

Week of June 8, 2020

Behavioral Health Impact Situation Report

This situation report presents the potential behavioral health impacts of the COVID-19 pandemic to inform planning efforts. The intended audience for this report is response planners and behavioral health agencies and organizations.

Purpose

This report summarizes data analyses conducted by the Behavioral Health Group's Impact & Capacity Assessment Task Force. These analyses assess the likely current and future impacts of the COVID-19 pandemic on the mental health and potential for substance use issues among Washingtonians.

Key Updates

- In recent weeks, statistical elevations were observed for symptoms of psychological distress and suicidal ideation. Early June data show a small decline.
- Symptoms of psychological distress are on the rise since the "Stay Home, Stay Healthy" order. They have recently surpassed the observed volume for the corresponding period in 2019.
- Domestic violence offense reports since April 6, 2020 remain elevated. Reports are 17% higher than the corresponding period in 2019.
- Calls to the Washington State Tobacco Quitline in April and May combined show a 41% decrease, year-over-year.
- Social media data suggest that anxiety continues to steadily rise among Washingtonians.

Impact Assessment

This section summarizes data analyses that show the likely current and future impacts of the COVID-19 pandemic on the mental health and potential for substance use issues among Washingtonians.

Syndromic Surveillance

Syndromic surveillance data are collected in near real-time from hospitals and clinics in Washington State. Key data elements reported include patient demographic information, chief

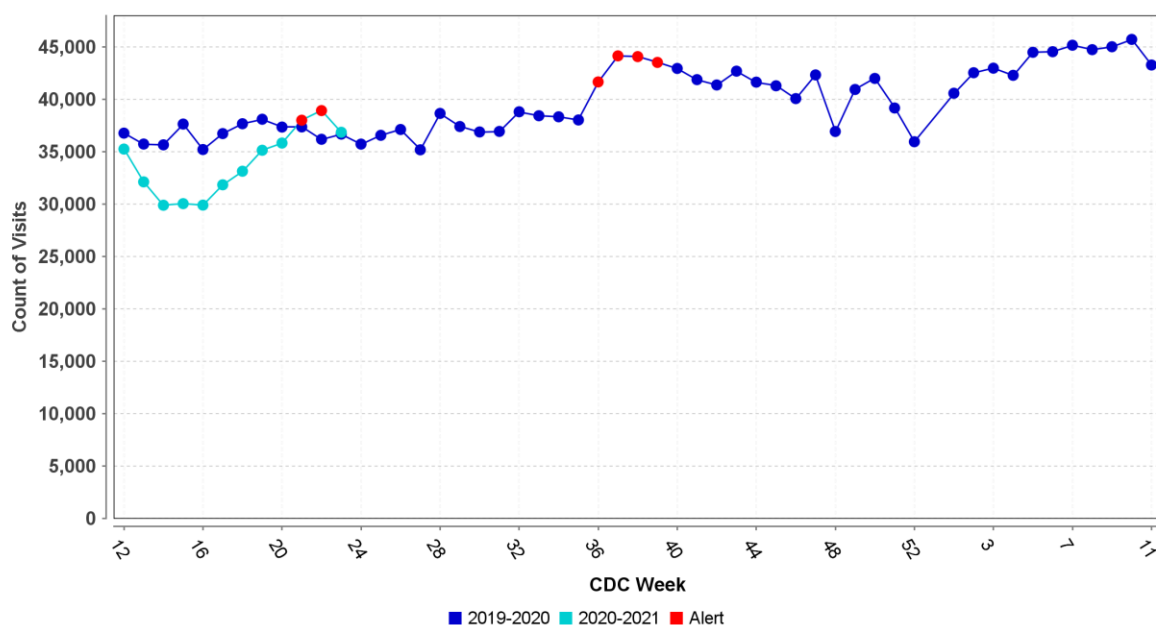
complaint, and coded diagnoses. This robust system is the only source of Emergency Department (ED) data for Washington.

Note: Relative to 2019, there was a 40-50% decline in volume of visits across care settings that corresponds to the “Stay Home, Stay Healthy” order implemented on March 23 (CDC Week 13 in graphs below). For this reason, indicators are presented as a total number of ED visits rather than a percentage of ED visits, starting at Week 12 of each year cycle.

Psychological Distress

The absolute count of ED visits for **psychological distress¹** has been rising in recent weeks following implementation of Washington State’s COVID-19 “Stay Home, Stay Healthy” order. Statistical elevations were observed in Week 21 and Week 22 (weeks of May 23 and May 30, respectively). This is consistent with the overall rise observed statewide across all age groups. From Week 12 to Week 20 of 2020, the count of visits were lower than the volumes observed during the corresponding weeks of 2019.

Count of emergency department visits for psychological distress¹, by week, 2020 vs. 2019

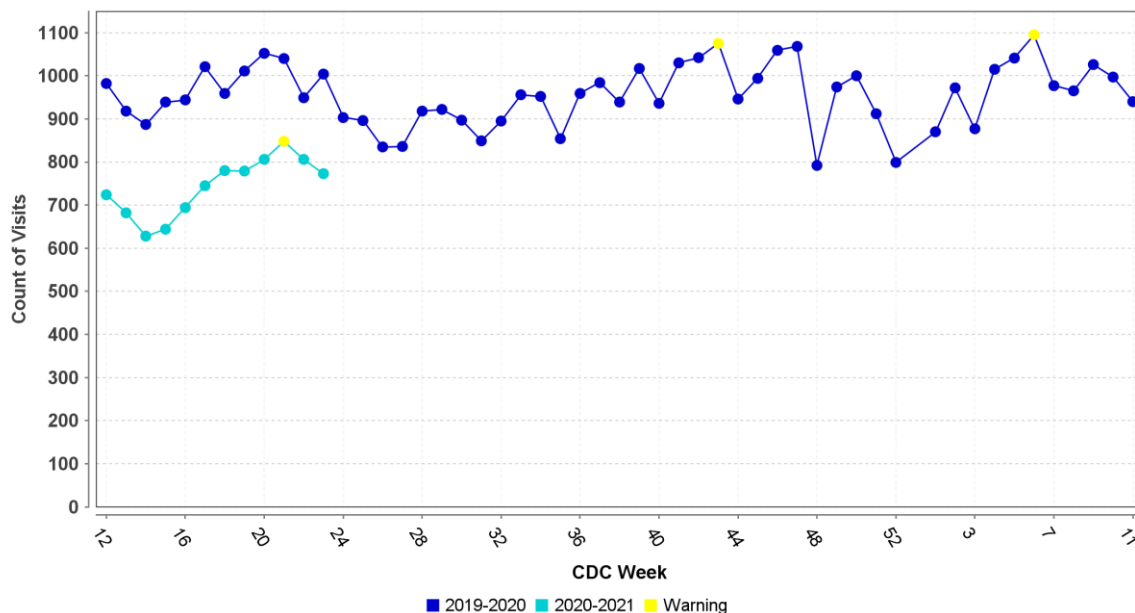


¹ Psychological distress in this context is considered a disaster-related syndrome comprised of panic, stress, and anxiety. It is indexed in the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) platform as Disaster-related Mental Health v1. Full details are available at <https://knowledgerepository.syndromicsurveillance.org/disaster-related-mental-health-v1-syndrome-definition-committee>.

Suicidal Ideation and Suicide Attempts

The absolute counts of emergency visits related to suicidal ideation have been rising in recent weeks with a statistical alert for Week 21, followed by a slight decline in Week 22 and Week 23. This pattern is consistent for all age groups, with statistical alerts for adults 18-44 and 45-64 in Week 21 and Week 22 (weeks of May 17 and May 24, respectively). The count of ED visits for suicidal ideation-related symptoms remain lower than volumes observed in the corresponding weeks of 2019. Additionally, there is no evidence to date of an increase in suicide attempt-related ED visits during this period, overall and for all age groups.

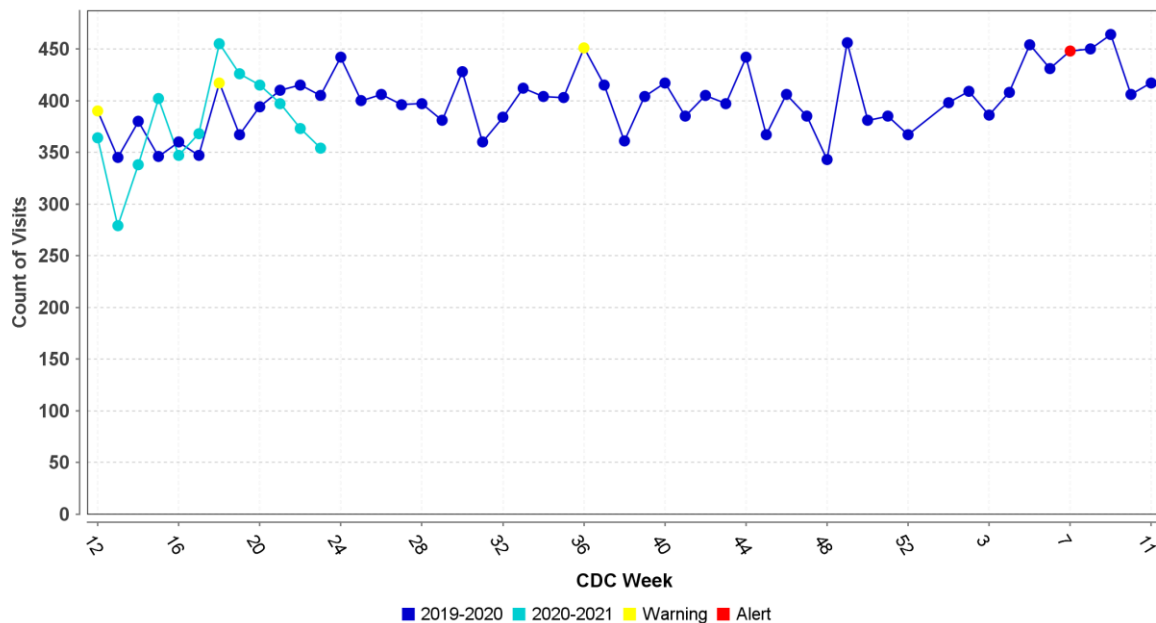
Count of emergency department visits for suicidal ideation, by week: 2020 vs. 2019



Drug Overdose

After peaking in early to mid-May 2020, the absolute counts of emergency visits for overdoses related to any drug² have been declining in recent weeks, overall and for most age groups. The exception to this is adults aged 50-59, for whom we see a slight increase (38 to 44) in visits from Week 22 to Week 23. During Week 21–Week 23, the count of ED visits for drug overdoses dipped lower than volumes observed in the corresponding weeks of 2019.

Count of emergency department visits for overdose by any drug², by week: 2020 vs. 2019

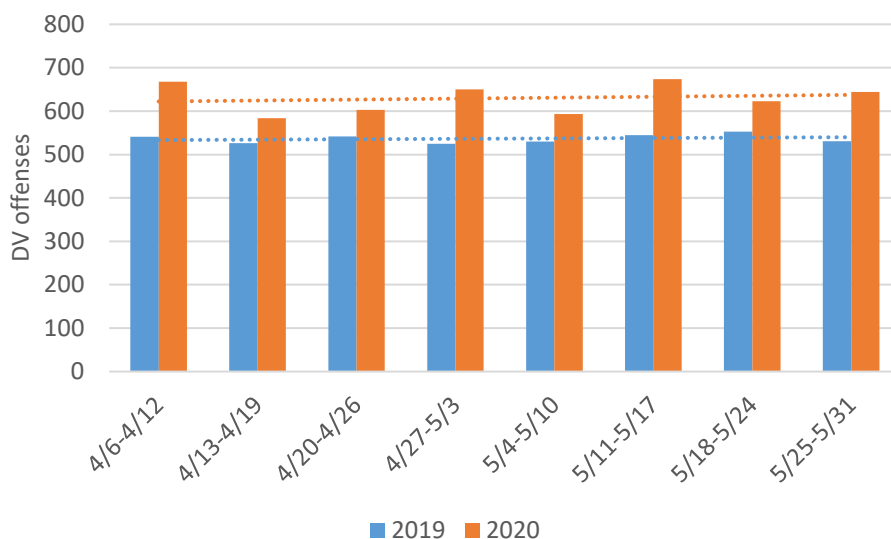


² This definition specifies overdoses for any drug, including heroin, opioid, and stimulants. It is indexed in the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) platform as CDC All Drug v1. Full details are available at <https://knowledgerepository.syndromicsurveillance.org/cdc-all-drug-v1>

Crime – Domestic Violence

According to survey data collected by the Washington Association of Sheriffs and Police Chiefs (WASPC), **domestic violence offenses remain elevated by approximately 17% year-over-year** from April 6 to May 31. Although May 25–31 domestic violence offenses were 21% higher than equivalent data for 2019, early data for the week of June 1 suggest that it will be the lowest year-over-year increase in weekly domestic violence offenses since WASPC began surveying³ law enforcement agencies (LEAs). Not displayed is a 26% decrease in other surveyed offenses, including theft, destruction of property, assault, and burglary.

Domestic violence offenses reported to WASPC, by week: 2020 vs. 2019

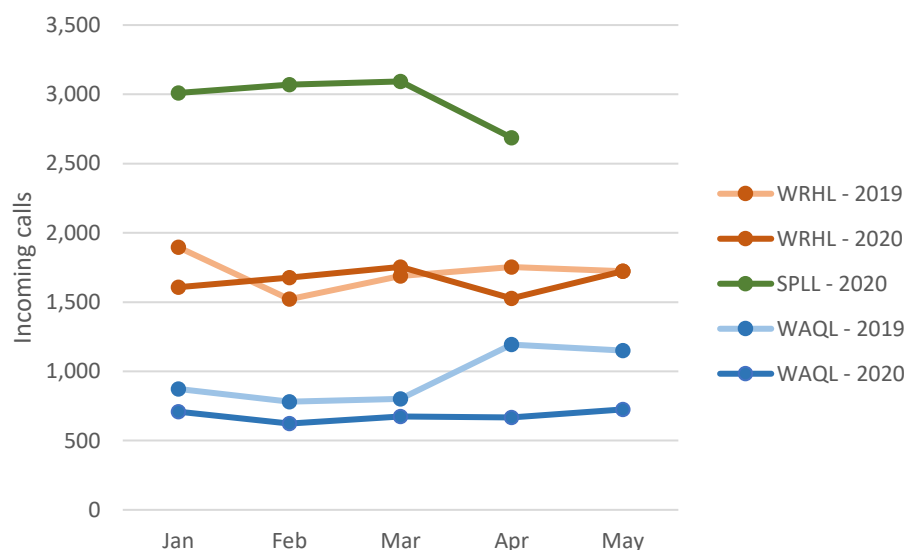


³ WASPC began deploying a weekly survey to all Washington LEAs in April to understand the likely impact of the COVID-19 pandemic on common crimes. An average of 77 of 275 LEAs respond each week.

Telephonic Support Line Activity⁴ – Substance Use and Suicidality

Calls to the Washington State Tobacco Quitline (WAQL) in April and May combined show a 41% decrease, year-over-year, suggesting that Washingtonians addicted to nicotine may be coping with stress by postponing quit attempts and continuing to use tobacco. Meanwhile, calls to the Washington Recovery Help Line (WRHL) are fairly stable (down 3%, year-over-year) after a 13% increase from April to May. No new data are currently available for the Suicide Prevention Lifeline (SPLL), but May 2020 and 2019 comparison data will become available in the coming weeks.

Incoming calls to telephonic support lines, by month: 2020 vs. 2019 (where available)



Product Sales – Marijuana and Liquor Taxes Collected

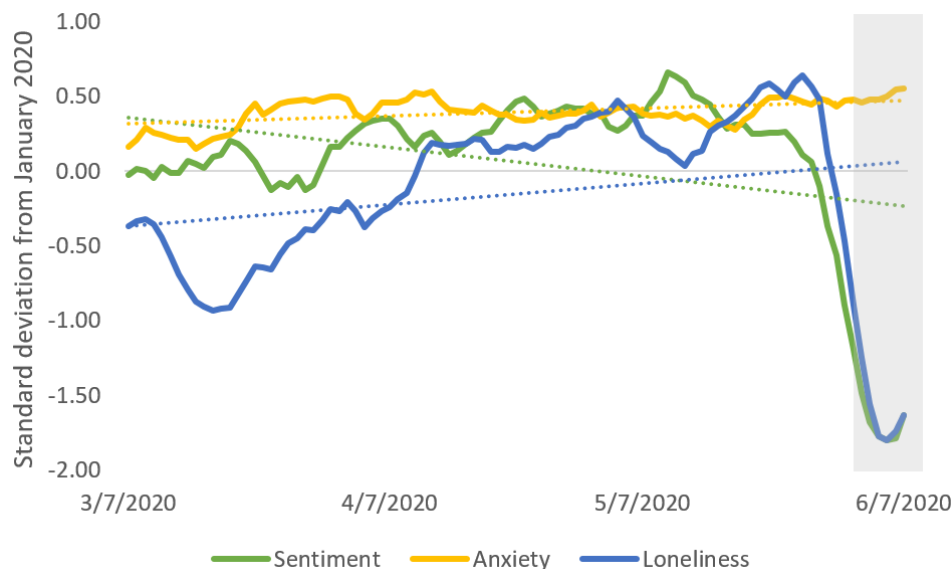
No change from Week of June 1 Situation Report: The Washington State Liquor and Cannabis Board (LCB) summarizes monthly marijuana and liquor tax collections, which may be used as a representation for sales of legal recreational substances, and, by extension, potential for substance use issues. After three months of elevated tax revenue levels for marijuana and comparable levels for liquor, **year-over-year sales of marijuana and liquor were up a combined 38% in May 2020.**

⁴ DOH maintains service contracts for the Suicide Prevention Lifeline (SPLL), the Washington Recovery Help Line (WRHL), and the Washington State Tobacco Quitline (WAQL).

Social Media – Expressions of Positive Sentiment, Loneliness, and Anxiety

Following a week of declining (positive) sentiment and loneliness coinciding with nationwide civil unrest and protests, tweets⁵ geo-tagged to Washington State suggest that this trend is beginning to reverse, but still remain very low compared to January 2020. However, the data also suggest that **anxiety has slowly and steadily risen since the beginning of March**.

7-day moving averages of deviations in select expression measuresError! Bookmark not defined. **relative to January 2020 baseline, by day: March 1, 2020 – June 7, 2020**



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⁵ Since January 2020, researchers at the Penn Center for Digital Health have been tracking “tweets” about the COVID-19 pandemic, analyzing language used by Twitter users to quantify the extent to which they reflect expressions of positive sentiment, loneliness, and anxiety. Although these measures have been made publicly available, the researchers included a disclaimer, stating that “the data are still being validated and are not ready for public policy decision making.”