



Managing a Child's Anxiety Disorders during a Pandemic

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Abstract

Objective: A Pandemic crisis devastating to families all over the world. Many families have lost their jobs, homes and freedom due to individuals and families being quarantined in their homes. As a result of a quarantine, children have been isolated from their friends and schools. Many children and families have developed anxiety issues because since they have been banned from attending school, separation from friends and isolated from rewarding social educational activities that are usually conducted in a school setting. This social isolation may trigger anxiety in children and if not addressed some of these children may develop future developmental and mental health issues.

Methods: Simple Descriptive Study, research articles were derived from multiple internet search engines.

Results: Anxiety and depression in children between the ages of 6-17 increased from 5.4% in 2003 and in 2007 increased to 8% and finally 8.4 % in 2011–2012, hence, an exploration of this topic has been conducted to investigate mental illness and possible treatment for children [1].

Consequences: It is essential that children are treated for their anxiety especially manifested by isolation from school and friends. If anxiety is untreated their mental health may decline and lower their quality of life.

Conclusion: Pandemic disasters are destructive for children and families. It is essential to treat children who have experienced natural disasters possibly referring the child to appropriate counselors to provide guidance to the patient and their families on alternative coping mechanism to manage anxiety. By guiding the child and family the child's health outcomes and their quality of life.

Keywords: Cognitive Behavioral Therapy, Anxiety, Pandemic

Managing a Child's Anxiety Disorders after a Pandemic

A pandemic can be devastating for children and their families. According to the Centers for Disease Control [2], in 1918-19 flu pandemic called the Spanish Flu killed as many as 50 million people worldwide [2]. These disasters can lead to multiple problems for children and their families including loss of employment, separation/isolation from friends and family and possible loss of homes due to loss of income as a result of isolation. One problem that has resulted from this pandemic is fear and anxiety in children. Historically, pandemic disasters have transpired the United States multiple times. With the Spanish Flu, H1N1 and other pandemics an abundance of

knowledge was gained with these disasters and how pandemics were managed however [3]. As a consequence of a pandemic many have development mental health issues such as anxiety and depression. One issue that could result with lack of treatment in individuals is stress, substance abuse sadness, depression and anxiety [4].

Review of Literature

According to Sadock, B. et al. [5], anxiety is "one of the most common disorders affect 10-20% of children and adolescents" [5]. Children may begin to feel anxiety disorder when they become isolated from their familiar environment. When children become isolated from their family, friends and school they begin to have anxious types of symptoms. Some signs and symptoms children may have insomnia, restlessness, and inability to concentrate to mention a few of symptoms associated with anxiety [5].

According to the Centers of Disease Control [3], between 2005-2011 the most prevalent mental health problems in the age group of -17 years old which included: anxiety disorders which were 3.0%, depression was 2.1%, and behavioral or conduct problems was 3-5%. For the age group of adolescents aged 12-17 years old they were identified as having illicit drugs use 4.7% and alcohol disorder 4.7%. Suicide, was the second leading cause of death among adolescents aged 12–17 years in 2010. These are alarming numbers considering that interventions can be utilized to ameliorate signs and symptoms of mental health issues by creating a treatment for the child. If left untreated a child may turn to various types of alternative coping. Some outlets a teenager or young adult may utilize are illegal drugs [6].

Treatment and Management

Treatment and management involves both medical and comprehensive treatments including cognitive behavioral therapy, psychotherapy for the child, family and may involve pharmacological treatment if needed. Medication of choice for anxiety are selective serotonin reuptake inhibitors and benzodiazepines. They have been shown to be effective for short-term use pharmacotherapy, when combined cognitive behavioral therapy this will yield more effective results [7].

Cognitive Behavioral Therapy

Cognitive behavioral therapy (CBT) is a therapy that is designed and catered per individual. and is typically recommended for children prior to initiation to pharmacotherapy. CBT has short-term goals and resolution for their respective problems and is typically utilized

for anxiety. CBT is typically done on a 1:1 basis but can also be done in a group [8].

Pharmacotherapy

Selective Serotonin Reuptake inhibitors, such as sertraline, paroxetine, fluvoxamine, fluoxetine and benzodiazepines have been effective in the treatment of separation anxiety for children. According to the National Institute of Health [9], a comprehensive review of pediatric trials conducted between 1988 and 2006 suggested that the benefits of antidepressant medications, suicidal ideation, likely outweigh their risks to children and adolescents with major depression and anxiety disorders [9].

Parents and care givers can help facilitate to all the adjustments that may occur with the after-math of a pandemic. Some parents be experiencing anxiety themselves, however, they can explain to the child the after-math of the natural disaster. A parent must also listen to what the child is thinking and feeling. Parents can make the child feel safe and secure by talking with them about the future in a positive manner to help the child feel safe.

Parents should also limit social media and television use to avoid watching the pandemic which avoid feelings of anxiety. Parents can also take their child to their pediatrician for their well child visits to ensure they are reaching their respective developmental milestones. According to the CDC [1], recommendations include taking breaks from watching, reading, or listening to pandemic information on the news. Recommendations also include taking deep breaths, stretch, eating health, well-balanced meals, exercise regularly, getting plenty of sleep. Parents should encourage children to connect with others, perhaps by phone, writing cards to families and friends and to do activities children enjoy like playing outdoors, take a walk or go on a bike ride [1].

Implementing into Practice

A healthcare professional such as an advanced practice nurse, a registered nurse, counselor, can learn to identify signs and symptoms of children experiencing separation anxiety from their parents or caregivers. As professionals many of us have learned theory and how to assess and evaluate our patients. However, to manage children that have actually been separated from their parents from actual disasters can be challenging. One must be astute to listening to their patients' and to assess for signs and symptoms associated with anxiety and monitor for other subtle symptoms. Screening tools will also help to assess for anxiety.

Conclusion

Pandemic disasters can be devastating for children and their families and can lead to multiple problems which include financial burden, loss of employment for parents and mental health issues including fear and anxiety. Children may react differently to pandemic disasters than adults, children may have a strong reaction to a disaster or an emergency, especially if separated from their family, friends and school. Many children may react immediately to a crisis where some children may internalize their anxiety which may manifest in their future. Therefore it is imperative that children are evaluated by their pediatricians and their counselors to discuss underlying anxiety so that a treatment plan can be created to treat the child and to improve their health outcomes and their quality of life for themselves and their families. Children must also be taught to avoid exposure to micro-organisms by washing their hands for 20 seconds and avoid touching their eyes, nose and face and to practice social distancing [1].

Conflicts of interest/Competing interests: Authors report no conflict or competing interest.

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