



## Short Communication

### Teenager's Mental Health Status During COVID-19 in Bangladesh

Turna Tribene Mithila <sup>1</sup>  and Shamima Lasker <sup>2</sup> 



<https://doi.org/10.62865/bjbio.v13i2.67>

**Abstract:** The outbreak of COVID-19 might not have a homogeneous dispersion of its own adverse consequences. Adolescents in the least developed country including Bangladesh who are already underprivileged or fragile predicted to suffer substantial damage and mental health disorders during COVID-19. Adolescents and their families might suffer significantly from a variety of mental health pressures like mood disorders, anxiety, stress, loneliness, depression, and suicidal tendency for children. A systemic literature review throughout PubMed, Google Scholar, and Medline was done to evaluate the research, which covered the years between 2020 and 2022. This manuscript emphasizes how COVID-19 harms children's mental health. Finally, suggestions for parental care, and mental health care for young children are given. Future studies will concentrate on how well age-appropriate, evidence-based mental health services work.

**Key Words:** Teenagers, mental health, COVID-19, Bangladesh, social media

**Introduction:** Mental health is important likewise physical health care; everyone needs to be cautious about mental health care<sup>1</sup>. Research proposed that 20% of children and young adolescents suffer from mental health disorders<sup>2</sup>. According to a survey, it is stated that at least

proportion of young children aged between 5 and 16 are clinically diagnosed with mental health disorders<sup>3</sup>.

However, it is important to note that COVID-19, the terror-like pandemic has increased the rate of mental health

1. Post graduate student, Teesside University, UK. Email: [T.mithila@tees.ac.uk](mailto:T.mithila@tees.ac.uk) ORCID ID: <https://orcid.org/0000-0002-7640-9967>
2. Professor & Head of the Department, Shahabuddin Medical College Email: [Splasker101@gmail.com](mailto:Splasker101@gmail.com) ORCID ID: <https://orcid.org/0000-0002-3484-9526>



disorders among adolescents. In the context of Bangladesh, data from a cross-sectional study in 2020 points out that the children between 5 and 15 years of 25% of experienced major depressive disorder, 13.4% suffered from anxiety disorder, and only 8% were found as insomniacs<sup>4</sup>. Another study during the COVID-19 period showed that 7.4 percent of 100 thought to commit suicide, 0.10 percent planned to commit suicide and 0.70 percent committed suicide in Bangladesh<sup>5</sup>. However, Before the pandemic, 39 school children committed suicide due to exam-related pressure from 2017-2019<sup>5</sup>.

Therefore, teenagers' mental health issues arising from depression, stress, anxiety, and trauma have plunged into the pandemic worldwide. Bangladesh is facing the same problem. Therefore, this article was written to understand how COVID-19 harms children's mental health in Bangladesh and how parental care and mental health care are important for young children.

**Methodology:** A systemic literature review was done by searching PubMed, Google Scholar, and Medline to evaluate the research on how COVID-19 harms children's mental health between the years 2020 and 2022. Teenagers, mental health, COVID-19, Bangladesh, and Social safety net were the keywords.

**Statistics of mental health status among teenagers:** Like physical health problems, mental health problems are also classified as mild, moderate, and severe. Good mental health refers to the proper act of mental health behaviors (thinking power, behavioral approach as per daily activities). On the other hand, bad mental health can be termed as a deviation from a normal thinking process compared to a healthy mind. Mental health problems arise from this bad mental health<sup>1</sup>. Depression, psychosis, bipolar mood disorder, anxiety, and autism (developmental disorder) are common mental health problems in adolescence. In 1999, Weissman mentioned that major depressive disorder leads to suicidal tendencies among teenagers and suicide is the third leading cause of pubertal period globally<sup>2</sup>. Again, teenagers experience

an emotional disorder (anxiety or depression) (4%), conduct disorder (6%), hyperkinetic disorder (2%), and rare disorders like autism, eating disorder, and mutism (1%) respectively<sup>3</sup>. Statistics in 2017 show that one in six children suffer from mental health problems aged between 5 and 16 years old, and 24.6% of children are affected by severe psychosis<sup>6</sup>. Overall, this statistic reveals that children's mental health disorders steadily increased from 1999 to 2017.

**The global effect of COVID-19 on teenagers' mental health:** Covid-19 has affected adolescent's mental health terribly worldwide. Now, the question is whether Covid-19 worsens teenage mental health conditions or not. The answer might be remained in the state-wise child and adolescent mental health disorder rate. Rizvi et al (2022) mentioned that during COVID-19, above 35% of Chinese children aged between 3 and 18 showed excess adherence in behaviour, nearly 32% experienced irritability, and 28% suffered from worries<sup>7</sup>. Looking forward to the US and Italy, statistics showed that only 5.5% of parents notified that their children had major distress problems. Similarly, Asian Journal Psychiatry manifested, 26.4 percentile teenagers aged between 4 to 10 years living in Italy suffered from insomnia<sup>8</sup>. Like Italy, the US, and China, Bangladesh also experienced the same situation in adolescent mental health. Of 6.2% of teenagers were victims of severe depression and anxiety, whereas 6.9% of children, and at least 4.9% of adolescents had severe sleeping disorders<sup>9</sup>.

**Reasons of Adolescents mental health disorders during COVID-19 in Bangladesh:** COVID-19 entered China in December 2019. After 3 months, on March 20, Bangladesh imposed a lockdown. During lockdown, all schools, sports centers, and playing spots remain closed down. Child and adolescent, geriatric people are being considered vulnerable because they have low immunity. Another fact is, initially, due to lack of vaccination, children, teenagers, and older people are obliged to stay at home during lockdown. In this case, the teenagers must adopt a new schedule over their daily routine. Mostly, they have spent their leisure time

playing online games, classes, and watching movies during lockdown<sup>10</sup>. Doing nothing usually at home, adolescents feel boredom and from these lonely feelings, they experience anxiety, depression, mood disorder, panic disorder, insomnia, and emotional disturbance. Before locking down, only 7.1% of adolescents had emotional disorders and a study showed that this percentage has increased up to 8.6%<sup>10</sup>. Therefore, lockdown over the country has put child and adolescent mental health status in a dark phase. Adolescents generally pass a difficult time in the pubertal period; this mandatory lockdown makes it hazier. In addition, the mental health crisis of teenagers formed from staying home idly has created a burden on family and society. Moreover, some socio-demographic variables such as family issues, the income of parents, social media, parenting style, politics, and demographic location have issued more crises on adolescent's mental health in lockdown<sup>10</sup>.

However, during lockdown, it is seen that the prevalence of behavioral disorders is higher in boys (32.8%) than teen girls (25.5%)<sup>11</sup>. Family crises, parenting style, and social media have affected it more. In the context of Bangladesh, families have tried to create a burden on male children during lockdown. It is a prejudice in Bangladesh that a male child is the light of a family<sup>11</sup>. For this reason, during lockdown, when educational institutes remained closed, the parents put study pressure on them for the betterment of their future. Moreover, coaching centers were also closed. In this case, parents became over-concerned regarding their careers and started creating pressure on them all day long in lieu of giving them mental support. Else, boys tend to go outside in nature with friends for recreation in their leisure time. The lockdown has stopped all these entertaining activities. Male children become depressed while being dominated to maintain strict rules made by parents without having a break for leisure<sup>12</sup>. In lockdown, parents become overprotective of their children, and this results in poor mental health for their teenage children. For instance, parental control over the children dims the potential activities of the children and it seems to be a limitation of teaching since lockdown

has been imposed, vaccination has not been discovered in the initial times of the pandemic, it was mandatory that all teenage must stay at home<sup>13</sup>.

Parents' overprotective behavior made the children socially disconnected from all friends and relatives. This causes loneliness and anxiety problems in young adolescents. Secondly, the parenting style in Bangladesh seems to be patriarchal-centric and autocratic. In most families, children are told to listen to their fathers<sup>13</sup>. For this, after imposing shut down, working parents tend to work from home. The most obedient children have felt panic disorder staying with their parents all the time in lockdown. This is because they do not get a single time to break down their family-made rules. If they do that, they have to suffer from punishment which is horrifying to them. It hampers their mental health tremendously. This makes behavior changes to the children. Their anger and tension create family crises and children from these family issues suffer from depression and mood disorders.

**A critical evaluation of social media during COVID-19 in Bangladesh:** Social networking acts as a social headache and the youth are victimized by it. The far and foremost drawback is to be distracted from social media's positive sides (using sites for enhancing creativity, and minimizing bad moods). Hence, young adolescents are using many sites like YouTube, TikTok, Facebook, and Instagram and presenting their self-identities as false images<sup>14</sup>. Problematic Internet use is causing internet addiction and it increases severe distraction in familial, economic, social, and functional determinants. This means pandemic makes the teenage social media addicted. Media addiction has broken their daily sleep patterns and changed behavior styles. School-going children using social media have made themselves popular by doing mimicry of others which is hazardous for their mental health as it creates fake imagination in their mind. Another fact is, social media sites are not restricted. For this, young adolescents cannot prohibit themselves from watching vulgar scenarios. For this reason, from social media, teenagers can learn about crimes and apply it in their

personal lives which can make them victimized by borderline personality disorder <sup>15</sup>.

E-learning has also negative perceptions among young adolescents in Bangladesh. According to BBC (2019), below 50% of housing has no network connectivity. Like Western countries (US, Australia, UK), Bangladesh also has initiated online learning so that a student can learn via technologies (laptop, mobile, tablet) from home and regard it as teaching centers. It is unfortunate, that e-learning has been set up without preparedness technologies <sup>16</sup>. Due to poor connectivity, student's loss concentration via remote learning. For this, most of the students become anxious about dropping out of the semesters. They get scared that if they fail the semester, they might be out of school or college. This fear makes them restless. This proves that e-learning has cracked up the student's mental health condition. Again, statistics show that above 83% of students have experienced horrifying situations and nearly 26% of students are not able to get permission to mental health support due to online learning-oriented psychological distress <sup>17</sup>. Therefore, these statistics represent a demand to monitor young children's mental health issues during the pandemic.

**Justification for parental care during the pandemic in Bangladesh:** Fear, anxiety, loneliness, calmness in nature, hyperactivity, and mood disorders are just outside expressions of teenage mental health disorders <sup>18</sup>. When their family is a concern, they can figure it out by observing the attitude of a teenager. Surprisingly, they want to sort it with help from a psychologist, or psychiatrist<sup>18</sup>. They never come up to sort out the prevention of the 'causes. That's the exact scenario of adolescent mental health in the social epidemiological context of Bangladesh. It is said that the family is the first school for children. The children learn ABC knowledge from a family. It is a matter of regret but a fact that where parenting style plays an important role in a child's mental health development, many parents need assistance for themselves<sup>19</sup>. In Bangladesh, family violence, child abuse, and divorce are not particular domains to determine the child-rearing status

<sup>20</sup>. For a child's mental health development, besides parenthood, the role of caregiver, institutions, maternal healthcare, and children's dietary patterns need to be explored <sup>20</sup>. In the twenty-first century, along with the increment in literacy level, women's empowerment has become a success for the Government of Bangladesh. Regarding this, both men and women work outside leaving their children to caregivers. In Asia, grandparents, or maid servants act as caregivers. For early childhood education, it is essential to know the behavior scale and happiness criteria measurement for a child <sup>21</sup>. The children are being taken care of for food, bathing, and going to school but the real world remains blank in front of their eyes. For this, after any bullying from friends, and teachers they become fragile. They cannot share it with their parents due to a lack of faith in their parents. It is the worst part of an adolescent life that in their mind, parents can never be friends. This is because most of the young, aged children pass their crucial period without having any support from working parents. In Bangladesh, most, parents do not listen to their children as well <sup>21</sup>.

**Conclusion and further recommendations:** COVID-19 puts tremendous pressure on the mental health of teenagers. Unfortunately, in the case of mental health diseases, teenagers don't have that much courage to express it, as no one can understand. Probably, adolescents find it embarrassing to think that they are the first ones who experience it. In Bangladesh, some parents are surprised to know that like physical health disorders, their children might be affected by mental health disorders. Parents struggle for their children's better future which means, fulfilling their basic needs. If parents cannot get through their young kid's mental health needs, then the youngsters of the family may become a burden. Here, proper care of teenagers is needed by parents especially in the COVID pandemic period because mental health disease can grasp the future of a nation and perhaps, then, it might be costly to tackle the overlooked issue.

## Reference:

- Prescott SL, Greeson JM, El-Sherbini MS, Planetary Health Community Convened by the Nova Institute for Health. No Health without Mental Health: Taking Action to Heal a World in Distress—With People, Places, and Planet 'in Mind'. <https://doi.org/10.3390/challe13020037>
- Racine N, Cooke JE, Eirich R, Korczak DJ, McArthur B, Madigan S. Child, and adolescent mental illness during COVID-19: A rapid review. *Psychiatry research*. 2020 Oct; 292:113307. <https://doi.org/10.1016/j.psychres.2020.113307>
- Merikangas KR, Nakamura EF, Kessler RC. Epidemiology of mental disorders in children and adolescents. *Dialogues in clinical neuroscience*. 2022 Apr 1. <https://doi.org/10.31887/DCNS.2009.11.1/krmerikangas>
- Viner R, Russell S, Saulle R, Croker H, Stansfield C, Packer J, Nicholls D, Goddings AL, Bonell C, Hudson L, Hope S. School closures during social lockdown and mental health, health behaviors, and well-being among children and adolescents during the first COVID-19 wave: a systematic review. *JAMA Pediatrics*. 2022 Jan 18. DOI: <http://www.doi.org/10.1001/jamapediatrics.2021.5840>
- Leong C, Katz LY, Bolton JM, Enns MW, Delaney J, Tan Q, Sareen J. Psychotropic drug use in children and adolescents before and during the COVID-19 pandemic. *JAMA Pediatrics*. 2022 Mar;176(3):318-20. DOI: <http://www.doi.org/10.1001/jamapediatrics.2021.5634>
- Li F, Cui Y, Li Y, Guo L, Ke X, Liu J, Luo X, Zheng Y, Leckman JF. Prevalence of mental disorders in school children and adolescents in China: diagnostic data from detailed clinical assessments of 17,524 individuals. *Journal of Child Psychology and Psychiatry*. 2022 Jan;63(1):34-46. DOI: <https://doi.org/10.1111/jcpp.13445>
- Rezvi MR, Tonmoy MS, Khan B. The mental health of adolescents following the COVID-19 pandemic in Bangladesh. *Asian Journal of Psychiatry*. 2022 Dec 1; 78:103309. DOI: <https://doi.org/10.1016/j.ajp.2022.103309>
- Ullah I, Razzaq A, De Berardis D, Ori D, Adiukwu F, Shoib S. Mental health problems in children & pandemic: Dangers lurking around the Corner and possible management. *International Journal of Social Psychiatry*. 2022 May;68(3):693-6. DOI: <https://doi.org/10.1177/0020764021992816>
- Oliveira JM, Butini L, Pauletto P, Lehmkuhl KM, Stefani CM, Bolan M, Guerra E, Dick B, De Luca Canto G, Massignan C. Mental health effects prevalence in children and adolescents during the COVID-19 pandemic: A systematic review. *Worldviews on Evidence-Based Nursing*. 2022 Apr;19(2):130-7. DOI: <https://doi.org/10.1111/wvn.12566>
- Alam MK, Ali FB, Banik R, Yasmin S, Salma N. Assessing the mental health condition of home-confined university level students of Bangladesh due to the COVID-19 pandemic. *Journal of Public Health*. 2022 Jul;30(7):1685-92. DOI: <https://doi.org/10.1007/s10389-021-01542>
- Barth AM, Meinert AC, Zopatti KL, Mathai D, Leong AW, Dickinson EM, Goodman WK, Shah AA, Schneider SC, Storch EA. A qualitative inquiry of parents' observations of their children's mental health needs during the COVID-19 pandemic. *Children's Health Care*. 2022 Apr 3;51(2):213-34. DOI: <https://doi.org/10.1080/02739615.2021.2003196>
- Raccanello D, Rocca E, Vicentini G, Brondino M. Eighteen months of COVID-19 pandemic through the lenses of self or others: a meta-analysis on children and adolescents' mental health. In *Child & Youth Care Forum* 2022 Aug 29 (pp. 1-24). Springer US. DOI: <https://link.springer.com/article/10.1007/s10566-022-09706-9>
- Johnson MS, Skjerdingsstad N, Ebrahimi OV, Hoffart A, Johnson SU. Parenting in a Pandemic: Parental stress, anxiety, and depression among parents during the government-initiated physical distancing measures following the first wave of COVID-19. *Stress and Health*. 2022 Oct;38(4):637-52. DOI: <https://doi.org/10.1002/smi.3120>
- Aggarwal K, Singh SK, Chopra M, Kumar S. Role of social media in the COVID-19 pandemic: A literature review. *Data Mining Approaches for Big Data and Sentiment Analysis in social media*. 2022:91-115. DOI: <http://doi.org/10.4018/978-1-7998-8413-2.ch004>
- Parlak Sert H, Başkale H. Students' increased time spent on social media, and their level of coronavirus anxiety during the pandemic predict increased social media addiction. *Health Information & Libraries Journal*. 2022 Jul 7. DOI: <https://doi.org/10.1111/hir.12448>
- Maatuk AM, Elberkawi EK, Aljawarneh S, Rashaideh H, Alharbi H. The COVID-19 pandemic and E-learning: challenges and opportunities from the perspective of students and instructors. *Journal of Computing in Higher Education*. 2022 Apr;34(1):21-38. DOI: <https://doi.org/10.1007/s12528-021-09274-2>
- Gupta R, Aggarwal A, Sable D, Chahar P, Sharma A, Kumari A, Maji R. Covid-19 pandemic and online education: Impact on students, parents and teachers. *Journal of Human Behavior in the Social Environment*. 2022 May 19;32(4):426-49. DOI: <https://doi.org/10.1080/10911359.2021.1909518>

18. Balayar BB, Langlais MR. Parental Support, Learning Performance, and Socioemotional Development of Children and Teenagers During the COVID-19 Pandemic. *The Family Journal*. 2022 Apr;30(2):174-83.

DOI: <https://doi.org/10.1177/10664807211052496>

19. Shelleby EC, Pittman LD, Bridgett DJ, Keane J, Zolinski S, Caradec J. Associations between local COVID-19 case rates, pandemic-related financial stress and parent and child functioning. *Journal of Family Psychology*. 2022 Apr 28. DOI: <https://psycnet.apa.org/doi/10.1037/fam0000996>

20. Gassman-Pines A, Ananat EO, Fitz-Henley II J, Leer J. Effect of daily school and care disruptions during the COVID-19 pandemic on child behavior problems. *Developmental psychology*. 2022 Apr 28. DOI:

<https://psycnet.apa.org/doi/10.1037/dev0001373>

21. Gennetian LA, Gassman-Pines A. 24 Parents as Earners: What Parental Work Means for Parenting and the Role of Public Policy. DOI: <https://doi.org/10.1542/peds.2020-007294>

#### **Acknowledgement:**

We acknowledge the support from Teesside University and Professor Barry Tolchard, Dr Rebekah McNaughton, and Peter Raby of Teesside University. We are grateful to all bridge staff (Neurology), Elysium healthcare, Middlesbrough who helped to give this idea.

**Author's contribution:** First author Turna Tribenec Mithila came up with the concept, planned the research design, conducted the literature review,

second author Shamima Lasker developed the article and thoroughly verified the article.

**Conflict of Interest:** No conflict of interest has arisen in this article.

**Funding:** Non