

Helping Adolescents with Mental Health Impacts from COVID-19 Isolation

Ie May Freeman, Ed.D.

Donna Block, Ed.D.

Azusa Pacific University
901 E Alosta Ave, Azusa, CA 91702
United States of America

Abstract

The purpose of this article is to offer K-12 educators, school districts, parents, and university professors, insights on understanding the impact on mental health on adolescents due to the COVID-19 pandemic. Education has pivoted to remote and hybrid learning instruction for students during the pandemic of 2021. This has caused an increase in the amount of mental health issues due to social isolation and the lack of interconnectedness. Grounded in the knowledge of current issues in education, this article provides suggestions on how adolescents can cope during the global pandemic. Additionally, the article contributes to the middle school and high school field by offering insights to stakeholders about how to address mental health issues among adolescents today.

Keywords: mental health, Social Emotional Learning, COVID-19, pandemic

Impacts on Mental Health of Adolescents

Adolescents between the ages of 12 and 18 in March of 2020 will have a story to tell to the younger generations as they grow older. Something that most everyone would not have dreamed of, befell the entire world. The COVID-19 pandemic that has lasted well over a year changed everyone's lives beyond imagination. While the pandemic impacted the world, adolescents had a particularly rough time. One day everything was business as usual. The next day everything was different. Teenagers were used to attending school and school events, working, dating, hanging out with friends, participating in sports, shopping, and other social activities. The news stations were warning the public about a disease that was affecting people worldwide with severe sickness and death. On March 13, 2020, President Donald J. Trump declared a national emergency and by the end of the month, most states' governors had enacted a stay-at-home order that shut down schools, businesses, and life as we knew it (Pereira & Mitropoulos, 2021).

Adolescence is a life stage in which the individual is working through what their identity will be. Erikson's (1968) research delves deeply into adolescents' desire to be unique yet be involved in social groups. This critical stage of life is difficult enough without the addition of a worldwide pandemic. Some of the effects on adolescents during this time included: anxiety, depression, social isolation, and suicide ideation. These effects are nothing new to adolescents; however, the extended time of the restrictions brought on by the pandemic added many other dimensions to what was already an out-of-control problem. COVID-19 is the most recent disease to impact young people around the world.

Anxiety

Although anxiety is normal in that people sometimes react to stress with anxious feelings, it can be debilitating to some. What can happen is that muscles become tense and the person might avoid what is making them feel anxious. In adolescents, it can affect their relationships, jobs, and school work (Muskin, 2021). According to James (2015) adolescents tend to show anxiety that is related to health, school, and social competence. Another stress-producing issue for teens during the pandemic, was the worry about family finances and lack of required technology needed for homeschooling (Joseph, 2020). For some homeless students, not having an actual school building to attend caused a whole new set of problems. Not only were their social experiences shut down, but their education was disrupted. A different view of this same concern expresses that school closures may have taken some pressure off some students in that with virtual learning, they were not having to cope with bullying and other types of conflict related to peers (Hoekstra, 2020). Nixon and Nelson (2020) add that adolescents may feel reluctant to go back to school once they have been away.

Schwartz & Costello (2021) add to the list of precursors to anxiety: increased social media use, lack of routine, and eating issues which could lead to eating disorders. They also share that their patients more than doubled from the period of April-December 2019 to April-December 2020 (Schwartz & Costello). Gerhart and Omar (2021) explain that teens' brains are still developing and the pandemic altered sleep patterns in adolescents. Another cause that can impact anxiety is sleep disorder. "Sleep is one of the great anxiety-sensitive functions" (Smirni et al., 2020, p. 6). Magson et al. (2021) adds exposure to news media as a contributor to anxious feelings. The list of causes of anxiety during the pandemic seems to go on and on. Many young people found this time of uncertainty about their future to be anxiety producing (Smirni et al., 2020). This was an unprecedented phenomenon in our world and many adolescents faced stressors that could have a lifelong effect.

Social Isolation and Loneliness

Even with access to friends utilizing social media and technology devices, nearly 25% of adolescents reported that they felt disconnected from their peers as well as having worsened mental health (Panchal et al., 2021). The Kaiser Family Foundation conducted surveys during the pandemic as well as studied data before the pandemic. In one survey, one in four adolescents felt their mental health had worsened since the onset of the pandemic. A more recent survey was even more concerning. Only one in three adolescents felt they were able to cope with the stress brought on by the pandemic (Stephenson, 2021). Adolescents were not the only group surveyed. Parents of teens were also participants of many studies. In one study, thirty-one percent of parents reported that from May of 2020 to October of 2020, their child's mental or emotional health had decreased (Panchal et al., 2021). In another study done by Orgiles et al. (2020) 83% to 88% of parents of teens in Italy and Spain noticed their child's mental health and behaviors had negatively changed during the early stages of the pandemic. Loades et al. (2020) reviewed many studies involving involuntary containment measures due to disease and concluded that loneliness may be an effect of social isolation.

Depression

One of the many concerns parents and educators had when the pandemic shuttered schools and social activities was the possible effect on adolescents. When adolescents are at the older range, they spend more time with peers and become more independent (Barendse et al., 2021). Adolescents are in the stage of life where they are starting to figure out who they are and what they want to be. A significant part of their lives is spent with peers in social situations. Friends are often more influential than parents at this stage of life (Magson et al., 2020). COVID-19 abruptly stopped peer interaction as we knew it. This could contribute to depression in teens. Depression is a condition that can have many symptoms. Some of these symptoms include: excessive sleeping, loss of interest in things that used to be pleasurable, sad mood, and less ability to concentrate. These symptoms last for longer than two weeks. Typically, adolescence is the time where depression begins (Petito et al., 2020).

Barendse et al. (2021) reviewed and combined data from 12 different research groups' studies. Their finding was that teens were impacted with depression and anxiety. The data also determined that teens who were locked down and teens who are multiracial felt the impact the most strongly. A study of depression and anxiety of adolescents during COVID-19 concluded that there were a couple of contributors noted in their findings. One was less physical exercise and the other was being left at home alone during the workday. Added to this conclusion was that older females had a higher incidence of depression (Chen et al., 2020).

Suicide Ideation and Suicide Attempts

In the decade prior to the pandemic, suicide was recognized as the second leading cause of adolescent death (Szlyk et al., 2020; Hill et al., 2021). Researchers quickly began studies to try and determine if there was an increase in suicide ideation, suicide attempts, and suicide during the approximate 15-month span of the pandemic restrictions. Hill et al. (2021) determined a significant increase of suicide ideation using a comparison from March and July of 2019 to March and July of 2020. The same held true for suicide attempts from February, March, April, and July of 2019 to the same months in 2020. Hill et al. (2021) cautions that there are limitations to the study but that the data pattern shows a positive correlation between the increase in suicide ideation and suicide attempts in adolescents during the COVID-19 pandemic. Another study by (Manzar et al., 2021) found that adolescent suicides during COVID-19 were related to the lockdown measures and that this information could help with future early detection of possible suicide. Longobardi et al. (2020) stresses that while social media would be a way to keep in touch with peers and lessen the effects of isolation, the converse could be a factor. Teens can still feel the effects of rejection in the online world. Paired with isolation, that could increase suicide ideation. Szlyk et al. (2020) contends there could be the opposite effect from the lockdown measures. Students who were having negative peer interactions might have benefitted from being away from those stressors and thus had less suicidal thoughts. There are different conclusions being made with early studies, but the majority warn of the possibility of the magnification of suicide risk.

Coping Skills for Adolescents

The pandemic has transformed the lives of adolescents aged 13-18 years and how they behave (O'Sullivan et al., 2021). Disruptions with child care, losing a job, loss of income, and decrease in work hours have negatively impacted adolescent's health and well-being (O'Sullivan et al., 2021). Additionally, practicing social distancing, mourning the loss of attending graduation in person, taking part in prom, and other milestone events have affected the loss of routine and guidance for adolescents during the pandemic (O'Sullivan et al., 2021). The loss of routine and the inability to connect with others has taken its toll on adolescents during the pandemic.

Social Media

A survey among 2,165 Belgian adolescents from age 13-19 years old showed that adolescents had experienced feelings of high anxiety, disconnectedness from normal routines, and loneliness due to COVID-19 (Caugberghe et al., 2021). A qualitative study conducted in Belgium showed that adolescents who are facing depression turn to social media in order to decrease feelings of isolation and nervousness (Caugberghe et al., 2021). Caugberghe et al. (2021) believes that social media such as Instagram, Facebook, and TikTok helped adolescents feel more connected to their friends and made them feel better. Youths are able to communicate with friends in real time while staying at home due to the pandemic. This helps to build a sense of belonging when pictures are posted, videos are personally shared, and feelings are voiced on social media. It helps youth to remain interconnected with their friends and avoid social isolation. Therefore, social media can be a valuable strategy to help adolescents self-regulate, reduce stress, feel better, and increase instances of happiness (Caugberghe et al., 2021).

Social Emotional Learning

The second approach in addressing coping skills for adolescents is Social Emotional Learning or SEL. SEL programs can shape the school climate by increasing self-awareness, motivation, empathy, perspective thinking, and reducing anxiety (Zins et al., 2004). As young adolescents face struggles and challenges during the pandemic, SEL is a timely aid to schools (Zins et al., 2004). How so? SEL helps students to manage and process their emotions and behaviors in order to overcome obstacles that they are going through such as depression, anxiety, sadness, or suicidal thoughts (Zins et al., 2004).

A teacher can set aside time to implement SEL at the beginning, middle, or the end of the school day to meet the social-emotional needs of students. This includes: 1) implementing mindfulness by meditating on good thoughts, 2) painting rocks to show gratitude and placing them outside in the school to look at whenever one is feeling sad or depressed, 3) checking in on student's well-being by asking them how they are feeling during the pandemic, 4) having a worksheet for students to color how they are feeling such as red for angry, yellow for happy, or blue for sad, 5) practicing breathing techniques to calm students who are feeling hurt, depressed, or nervous because of the pandemic, 6) sharing with a small group of students what makes them feel happy and sad, 7) providing scenarios in which students learn how to practice stress and deal with troublesome feelings, and 8) drawing a picture of feelings to represent sadness and happiness.

By implementing these coping skills, it is the hope that students will feel motivated to learn, succeed, and overcome barriers of mental health (Zins et al., 2004). The overall goal for teachers is to provide a caring, safe, and supportive environment to students who are feeling overwhelmed with mental struggles of their own (Elias et al., 1997).

Restorative Circles

A third approach to address coping skills is Restorative Circles. Students who are entering charter, public, or private schools for the first time after the lift of restrictions in COVID-19 may arrive with pressing concerns, heavy hearts, and issues such as depression from dealing with the pandemic on their minds. For this reason, Restorative Circles can help students handle tough situations that they are experiencing (van Woerkom, 2018). Implementing restorative circles at school includes several processes. First, restorative circles can be planned where students sit in a small or whole group circle while facing each other. This can be done by sitting on carpet areas or on chairs. Then, the need to create a safe and supportive place where students can talk is first established by the teacher of record (van Woerkom, 2018).

The teacher provides clear expectations and norms such as how the Restorative Circles will begin with sharing and can end with the lighting of a unity candle. Key values such as kindness, courage, empathy, patience, and respect are explored within the restorative circle (van Woerkom, 2018). Students are invited and welcomed to honestly share their experiences with the group during this sacred space in class. All the while, peers listen with an open mind, be fully present and engaged, and exhibit good listening skills (van Woerkom, 2018). According to van Woerkom (2018) the support students receive from their peers in the form of verbal acknowledgment through paraphrasing and empathy is essential. Restorative circles can help students cope with feelings of depression, anxiety, or fear as experienced from the pandemic.

According to Santos (2021), “physical isolation and stress from the pandemic are pressuring students to drop out of school” (p.1). In a study conducted by the Mexican National Statistical and Mapping Agency, over 5.2 million students were forced out of school due to the lack of technology during the pandemic which was a factor that put them at-risk of dropping out of school (Santos, 2021). Santos (2021) believes that teaching social emotional skills provides resilience to keep students in school. Social emotional skills can also help adolescents to cope with stress, anxiety, fear, and depression during the pandemic.

Restorative Practice

Restorative Practice is a way to address social emotional skills. According to Kidde and Alfred (2011), a school-wide prevention program begins with a framework. The framework is called School-wide Prevention Practices which includes developing social-emotional understanding and building healthy relationships with others (Kidde & Alfred, 2011). At this level, the school creates norms, builds community, and develops social emotional learning while students are attending school (Passarella, 2017). Restorative Practice includes: 1) practicing mindfulness, 2) identifying and expressing emotions by journaling, 3) planning activities that focuses on building trust and a sense of belonging, 4) role-playing to problem-solve issues, 5) exhibiting a positive growth mindset, and 6) managing stress by practicing breathing exercises during the school day. Studies have shown then when this intervention is in effect, trust, empathy, and respect are built to help students cope with their emotions (Morrison & Vandearing, 2012). This intervention can also help students who are coping with anxiety, depression, fear, and suicidal thoughts as faced during and prior the pandemic.

Intervention

The last approach for youth who are expressing deep depression, continual sadness, isolation, or crisis situations is to have one on one support (Kidde & Alfred, 2011). This support can be provided by administrators, counselors, teachers, paraprofessionals, and school site personnel. A study completed in St. Paul, Minnesota showed that when one on one intervention was implemented among two elementary and one junior high school students, it helped to cultivate empathy skills, reduce violence, harm to self and others, and a reduction in behavioral issues (Stinchcomb et al., 2006).

Conclusion

It is not yet clear as to how the impact of COVID-19 pandemic has affected the mental health of adolescents as there isn't longitudinal data yet available. The consideration of coping skills to help address mental health disorders are a few steps teachers and parents can take to address the welfare of adolescents.

This consideration is especially important as adolescents are more capable of experiencing long-term consequences of mental health if not addressed in a timely manner (De Miranda et al., 2020). Therefore, it is imperative that stakeholders such as educators, counselors, parents, and caretakers meet the needs of adolescents while at school and at home in order to prevent long term mental health issues.

APA References

- Barendse, M. E. A., Flannery, J. E., Cavanagh, C., Aristizabal, M., Becker, S. P., Berger, E., Breaux, R., Campione-Barr, N., Church, J., Crone, E., Dahl, R., Dennis-Tiway, T. A., Dvorsky, M. R., Dziura, S. L., van de Groep, S., Ho, T. C., Killoren, S. E., Langberg, J. M., Larginho, T. L.,... Pfeifer, J. H. (2021, February 3). Longitudinal change in adolescent depression and anxiety symptoms from before to during the COVID-19 pandemic: A collaborative of 12 samples from 3 countries. <https://doi.org/10.31234/osf.io/hn7us>
- Cauberghe, V., Wesenbeeck, I.V., De Jans, S., Hudders, L., & Ponnet, K. (2021). How adolescents use social media to cope with feelings of loneliness and anxiety during COVID-19 lockdown. *Cyberpsychology, Behavior, and Social Networking*, 4(24), 250-257. DOI: 10.1089/cyber.2020.0478
- Chen, F., Zheng, D., Liu, J., Gong, Y., Guan, Z., & Lou, D. (2020). Depression and anxiety among adolescents during COVID-19: A cross-sectional study. [letter to the editor]. *Brain, Behavior, and Immunity*, 88, 36–38. <https://doi.org/10.1016/j.bbi.2020.05.061>
- De Miranda, D. M., Da Silva Athanasio, B., De Sena Oliveira, A. C., & Silva, A. C. S. (2020). How is COVID-19 pandemic impacting mental health of children and adolescents? *International Journal of Disaster Risk Reduction*. (51), 1-8. <https://doi.org/10.1016/j.ijdr.2020.101845>
- Elias, M. J., Zins, J. E., Weissburg, R. P., Frey, K. S., Greenberg, M. T., Haynes, N. M., Kessler, R., Schwab-Stone, M. E., & Shriver, T. P. (1997). *Promoting social and emotional learning: Guidelines for educators*. Association for Supervision and Curriculum Development.
- Erikson, E. H. (1968). *Identity: Youth and crisis*. W. W. Norton.
- Gerhart, E., & Hatim, O. (2021). COVID and teens: A commentary. *Dynamics of Human Health*, 8(2), https://journalofhealth.co.nz/?page_id=2557
- Hoekstra, P. J. (2020). Suicidality in children and adolescents: Lessons to be learned from the COVID-19 crisis. *European Child and Adolescent Psychiatry*, 29, 737–738. <https://doi.org/10.1007/s00787-020-01570-z>
- Hill, R. M., Rufino, K., Kurian, S., Saxena, J., Saxena, K., & Williams, L. (2021). Suicide ideation and attempts in a pediatric emergency department before and during COVID-19. *Pediatrics*, 147(3), 1-7. DOI: 10.1542/peds.2020-029280
- James A. C., James G., Cowdrey F. A., Soler A., & Choke A. (2015). Cognitive behavioural therapy for anxiety disorders in children and adolescents. *Cochrane Database of Systematic Reviews*, (2) DOI: 10.1002/14651858.CD004690.pub4
- Joseph, S. (2020). Isolation and mental health: The psychological impact of COVID-19 lockdown on children. *Mukt Shabd Journal*, 9(8), 399-405
- Kidde, J., & Alfred, R. (2011). Restorative justice: A working guide for our schools. Alameda County School Health Services Coalition https://crededucation.net/resources/Alameda_County_Restorative_Justice_Report_2011.pdf
- Loades, M.E., Chatburn, E., Higson-Sweeny, N., Reynolds, S., Shafran, R., Brigden, A., Linney, C., McManus, M. N., Borwick, C., & Crawley, E. (2020). Rapid systematic review: The impact of social isolation and loneliness on the mental health of children and adolescents in the context of COVID-19. *American Academy of Child and Adolescent Psychiatry*, 59(11), 1218-1239. <https://doi.org/10.1016/j.jaac.2020.05.009>
- Longobardi, C., Morese, R., & Fabris, M. A. (2020). COVID-19 emergency: Social distancing and social exclusion as risks for suicide ideation and attempts in adolescents. *Frontiers in Psychology*, (11)551113, 1-3. <https://doi.org/10.3389/fpsyg.2020.551113>
- Magson, N. R., Freeman, J. Y., Rapee, R. M., Richardson, C. E., Oar, E. L., & Fardouly, J. (2021). Risk and protective factors for prospective changes in adolescent mental health during the COVID-19 pandemic. *Journal of Youth and Adolescence*, 50(1), 44-57. <https://doi.org/10.1007/s10964-020-01332-9>

- Manzar, M. D., Albougami, A., Usman, N., & Mamun, M. A. (2021). Suicide among adolescents and youths during the COVID-19 pandemic lockdowns: A press media reports-based exploratory study. *Journal of Child and Adolescent Psychiatric Nursing*, 34, 139-146. <https://doi.org/10.1111/jcap.12313>
- Morrison, B., Blood, P., & Thorsborne, M. (2005). Practicing restorative justice in school communities: Addressing the challenge of culture change. *Public Organization Review*, 5(4), 335–357. <https://doi.org/10.1007/s11115-005-5095-6>
- Morrison, B. E., & Vaandering, D. (2012). Restorative justice: Pedagogy, praxis, and discipline. *Journal of School Violence*, 11(2), 138–155. <https://doi.org/10.1080/15388220.2011.653322>
- Muskin, P. (2021, June). *What are anxiety disorders?* American Psychiatric Association. <https://www.psychiatry.org/patients-families/anxiety-disorders/what-are-anxiety-disorders>
- Nixon, J. & Nelson, K. (2020, July). *The impacts of isolation and physical distancing on children and youth*. Community Engaged Scholarship Institute. <https://atrium.lib.uoguelph.ca/xmlui/handle/10214/21305>
- O’Sullivan, K., Clark, S., McGrane, A., Rock, N., Burke, L., Boyle, N., Joksimovic, N., & Marshall, K. A. (2021). Qualitative study of child and adolescent mental health during the COVID-19 pandemic in Ireland. *International Journal of Environmental Research and Public Health*, 18(3), 1062. <https://doi.org/10.3390/ijerph18031062>
- Orgilés, M., Morales, A., Delvecchio, E., Mazzeschi, C., & Espada, J. P. (2020). Immediate psychological effects of the COVID-19 quarantine in youth from Italy and Spain. *Frontiers in Psychology*, DOI: 10.3389/fpsyg.2020.579038
- Panchal, N., Kamal, R., Cox, C., Garfield, R., & Chidambaram, P. (2021, May 26). *Mental health and substance use considerations among children during the COVID-19 pandemic*. Kaiser Family Foundation. <https://www.kff.org/coronavirus-covid-19/issue-brief/mental-health-and-substance-use-considerations-among-children-during-the-covid-19-pandemic/>
- Passarella, A. (2017). Restorative practices in schools. Johns Hopkins. Retrieved from, <https://jscholarship.library.jhu.edu/bitstream/handle/1774.2/62995/osi-restorativepracticemastheadfinal-1.pdf?sequence=1>
- Pereria, I. & Mitropoulos, A. (2021, March 6). *A year of COVID-19: What was going on in the US in March 2020*. ABC News. <https://abcnews.go.com/Health/year-covid-19-us-march-2020/story?id=76204691>
- Petito, A., Pop, T. L., Namazova-Baranova, L., Mestrovic, J., Nigri, L., Vural, M., Sacco, M., Giardino, I., Ferrara, P., & Pettoello-Mantovani, M. (2020). The burden of depression in adolescents and the importance of early recognition. *European Paediatric Association*, 218, 265-268. <https://doi.org/10.1016/j.jpeds.2019.12.003>
- Santos, M. (2021). What is social and emotional learning? Advancing students forward. Retrieved from: https://advancingstudentsforward.org/what-is-social-and-emotional-learning/?gclid=CjwKCAjw55-HBhAHEiwARMCszgYxcmuh6zoTj7ZdboTgOGCNL-jIFC8-2UgxdnCjappXPnvt1WBOPxoCsoEQAvD_BwE#more-2193
- Schwartz, M. D., & Costello, K. L. (2021, May 01). Eating disorder in teens during the COVID-19 pandemic. [letter to the editor]. *Journal of Adolescent Health*, 68(5), 1022. <https://doi.org/10.1016/j.jadohealth.2021.02.014>
- Smirni, P., Lavanco, G., & Smirni, D. (2020). Anxiety in older adolescents at the time of COVID-19. *Journal of Clinical Medicine*, 9(10), 1-10.
- Stephenson J. (2021). Children and teens struggling with mental health during COVID-19 pandemic. *JAMA Health Forum*, 2(6), 1-2. DOI:10.1001/jamahealthforum.2021.1701
- Stinchcomb, J. B., Bazemore, G., & Riestenberg, N. (2006). Beyond zero tolerance: Restoring justice in secondary schools. *Youth Violence and Juvenile Justice*, 4(2), 123–147. <https://doi.org/10.1177/1541204006286287>
- Szlyk, H. S., Berk, M., Peralta, A. O., & Miranda, R. (2020). COVID-19 takes adolescent suicide prevention to less charted territory. *Journal of Adolescent Health*, 67(2), 161-163. <https://doi.org/10.1016/j.jadohealth.2020.05.046>
- Van Woerkom, M. (2018, March 12). Building community with restorative circles. Edutopia. Retrieved from: <https://www.edutopia.org/article/building-community-restorative-circles>
- Zins, J. E., Weissberg, R., Wang, M., & Walberg, H. (2004). *Building academic success on social and emotional learning*. Teachers College Press.