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The long shadow of the COVID-19 pandemic on children and adolescents' mental health.

In May 2023, the World Health organisation announced the end of the COVID-19 pandemic (1), which killed nearly 7 million persons worldwide since 2020 (2). One of the well-described consequences of the pandemic and of the sanitary crisis which resulted from it was a rapid and durable deterioration in the mental health of children and adolescents: in particular, a notable increase in levels of anxiety and depression (3). While this increase was highest during the course of 2020, it appears that contrary to what has been observed in adults (4), there has been no major improvement in the psychological health of young people since 2022. What is more, there is evidence of increases in self-harm and suicidal attempts (5), that is clinically-significant mental health problems that require medical attention. While the deterioration in youths' mental health during the pandemic, when fear of illness and death due to COVID-19 made the headlines, schools were closed, sports and leisure activities were curtailed and social relations were limited, is understandable (6), what could explain the persistence of what appears to be a mental health crisis among young people? Several articles in this issue of European Child and Adolescent Psychiatry shed light upon some of the mechanisms that may be at play.

First, the study conducted by Calvano et al (7), shows an increase in levels of verbal, physical and sexual abuse towards children during the course of the COVID-19 pandemic, as well as a worsening of parental mental health. Child maltreatment and abuse are among the best described risk factors of children's poor mental and physical health over the long-term, and the increase in the prevalence of violence among parents and toward children could have lasting effects (8). Second, the study conducted by Rapport et al. shows that children's mental health additionally fluctuated with the prevalence of COVID-19 infection rates (9). Clearly, COVID-19 infection rates were a source of stress in and of themselves and were additionally related to the stringency of protective measures implemented, as well as decreased parental mental health in part due to a worsening in employment and income (10, 11). Several reports highlighted the relationship between parental levels of stress, anxiety and depression as well as their fluctuations and children's mental health (12-15). It may be that in some families the COVID-19 pandemic precipitated the occurrence of parental symptoms of anxiety and depression, which in turn had a negative impact on parent-child interactions – possibly during critical periods of development - and therefore exert long-term consequences on youth wellbeing (16). Third, the COVID-19 appears to have had an impact on social behaviours that may have consequences on children's and adolescents' psychological difficulties - in particular an increase in the levels of screen use (17) and a decrease in social leisure activities which, as shown by the study conducted by Timonen et al in this month's issue of ECAP are an important sources of positive mental health and appear to mediate the relationship between early signs of psychological distress and later psychiatric morbidity (18).

Overall, these studies highlight negative changes in multiple risk factors of children's and adolescents' psychological well-being in the context of the COVID-19 pandemic, some of which persist over time which could explain relatively stable rates of young people's levels of depression, anxiety and self-harm. One of the issues that seems unresolved at this time is the extent to which the deterioration in youth mental health is a lasting phenomenon and whether it will predict a rise in the number of cases of psychiatric disorders in the future. Since the COVID-19 pandemic, the world has provided children and adolescents which much reason to worry - the Russia-Ukraine war, an economic shock and massive increases in economic and energy prices exerting pressure on family budgets, unresolved climate change, and now the war between Israel and the Hamas. In parallel, exposure to known risk factors of stress, anxiety and depression such as violence in the context of family or school, as well as school pressure, do not appear to have receded (19). Finally, child and

adolescent mental health care systems are experiencing a serious shortage of professionals and underfunding across several European countries, making access to care more difficult for a substantial fraction of children in need of psychological and psychiatric treatment (20). Almost two years after the end of the COVID-19 pandemic, the global sanitary crisis casts a long shadow on children's and adolescents' mental health and all efforts should be made to implement actions that may help address the needs of those who require psychological attention, from broad-ranging, population-wide, psychosocial support, through psychological care all the way to psychiatric treatment whenever necessary.

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