

CONTEXT

From the start of the Coronavirus lockdown, there were concerns amongst academics, practitioners and charities about the effect of the lockdown on mental health, particularly of children and young people. When the first lockdown was announced, the Academy of Medical Sciences and the charity MQ Mental Health Research convened an expert panel, which led to a 'call for action' for mental health science during the pandemic. Public Health England has published Covid-19 Mental Health and Wellbeing Surveillance Reports throughout the pandemic, and produced a Mental Health Winter Plan for 2020/21. The House of Lords Science and

Technology Committee took evidence on the mental health impacts of the pandemic as part of its inquiry on the Science of Covid-19. The media were also reporting the effects of the lockdown on the mental health of children. The Foundation wanted to explore the evidence from different perspectives, and brought together a Professor of Developmental Clinical Psychology, the Chief Executive of the charity MQ Mental Health Research, and the National Lead for Mental Health and Wellbeing at Public Health England. A video recording of the webinar, presentation slides and speaker audio from the event are available on the FST website.

The pandemic has exacerbated mental health problems

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Prior to the pandemic it was already clear that there was a substantial problem in the prevalence of mental health problems. In 2017, a nationally-representative survey conducted in England found that, among children and young people, one-in-nine had a probable mental health disorder. That reflected a significant increase from previous surveys in 2004.

While there was already reason to be concerned, the pandemic has brought more challenges. Among these were the concerns that participants had about:

- the direct threat from the virus to young people, their family and friends;
- managing the ongoing uncertainty they face;
- dealing with pressures relating to schoolwork, learning from home, etc;
- the economic impacts on families;
- managing boredom and not being able to do the usual things;
- not seeing friends and feeling isolated.

There have also been increases in domestic violence and reduced access to support outside the home.

A repeat of the 2017 national survey was carried out in July 2020 and it revealed that 1-in-6 children or young people were now found to have a probable mental health disorder. That was a few months into the pandemic. As restrictions had eased somewhat, it is possible that this may have been an under-representation compared with other points in the pandemic.

SUMMARY

- There is increasing evidence of a negative effect on mental health outcomes during the pandemic
- In July 2020, a national survey suggested that one-in-six young people might be suffering from mental health problems
- Those that have struggled most have often had pre-existing vulnerabilities
- It is critical to identify those with enduring problems and take prompt action to tackle these.

Co-SPACE² is a longitudinal study launched in March 2020, in which parents and carers of children aged 4-16 years – and the adolescents themselves – were invited to report mental health symptoms on a monthly basis throughout the pandemic. It aims to identify who is experiencing what and the factors which may explain differences.

Now, it should be noted that this is an online survey and not a nationally representative sample. In particular, this is a relatively affluent group compared to the general population. Yet while we cannot use this data to draw conclusions about the general prevalence of mental health problems, it can tell us how things have changed over time among this sample. That can give an indication of what may be going on more broadly. We can also look at how experiences vary across the participants in the study, those who are living in different circumstances or have particular characteristics.

The study found that mental health symptoms have changed through the pandemic. Using the parent report, we have been able to look across that whole age range, both primary and secondary school students. There are quite dramatic shifts, particularly in restlessness and attention difficulties, and these can be seen especially in the times of maximum restrictions. Difficulties increased during the first lockdown, then started to reduce as lockdown was eased, before rising again over the lockdown of early 2021. There has also been, particularly in those of secondary school age, an increase in emotional difficulties.

People might, rightly, say ‘of course they are going to experience different symptoms, just because the environment is so different in the pandemic’, but what the study also points out is that there was also a marked increase in the number of children and young people who were struggling, i.e. where the symptoms were causing interference and having an impact in a negative way on their lives. Again, there are some striking increases in the numbers who were experiencing difficulties among primary school children, particularly in conduct problems, hyperactivity and inattention.

It is important to highlight that, by looking across this whole population, the very different experiences of individuals within the pandemic can get lost. We are very aware that all have had very different experiences, depending on circumstances.

Looking at changes over time, essentially what we found was that there was one group with very low levels of difficulty at the beginning of the pandemic, which continued to be low throughout. That amounted to about 50-60% of the children. Another group was struggling at the beginning of the pandemic and continued to struggle throughout.

Of additional concern was a further group, which started the pandemic with fairly low levels of symptoms, but these increased as time went on. When we look at who the children who have struggled at some point in the pandemic are, and how they differ from the group which has been fine throughout, we find a number of characteristics. They are more likely to be male, when it comes to hyperactivity and attention, but also these children are more likely to be in families that are living on particularly low incomes, to be younger children and to have special educational needs.

We also found some wider family characteristics that were associated with a more negative pattern. That included parents reporting:

- a higher level of parent depression, anxiety and stress at the beginning of the pandemic;
- higher parent/child conflict at the

beginning of the pandemic;

- lower levels of family warmth at the beginning of the pandemic.

There are similar patterns across the different mental health symptoms we have been measuring. For conduct, for example, there is a substantial group which has done very well throughout. There is another group which has struggled throughout. The broad conclusions of course hide the individual experiences of people in the pandemic. The characteristics associated with the groups who have had difficulties in this area during the pandemic are similar to what we have seen before – including children with special educational needs, those living on low incomes, high parent stress at the beginning of the pandemic, higher conflict at the beginning of the pandemic, and so on.

When it comes to emotional symptoms, we have a slightly more complicated pattern but the findings are quite consistent in many ways. A significant group has experienced low levels of difficulties throughout and then there are groups who have experienced difficulties just in the pandemic. Yet there are also groups that reflect increasing or sustained high levels of difficulty. Again, relevant characteristics include: being on a low income, high parent/child conflict at the beginning of the pandemic, presence of special educational needs, higher parental psychological stress and also, in one case, the child having a chronic health condition.

Increasing evidence

Prior to the pandemic, the prevalence of mental health problems in children and young people was already high. There is increasing evidence, from a range of sources, for an overall negative impact of the pandemic on children and young people, as well as on their parents’ mental health.

Pre-existing vulnerabilities were associated with more negative mental health outcomes during the pandemic. That includes poverty and other challenging family circumstances and children’s special educational needs.

This highlights just how critical it is to make sure those children with enduring problems are identified at this stage and that they can access evidence-based support promptly, so that we can shift those negative trajectories. □

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¹The Oxford Psychological Interventions for Children and adolescents (TOPIC) research group: www.psy.ox.ac.uk/research/topic-research-group

²Co-SPACE: <https://cospaceoxford.org>

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At the start of 2021, we invested a further £750,000 into three new fellowships. One is looking specifically at the impact of the Covid-19 pandemic as a stressor on young people's mental health. The second is concerned with a new treatment for Borderline Personality Disorder, delivered in the community. The third is investigating mental health impacts on autistic individuals as they transition from adolescence into adulthood.

MQ is also carrying out policy and advocacy work. We have sponsored a report by the All Party Parliamentary Group entitled *The Covid Generation: a Mental Health Pandemic in the Making*¹. This involved working with over 25 researchers, all of whom submitted evidence for the report. That brings together all of the thinking that is out there and presents a way forward in terms of policy recommendations.

In partnership with the Royal Foundation we are looking at the inequities of mental health research exacerbated by Covid-19. We recognise

that black females in particular are almost non-existent in research studies. There is therefore much more to be done to ensure fully representative data in understanding the true impact of something like the pandemic.

The way forward

Everyone has heard the political aspiration to 'Build Back Better'. It is a wonderful, alliterative phrase, but to really make that a reality, we have to take a holistic approach and a 'whole child' approach. There must be greater access to routinely collected data, so that there is a more 'live' approach to understanding the impact of policies on children and young people. Ultimately, though, there has to be greater investment in mental health research: it is as simple as that. □

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¹www.mqmentalhealth.org/wp-content/uploads/2021/04/2021-04-20-Generation-Report-2021.pdf