Counselling Support for Children and Adolescents during COVID-19 Pandemic

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Abstract

Children and Adolescents are not left out in the struggles to survive in the existing emerging psychological crisis of Covid -19 pandemic. Children are likely to be experiencing worry, anxiety and fear, and this can include the types of fears that are very similar to those experienced by adults, such as fear of dying, fear of their relatives dying, or fear of what it means to receive medical treatment in an isolated facility. Since schools have closed as part of necessary measures, then children may no longer have that sense of structure and stimulation that is provided by that environment. Consequently, and now they have less opportunity to be with their friends and get that social support that is essential for developing good mental well-being. Being at home can place some children at increased risk of, or increased exposure to, child protection incidents or make them witnesses of interpersonal violence if their home is not a safe place. Counselling support must begin by encouraging active listening and an understanding attitude with the children and adolescents because of their differential responses to a difficult/unsettling situation in different ways either by clinging to caregivers, feeling anxious, withdrawing, feeling angry or agitated, having nightmares, bedwetting, frequent mood-changes. When therefore the counsellor engages in active listening and understanding attitude the counselling support he gives next becomes effective.

Keywords: Counselling Support, Children, Adolescents, COVID-19 Pandemic.
Introduction

In December 2019, the Chinese authorities informed the world of the rapid spread of a new type of virus, initially named CoV-2019, identifying its epicenter in the city of Wuhan belonging to the Hubei province. In February 2020, the International Committee on Taxonomy of Viruses (ICTV) assigned the definitive name to the new corona virus: “SARS-CoV-2”. During the same period, the World Health Organization (WHO) announced “COVID-19” as the official name of the new disease, to identify the severe acute respiratory syndrome caused by SARS-CoV-2. The aim of this brief article is a preliminary analysis of the psychological interventions following the infectious disease outbreak in order to implement guidelines for the existing emerging psychological crisis for people directly and indirectly affected by COVID-19, and establish adequate procedures and prompt responses.

Currently, the global population is living under stressful conditions of forced quarantine (i.e., isolated at home, ordinary isolation ward or intensive care unit) characterized by self isolation, social distancing, separation, accompanied by a deep loss of freedom, uncertainty and intolerance of uncertainty. Quarantine is often characterized by negative emotions such as fear, anger and frustration which may lead to anxiety, boredom and/or a feelings of uneasiness (Brooks, Webster, Smith, Woodland, Wessely, Greenberg, & Rubin, 2020; Qiu, Shen, Zhao, Wang, Xie, & Xu, 2020), which endorses negative beliefs about the individual’s ability to cope. An even worst case-scenario can be envisaged for children who are the most vulnerable in the community, since they are likely to be at risk for developing more anxiety about the pandemic, particularly if they are already treated for anxiety (Bitanihirwe, 2016) or if they are susceptible to uncertainty.

Results emerging from empirical researches, carried out in comparable periods of quarantine, underlined additional components of psychological distress such as: maladaptive behaviours (excessive information seeking, avoidance, or impulsive decision-making) and feelings of loss (Chiumento, Rahman, Frith, Snider, & Tol, 2017; Paules, Marston, & Fauci, 2020). In particular, feelings of loss seem to consistently correlate with the conflict between a sense of duty (I’m staying at home in order to contain the infection spread/I’m going to work because I cannot abandon my patients) and disruptive sensations since across decades and centuries, there have always been epidemics and pandemics. These pandemics have threatened
the entire human race and brought effects upon businesses and professions in diverse ways. During the COVID-19 outbreak, children’s and adolescents can experience anxiety and panic symptoms due to: Lack of information or facts, Influence by social media, fear and anxiety about a disease can be overwhelming and cause strong emotions in children and adolescent. Coping counselling support with the current pandemic will make the individual, the people they care about, and the whole community stronger. These feelings can be normal in view of the outbreak when they receive counselling support. However, how children to the current lock down and adolescents respond makes a difference Against this backdrop this paper sets out to provide counselling support for children and adolescents during Covid-19 pandemic.

**Impact of COVID-19 crisis on children and adolescent**

This is indeed an unprecedented time for all of us, especially for children who face an enormous disruption to their lives. Children are likely to be experiencing worry, anxiety and fear, and this can include the types of fears that are very similar to those experienced by adults, such as fear of dying, fear of their relatives dying, or fear of what it means to receive medical treatment in an isolated facility. If schools have closed as part of necessary measures, then children may no longer have that sense of structure and stimulation that is provided by that environment. Consequently, and now they have less opportunity to be with their friends and get that social support that is essential for developing good mental well-being. Being at home can place some children at increased risk of, or increased exposure to, child protection incidents or make them witnesses of interpersonal violence if their home is not a safe place.

Although all children are receptive to change, young children may find the changes that have taken place difficult to understand, and both children and adolescents may express irritability and anger. Children and adolescents may find that they want to be closer to their parents, make more demands from them, and, in turn, some parents or caregivers may be under undue pressure themselves as a result of the current lock down and stay at home order.

Simple strategies that can address this can include giving young people the love and attention that they need to resolve their fears, and being honest with them, explaining what is happening in a way that they can understand. Parents also need to be supported in managing their
own stressors so that they can be models for their children. Zhou, (2020) avow that helping children to find ways to express themselves through creative activities, and providing structure in the day – if that is possible – through establishing routines, particularly if they are not going to school anymore, can be beneficial. Mental health and psychosocial support services should be in place, and child protection services need to adapt to ensure that the care is still available for children and adolescents who need it.

Managing family communications and supporting children and adolescents based on age/developmental stages in a time of COVID-19

Infants and toddlers (0- 3 years) are unlikely to understand the implications of COVID-19. But they can understand when a caregiver is worried, sad, or upset. Children this age may not have words to describe their feelings but they may be more fussy than usual or show changes in their sleep or feeding patterns. Maintaining routines and consistency in caregivers and environments is important because it provides a sense of security and safety. They may need more physical comforting and soothing than usual from their caregivers.

Preschoolers (3 - 5 years) may understand basic ideas about germs and being sick. Maintaining routines and minimizing exposure to adult sources of information (television, online information) is important. Encouraging normal play and reading with children of this age can be helpful because preschoolers’ often use play to understand and organize their feelings. Offering brief explanations while focusing on prevention and practicing hygiene behaviours (examples, counting or singing while hand washing) can help children feel a sense of control. Letting them know that you are there to keep them safe can help reduce fears or anxiety. Children of this age may also need more physical comforting and reassurance.

School age children (> 6 years) may ask more questions. Keep your explanations simple and factual. Give them opportunities to explore their feelings and concerns, and provide appropriate assurances about your efforts (and the school’s efforts) to keep them safe. Supervise television/internet use and be available to answer questions that arise from media exposure.

Adolescents (> 13 years) can cognitively process information much more like adults, and may get information through school, peers, social media/ online sources, or television. They may be more likely to seek alternate sources of information or support (example peers) than parents, some of which may not be accurate. They will benefit from your emotional support, discussing
the facts, and help with setting appropriate limits related to media and internet use. Focus on listening, and invite your adolescent children to join you in watching and discussing COVID related news, or in exploring online information together.

**Begin from the beginning**

- Begin by asking your child what he or she knows and explore what questions they have. Children may ask questions that are quite specific to them. For instance, younger children are more likely to ask questions about changes to their own family’s plans (examples, cancelled birthday parties or trips), and concrete questions such as what are germs, and why is hand washing important.

- Experiencing unexplained changes to routines or uncertainty can be confusing and increase worries. Provide factual information, using age-appropriate terms (examples. virus, germs, COVID-19), followed by reassurance. For instance, with young school-aged children, you might say: “We are learning about this new germ/virus so that scientists can make the right medicine for it”.

**Provide realistic assurance to help children and adolescents engage in positive coping.**

- Validate your children’s feelings or concerns, and provide realistic assurance. For instance, “Doctors are telling us that the best way to stay healthy is by washing our hands often” and “by catching your cough in your elbow (or by using a tissue)”. With older children: “Scientists and doctors are working to help us learn more about this special virus”. You may also consider telling them that “This virus usually does not make kids very sick, but it can make some grown-ups very sick.” The counselling support of explaining to children that practicing the recommended hygiene behaviours help everyone stay safe can help them feel calm and in control.

- Engage in positive active coping with your child. This can include reading together, playing, or being physically active. If you are limiting physical contact with others and social events, consider alternate ways of staying connected to friends and family members through phone calls, video conferencing, or making cards and writing emails or
letters. This counselling support will helps children stay emotionally connected to you and the people they care about.

- If your child has pre-existing medical conditions, it is important that you consult with your child’s primary care provider about additional precautions for your child, and speak to your child about information specific to him/ her. This will aid the youngster in the stay home stay safe principle.

Balance flexibility with maintaining routines.

- Even though you may need to be flexible and responsive to accommodate changes in work or school schedules, try to maintain normal routines and prioritize family time (e.g., homework, family meal times) as much as possible. Familiar routines and predictability help children feel that life is going on as normal, which can help them feel safe and secure when other aspects of life fall out of control or unpredictable.

- Allow flexibility in your own routine. Children may need extra attention at this time and this should not be denied them.

Manage media and internet access: staying informed without getting overwhelmed.

- Children and adolescents, who use social media or have online access, are likely to hear a lot of information, some of which may not be accurate. Ask your children about what they have heard, and help them understand the information. Clarify misconceptions and remind them of the things they, and your family, can do to be safe such as hand washing, avoiding large groups of people, etc.

- Set healthy limits with media/ internet use. For instance, you could discuss the importance of getting information from trusted sources and identify those age-appropriate sources (e.g., parents, school teachers and specific websites).

- Talk to children about the fact that excessive focus on media and online information can be anxiety provoking and counterproductive. Finding ways to balance being safe and relaxed are both important.
• Parents can model healthy limits to media and television use (and provide healthy alternatives like watching a favorite family movie together).

Care of children in the period of pandemic

• Help children find positive ways to express feelings such as fear and sadness. Every child has his/her own way of expressing emotions. Sometimes if they are helped to engage in creative activities, such as playing and drawing, the process is facilitated since children feel relieved if they can express and communicate their feelings in a safe and supportive environment.

• Keep children close to their parents and family, if considered safe for the child, and avoid separating children and their caregivers as much as possible. If children need to be separated from their primary caregiver, ensure that appropriate alternative care is provided and that a social worker, or equivalent, will regularly follow up on them.

• Ensure that during periods of separation (unavoidable) regular contact with parents and caregivers is maintained, such as twice-daily scheduled phone or video calls or other age-appropriate communication (example, social media depending on the age of the child).

• Maintain familiar routines in daily life as much as possible, or create new routines, especially if children must stay at home. Provide engaging age-appropriate activities for them, including learning activities. As much as possible, encourage them to continue to play and socialize with others, even if only within the family when advised to restrict social contract.

• During times of stress/crisis of this nature it is common for children to seek more attachment and be more demanding on parents. This being the case the COVID-19 pandemic should be discussed with them using honest and age-appropriate way. If they have concerns, addressing them together may ease their anxiety, without prejudice to the fact that children will normally observe adults’ behaviours and emotions for cues on how to manage their own emotions during difficult times.
Care of adolescents with underlying health conditions

Adolescents and/or young persons in isolation/quarantine centres and those with cognitive decline/dementia may become more anxious, angry, stressed, agitated, and withdrawn. There is the need to provide practical and emotional support through informal networks (families) and health professionals as listed below:

- Share simple facts about what is going on and give clear information about how to reduce risk of infection in words adolescents and/or young people with/without cognitive impairment can understand. Repeat the information whenever necessary.
- Instructions need to be communicated in a clear, concise, respectful and patient way.
- It may also be helpful for information to be displayed in writing or pictures. Engage their family and other support networks in providing information and helping them practice prevention measures (example, hand washing etc.).
- If you have an underlying health condition, make sure to have access to any medications that you are currently using. Activate your social contacts to provide you with assistance, if needed.
- Be prepared and know in advance where and how to get practical help if needed, like calling a taxi, having food delivered and requesting medical care. Make sure you have adequate supply of all your regular medicines.
- Teach them simple daily physical exercises to perform at home, in quarantine or isolation centres to maintain mobility and reduce boredom.
- Keep regular routines and schedules as much as possible or help create new ones in a new environment, including regular exercising, cleaning, daily chores, singing, painting or other activities.
- Help others, through peer support and checking in on your neighbours.
- Keeping regular contact with loved ones (example, via phone or other accesses).
- Prepare a personal safety pack, which The pack may include a summary of basic personal information, available contacts, medical information, and regular medicines for two weeks, storable preferred snacks, a bottle of water, and some personal clothes.
Counselling support for children and adolescents during the COVID-19 pandemic

Counselling services are vital in providing counselling support to children and adolescents suffering from stress necessitated by any pandemic including lockdown during COVID-19. First and foremost the counselling support must begin by encouraging active listening and an understanding attitude with the children and adolescents because of their differential responses to a difficult/unsettling situation in different ways either by clinging to caregivers, feeling anxious, withdrawing, feeling angry or agitated, having nightmares, bedwetting, frequent mood-changes. When therefore the counsellor engages in active listening and understanding attitude the counselling support he gives next becomes effective.

- Children and adolescent usually feel relieved if they are able to express and communicate theirs disturbing feelings in a safe and supportive environment. So help them to find positive ways to express disturbing feelings such as anger, fear and sadness.
- Encourage an increased sensitive and caring environment around the children and adolescents since they need adults’ love and often more dedicated attention during difficult times.
- Remember that children and adolescents often take their emotional cues from significant others in their lives, so how the counsellors respond to the crisis is very important. It’s important they manage their own emotions well and remain calm, listen to their client’s concerns and speak kindly to them and reassure them. If appropriate and depending on the age, encourage parents/caregivers to hug their children and adolescents and repeat that they love them and are proud of them. This will make them feel better and safer.
- If possible, make opportunities for children and adolescents to play and relax. This is particularly important because in our current school system, children in the nursing section are generally deprived of the initial kidgegantin experiences of “Play Garden” where they were expected to play safe and socialize. The opportunity of stay home and stay safe provided by the COVID-19 pandemic should be judiciously utilize so that lost opportunities might be regained.
• Encourage the clients to be close to their parents and family, if considered safe for the children and adolescent, and avoid separating them from their caregivers as much as possible. If they need to be separated from their significant others, ensure that appropriate alternative care is provided and that social workers, or equivalent, will regularly follow from where the counsellor had stopped.

• If children and adolescent are separated from their counsellor physically, ensure regular and frequent contact (example, via phone, video calls) continuous re-assurance since there is always light at the end of the tummel. This will ensure that all children and adolescents protection and safeguarding measures are addressed.

• Keep regular routines and schedules as much as possible or help create new ones in a new environment, including learning, playing and relaxing. If possible, maintain schoolwork, study or other routine activities that do not over task children and adolescent or go against health conditions. The clients should only continue to attend school where is it allowable and if it is not a risk to their health.

• Provide facts about what is going on and give clear child-friendly information about how to reduce risk of infection and stay safe in words they can comprehend easily. Demonstrate to children and adolescents how they can keep themselves safe practically.

• Avoid speculating about rumours or unverified information in front of children and adolescent. In fact the counsellor should guide against unverifiable information in social media.

• Provide information about what has happened or could happen in a reassuring, honest and age-appropriate way. What is implied here is that the counsellor should provide the right information to clients at the right time. In other words if a given client (either a child or an adolescent) is old enough to ask a question, he or she is old enough to be given a right answer otherwise he or she might get the wrong answer from the wrong person.

• Support adults/caregivers with activities for children during home isolation/quarantine. Activities should explain the virus but also keep children and adolescent active when they are not at school, for example: hand washing games with rhymes imaginary stories about the virus exploring the body make cleaning and disinfecting the house into a fun game
draw pictures of virus/microbes which should be coloured by children explaining Personal Protective Equipment (PPE) to children and adolescents in such a way that they are not scared.

Conclusion

In conclusion, this paper had provided counselling support for our of school children and adolescents during the current corona virus pandemic. This pandemics will no doubt provided invaluable lessons in terms of global responses in all facet of human endeavour, and Nigeria, as is the case for many other countries, in providing counselling support for children and adolescent in this COVID-19 outbreak, It is pivotal, however, that we do not ignore the psychological impact that the outbreak has on individuals and the society, which is often the limiting factor for the nation to overcome the crisis. Copping counselling support with the psychosocial for children and adolescent must attract the desires attention ever now than before because lives is dear and have to be preserved. This study have review among others; impact of COVID-19 crisis on children’s and adolescent’s mental health, Counselling support for helping children deal with stress during the outbreak, Provide realistic assurance to help children and adolescents engage in positive coping, Managing family communications and supporting children and adolescents in a time of COVID-19 the psychological counselling support ramifications can be long-lasting even after the epidemic has ended.
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