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COVID-19 and Its Impact on Mental Health Across All Age Groups

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Abstract: The COVID-19 pandemic has significantly impacted mental health across all age groups, with varying degrees of severity depending on age and life circumstances. This article explores these differences, revealing that while older adults experienced the highest physical health risks, they often demonstrated greater psychological resilience, reporting lower levels of anxiety and depression compared to younger populations. In contrast, children and adolescents faced considerable psychological challenges, including heightened anxiety, sleep disturbances, and emotional distress due to school closures, social isolation, and disrupted routines. Adolescents, particularly those in unsupportive home environments, experienced increased psychological distress and reduced access to affirming communities and mental health services. Among adults, widespread psychological distress stemmed from job losses, economic insecurity, caregiving burdens, and fear of illness. Younger and middle-aged adults reported higher anxiety levels than older adults, partly due to financial strain and balancing work-from-home duties with childcare. Frontline healthcare workers experienced extreme mental health impacts, including burnout and post-traumatic stress symptoms. Understanding these age-specific mental health impacts is crucial for developing targeted interventions to support psychological well-being during pandemics and other public health crises.

Keywords: v, Publishing, Mental Health, Adolescents.

1. Introduction

The COVID-19 pandemic has had a profound impact on mental health across all age groups. Age appears to play an important role in how individuals respond to a major pandemic, both psychologically and physically. While a great deal of attention has been focused on the physical outcomes and impacts, less attention has been paid to the mental health consequences. As the world begins to slowly recover from the pandemic, it is critical to understand how people of different ages experience various psychological impacts.

A major study analyzing the physical outcomes of COVID-19 found that mortality was highest in people over the age of 60 [1]. This study constructed a large sample of clinical data and used statistical modeling to demonstrate that mortality increased significantly with age. The study also examined psychological and psychosocial outcomes during the COVID-19 pandemic [1]. It found that older adults had better mental health than younger populations, especially in the early stages of

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the pandemic [1]. Mental health includes factors such as anxiety and depression; studies have shown that older adults tend to have a more optimistic outlook on life, with lower levels of depression and anxiety [1]. Their psychological resilience during an epidemic is thought to be related to their coping strategies, life experiences, and emotional maturity [2]. Thus, although older adults are more susceptible to the physiological effects of COVID-19, they exhibit better psychological resilience due to their life experiences and emotional regulation.

In contrast, studies have found higher levels of depression and anxiety among adolescents and younger adults, such as college students and working adults [3]. During the COVID-19 outbreak, many faced social isolation, unemployment, and difficulties adapting to the changing healthcare environment. Healthcare workers, in particular, exhibited significant psychological distress, including poor sleep quality and depression. Prolonged isolation also had a critical impact on mental health due to increased feelings of loneliness and emotional distress [4].

Younger and older individuals understand and respond to mental health messages very differently, highlighting the need for epidemiology and pandemic-related education and support strategies tailored to specific age groups [2]. Additionally, it has been found that age affects physiological responses to stress, which may influence psychological responses [1].

The aim of this paper is to explore and compare the impact of COVID-19 on mental health across different age groups and to reveal the reasons for the differences in psychological impact among these groups [4]. Understanding these differences will help healthcare professionals, educators, and policymakers construct more effective and age-appropriate support systems to promote mental health in both crisis and non-crisis settings [5].

2. The impact across all age groups

2.1. Impact on children

Children have been severely affected by the pandemic, largely because their daily lives were disrupted. They experienced school closures, limited access to playgrounds, and fewer opportunities to meet with others. Children had to quickly adapt to online learning, which placed a strain not only on them but also on adults [6]. It is often difficult for young people to fully comprehend such situations, which can lead to confusion, stress, and even behavioral regression [6].

A study published in the Journal of the American Academy of Child and Adolescent Psychiatry showed that many children experienced increased levels of anxiety, sleep disturbances, and irritability during the early stages of the pandemic [7]. In addition, restrictions on outdoor activities and peer interactions had a significant impact on their emotional development [7].

Children in families affected by unemployment or illness due to COVID-19 were particularly vulnerable, often experiencing heightened parental stress and economic insecurity. In a 2021 survey of 1,290 parents, 72% reported that their children became more stressed and worried during the pandemic, 69% reported difficulties with their children's sleep, and 18.7% noted an increase in nightmares and night terrors [8].

Furthermore, the number of children exposed to COVID-19 increased over the course of the pandemic [9]. In the early months, children who were exposed were more likely to experience anxiety compared to those who were not exposed [9].

Accessing children's mental health services also became more difficult, especially after many services moved online. For children with developmental disabilities and mental health issues such as ADHD or autism, the loss of daily routines and support systems often worsens their symptoms [5].

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2.2. Impact on adolescents

Adolescents face unique challenges during the epidemic as they undergo the transition from childhood dependence to adult independence. During this period, they are typically forming identities, increasing their autonomy and developing friendships. All of these were disrupted by the blockade of the new crown epidemic. As a result of isolation from the epidemic during this important developmental stage, depression, anxiety, and suicidal ideation are on the rise among adolescents.

The Centers for Disease Control and Prevention's Adolescent Behaviour and Experiences Survey revealed that more than 37% of high school students exhibited poor mental health during the epidemic, and 44% of adolescents felt sadness and hopelessness [9]. Distance learning also greatly impacted their mental health issues. Many adolescents lacked motivation, felt disconnected from their studies, and reported difficulty concentrating due to underlying stress [9].

During lockdowns, adolescents become more reliant on social media, which has both positive and negative consequences. For LGBTQ+ youth or those living in unsupportive home environments, isolation increases the risk of psychological distress and decreases access to supportive community and mental health services [10]. LGBTQ+ youth report that their mental health problems are exacerbated when they are stuck at home with unsupportive family members and, due to the lack of face-to-face peer interaction, they have to turn to cyberspace for comfort and support [11]. Counseling services, extracurricular activities, and face-to-face peer interactions, all of which are key factors in supporting adolescent mental health, are largely inaccessible. Thus, the long-term effects of isolation on adolescent mental health may be the most significant and long-lasting of all age groups [10].

2.3. Impact on adults

During the COVID-19 pandemic, adults were exposed to both physical health risks and economic stress. Unemployment, increased caregiving burdens, and fears of illness for themselves and their families caused widespread psychological distress. However, the mental health impact on adults varied by age and life circumstances. A national study of adults aged 18–100 years in the United States found that older adults reported lower levels of anxiety and depression than younger adults at the beginning of the pandemic [7].

Young and middle-aged adults experienced high levels of uncertainty as they had to adapt to working remotely or risk losing their jobs [12]. Economic insecurity was a major cause of anxiety, particularly in single-income families. Parents also had to balance working from home with supporting their children’s distance education, which led to significant emotional exhaustion [12].

In contrast, older adults aged 60 and over demonstrated surprising psychological resilience despite facing the highest risk of death. Studies have shown that in the early stages of the pandemic, older adults experienced lower levels of anxiety and depression compared to younger adults [1]. This resilience has been attributed to greater life experience, emotional regulation, and coping strategies developed over time [1].

However, older adults remained vulnerable to psychological challenges. Those living alone or in long-term care facilities often experienced a strong sense of isolation, particularly due to visitation restrictions and difficulties using digital technology. In addition, sudden interruptions in regular medical visits and community services contributed to anxiety and depression, although these effects were generally less severe than in younger populations.

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Frontline healthcare workers constituted a special group of adults who experienced both physical exhaustion and psychological trauma. Prolonged exposure to patient suffering, fear of virus transmission, and the emotional toll of their work resulted in high rates of PTSD and burnout.

2.4. The mental health impact of COVID-19 across age groups

The COVID-19 pandemic has had a profound impact on the mental health of people of all ages around the world. Age appears to play an important role in how individuals respond to major outbreaks, both psychologically and physically. While much of the global attention has been focused on the physical effects of the pandemic, including infection rates, hospitalizations, and mortality, relatively little attention has been paid to its mental health consequences. As the world begins to recover from the immediate threat of the pandemic, understanding its psychological impact on different age groups is critical for public health planning.

A large study analyzing the physical impact of COVID-19 confirmed that mortality rates were highest among people over the age of 60 [1]. Using large-scale clinical data and statistical modeling, researchers showed that mortality increases significantly with age. Interestingly, however, the study also found that older adults had better mental health than younger adults, especially in the early stages of the pandemic [1]. Older adults showed a lower prevalence of mental health issues such as anxiety and depression and demonstrated higher levels of optimism, emotional stability, and resilience [1]. This phenomenon is thought to be related to older adults' coping strategies, accumulated life experience, and emotional maturity. Thus, although older adults are more vulnerable to the physical effects of COVID-19, they display greater psychological resilience, highlighting the complex interplay between physical vulnerability and psychological strength [1].

In contrast, adolescents and young adults, including college students and early-career professionals, experienced much higher levels of depression, anxiety, and stress [2]. For this younger cohort, the sudden shift to online learning, widespread social isolation, and uncertainty about the future exacerbated mental health problems [2]. Healthcare workers, in particular, faced significant psychological stress due to increased workloads, exposure to trauma, and constant fear of infecting family members. Studies have shown that prolonged isolation and lockdown environments exacerbated feelings of loneliness in these groups, disrupted sleep patterns, and led to emotional exhaustion [2].

Children were uniquely affected by the disruption of their daily lives. School closures, suspension of extracurricular activities, and limited access to outdoor play reduced their opportunities for social and emotional development. Studies showed an increase in anxiety, irritability, and sleep disturbances among children during the early stages of the pandemic. In addition, children in families experiencing unemployment or illness due to COVID-19 were particularly vulnerable, as they faced parental stress and higher levels of economic insecurity. A 2021 survey of more than 1,200 parents found that over 70% reported their children experienced increased nervousness or worry, and nearly 19% reported increased nightmares or night terrors. For children with developmental or mental health conditions such as autism or ADHD, disruptions in daily routines and therapeutic services often led to regression in behavioral and emotional development.

Adolescents also faced unique challenges. The lockdown period coincided with a stage of development characterized by identity formation, increased social connectedness, and growing independence [10]. The sudden elimination of face-to-face instruction and peer interaction led to increased depression, anxiety, and, in some cases, suicidal ideation. The Centers for Disease Control and Prevention's Adolescent Behaviour and Experiences Survey found that more than 44% of high school students felt persistent sadness or hopelessness during the pandemic [9]. Distance learning

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further exacerbated academic disengagement, loss of motivation, and inattention due to increased stress and reduced structure. LGBTQ+ adolescents were particularly at risk, as isolation in unsupportive homes limited their access to affirming communities and mental health resources. While online spaces provided some refuge, overreliance on social media also intensified issues such as body image anxiety and cyberbullying.

Adults faced multiple stressors, ranging from health concerns to financial pressures [6]. Job losses, financial insecurity, increased caregiving responsibilities, and disruption of work routines led to widespread psychological distress, especially among young and middle-aged adults [6]. Parents working from home while managing their children's distance learning reported high levels of emotional exhaustion and anxiety. Frontline healthcare workers constituted a special group facing unique mental health risks, including burnout, moral injury, and post-traumatic stress symptoms resulting from prolonged exposure to suffering and death [6]. In contrast, older adults demonstrated greater psychological resilience despite their heightened physical vulnerability.

3. Conclusion

This paper explores the impact of the COVID-19 pandemic on mental health across different age groups, focusing on patterns in children, adolescents, and adults. For children, the pandemic disrupted daily life, leading to increased anxiety, behavioral regression, and sleep disturbances. Adolescents experienced heightened psychological distress due to social isolation, disruptions to their education, and lack of peer support. LGBTQ+ youth were at greater risk, particularly in unsupportive family environments. Among adults, young and middle-aged individuals reported higher levels of anxiety and depression due to unemployment, economic insecurity, and caregiving burdens. In contrast, older adults, despite facing multiple physical health risks, demonstrated greater psychological resilience, attributed to emotional regulation and accumulated life experiences.

The significance of these findings is that they suggest mental health impacts during a pandemic are not uniform but vary by age, life circumstances, and social context. This supports the paper’s aim to reveal the reasons for differences in psychological outcomes across age groups and highlights the need for age-specific and context-specific mental health interventions. By identifying resilience factors in older adults and vulnerability factors in adolescents and their caregivers, these results can guide healthcare professionals, educators, and policymakers in designing targeted support systems to promote mental health in both crisis and non-crisis settings.

However, this study has limitations. While it utilized existing literature and surveys to analyze age-related psychological differences, it did not examine long-term mental health trajectories after the pandemic or the intersectionality of other factors such as race, socioeconomic status, or pre-existing mental health conditions. Future research should explore these dimensions, particularly through longitudinal studies that track the recovery or deterioration of mental health in different subgroups over time.

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