MENTAL HEALTH AT CHILD CARE INSTITUTIONS:
DURING COVID-19
Introduction

The COVID-19 pandemic has not only altered the socio-economic fabric of the world but has led to a progressive decline in the overall wellbeing of individuals. While we grapple with the health and economic impact of the pandemic, its profound effect on our mental health remains under addressed. Recent mental health trends indicate that rates of depression, anxiety, frustration, irritability and general psychological distress is rapidly increasing among the general population. The United Nations has urged governments across the globe to take mental health consequences seriously and ensure widespread availability of mental health support.

Children are often silent victims of any calamity. This looming mental crisis will also have serious implications on the mental wellbeing of children. The pandemic and the unprecedented measures to contain its spread are disrupting nearly every aspect of children’s lives: their health, development, learning, behavior, their families’ economic security, and their protection from violence and abuse.

Part 1

General psychological concerns during COVID-19

- **Loss of social networks:** We normally deal with challenges and adverse situations by accessing our social networks. But the COVID-19 imposed lockdown has severely restricted our social circles which were essential to our ability to cope in adverse situations.

- **Decreased access to coping resources:** In addition to limited access to social networks, people are also unable to access essential coping resources such as hobbies and activities that they engage in to de-stress.

- **Loneliness and mental health concerns:** Indian Psychiatric Society has found a 20% increase in mental health concerns since the Coronavirus outbreak in India. COVID-19 imposed lockdown and physical distancing measures are increasing feelings of loneliness. Such feelings are triggering psychological concerns of depression, thoughts of self-harm, declining self-esteem.
Fear of falling ill: Individuals are feeling anxious about falling ill, becoming carriers, or the fear of the death of a loved one. Some behavioral patterns observed have been:

1. Compulsive hand washing and de-sanitizing
2. Obsessive updates about COVID-19 related information, news
3. Conversing, sharing and thinking COVID-19 information without a break
4. Daydreaming or nightmares about falling ill
5. Making plans in case of falling ill.
6. The increased hesitancy of going out or meeting others

Many individuals may be afraid to resume their life for the fear of falling ill, hesitant to go back to work, not wishing for children to return to schools. They may also fear being discriminated against if they are detected COVID positive.

Increased uncertainty and monotony of life: Individuals are facing uncertainty in all aspects of personal and professional lives coupled with a sense of monotony in the mundane routine of everyday life that is adversely affecting mood and coping.

Decreased immunity: Due to COVID-19 stressors of falling sick, inability to access coping resources, changes in our diet, and sleeping patterns along with reduced activity have increased the risk of declining our immunity.

Mental health impact of the lockdown: Research on isolation and quarantine has shown to adversely affect the mental health of individuals. Those with pre-existing mental health conditions may progressively decline, especially if they have limited access to medication and psychotherapy. Individuals with no pre-existing conditions may begin to show symptoms of mental health concerns such as:

1. Irritability
2. Mood fluctuation - very low mood to sudden anger
3. Changes in appetite and sleeping patterns
4. Difficulty in concentrating
5. Thoughts of self-harm
6. Increased crying
7. Sitting passively in a corner (physical and mental fatigue)
8. Not being participative in activities that once interested them
9. Physical symptoms of distress:
   - Sweating
   - Racing heartbeat
   - Tense, shaking limbs
   - Sudden body aches
   - Digestive issues - diarrhea

Due to COVID-19 stressors of falling sick, inability to access coping resources, changes in our diet, and sleeping patterns along with reduced activity have increased the risk of declining our immunity.
Increased exposure to violence: Individuals are increasingly being exposed to violent situations. There is an increased in incidences of domestic violence and other gender-based violence across the Country. Additionally, all individuals are exposed to information about violence and challenging times across the globe.

Gendered Impact: The Pandemic has affected men and women differently. Studies have shown that domestic violence, exploitation, emotional and sexual abuse are on the rise during this period. Women are likely to become scapegoats in their household and face discrimination.

Use of Substances: Individuals are likely to indulge in excessive intake of alcohol, tobacco, and other illicit substances during this time as a means of coping during these challenging and distressing times.

Increased exposure to negative information: News reports and social media are filled with information about COVID related deaths, negligence of the citizens, suffering of the others, etc. This information can get toxic and emotionally draining. The perception of the situation is likely to cause extreme distress and anxiety.

Part 2

Children living in Child Care Institutions (CCI) may also experience similar mental health concerns as mentioned above. However, their placement in the CCI may expose them to vulnerabilities unique to their circumstance. Their concerns have been detailed below.
Feelings of isolation: Many children are experiencing loneliness as their normal routine continues to be put on hold due to the COVID-19 imposed restrictions. Children are unable to maintain essential social interactions as schools remain shut, they are unable to meet visitors, donors, or even interact with their family members.

Uncertainty about the future: Many children residing in CCIs are experiencing distress due to the uncertainty of their future. Some signs of distress observed:

- Changes in sleeping and eating habits.
- Increased crying.
- Increase in conflicts and fights among the residents.
- Increased mood fluctuation. (anger, sadness, irritability)
- Compulsive information gathering about COVID-19 especially regarding the end of the lockdown period.
- Narratives of hopelessness such as, ‘What is the point of doing anything? Nothing is going to change’; ‘All my efforts have gone to waste’.
- Thoughts of self-harm such as, ‘I am already dead inside, how does it matter if I live or die’.
- Seeking out adults to gather COVID related information asking questions such as, ‘When will the lockdown be lifted?’; ‘Has a cure been found?’; ‘When will things return to normal?’.

Decisions for restoration of children are pending or delayed which has led to frustration and aggressive outbursts such as, crying, throwing things, increased use of abusive language, threats of self-harm i.e. ‘I will cut my wrist if you don’t let me go’; ‘I will run away from the institution’.

The plans for the future of many children have been derailed. Children who may have wanted to work in the hospitality sector are now afraid if there will be any job opportunities available.

Many children are seeking out stability and support during these tough times, prior to COVID they wished to focus on their careers and access After care facilities now they are considering returning to their families.
**Feeling stuck:** Children may share feelings of frustration such as being stuck at the Institution especially if their restoration process was previously underway. Some signs of distress that may be observed in them are:

- Anger
- Denial
- Irrational thoughts

**Re-traumatization:** The lack of control and feeling of helplessness created by the pandemic is akin to their experiences of trauma and may lead to re-experiencing of traumatic memories. Signs to look out for:

- **Regressive behavior:** bed-wetting, thumb sucking, using childlike voice, egocentric views, immediate gratifications
- **Compulsive cleaning** (especially for victims of sexual trauma).
- **Changes in sleeping patterns:** insomnia or oversleeping
- **Hypervigilance** and **increased sensitivity** to external sounds, smells, and colors.
- **Mood fluctuations:** angry, sad, irritable, and frustrated
- **Seeking out support and comfort through regular questions** such as. ‘Will everything be okay?’; ‘Will I be safe?'; sharing a bed, holding hands, etc.

**Lack of understanding of the news:** The influx of information regarding COVID-19 may not always be understood by children. Thus, leading to rumors, additional details being added, discussions among themselves or confusing information from other Countries or States to their place of residence.

**Concern for family’s well-being:** Children living away from their family are apprehensive of their family’s safety and well-being. This adversely affects their mental health at the Institution. They regularly ask to be connected to them and question about their well-being from all trusted sources. Some of the concerns shared by children are:

- If their family is able to procure basic necessities like ration and other essentials to survive.
- Worried about their families income in the case of a job loss.
- Experiencing guilt of not being with their family or in anticipatory grief that they might not have been able to say goodbye.
- In situations where the loved one of a child may pass away, the child may experience intense grief.
- Concern about being a burden on their families in times of extreme financial crisis (for children who are to be restored back to their families).
Behavioral concerns: Children are experiencing severe distress and it often manifests in their behavior. Some signs we have observed are:

- Mood fluctuations i.e. low mood, increased anger and frustration.
- Unwillingness to do chores.
- Decreased interest in activities.
- Seeking the comfort of adult caregivers i.e. sitting next to them, following them around etc.
- Decrease in hygiene.
- Inability to concentrate on activities.
- Increased impulsivity and reckless behavior i.e. wanting to step out without evaluating the consequences of such a decision.

Anticipatory and disenfranchised grief: Experiencing difficulty in verbally articulating experiences of grief over events such as inability to go to vocational training, not being able to see family in person, no social contact outside of caregivers, etc. These feelings may not be expressed but are manifested in children’s behavior.

Children with special needs: Children with special needs may find it more difficult to accept the information and adjust to the new normal. They may begin to show a decline in their progress, for e.g. a child who could dress on their own may now need assistance for the same action. They are also more likely to be frustrated but find it difficult to articulate the same resorting to self-harm - hitting the head, slapping themselves, pulling hair; or behave aggressively towards others - physical fights with others; increased crying and compulsive actions

Relapse to pre-existing mental illness: Children clinically diagnosed with mental health conditions may show a steep decline in their well-being and progress during this emotionally distressing time i.e. thoughts of self-harm and passive suicidal ideation may resurface.

Insensitivity of Caregivers: The lack of sensitive communication with the children may lead to additional feelings of distress among them. Furthermore, the children may feel that the caregivers do not fully understand their concerns, needs, or wants.

Fear of stigma or discrimination: Children may have a fear of stigma or discrimination if they have flu-like symptoms.
Increased and regular contact of children with their families:
- Set up a regular routine for phone calls, if possible use video calls.
- If possible, increase the phone contact time to 15 minutes, ensuring each child is able to talk to their family for 15 minutes.
- Trying being as flexible as possible with the timings if there is a need.

Teach children self care i.e. maintaining hygiene, taking precautions, etc.

Encourage flexibility: When establishing the child’s routine encourage their participation in the same. The goal of the routine should focus on the child’s well-being. Focusing on improving productivity may not be beneficial at this time as the child is under a great amount of stress.

Digital Access: The digital medium of learning and communication has become a norm in this time, it has its pros and cons. It is important to limit digital access for the children to help them deal with their stresses.

Increased sensitivity in communication:
- Be empathetic when communicating with children.
- Acknowledge and listen to their thoughts, feelings, and concerns.
- Refrain from making false promises and assurances i.e. ‘everything will be okay’, ‘as soon as lockdown is lifted, you will meet your family/ be restored’.
- Provide accurate, concrete and age-appropriate information regarding COVID-19. It’s okay to say that you do not have sufficient information and will get back to them.
- Regular and patient repetition of all information shared is required.
- Appreciate efforts during these tough times.
- Discourage the narrative of productivity i.e. ‘This is the time to learn new skills’; ‘Why aren’t you using this time to study?’ etc. should not be used.
- Be empathetic to children’s emotional experiences.
- End conversations on a positive note i.e. use mindfulness and grounding techniques during this time.
Helping a child find a safe place/person: This helps children experience internal stability in times of stressful situations - children could be asked to make a crib of their own near their bed or choose a place in the CCI which they find calming or approach someone they feel safe speaking to.

Encourage regular use of coping strategies: Coping strategies such as art-based activities, journaling, physical activity, mindfulness etc. can be added to the child’s daily routine.

Discussing news regularly (in an age-appropriate way): This should be done only if the child requests for information. It is important to stick to facts and not pass on one’s personal perceptions of the situation to the children.

Informing the children about the governmental aid their families may avail.

Dealing with uncertainty: Focus on the present - ‘How can I take care of myself now?’ Developing a new hope for the future - ‘What is the first thing I will once the lockdown has been lifted and it is safe again?’; ‘Who do I want to see first from my school/college/family?’

Using affirmations with the child by encouraging them to do the same.

Part 4

Self care tips for Caregivers

Get 8 hours of sleep.

Drink adequate water and make sure you are eating healthy meals.

Be self compassionate: You are also going through a difficult time, it’s okay to struggle

Know your limitations: In the pandemic situation, we have limited resources to help ourselves and others, acknowledging this would help caregivers to feel less exhausted and guilty.

Regularly engage in coping strategies: Deep Breathing, Exercising, Practicing a hobby, taking regular breaks, self-care activities, using humor in day to day life, Affirmations, Systematic Body relaxation, grounding, Mandala making etc.
Stay in contact with loved ones.

Caregivers with high blood pressure and diabetes must take additional precautions, and follow the medical advice given.

If you see and feel any symptoms of COVID-19 coming on, don’t fear being discriminated in the neighborhood rather quickly visit the doctor and get tested.

If visiting the CCI regularly, follow all sanitization procedures properly.

If working from home, do not sit on any screen continuously for a long time. Blink your eyes frequently.

Stretching exercises may help in resolving body stiffness.

If you are attending webinars, try to avoid headphones. Try and use the laptop/phone speakers.

Don’t disrupt your natural sleeping pattern.

Don’t use any screen as your stress buster. Try to remember your other hobbies which are not connected to the screen.

If the information you read/come across on social media and in the news related to the pandemic is stressful for you, it is important to limit the intake of this information.

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