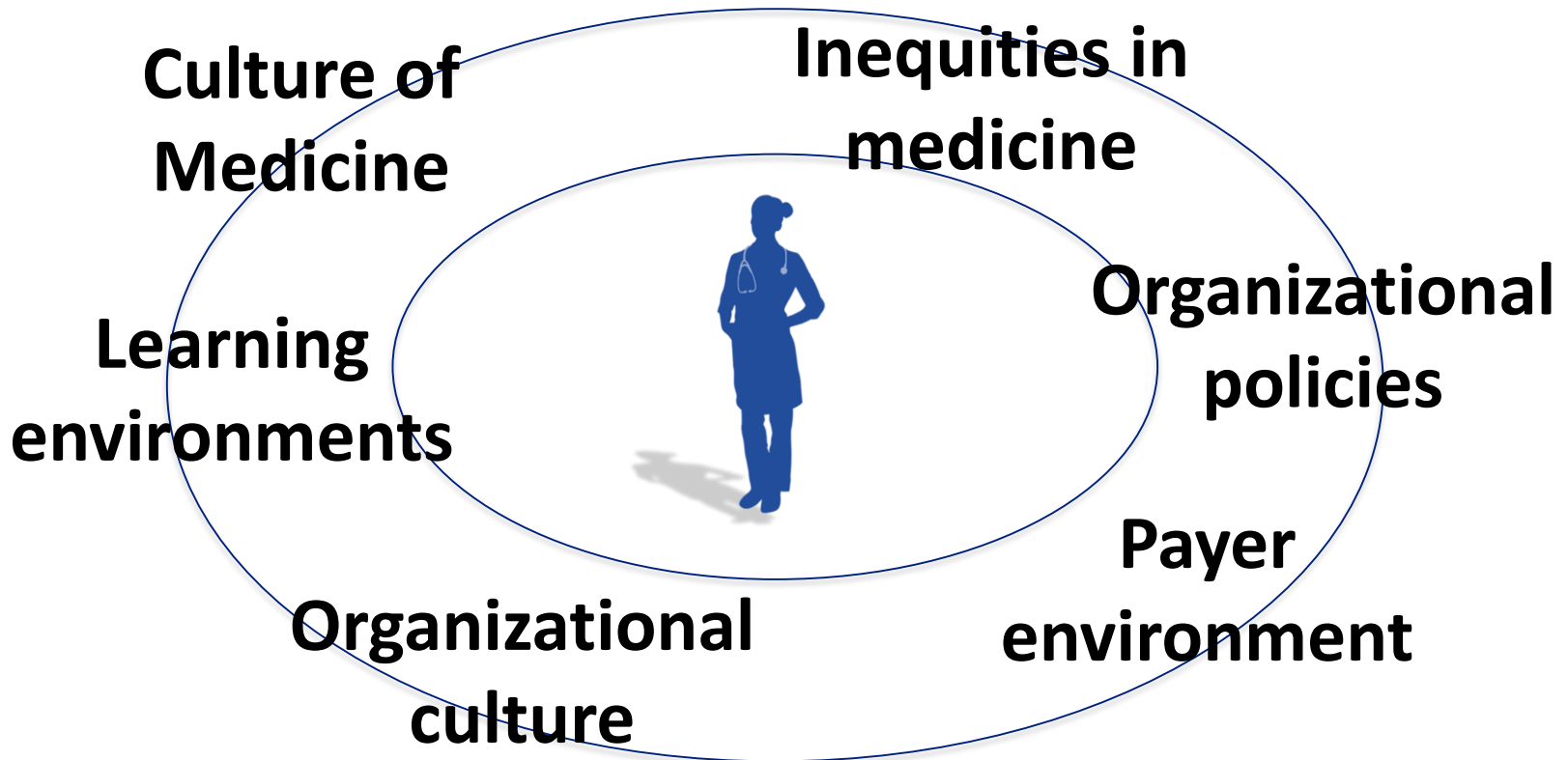
HEALTH AND WELLBEING OF PHYSICIANS

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“BURNOUT”: THIS IS NOT AN INDIVIDUAL-LEVEL PROBLEM



CURRENT COVID STRESSORS

- Fear of becoming infected
- Fear will infect family
- Anger at working conditions
- Financial worries within your practice and other family members
- Moral distress
- Self preservation vs. self sacrifice
- Exhaustion and overwork

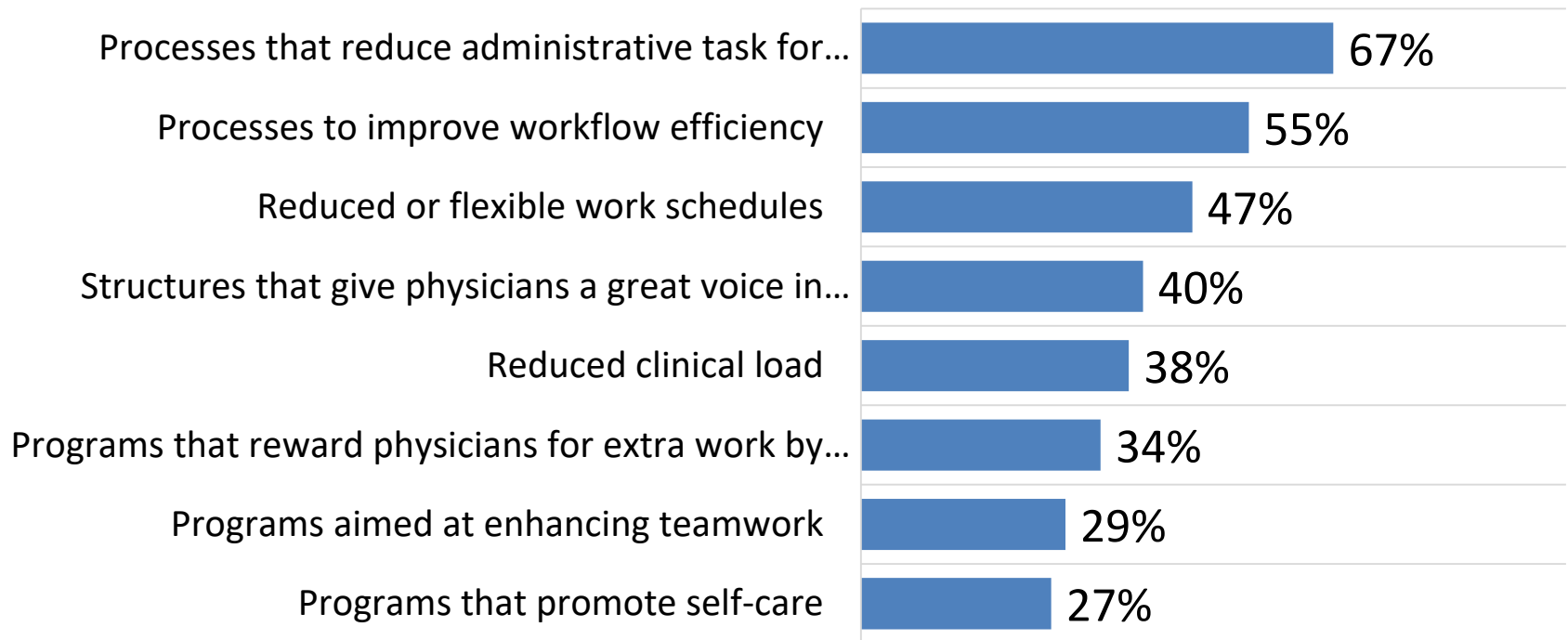


PRELIMINARY DATA FROM PEDIATRICIAN LIFE AND CAREER EXPERIENCE STUDY (PLACES) ON COVID-19

- Early and Midcareer Primary Care Pediatricians
(Aug-Oct, 2020)
- Response rate: $1871/2713=69\%$;
- Mean age: 40 years.



PERCENT WHO STRONGLY AGREE THAT THE STRATEGY WOULD HELP REDUCE PHYSICIAN BURNOUT/ENHANCE WELLNESS



Source: AAP PLACES Check Point Survey, 2017 (n=1,228)



FINANCIAL IMPACT ON PRACTICE

- Two-thirds report **clinic visits are currently down**
One-third report visits down more than 25%
- Nearly three-quarters report (agree/strongly agree) they are worried about the **financial impact on their practice**
- Nearly 60% agree/strongly agree they are concerned about the **financial impact on their family**



CONCERN ABOUT IMPACT ON THE COMMUNITY VERY HIGH

- Nearly all (95%) are concerned (agree/strongly agree) about the social and financial impact of COVID in their practice community
- More than half, 55% strongly agree they are concerned about the impact of COVID in their practice community
- One-third have a colleague who has been infected with COVID-19



COMMENTS FROM PLACES

PEDIATRICIANS

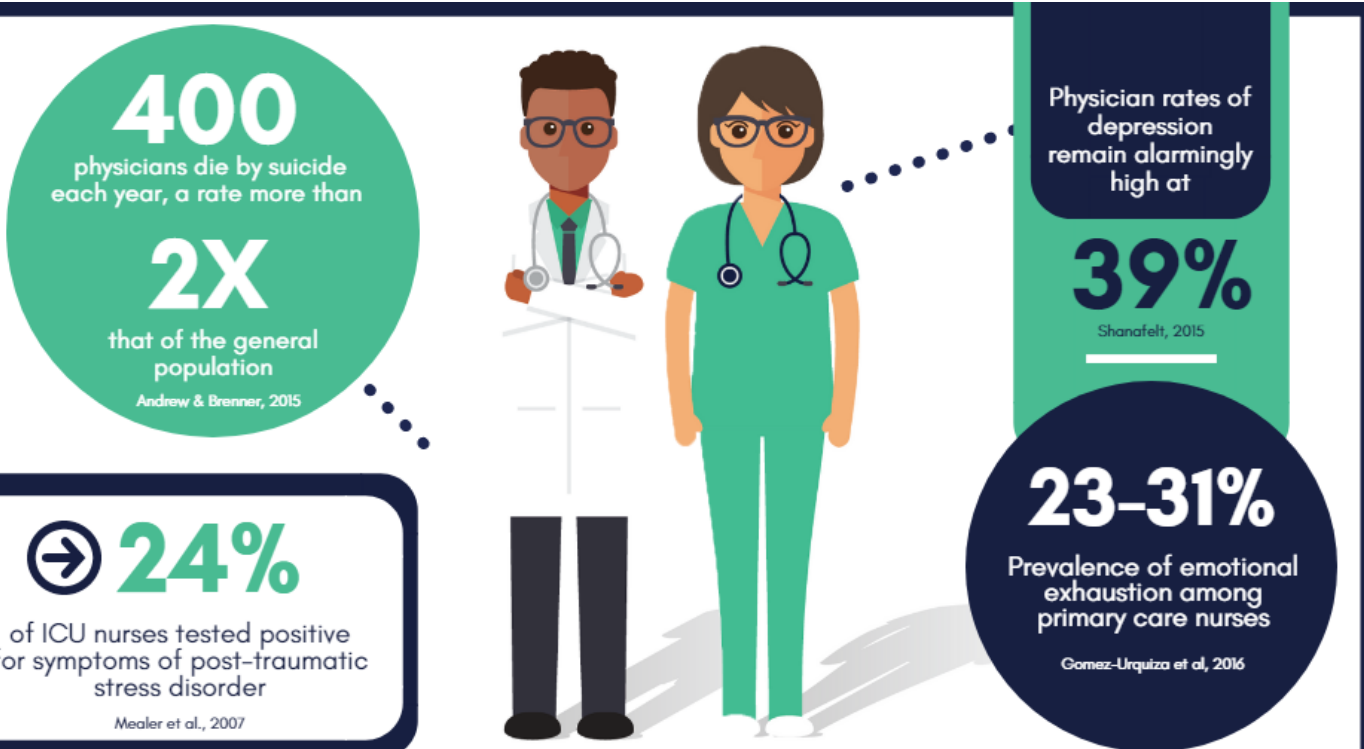
- “During the pandemic, our office took a large financial hit due to the decrease in visits. As a result, we had many layoffs, and all providers were cut back to 1/2 their hours. Due to childcare issues, I **transitioned permanently to part time** to care for my children.”
- “COVID-19 had a **major impact** on the financial stability of my practice and thus myself. As a doctor I never thought that I would be without a salary, but when visits dropped to nothing it was hard to pay our staff let alone us as physicians and providers.”



COMMENTS FROM PLACES PEDIATRICIANS

- “I feel like my community of patients has been hit hard financially with loss of jobs and the financial instability is leading to **personal instability** to my patients.”
- “Having to be a full-time physician, full-time Mom and full-time teacher during our surge was unbelievable. We did not have any childcare because people did not want to babysit for a physician. Thankfully, my clinic was gracious and allowed me to bring the kids to work, they even allowed me to decrease my clinical time for a short period. **I felt pulled in all directions and didn't do anything well.**”





How can we protect the health of the people who protect our own?



National Academy of Medicine
Action Collaborative on
Clinician Well-Being and Resilience

Learn more at nam.edu/ClinicianWellBeing

@theNAMedicine

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Supporting the Health and Well-Being of Clinicians During COVID-19

bit.ly/CWCOVID19
#ClinicianWellBeing

Strategies for Health Care Leaders

For leaders and managers to implement to help sustain the well-being of clinicians amidst the COVID-19 outbreak

Strategies for Clinicians

For health care professionals to implement to help support themselves and their colleagues

Other Resources

More information on how to promote clinician well-being from sources such as global health organizations, U.S. government agencies, professional associations, health care providers & schools of health professions

Source: National Academy of Medicine

<https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-strategies-during-covid-19/>

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Strategies for Health Care Leaders During COVID-19

bit.ly/CWCOVID19
#ClinicianWellBeing

- 1** Value clinicians
- 2** Communicate best practices
- 3** Monitor & promote clinician well-being
- 4** Provide supportive environment
- 5** Enable cooperation & collaboration
- 6** Provide central information access point
- 7** Ensure clinicians aren't required to return to work during dire situation
- 8** Provide appropriate resources if clinicians are infected

Source: National Academy of Medicine

<https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-strategies-during-covid-19/>

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Strategies for Clinicians During COVID-19

bit.ly/CWCOVID19
#ClinicianWellBeing

1 Meet basic needs

2 Take breaks

3 Stay connected

4 Respect differences

5 Stay updated

6 Perform self check-ins

7 Honor your service

A collection of resources to promote clinician well-being is available online.

Source: National Academy of Medicine

<https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-strategies-during-covid-19/>

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WELLNESS AT THE AAP



PEDIATRICIAN WELLNESS WEBSITE

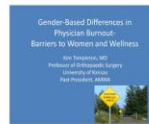
AAP Pediatrician Wellness

<https://bit.ly/AAPpediatricianwellness>

Individual wellness
plan



Educational
Offerings



National Resources
such as the NAM
knowledge hub



Strategies to build
mentorships and
effective leaders



**“YOUR CONVERSATION WITH A FAMILY
(OR COLLEAGUE) MAY BE THE LIFELINE
THEY NEED.”**

**- CAROL C. WEITZMAN, MD, FAAP
IMMEDIATE PAST CHAIR**

SECTION ON DEVELOPMENTAL AND BEHAVIORAL PEDIATRICS

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ADVERSITY CAN
HAVE
LIFELONG
CONSEQUENCES.

Now—more than
ever—your impact on
children, youth,
families (and
colleagues) will be
meaningful, tangible
and forever.

Thank you!



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QUESTIONS?

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