

## Child Mental Health during COVID-19 Pandemic: A Case Report

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### ABSTRACT

COVID-19 pandemic has affected a large part of population in general. Children have been observed and reported to show a heightened level of distress, fear, helplessness and related behavioral issues during the pandemic and lockdown, as their normal routine activities including school and play had been largely restricted during this time. The present article is an attempt to highlight some of the major psychosocial issues faced by children during the pandemic through a case study.

**Aim:** To understand the psychosocial impact of the corona virus pandemic in children along with its psychological management.

**Case presentation:** Case of a ten year old male child is presented here who developed episodes of unresponsiveness, fear of uncertainties, and anxiety of losing his parents as a consequence of being infected with the virus and various behavioral problems during pandemic time. The problems of child were understood in context of the psychosocial and family factors. Psychological management included psychoeducation and addressing secondary gains through parental counseling. Further psychoeducation and supportive counseling of the child was done in an easy language to address his pandemic related worries; also training of healthy coping styles and problem solving skills to prevent relapse was provided.

**Results:** The parents and child reported decline in the symptoms and their distress to a significant extent along with increased socio-occupational functionality of the child. Findings have been discussed in light of the need to understand and address the psychosocial issues specific to COVID situations which are affecting the mental health of children during current times.

**Keywords:** COVID; Dissociative disorder; Child mental health

## INTRODUCTION

Corona virus pandemic and the lockdown have resulted in a sense of fear and anxiety throughout the world. Though it has affected all age groups and all classes of people globally, effects on children and adolescents seem much different and worrisome. They are not able to comprehend the anxieties of elders in taking extra precautions, at the same time constant exposure to pandemic related news and discussions has led to unexplained fears and worries in their minds. Their routines have been disturbed thoroughly as they have not been able to attend school, participate in outdoor activities and games,

meeting friends and peers; so there is no ventilation or outlet for their feelings and energies, which in some cases has resulted in extreme form of anxiety or in some other behavioral problems. Some recent studies have also reported the same; like the pandemic has contributed to short term as well as long term impact on the mental health of children and adolescents [1]. Another recent article published from India has observed a very high value of psychological distress in children due to COVID-19 pandemic. In this study, most (around 68%) of quarantined children showed some or other form of psychological distress which is much higher than the non-quarantined group especially worry, fear and helplessness [2].

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Uncertain prognosis and scarcity of medical and protective resources have led to imposition of measures which are restrictive of individual freedom. As children are in their critical period of development, they are highly vulnerable to the impact of the pandemic and need special care to preserve their mental health [3]. Children have experienced drastic changes in their lives as a result of the pandemic. Various modifications have been made in their routines and physical activities are reduced significantly [4]. The absence of peer involvement and increased involvement of parents has created an obstacle in the child’s autonomy [5]. Although screen time has become more relaxed for most children, access and exposure to inappropriate content is an added disadvantage and concern for most parents during the lockdown [6]. The adverse consequences of these drastic changes have been worsened academic performance, increased agitation, and aggression [7].

The present case study highlights the psychosocial impact of the corona virus pandemic in a ten year old child which is manifested through dissociative episodes and behavioral disturbances. The case study also focuses on the psychological formulation and management of the case in detail.

### CASE PRESENTATION

Master J, a ten year old male child, currently studying in fifth standard, from a lower middle SES Hindu nuclear family of urban background was brought to the Crisis Intervention Unit of IHBAS (a tertiary care neuropsychiatric hospital) by his parents during the outbreak of the Corona Virus pandemic in the month of September’2020. The child was presented with the complaints in form of frequent episodes of unresponsiveness, fearfulness, worrisome thoughts, social withdrawal and other behavioral disturbances. The episodes of unresponsiveness lasted for five to fifteen minutes at a frequency of at least five times in a day contributing to significant distress and concerns in the parents. He also reported fear of uncertainties and loss. He expressed his fear of losing his parents as a consequence of a serious illness. He also experienced such episodes of unresponsiveness while expressing these fears during the initial therapy sessions. He also had frequent dreams of his father getting ill and being infected with the corona virus. His worrisome thoughts revolved around losing his parents as a consequence of being infected with the virus. The child felt a sense of loss after his schools were shut due to the pandemic. He reported a sense of lost freedom as he could not interact with his peers anymore. The parents imposed restrictions on the child for going out, his screen time usage, and for taking various precautionary measures during the pandemic. These restrictions contributed to feelings of anger and irritability in the child. He verbalized his need to feel free and relive experiences which he had at school with his peers.

Parents expressed their concerns regarding various behavioral problems of the child. The child had started to engage in aggressive behaviors, anger outbursts, refusing to attend online classes and completing assignments, indulging in increased screen time usage, and withdrawal from social interactions. His dependency increased on his parents for daily tasks, including school assignments and routine activities. His aggressive

behavior was also heightened towards his younger sibling as the child started to experience jealousy when his parents directed their attention towards the sibling.

Working diagnosis of behavioral problems with dissociative episodes was made. For further understanding and planning of intervention, psychosocial and family factors were explored and a psychological formulation of the case was made and shared with the parents.

### Psychosocial factors and psychological formulation

Psychosocial factors were explored during the therapeutic process. The client’s grandfather had been experiencing a terminal illness since last two-three years. His father resigned from his job in order to care for the grandfather. The mother often complained about feeling burdened with responsibilities, as financial and other household responsibilities are mainly looked after by her; whereas the father expressed his helplessness due to his father’s illness.

Dissociative episodes and behavioral disturbances could be explained through secondary gains and a means to escape unpleasant aspects of reality. The child often felt neglected by the parents due to their preoccupation with responsibilities and interpersonal conflicts. His symptomatic manifestations served the purpose of attracting attention from his parents coupled with behavioral disturbances through which he could get his demands fulfilled by them. The psychosocial demands and impact of the corona virus pandemic on the child was communicated to the parents in order to formulate goals and plan the treatment for the client through collaborative effort. The Psychological formulation is depicted through a flowchart in Figure 1.

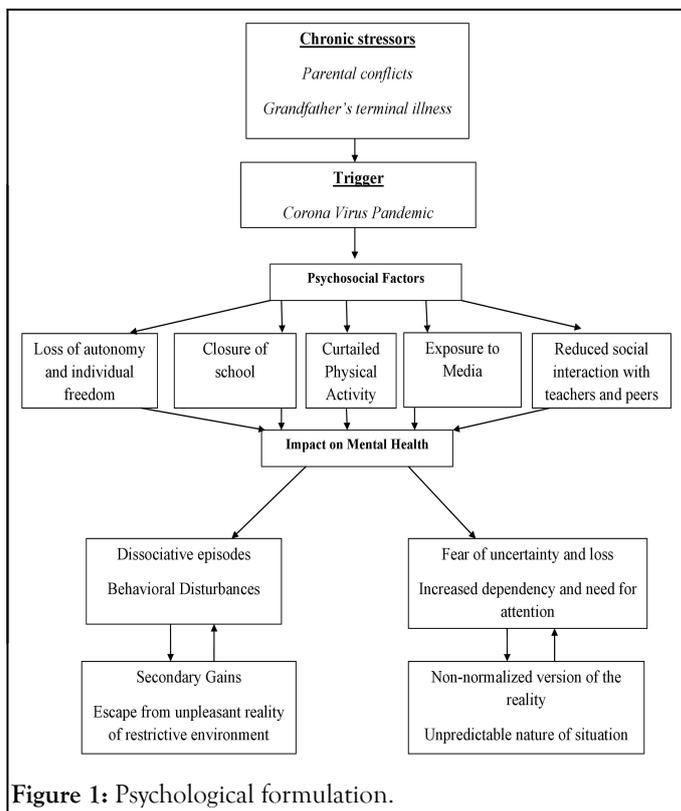


Figure 1: Psychological formulation.

## Psychological management

The management process involved sixteen therapy sessions held from the month of September to November'2020. Both child and his parents were involved in the sessions.

**Initial phase:** The initial phase of management focused on rapport formation, assessment, formulation, goal setting and psychoeducation. The assessment of the ongoing problems was held through clinical interview with the parents and the child. It included understanding of the ongoing problems, exploration of the stressors, as well as the impact of the ongoing situation. The assessment facilitated in the psychological understanding and conceptualization of the case.

**Middle phase:** The middle phase was directed towards goal setting, treatment planning, and implementation of the treatment plan. Their understanding of the child's problems and psychological formulation was reviewed in order to facilitate collaborative goal setting and treatment planning. The goals that were formulated with the help of parents were: to manage the symptoms of the child; to strengthen coping mechanisms and problem solving skills of the child in dealing with the pandemic situations; and to increase independent functioning of the child.

## Interventions with the parents

Firstly, emphasis was laid on cutting down the secondary gains being provided by the parents. The parents were educated about the reinforcing nature and disadvantages of secondary gains. The child's symptoms served a purpose of gaining attention from them and secondary gains were reinforcing his symptoms without their knowledge.

Secondly, the parents were encouraged to establish a routine for the child. The routine focused upon mastery as well as pleasurable activities for the child for inculcating a sense of mastery as well as pleasure in the child which is extremely essential in an unpredictable and unfamiliar time like pandemic.

Thirdly, the parents were encouraged to implement procedures based on the principle of operant conditioning such as reinforcing the child positively when he follows his schedule and makes attempts to function independently. They were asked to avoid punishment procedures in dealing with his behavioral disturbances. Fourthly, parental counseling was regularly held in order to address their distress and concerns. During the parental counseling sessions, the parents were provided with a space to express their emotions. Empathetic and reflective listening was facilitated during these sessions.

## Interventions with the child

In order to address the overwhelming affective response of the child, an attempt was made to desensitize the child to these reactions and the situation. A safe and non-judgmental space was provided to him in therapy in order to facilitate appropriate expression of affect. Initially, he experienced episodes of unresponsiveness during these sessions, however, eventually, when the child expressed his feelings in the sessions, these episodes reduced to a great extent.

**Termination phase:** The termination phase focused upon relapse management and strengthening coping as well as problem solving skills of the child and his parents. The phase involved obtaining feedback about the therapeutic outcome. The frequency, intensity, and duration of the child's symptoms reduced to a significant extent. The child was able to engage in socio-occupational tasks independently.

## RESULTS AND DISCUSSION

The current case study has highlighted various psychological interventions aiming at adequate care of the child during COVID-19 pandemic. The interventions have been beneficial in strengthening the coping and problem solving skills of the child as well as his family members. The involvement of parents and child in the therapeutic process facilitated the management of child's problems effectively. The psychological interventions with parents aimed at addressing behavioral disturbances of the child and encouraging self-management in the child. The interventions with the child aimed at resolving disturbances at cognitive and affective level. Making opportunities for the child to play and relax has proven to be beneficial. Providing children with facts and explanation can be reassuring for the child [8].

## CONCLUSION

The experience of working on this particular case study resulted in various positive outcomes. The therapeutic outcome in terms of adequate symptomatic management and increased independence of the child was positive. Along with this, the psychological sophistication of the parents resulted in increased cooperation from their side making the therapeutic process successful through collaborative effort. The client was also motivated and encouraged to work in therapy which made the implementation of therapeutic techniques beneficial and effective.

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