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10-16-2020

1.16 THE EFFECT OF QUARANTINE ON THE EMOTIONAL WELL-BEING OF KIDS: A SYSTEMATIC REVIEW

Raheel I. Memon

Henry Ford Health, rmemon2@hfhs.org

Irum Aamer

Muhammad I. Sharif

Zubair H. Bodla

Sadiq Naveed

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Recommended Citation

Imtiaz Memon R, Imran N, Aamer I, Imran Sharif M, Hassan Bodla Z, and Naveed S. 1.16 THE EFFECT OF QUARANTINE ON THE EMOTIONAL WELL-BEING OF KIDS: A SYSTEMATIC REVIEW. *Journal of the American Academy of Child and Adolescent Psychiatry* 2020; 59(10):S144.

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0.001). Inpatients with PTSD had 1.2 times higher odds for suicidal behaviors (95% CI, 1.19-1.26; $p < 0.001$) compared with the non-PTSD cohort.

Conclusions: Diagnosis of PTSD is prevalent in adolescents, especially females and Whites, with anxiety and mood disorders being the most prevalent comorbidities. There exists a significant association between PTSD and suicidal behaviors, with an increased risk of 23% in adolescents. The current PTSD checklist needs modifications to address the gaps in terms of comorbid anxiety and depression and to cover demographic differences in response to trauma.

PTSD, S, ADOL

<https://doi.org/10.1016/j.jaac.2020.08.041>

1.16 THE EFFECT OF QUARANTINE ON THE EMOTIONAL WELL-BEING OF KIDS: A SYSTEMATIC REVIEW



Raheel Imtiaz Memon, MD, Henry Ford Health System, rmemon2@hfhs.org; Nazish Imran, FRCPsych; Irum Aamer, MBBS; Muhammad Imran Sharif, MBBS; Zubair Hassan Bodla, MBBS; Sadiq Naveed, MD, Kansas University Medical Center, naveed193@gmail.com

Objectives: COVID-19 has a significant impact on the mental health of children and adolescents including adverse consequences from quarantine or isolation. In this systematic review, we explore the impact of quarantine and isolation on psychological well-being of youth and propose a comprehensive strategy to reduce psychological burden.

Methods: Three electronic databases including PubMed, Scopus, and Web of Science were searched for relevant articles by using the following search terms: (stigma OR stigmas OR stigmatization OR stigmatization) AND (psych* OR mental OR anxiety OR depression OR stress OR insomnia OR adjustment) AND (quarantin* OR patient isolation OR isolate* OR lockdown OR lock-down OR cordon) AND (child* OR adolescent OR adolescence OR youth). Two independent reviewers performed title and abstract screening followed by full-text screening by using predetermined eligibility criteria. Data were extracted for study population, country of study, scales used to measure for outcome, summary of results, and limitations.

Results: The initial search found 530 unique citations, and 10 studies were included after thorough screening. Among the included studies, the study design was cohort in 4 studies, cross-sectional in 3, and descriptive qualitative in 3. The most common diagnoses were acute stress disorder, adjustment disorder, and PTSD. There was also evidence for restlessness, irritability, anxiety, clinginess, and inattention with increased screen time in children during quarantine.

Conclusions: This review helps in improving the understanding of quarantine's effects on children and adolescents, such as mental health issues, stigma, physical health, education, socialization, and parental perception. We also propose interventions for quarantined children through education, information dissemination, behavioral activation, health care system response, school-based strategies, and other coping techniques.

ADOL, PRE, WL

<https://doi.org/10.1016/j.jaac.2020.08.042>

1.17 THE EFFECTIVENESS OF A GROUP-BASED SUICIDE PREVENTION TREATMENT ADAPTED FOR A COMMUNITY MENTAL HEALTH SETTING



Graziela Solomon, MS, Children's Medical Center Dallas, graziela.solomon@childrens.com; Mehak Gupta, MRC; Jessica D. King, PhD; Rebecca Mathews, PhD; Brooke Gomez, MRC; Brooke Castillo, MA; Jeffery Armstrong, MA; Betsy D. Kennard, PsyD

Objectives: Suicidality is increasing in adolescents and is the second leading cause of death in this age group. An intensive outpatient program (IOP) has been developed to reduce risk for suicidal behaviors in adolescents in an academic medical center. Recently, this IOP was adapted to a community mental health setting to better assist the needs of that community.

Methods: A total of 70 adolescents, aged 12 to 17 years ($M_{age} = 14.7 \pm 1.57$), were enrolled in an 8-week CBT skills group treatment (with DBT components) targeting reducing risk for suicidal behaviors and ideation (eg, reasons for living, behavioral activation, family communication) for 1.5 hours per week. Parents/guardians were involved, participating in 4 sessions that included psychoeducation and communication skills, along with 2 multifamily group sessions with a family communication component. Youth were predominantly Hispanic (63.3%) and female (76.7%). Depressive symptoms and suicidality were assessed at baseline and discharge using the Quick Inventory of Depressive Symptomatology Adolescent version (QIDS-A) and the Concise Health Risk Tracking (CHRT) risk and propensity subscales. In a subset of 18 adolescents, we developed and piloted a family communication measure (Family Health Questionnaire [FHQ]), with the goal of determining whether family communication improved over the course of treatment. The family communication measure was implemented at baseline and discharge.

Results: Paired samples t tests were conducted to analyze the changes in suicidal thoughts and behaviors. Overall, participants reported a significant reduction in depressive symptoms ($M_{entry} = 12.97 \pm 5.34$; $M_{exit} = 10.33 \pm 5.47$; $t_{70} = 5.03$; $p < 0.01$), propensity ($M_{entry} = 21.4 \pm 9.11$; $M_{exit} = 16.15 \pm 9.62$; $t_{70} = 4.76$; $p < 0.01$), and risk ($M_{entry} = 4.24 \pm 3.20$; $M_{exit} = 2.06 \pm 2.67$; $t_{70} = 5.70$; $p < 0.01$). The outcomes for the subset ($n = 18$) were comparable with the overall results ($N = 70$). The family communication measure reported a small effect of improvement in communication between adolescents and their parents/guardians ($M_{entry} = 3.74 \pm 1.37$; $M_{exit} = 4.05 \pm 1.48$; $p = 0.18$; Cohen's $d = 0.22$).

Conclusions: These results support feasibility and acceptability of a suicide risk reduction program across participants. These results also demonstrate that the adaptation of a suicide treatment to a community mental health setting has positive outcomes on depressive symptoms and suicidality and a small effect on improvement in family communication. Limitations include the small sample size, a predominately female sample, and a lack of follow-up data. Although these results are preliminary, our findings indicate that the adaptation of an IOP, developed in an academic medical center, can be successfully expanded to a community mental health clinic.

CBT, ADOL, S

<https://doi.org/10.1016/j.jaac.2020.08.043>

1.18 THE EXPERIENCE OF RECEIVING A DIAGNOSIS OF DEPRESSION: A PILOT STUDY WITH ADOLESCENTS FROM BRAZIL



Anna Viduani, BA, Universidade Federal do Rio Grande do Sul, annaviduani@gmail.com; Silvia Benetti, PhD; Sandra Petresco, MD, PhD; Bruna Velazquez, MD; Jader Piccin, MD, MSC; Valeria Mondelli, MD, PhD; Brandon Kohrt, MD, PhD; Christian Kieling, MD, PhD

Objectives: MDD is a common mental disorder affecting adolescents worldwide. Qualitative studies focusing on adolescent depression, although still not very common, may shed some light on how depression is experienced by youth, as well as their reaction to receiving the diagnosis. This pilot study had the aim to qualitatively explore adolescents' subjective experience of depression.

Methods: A total of 10 Brazilian adolescents (6 boys, 4 girls), aged 14 to 16 years, were interviewed twice: immediately after receiving a diagnosis of MDD and 2 weeks after. All participants were taking part in the Identifying Depression Early in Adolescence (IDEA) study in Porto Alegre, South Brazil. Questions focused on how adolescents perceive and experience feelings of traditional diagnostic criteria (eg, sad mood, irritability) and what aspects they believe caused and/or influenced the onset of their depression. Responses were analyzed using framework analysis.

Results: All adolescents reported having changed as a core component of depression; they seem to understand that depression feels like not being themselves anymore. They often mentioned unspecific feelings of discomfort, and annoyance, but they did not express surprise when diagnosed with depression. All of the adolescents reported feelings of sadness; 7 adolescents also reported irritability as a symptom. Five of those who reported irritability related it to the feeling of sadness toward oneself, because of not wanting or not being capable of talking about one's feelings and emotions.

Conclusions: This first study of Brazilian adolescents highlights the opportunity to discuss how depression can be experienced by young people and its