

SCHOOL CLOSURES AND MENTAL HEALTH CONCERNS FOR CHILDREN AND ADOLESCENTS DURING THE COVID-19 PANDEMIC

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The COVID-19 pandemic has caused a worldwide crisis leading to a negative consequence on the mental health of people all over the globe. During this period even children and adolescents are majorly affected. One of the chief concerns is the experience of disruption from their daily routine and social scaffold as a result of school closures (Lee 2020, Viner 2020). As per the data available from The United Nations Educational, Scientific and Cultural Organization (UNESCO) as on 29th April, 2019, school functions have been affected globally with 186 countries having nationwide school closures. This has led to around 74% of registered learners being affected which is about 1.3 billion young people (UNESCO 2020).

Literature from past epidemic in certain Asian countries shows that closure of schools did not have an impact on its control. Modelling studies during that period showed contradictory findings. Some of the current modelling studies during the COVID-19 pandemic show that school closures can control the spread of infection and mortality only to a small extent, way lower than various social distancing measures (Viner 2020). Schools are places for growth for children and adolescents which provide them with a social structure and offer efficient coping mechanisms to those with or vulnerable to mental health issues (Lee 2020). The concept of school closure may have its boon and bane. School closures can benefit by its effect on employers to have parents work from their homes, thus, reducing exposure to contact at workplace or outside; also, giving an opportunity for better parent-child interaction. On the other side, it may affect working persons financially due to the need to be at home when children are at home. In case of health care workers staying at home with children will result in weakening of the healthcare force. It may not only affect the mental health of already vulnerable children, but, may also cause nutritional deficiency in children, especially to those who rely on free meals at school and, also, cause loss of days of formal education and diminish peer interaction (Viner 2020). Parents may be more focused on how to engage and entertain them throughout the lock down and primary concern for all is how to remain untouched from the infection only. As a consequence, perhaps they are neglecting a more signi-

ficant issue of the psychological impact on children and adolescents. Children are placed in the vulnerable population (Hutchins 2009) and are further vulnerable to the emotional impact of traumatic events that can affect the adjustments they need to make as a result of school closures, social distancing and home confinement. (Lubit 2003). Children with special educational needs, like those with autism spectrum disorders may face issues as a result of disruption of therapies like speech therapy or social skills group therapy (Lee 2020). Tremendous cases of parental conflicts have been reported throughout the world during the lockdown. Being at home throughout the day can increase the risk of their exposure to witness interpersonal violence which would have a major impact on their mental health (Arfaie 2013).

There are several options apart from complete school closures which would be useful at this period without causing any harm to the emotional and mental growth of children and adolescents. Practices such as deferring affected classes or groups, closure of playing areas or school grounds, deferring non-essential school meetings, teaching students in the same classrooms, strictly maintaining distance between students in classrooms, reducing number of school days per week, staggered manner of school start like classes on alternate days, appropriate meal break timings with social distancing could be helpful instead of complete school closures (Viner 2020). During this period, it is essential that children receive honest and factual information from parents or their teachers, regarding the illness and its effects on their families and friends. If such information is deficient, they would try to make their own interpretations of the prevailing situation. Children belonging to age group 4-7 years may have thoughts, actions, events influenced by magical thinking. This may lead them to believe that illness is caused by some particular action or thought of theirs or is a punishment for bad deeds (Dalton 2020). Hence, effective communication and prioritizing that factual information reach children and adolescents is an important consideration during this period.

Formal training of primary health care professionals and pediatric specialists would be vital to identify mental health issues in children related to the COVID-19

pandemic which would help in efficient intervention or referral to a mental health professional. Further research on the mental health effects of this pandemic on children and adolescents is necessary for evidence-based mental health services at the moment and also, for their post-pandemic mental health care. Policy building should include more evidence while considering school closures and adapt to combining various other social distancing measures.

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