## **BRIEF19**

A daily review of covid-19 research and policy

## RESEARCH BRIEFING

School closures and pediatric wellbeing. Caregivers are worried, but hospitalization data do not yet bear out concerns.

With long-term school closures and social isolation due to the pandemic, the mental well-being of children has become a significant concern for parents and educators. Recent studies have reported increases in depression and anxiety symptoms in the adolescent population. While a report we covered earlier in the week found that pediatric hospitalizations for mental health conditions (suicide, self-harm, and major depression) during the spring and summer of 2020 in a large stud were either stable or lower than previous years, that may not be the entire story. An investigation released this week in <u>JAMA Network Open</u> provides a more troubling outlook on the psychological wellbeing of children during the covid-19 pandemic.

The authors of this study sought to assess mental health concerns during school closures for children between pre-K and 12th grade. Families in the Chicago public school system were surveyed along with caregivers. The respondents were asked to report changes in children's psychological wellbeing. The results indicate that Chicago youth fared significantly worse across a number of different areas of mental health and behaviors after schools closed. Among the outcomes studied were concerns over increasing stress, anxiety, anger, self-harm, and suicidal thoughts. Children were seen as faring worse in every category assessed, underscoring the perception that the pandemic has had negative effects on the mental health of children and adolescents. Children have also exhibited decreased "positive adaptation strategies" according to parents' responses.

The authors sent this survey to families of approximately 350,000 students, of which approximately 32,000 completed the survey. The sample was fairly diverse, with the majority of respondents identified as White (39 percent), Latinx (30 percent) and Black (22 percent). There did not seem to be a significant difference in outcomes across race and ethnicity.

While there are certainly limitations to this study, as it was based on caregivers' assessment of their children, rather than a direct assessment of children themselves or the professional medical care they required during the pandemic, the results are important. From the perspective of parents and caregivers, the pandemic has had a negative effect on the wellbeing of the children in their lives. What remains unclear is why these findings seem to contradict those related to the rates of emergency mental health care, such as the one covered earlier this week, and other similar emerging datasets (including another study out today, also in *JAMA Network Open*) that again found that emergency mental health care did not increase during 2020.

Going forward, public health efforts focusing on their mental health and well-being should be prioritized. A major place where recognition and initial treatment can start is at school itself, now that many children are able to go back.

—Christopher Sampson, MD, FACEP

## **POLICY BRIEFING**

Changes sought to address missed coronavirus vaccine doses.

As vaccine rollout has continued, it seems clear that America's initial strategy of prioritizing two doses is working out, for the most part. In the US Centers for Disease Control and Prevention's interim data analyzing the vaccinations from December 2020 to February 2021,

a vast majority of adults who received their first dose of one of the mRNA vaccines (Moderna or Pfizer/BioNTech) had received both shots. Of the 12.5 million Americans who had received a shot in the arm at the time of the analysis, 88 percent had received two doses, nine percent were waiting on a second shot, but were still within the allowable window. Just three percent were overdue. Demographically, older adults and American Indians/Alaskan Natives were most likely to have not received the full vaccine series.

This initial report posited that as vaccine eligibility expanded, this noncompliance would likely expand. That theory has been borne out by newer data <u>showing</u> eight percent of recipients having missed their second appointment, totaling more than five million people.

The reasons for this growing trend are varied, but in many ways predictable. Many recipients had flu-like symptoms following their initial dose and didn't want to relive the experience. Others have lingering questions over efficacy and necessity given the flood of misinformation. Other still are hindered by logistics, as they cannot get easily get back to their provider to complete the series. To combat the latter problem, federal health officials have directed pharmacies to provide second doses to individuals who received their initial inoculation at other locations. This practice raises legitimate concerns surrounding accurate tracking of vaccination status but increasing ease of access outweighs such issues.

While the CDC is making it easier to find a second dose, the agency <u>emphasized</u> that the different vaccines are *not* thought to be interchangeable and that individuals should receive both shots from the same series in order to be considered fully immunized. Meanwhile, the US Food and Drug Administration has also reaffirmed its Emergency Use Authorization of the single-dose Janssen Pharmaceuticals (Johnson & Johnson) dose, which should also help push the campaign forward. *Various*.

—Brief19 Policy Team

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