



Sheppard Pratt

**The Impact of Pandemic on Child Development:
Vulnerabilities and Resilience of our Youth**

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September 10, 2022

Conflicts of Interest

None of the presenters have any biomedical or financial conflicts of interest.

Youth Mental Health Crisis in America

- Highlighted by U.S. Surgeon General Vivek Murthy's recent advisory, "[Protecting Youth Mental Health](#)"
- A youth mental health crisis existed before the pandemic; isolation and disrupted care exacerbated the existing crisis

The background of the slide features a large, semi-transparent seal of the U.S. Department of Health and Human Services. The seal is circular and contains the text "U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES" around the perimeter, with "1798" at the bottom. In the center of the seal is a caduceus (a staff with two snakes and wings) and a shield. The main title is overlaid on this seal.

PROTECTING YOUTH MENTAL HEALTH

The U.S. Surgeon General's Advisory

Youth Mental Health Crisis in America

Key Data Points:

- From 2009 to 2019, the proportion of high school students reporting persistent feelings of sadness or hopelessness increased by 40%; the share seriously considering attempting suicide increased by 36%; and the share creating a suicide plan increased by 44%.
- Between 2011 and 2015, youth psychiatric visits to emergency departments for depression, anxiety, and behavioral challenges increased by 28%.
- Between 2007 and 2018, suicide rates among youth ages 10-24 in the U.S. increased by 57%. Early estimates from the National Center for Health Statistics suggest there were tragically more than 6,600 deaths by suicide among the 10-24 age group in 2020.
- In 2019, approximately 1 in 6 youth reported making a suicide plan in the past year, a 44% increase since 2009.

Challenges Facing America's Youth

- Increasing social media & technology use
- Bullying
- School violence, shootings
- Substance use
- Increasing suicide rates

How has the COVID pandemic impacted this?

- Depressive and anxiety symptoms doubled during the pandemic, with 25% of youth experiencing depressive symptoms and 20% experiencing anxiety symptoms.
- Negative emotions or behaviors such as impulsivity and irritability—associated with conditions such as ADHD—appear to have moderately increased.
- In early 2021, emergency department visits in the United States for suspected suicide attempts were 51% higher for adolescent girls and 4% higher for adolescent boys compared to the same time period in early 2019.
- Pandemic-related measures reduced in-person interactions, making it harder to recognize signs of child abuse, mental health concerns, and other challenges.

How has the COVID pandemic impacted this?

- Groups at higher risk of mental health issues during the pandemic:
 - Youth with intellectual and developmental disabilities
 - Racial and ethnic minorities (especially American Indian and Alaska Native youth, Black youth, and Latino youth)
 - LGBTQIA+ youth
 - Low-income youth
 - Youth in rural areas
 - Youth in immigrant households
 - Youth involved with juvenile justice or child welfare systems

RISK FACTORS CONTRIBUTING TO YOUTH MENTAL HEALTH SYMPTOMS DURING THE PANDEMIC

Note: Not a comprehensive list of risk factors

Having **mental health challenges** before the pandemic^{61, 64}

Living in an **urban area** or an **area with more severe COVID-19 outbreaks**⁶⁵

Having parents or caregivers who were **frontline workers**⁶⁶

Having parents or caregivers at elevated risk of **burnout** (for example, due to parenting demands)^{67, 68}

Being **worried about COVID-19**⁶⁴

Experiencing **disruptions in routine**, such as not seeing friends or going to school in person^{69, 70, 71}

Experiencing more **adverse childhood experiences (ACEs)** such as abuse, neglect, community violence, and discrimination^{72, 73, 74}

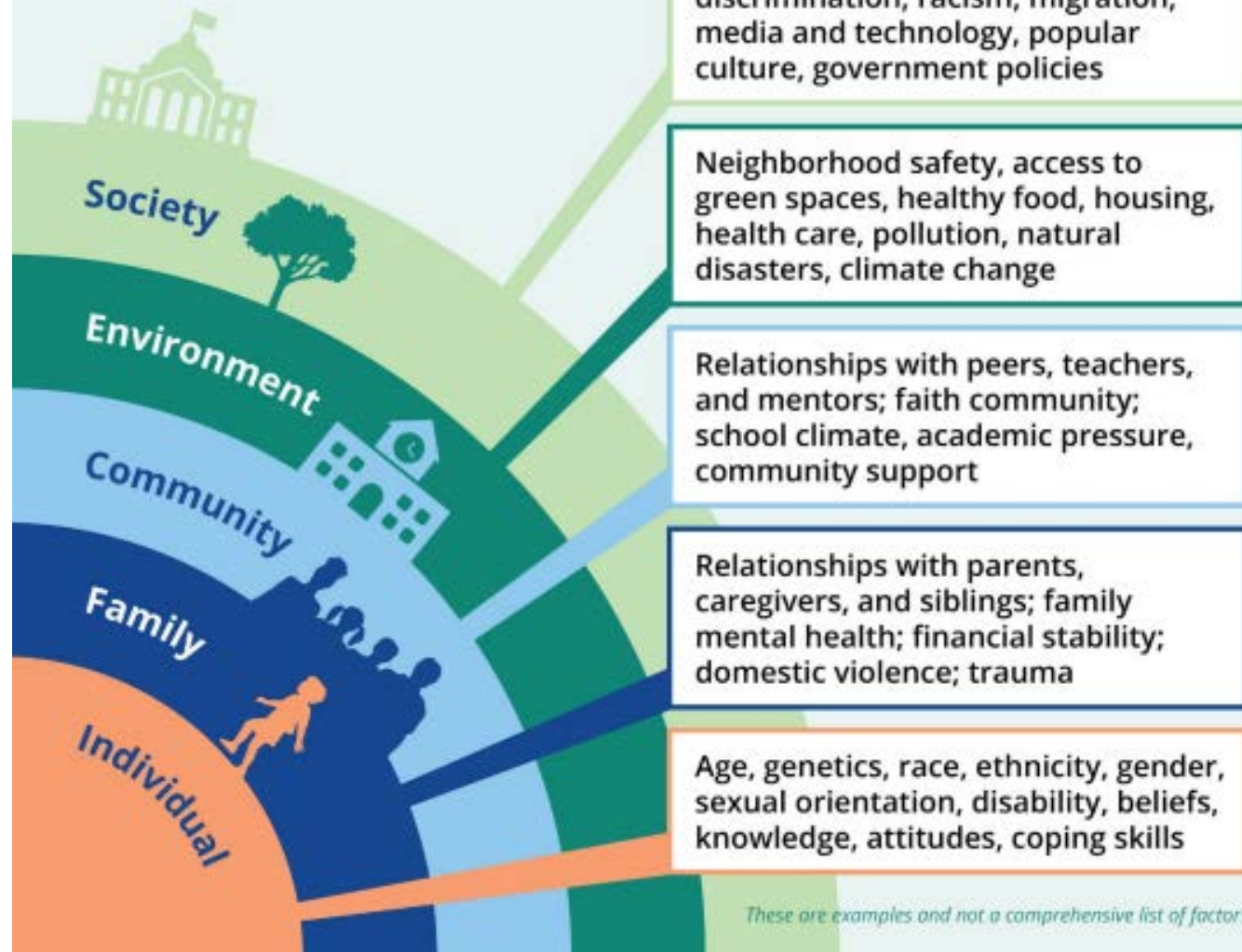
Experiencing more **financial instability, food shortages, or housing instability**^{75, 76}

Experiencing **trauma**, such as losing a family member or caregiver to COVID-19⁷⁷

FACTORS THAT CAN SHAPE THE MENTAL HEALTH OF YOUNG PEOPLE



Source: Adapted from WHO's *Determinants of Adolescent Health Development: An Ecological Model, 2014* and Bronfenbrenner & Ceci (1994)



These are examples and not a comprehensive list of factors



Factors Exacerbating Youth Mental Health Issues



Factor 1



Factor 2



Factor 3



Factor 4



Factor 5







What can society do to help?

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- Improving the mental wellness of our young people requires a “whole of society” effort. The Surgeon General’s Advisory provides specific suggestions to individuals, families, educators, healthcare, media, social media/gaming sites, community organizers, funders, employers, and government about what they can do to improve mental wellness for America’s young people.
- Things to do:
 - Recognize that mental health is an essential part of overall health
 - Empower youth and their families to recognize, manage, and learn from difficult emotions
 - Ensure that every child has access to high-quality, affordable, and culturally competent mental healthcare
 - Support the mental health of children and youth in educational, community, and childcare settings
 - Address economic and social barriers that contribute to poor mental health

What can caregivers do to help?

- Model good behavior
- Help them build relationships with safe adults and peers
- Try to minimize negative influences
- Create a supportive, stable, predictable home environment
- Reach out for support from professionals when needed
- Minimize access to means of self-harm (medications, firearms)
- Be attentive to how youth spend time online

TECHNOLOGY AND YOUTH MENTAL HEALTH: QUESTIONS FOR FAMILIES TO CONSIDER

Time

- How much time is my child spending online? Is it taking away from healthy offline activities, such as exercising, seeing friends, reading, and sleeping?
- Are there healthy limits I can set on my child's use of technology, such as limiting screen time to specific times of the day or week, or limiting certain kinds of uses?

Content

- Am I aware of what devices and content my child has access to?
- Is my child getting something meaningful and constructive out of content they are looking at, creating, or sharing? How do I know?
- Are there healthier ways my child could engage online? (Examples: Finding meal recipes, researching options for a family outing, video chatting with a relative, etc.)
- Is being online riskier for my child than for some other children? For example, does my child have a mental health condition that might make them react more strongly to certain kinds of stressful or emotional content?

Impact

- How does my child feel about the time they spend online?
- Is my child engaging because they want to, or because they feel like they have to?
- How can I create space for open conversations with my child about their experiences online?
- How do I feel about my own use of technology? Can I be a better role model for my child?

What can educators/school staff do to help?

- Create positive, safe, and affirming school environments
- Expand social/emotional learning programs
- Learn to recognize signs of trauma/behavioral changes and take appropriate action when recognized
- Expand school-based mental health workforce and implement evidenced-based, trauma-informed care practices
- Support mental health of all school personnel
- Protect and prioritize students with higher needs and those at greatest risk of mental health issues

What can healthcare organizations do to help?

- Best treatment is prevention – implement trauma-informed care principles
- Routinely screen for adverse childhood experiences (ACEs) in all settings
- Identify and address mental health needs of parents/caregivers
- Combine treatment efforts with trusted community partners and child-serving systems (child welfare, juvenile justice, etc.)
- Foster multidisciplinary care teams to create services focused on children and families

Advisory's Call to Action

The advisory's closing comments galvanized the call to action:

- **“For too long, mental and emotional health has been considered, at best, the absence of disease, and at worst, a shame to be hidden and ignored.**
- **If we each start reorienting our priorities to create accessible space in our homes, schools, workplaces, and communities for seeking and giving assistance, we can all start building a culture that normalizes and promotes mental health care.”**

Hope is Here

- Sheppard Pratt Call Center: connect with our care navigators to find the services you or your child needs
 - **410-938-5000**
- Sheppard Pratt Psychiatric Urgent Care
 - **410-938-5302**
 - Monday – Friday, 10 a.m. – 9 p.m.
 - Saturdays, 11:00 a.m. – 3:00 p.m.
 - Weinberg Building | 6501 N. Charles Street, Baltimore, MD 21204



Questions?



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