COVID-19 AND CHILDREN'S MENTAL HEALTH: THE MAIN CHALLENGES

Dainius Pūras Department of Psychiatry, Vilnius university Human Rights Monitoring Institute Former UN Special rapporteur on the right to health (2014-2020)

CDNEF Webinar series on COVID-19 and Children's Rights – "Children's Mental health - Intrafamily violence"

COVID-19 pandemic: impact on mental health

- Many mental health related issues were exacerbated by crisis or emerged newly due to the crisis
- Violence against children. Adverse childhood experiences. Toxic stress. Insecurity. Quality of parenting and parent-child relationships
- School closures
- Lack of socialization in general and relationships with peers
- Illness or bereavement of family members
- Prolonged exposure to screens
- Lack of physical activity
- Lack of child/adolescent friendly services
- Are national mental health systems ready to effective response (before, during and after pandemic)?

Basic principles of modern approach to human rights of the child

- Right to life, survival and (holistic) development (CRC art 6)
- Non-discrimination on any ground (CRC art 2)
- Right to be heard (participation/inclusion) (CRC art 12)
- Best interests of the child (CRC art 3)

- Child is a subject (owner) of his/her rights, and not an object.
- Evolving capacities of the child. Children should be protected. But they should not be overprotected
- Children and families representing groups in vulnerable situations, should not be left behind. COVID-19 pandemic has activated importance of protection of all human rights as effective remedy

Mental health promotion

- Social and environmental determinants of mental health (including psychosocial/emotional environment)
- All forms of violence, discrimination and inequalities have negative impact to mental health
- States need to invest in enabling non-discriminatory and non-violent environments in all settings (family, school, workplace, community, healthcare and other services, society at large)
- All services to children/adolescents should be child/adolescent friendly (take into account their rights/needs)
- Support families with variety of community based non-discriminatory services
- Full implementation of human rights based approach is an obligatory pre-condition of effective investment in mental health and well-being (including promotion, prevention, treatment, rehabilitation, recovery)
- These issues are relevant to development, sustaining and monitoring of preventive and therapeutic services to children and families

Time of crisis may be helpful in re-thinking and improving mental health related services

- Mental health as an emerging priority should be addressed in multisectorial and rights based way
- Right to holistic development is as important, as is right to life and survival (CRC art 6).
- Interventions should target not just individuals and their brains. They should firstly target relationships and social determinants of health and reduce/eliminate violence, discrimination and inequalities
- Avoid another wave of excessive pathologization and medicalization during the process of assessment and management
- Avoid institutional care
- Take into account evolving capacities: adolescents should be protected, but not overprotected
- Example of management of adolescent depression: "watchful waiting" may be helpful approach in milder cases

The ways to address challenging behavior of adolescents

- All history of child/adolescent mental health care is to large extent about how to balance important targets of interventions child, family, community, society?
- Spectrum of interventions primary and secondary prevention, family based interventions, foster care and other. Key issues therapeutic alliance (relationship) and supportive environments.
- Family focused and community based interventions are effective when they promote resilience, strengthen protective factors, empower children and parents, promote coping skills, eliminate or reduce violence, discrimination and inequalities.
- Universal human rights principles should be observed in development of family policies (to prevent discrimination and violence against members of family)
- Working towards healthy, non-violent and trustful relationships should be among the main goals.

The State of the World's children 2021 (UNICEF report)

- Urgent investment in child and adolescent mental health across sectors, not just in health, to support a whole-of-society approach to prevention, promotion and care.
- Integrating and scaling up evidence-based interventions across health, education and social protection sectors - including parenting programmes that promote responsive, nurturing caregiving and support parent and caregiver mental health; and ensuring schools support mental health through quality services and positive relationships.
- Breaking the silence surrounding mental illness, through addressing stigma and promoting better understanding of mental health and taking seriously the experiences of children and young people.

Conclusion: a need for change

- Human rights imperative. UN Human Rights Council Resolutions on mental health and human rights (2016, 2017, 2020) <u>A/HRC/RES/43/13.</u>
- Council of Europe resolution (2019) on ending coercion in mental healthcare <u>http://assembly.coe.int/nw/xml/XRef/Xref-XML2HTML-</u> <u>en.asp?fileid=28038&lang=en</u>
- Address adversities in childhood and adolescence with all policies
- Prevent excessive medicalization of diversities, disabilities, mental health conditions
- Mainstream mental health and discontinue investments in segregated psychiatric and "correctional" institutions
- Prioritize child/adolescent friendly psychosocial interventions. Therapeutic relationships a key!
- Replicate good practices that provide non-discriminatory and non-coercive mental health services
- Address all forms of discrimination and violence. Dignity must prevail!