

DEPRESSION DURING COVID 19 PANDEMIC: IS THERE AN EMERGENCY?

Yasmine Guerfali¹ & Nicolas Zdanowicz²

¹Center Psychiatric Saint-Bernard, Manage, Belgium

²Catholic University of Louvain, Psychosomatic Medicine Unit, CHU Mont-Godinne, Yvoir, Belgium

SUMMARY Covid Covid

Background: As attention is currently focused on the urgent need to address the impacts of the social isolation measures imposed during the COVID-19 pandemic on adolescent mental health, this study aims to determine whether the reported malaise and depression among this population is directly related to the pandemic.

Subjects and methods: We conducted an analysis of the review of the literature based on content in the leading medical databases, and reviewed empirical data regarding the number of psychiatric consultations, and markers of anxiety and depression in adolescents.

Results: Social isolation has clearly had a negative impact on adolescent mental health. However, while adolescent psychiatric consultations, and markers of anxiety and depression have increased, this increase has been present for many years. It is therefore difficult to establish a causal link between the two.

Conclusion: Our results suggest that adolescent mental health is an important problem that needs to be addressed as a priority, while care needs to continue even after social isolation measures have been lifted.

Key words: depression - mental health - adolescent - COVID-19

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INTRODUCTION

Coronavirus 19 (COVID-19) has been the cause of a major health crisis that has affected countries around the world. In March 2020, the World Health Organization declared that it was a global pandemic. It has had a major impact on our daily lives and quality of life. From the beginning, many healthcare professionals raised questions about the psychological impacts of social isolation measures. In Belgium, professionals were particularly concerned by the effects of the second wave during which social isolation measures were put in place (October 2020) on adolescents, who seem to have been affected by this upheaval. The country's child psychiatry network is saturated, and adult psychiatrists feel that their patients are getting younger and younger (Maes 2021). At the same time, many articles have been published on adolescent mental health during the pandemic, and many professionals are sounding the alarm.

In this article, we examine the factors that could underlie the vulnerability that is described by professionals, and review the literature to identify whether this vulnerability is confirmed by research. We also review change in the number of patients seeking a psychiatric consultation, together with rates of anxiety and depression among the relevant age groups in Belgium. Finally, we seek to identify whether there is a causal link between adolescent depression and social isolation, and whether we can expect an improvement now that isolation measures have been lifted.

SUBJECTS AND METHODS

We conducted a literature review of articles published since the pandemic, recorded in the Cairn, PubMed, and Cochrane databases. The keywords were 'mental health', 'adolescent' and 'COVID-19'. We also approached a Belgian medical insurance organization, *La Mutualité Chrétienne*. Here, the aim was to study their figures on the number of psychiatric consultations for the 12–18 and 19–24 age groups, and evaluate changes over the past ten years. Finally, we reviewed the literature recorded in the same databases using the keywords 'mental health' and 'adolescents' in order to compare our study to earlier evidence.

RESULTS

Are adolescents more sensitive to the effects of social isolation?

Among adults, anxiety, post-traumatic stress disorder, depression and suicidal behaviors, addictive behaviors, and domestic violence have been recorded as effects of social isolation (Mengin et al. 2020). Adolescence is characterized by increased sensitivity to social life, stimuli, and a greater need for peer interaction. The physical distancing measures that were imposed worldwide to contain the spread of COVID-19 reduced adolescents' ability to engage in face-to-face social contact outside their families. Young people could not leave the family home; they were unable to go to school and could not see their friends.

Animal research has shown that deprivation and isolation have specific effects on brain and behavior in adolescence compared to other stages of life (Orben et al. 2020).

In 2021, the Belgian Superior Health Council (Conseil Supérieur de la Santé 2021) published an opinion, which designated young people “in their pivotal years” as a group vulnerable to anxiety and depression. Although not particularly vulnerable to COVID-19 as such, this group is more vulnerable to the negative effects of the restrictions put in place to fight the virus. This may be due to a lack of social interaction and peer relationships that are fundamental to their development. We would also add that social support and good social skills contribute significantly to the mental health of young people, while for students in higher education, social relationships and interactions are crucial to their academic success.

In 2021, UNICEF published, for the first time, a report on the mental health of children, adolescents and caregivers (Sharma et al. 2021). This report highlights the poorer mental health of children and adolescents with respect to several aspects:

- stress and anxiety;
- depression and suicidal behavior;
- behavioral problems;
- alcohol and drug use;
- lifestyle changes associated with a decrease in physical activity, an increase in screen time, and sleep disruption.

In Belgium, the most recent survey by Sciensano, which is the body responsible for epidemiology and public health (Sciensano 2021), highlights a very disturbed and psychologically-challenged population. It notes that young adults (aged 18–29) are “by far the most affected by anxiety (34%) and depressive (38%) symptomatology”. Another consequence of closing schools and educational facilities is that mental health issues among young people may not be reported.

What are the consequences for adolescents?

Social isolation has been observed to have negative impacts on the mental health of young people and adolescents (Hawke et al. 2020). Twelve longitudinal studies of adolescents (10 in the United States, one in the Netherlands, one in Peru) detected a moderate increase in depressive symptoms based on data from both before and during the pandemic (Barendse et al. 2021). The factors that seem to influence this psychological state include the following: a lack of extra-familial social relationships (families become the only place where adolescents live), a lack of physical exercise, a lack of extra-curricular activities, along with uncertainty about not only the crisis, but also their education and their academic performance. However, it should be noted that these studies did not take into account adolescents’ pre-pandemic mental state (Ford et al. 2021, Racine et al. 2020).

Some current numbers

It is difficult to obtain up-to-date figures on the current situation in Belgium regarding patients seeking child psychiatric care. Figures are usually only published with a delay of two, or even three years, which is comparable to the overall duration of the pandemic. In order to make a quantitative assessment, we approached a Belgian health insurance company (*La Mutualité Chrétienne*), and asked it to share their data on the number of psychiatric consultations for the 12–18 and 19–24 age groups. In 2020, the organization insured 4,592,121 people (40.5% of all people affiliated to a health insurance scheme in Belgium), thus our sample represents a significant percentage of the population. Although the analysis identified an increase in consultations among 12–18-year-olds since the advent of the crisis, this increase had already begun in previous years, and long before the crisis began. In fact, a continuous increase can be observed in this population beginning in 2010. As for 19–24-year-olds, the analysis found that while the number of consultations had been relatively stable over the preceding ten years, it increased by over 8% during the period 2020–2021 (Figure 1).

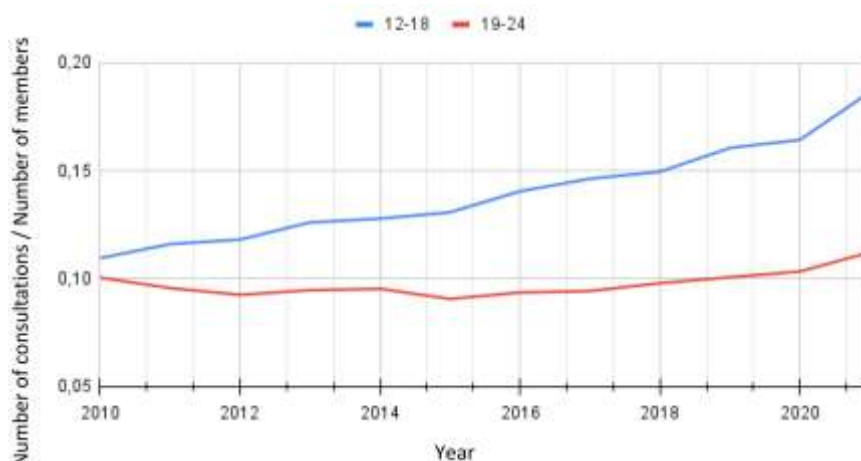


Figure 1. Change in the number of psychiatric consultations (Source: ANMC)

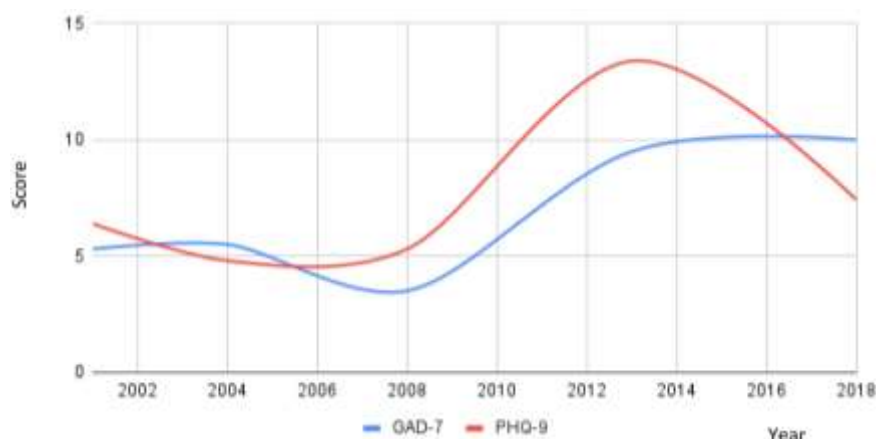


Figure 2. Change in anxiety and depression rates for the 15-24 age group (Source: Sciensano)

A similar trend can be identified based on figures for change in rates of anxiety and well-being over the past 20 years recorded by Sciensano surveys. Here, rates have been increasing for the 15–24 age group for many years. The organization’s health surveys have consistently used the same questionnaires, namely, the GAD-7 (Generalized Anxiety Disorder) to assess generalized anxiety disorder, and the PHQ-9 (Patient Health Questionnaire) to estimate depressive disorders (including major depression and other forms), and while the analysis shows variation over the years, there is a general upward trend (Figure 2).

What was the mental health status of adolescents before the pandemic?

Even before the crisis began, the number of emergency admissions to child psychiatric units was steadily increasing. The following figures are taken from WHO (2018):

- Globally, one in seven young people aged 10 to 19 suffers from a mental disorder, representing 13% of the global burden of disease in this age group. In Belgium, this figure is 16.3%.
- Depression, anxiety and behavioral disorders are among the leading causes of morbidity and disability among adolescents.
- Suicide is the fourth leading cause of death among young people aged 15 to 19.

In France, emergency child psychiatric unit consultations have significantly increased; for example, numbers have tripled at the Pitié-Salpêtrière Hospital over the past 20 years. A similar increase is found in the United States (Christodulu et al. 2002). These studies describe the increase as both massive and ongoing (Chatagner et al. 2012). As early as 2006, in an article on changes over the preceding 20 years in emergency child and adolescent psychiatry, Blondon et al. (2007) noted, “We must think about how to respond to this increasing demand, in particular, the development of specific hospital and ambulatory systems able to care for a population that is increasingly young”.

In Belgium, a study conducted at the Cliniques Universitaires Saint Luc came to the same conclusion, noting an increase in the number of minors admitted to the psychiatric crisis and emergency unit (Koener et al. 2015). The *Comportements, bien-être et santé des élèves* survey has been administered since 1986 to pupils aged 10 to 18 in French-speaking schools in Belgium. This survey, which is the French-speaking Belgian version of the international *Health behaviour in School-aged Children* (HBSC) study sheds light on change in a certain number of markers of well-being among adolescents. In particular, Lebacqz T et al. (2018) note the following:

- A fall in feelings of self-confidence between 1994 and 2018.
- The percentage of students who reported being stressed by their schoolwork increased between 2010 and 2018.
- The percentage of students who reported feeling supported by their classmates has declined since 2002.

UNICEF’s report on the mental health of children, adolescents and caregivers in the 21st century indicates that even before the COVID-19 pandemic, children and young people were already suffering from mental health problems, and that no substantial investment had been made to address these problems.

DISCUSSION

It is clear that the social isolation measures imposed during the COVID-19 pandemic have had a negative impact on adolescent well-being. However, it should be noted that, in Belgium, the well-being of adolescents has been declining for many years. Although we cannot establish a causal link between the social isolation of adolescents during the pandemic, we do know that that malaise and depression among adolescents has been increasing for many years; moreover, the present health crisis has disrupted their education, and many young people are now facing an uncertain future. While the information that was brought to the attention of political

bodies during the pandemic has helped to raise awareness about the mental health of our young people, this attention should not end with the pandemic. The adolescents who have lived through COVID-19 experienced an unprecedented situation. While we still cannot fully measure its impacts, we cannot really expect an improvement as it ends, given that the number of young people in difficulty has been increasing for many years.

CONCLUSION

The studies we reviewed highlight an increase in anxiety and depressive symptoms during the pandemic. While this increase could be directly related to the effects of the social isolation measures implemented during the crisis, the number of psychiatric consultations, along with rates for anxiety and depression, and the number of visits to emergency rooms have been steadily increasing among young people for many years, and long before the outbreak of the pandemic in 2020. In view of these increases, and the saturation of child psychiatric and mental health networks, we argue that there is an urgent need to address this problem, and that care must continue to be provided after the pandemic ends.

Acknowledgements:

We thank Mr. H. Avalosse (*La Mutualité Chrétienne*).

Conflict of interest: None to declare.

Contribution of individual authors:

All authors made a substantial contribution to the conception and design of the study, and/ or data acquisition, analysis, or interpretation.

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Correspondence:

Nicolas Zdanowicz, MD, PhD
 Catholic University of Louvain, Psychosomatic Medicine Unit, CHU Mont-Godinne
 Rue Dr Gaston Therasse 1, 5530 Yvoir, Belgium
 E-mail: nicolas.zdanowicz@chu.uclouvain.be