

BÖLÜM 49

COVID-19 SALGINININ ÇOCUK VE ERGEN RUH SAĞLIĞI ÜZERİNE ETKİLERİ

Miraç Barış USTA¹
Hatice GÜLŞEN²

GİRİŞ

Pandemiler, bireyleri fiziksel olarak etkilemekle birlikte ruh sağlığı üzerinde de olumsuz sonuçlar doğurmaktadır. Bu tür dönemler toplumda yarattığı psikososyal yan etkilerden dolayı insanlarda çeşitli ve karmaşık travmalara neden olmaktadır. Çocukluk ve ergenlik döneminde yaşanan travmalar, bazıları acil olmakla birlikte müdahale edilmedikleri zaman yaşamında kalıcı hale gelebilecek sorunlara yol açmaktadır. Karmaşık travmalara maruz kalmak, öz denetim ve kişilerarası ilişkilerde bozulmalarla sonuçlanabilmektedir. Ayrıca travmanın çeşidi, şiddeti, maruz kalınan gelişimsel dönem ve süresine göre depresyon, anksiyete bozuklukları, yeme ve uyku bozuklukları, iletişim ve bağlanma bozuklukları, dikkat eksikliği/hiperaktivite bozukluğu (DEHB), karşıt olma karşıt gelme bozukluğu ve madde bağımlılığı gibi psikiyatrik rahatsızlıklar şeklinde karşımıza çıkabilmektedir (1).

Çocukların olayları anlamlandırma ve baş etme becerilerinin sınırlı olması, duygularını ifade etmede zorluk yaşamaları nedeniyle ruhsal

olarak erişkinlere göre daha farklı tepkiler vermektedirler. Kriz durumlarına verilen tepkiler, kişinin önceki yaşantılarına, fiziksel ve ruhsal sağlığına, ailenin sosyoekonomik durumuna ve kültürüne göre değişebilmektedir (2). Çocukların ise travmaya verdikleri yanıtta ebeveynlerin vermiş olduğu tepkiler büyük önem arz etmekte, özellikle üç unsur fark yaratmaktadır:

1. Ebeveynlerin çocukların yaşadıklarına inanması ve onaylaması
2. Çocuğun tepkilerini tolere edebilmesi
3. Ebeveynin kendi duygu ve davranışlarını yönetebilmesi

Eğer bakım veren çocuğun yaşadığı travmayı reddederse çocuk hiç travma yaşamamış gibi davranmaya zorlanabilir ve bakım verene olan güveni sarsılır. Verdiği tepkiler tolere edilemediğinde çocuk kendi duygu ve davranışlarından kaçınarak onları bastırabilir, ebeveyninden uzaklaşabilir. Ebeveynlerin duygularını yönetemediği durumlarda çocuklar onlar yerine “ebeveynlik” yapmak zorunda kalarak kendi sorunları yerine onların sıkıntılarını azaltmaya çalışabilir (3).

¹ Dr. Öğr. Gör. Miraç Barış Usta, Ondokuz Mayıs Üniversitesi, Çocuk Psikiyatri Anabilim Dalı, miracbaris.usta@omu.edu.tr

² Araş. Gör. Dr. Hatice Gülşen, Ondokuz Mayıs Üniversitesi, Çocuk Psikiyatri Anabilim Dalı, hatice.gulsen@omu.edu.tr



KAYNAKLAR

1. Cook A., Spinazzola P., Ford J., et al., Complex trauma in children and adolescents. *Psychiatric Annals*, 2005;35:390-398.
2. Dalton L., Rapa E., and Stein A., Protecting the psychological health of children through effective communication about COVID-19. *The Lancet Child & Adolescent Health*, 2020;4:346-347.
3. Deblinger E., Cognitive behavioral interventions for treating sexually abused children. Thousand Oaks, 1996;
4. Friedrich W.N., Psychological assessment of sexually abused children and their families. 2002: SAGE.
5. Lyons-Ruth K. and Jacobvitz D., Attachment disorganization: Unresolved loss, relational violence, and lapses in behavioral and attentional strategies. *Handbook of Attachment: Theory, Research, and Clinical Application*. 1999. 520-554.
6. Teicher M.H., Andersen S.L., Polcari A., et al., Developmental neurobiology of childhood stress and trauma. *Psychiatr Clin North Am*, 2002;25:397-426, vii-viii.
7. Crittenden P.M. and DiLalla D.L., Compulsive compliance: the development of an inhibitory coping strategy in infancy. *J Abnorm Child Psychol*, 1988;16:585-599.
8. Culp R.E., Watkins R.V., Lawrence H., et al., Maltreated children's language and speech development: Abused, neglected, and abused and neglected. *First Language*, 1991;11:377-389.
9. Beers S.R. and De Bellis M.D., Neuropsychological function in children with maltreatment-related posttraumatic stress disorder. *Am J Psychiatry*, 2002;159:483-486.
10. Jiao W.Y., Wang L.N., Liu J., et al., Behavioral and Emotional Disorders in Children during the COVID-19 Epidemic. *The Journal of Pediatrics*, 2020;
11. Shevlin M., McBride O., Murphy J., et al., Anxiety, Depression, Traumatic Stress, and COVID-19 Related Anxiety in the UK General Population During the COVID-19 Pandemic. 2020;
12. World Health Organisation., Mental health and psychosocial considerations during the COVID-19 outbreak, 18 March 2020. 2020; World Health Organization.
13. Buheji M., Hassani A., Ebrahim A., et al., Children and Coping During COVID-19: A Scoping Review of Bio-Psycho-Social Factors. *International Journal of Applied*, 2020;10:8-15.
14. Imran N., Zeshan M., and Pervaiz Z., Mental health considerations for children & adolescents in COVID-19 Pandemic. *Pakistan Journal of Medical Sciences*, 2020;36:
15. Xie X., Xue Q., Zhou Y., et al., Mental Health Status Among Children in Home Confinement During the Coronavirus Disease 2019 Outbreak in Hubei Province, China. *JAMA Pediatrics*, 2020;
16. Hawryluck L., Gold W.L., Robinson S., et al., SARS control and psychological effects of quarantine, Toronto, Canada. *Emerging Infectious Diseases*, 2004;10:1206.
17. Türkiye Bilimler Akademisi, Covid-19 Pandemi Değerlendirme Raporu, in Türkiye Bilimler Akademisi Yayınları. 17 Nisan 2020.
18. Garfin D.R., Silver R.C., and Holman E.A., The novel coronavirus (COVID-2019) outbreak: Amplification of public health consequences by media exposure. *Health psychology : official journal of the Division of Health Psychology*, American Psychological Association, 2020;39:355-357.
19. Honig A.S., Secure relationships: Nurturing infant/toddler attachment in early care settings. 2002: ERIC.
20. Dalton L., Rapa E., Ziebland S., et al., Communication with children and adolescents about the diagnosis of a life-threatening condition in their parent. *Lancet (London, England)*, 2019;393:1164-1176.
21. Golberstein E., Gonzales G., and Meara E., How do economic downturns affect the mental health of children? Evidence from the National Health Interview Survey. *Health economics*, 2019;28:955-970.
22. Halk Sağlığı Uzmanları Derneği, *Yeni Koronavirüs Haber Postası*. 2020 [cited 2020; Available from: <https://korona.hasuder.org.tr/hasuder-yeni-koronavirus-covid-19-haber-postasi-29-04-2020/>].
23. Ghosh R., Dubey M.J., Chatterjee S., et al., Impact of COVID-19 on children: Special focus on psychosocial aspect. *Minerva Pediatrica*, 2020;72:34.
24. Norredam M., Nellums L., Nielsen R.S., et al., Incidence of psychiatric disorders among accompanied and unaccompanied asylum-seeking children in Denmark: a nation-wide register-based cohort study. *European child & adolescent psychiatry*, 2018;27:439-446.
25. Lyytinen H., Erskine J., Tolvanen A., et al., Trajectories of reading development: A follow-up from birth to school age of children with and without risk for dyslexia. *Merrill-Palmer Quarterly-Journal of Developmental Psychology*, 2006;52:514-546.
26. Lee A.M., Wong J.G., McAlonan G.M., et al., Stress and psychological distress among SARS survivors 1 year after the outbreak. *Canadian journal of psychiatry. Revue canadienne de psychiatrie*, 2007;52:233-240.
27. Hawryluck L., Gold W.L., Robinson S., et al., SARS control and psychological effects of quarantine, Toronto, Canada. *Emerg Infect Dis*, 2004;10:1206-1212.
28. Adams P.R. and Adams G.R., Mount Saint Helens's ash-fall. Evidence for a disaster stress reaction. *Am Psychol*, 1984;39:252-260.
29. Schumacher J.A., Coffey S.F., Norris F.H., et al., Intimate partner violence and Hurricane Katrina: predictors and associated mental health outcomes. *Violence Vict*, 2010;25:588-603.
30. Cerna-Turoff I., Kane J.C., Devries K., et al., Did internal displacement from the 2010 earthquake in Haiti lead to long-term violence against children? A matched pairs study design. *Child Abuse Negl*, 2020;102:104393.
31. Campbell A.M., Hicks R.A., Thompson S.L., et al., Characteristics of intimate partner violence incidents and the environments in which they occur: Victim reports to responding law enforcement officers. *Journal of interpersonal violence*, 2017;0886260517704230.
32. Cluver L., Lachman J.M., Sherr L., et al., Parenting in a time of COVID-19. *Lancet (London, England)*, 2020;395:e64.
33. Curtis T., Miller B.C., and Berry E.H., Changes in reports and incidence of child abuse following natural disasters.



- ters. *Child Abuse Negl*, 2000;24:1151-1162.
34. Brooks-Gunn J., Schneider W., and Waldfogel J., The Great Recession and the risk for child maltreatment. *Child Abuse Negl*, 2013;37:721-729.
 35. US Department of Health Human Services, Child maltreatment 2012. 2013;
 36. Taha S., Matheson K., Cronin T., et al., Intolerance of uncertainty, appraisals, coping, and anxiety: the case of the 2009 H1N1 pandemic. *Br J Health Psychol*, 2014;19:592-605.
 37. Rath B., Donato J., Duggan A., et al., Adverse health outcomes after Hurricane Katrina among children and adolescents with chronic conditions. *Journal of health care for the poor and underserved*, 2007;18:405-417.
 38. Lee J., Mental health effects of school closures during COVID-19. *The Lancet Child & Adolescent Health*, 2020;
 39. Golberstein E., Wen H., and Miller B.F., Coronavirus Disease 2019 (COVID-19) and Mental Health for Children and Adolescents. *JAMA Pediatrics*, 2020;
 40. Xiang Y.T., Zhao Y.J., Liu Z.H., et al., The COVID-19 outbreak and psychiatric hospitals in China: managing challenges through mental health service reform. *International journal of biological sciences*, 2020;16:1741-1744.
 41. Sartorius N., Comorbidity of mental and physical diseases: a main challenge for medicine of the 21st century. *Shanghai archives of psychiatry*, 2013;25:68-69.
 42. Narzisi A., Handle the Autism Spectrum Condition During Coronavirus (COVID-19) Stay At Home period: Ten Tips for Helping Parents and Caregivers of Young Children. *Brain sciences*, 2020;10:
 43. Cortese S., Asherson P., Sonuga-Barke E., et al., ADHD management during the COVID-19 pandemic: guidance from the European ADHD Guidelines Group. *Lancet Child Adolesc Health*, 2020;4:412-414.
 44. Cole D.A., Martin J.M., Peeke L.G., et al., Are cognitive errors of underestimation predictive or reflective of depressive symptoms in children: a longitudinal study. *Journal of abnormal psychology*, 1998;107:481-496.
 45. Salkovskis P., Shafran R., Rachman S., et al., Multiple pathways to inflated responsibility beliefs in obsessional problems: possible origins and implications for therapy and research. *Behav Res Ther*, 1999;37:1055-1072.
 46. Laurens K.R., Hobbs M.J., Sunderland M., et al., Psychotic-like experiences in a community sample of 8000 children aged 9 to 11 years: an item response theory analysis. *Psychol Med*, 2012;42:1495-1506.
 47. Downs J.M., Cullen A.E., Barragan M., et al., Persisting psychotic-like experiences are associated with both externalising and internalising psychopathology in a longitudinal general population child cohort. *Schizophrenia Research*, 2013;144:99-104.
 48. Wong K.K., Freeman D., and Hughes C., Suspicious young minds: paranoia and mistrust in 8-to 14-year-olds in the UK and Hong Kong. *British Journal of Psychiatry*, 2014;205:221-229.
 49. Goldman P.S., van Ijzendoorn M.H., Sonuga-Barke E.J.S., et al., The implications of COVID-19 for the care of children living in residential institutions. *Lancet Child Adolesc Health*, 2020;4:e12.
 50. Van Lancker W. and Parolin Z., COVID-19, school closures, and child poverty: a social crisis in the making. *The Lancet. Public health*, 2020;5:e243-e244.
 51. Parpia A.S., Ndeffo-Mbah M.L., Wenzel N.S., et al., Effects of Response to 2014-2015 Ebola Outbreak on Deaths from Malaria, HIV/AIDS, and Tuberculosis, West Africa. *Emerg Infect Dis*, 2016;22:433-441.