

FOURTH QUARTER UPDATE - 2022

Statewide High-Level Analysis of Forecasted Behavioral Health Impacts from COVID-19

Purpose

This document provides a brief overview of the potential statewide behavioral health impacts from the COVID-19 pandemic. The intent of this document is to communicate potential behavioral health impacts to response planners and organizations, or individuals who are responding to or helping to mitigate the behavioral health impacts of the COVID-19 pandemic.

Bottom Line Up Front

- The COVID-19 pandemic has strongly influenced behavioral health signs and symptoms of individuals across the state due to far-reaching medical, economic, social, and political consequences. This forecast is informed by disaster research, and the latest data and findings specific to this pandemic. Updates will be made quarterly to reflect changes in baseline data.
- The **current economic conditions** have significant implications for the mental health of individuals, families, and communities. Costs of goods and services continue to remain higher than previous years, and supply chain shortages have threatened access to some for needed medications, supplies, or other necessary staples.
- The **shift to the final quarter of the year** brings with it some additional risks related to mental health. Midterm elections and the associated political rhetoric and division are challenging within and between many families and communities. Coupled with seasonal changes to weather and decreasing hours of daylight, which has a strong influence on mental outlook and expression of symptoms for many people, the final months of 2022 are likely to create more behavioral health challenges than seen through the summer.
- As another school year moves forward, we are likely to see an increase in **challenges related to mental health for children, youth, and teens in October and November**, which is typical of most years,¹ but may be more significant this year as a

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function of the difficulties specific to youth over the course of the pandemic.¹

- Based on current research and ongoing experiential outcomes, in addition to clinical reports from providers, there are three behavioral health areas of focus this quarter:

1. **Economic pressures on families and individuals: inflation, gas prices, and cost-of-living**
2. **Seasonal and socio-political patterns in the shift to the final quarter of 2022**
3. **Youth mental health in the context of the current academic year**

Please see the sections that follow for more details on each of these areas of focus.

Areas of Focus for Second Quarter 2022

General Trends

Long-term outcomes for large-scale disasters typically are characterized by resilience. There are groups and individuals, however, who experience complex and combined effects, including increased behavioral health symptoms and substance use, chronic dysfunction, and other problematic long-term effects.

1. **Economics- Inflation, Gas prices and Cost-of-Living**

Current prices and supply chain issues may be preventing people from accessing basic nutrition, life-saving medications, or other interventions such as specific prescription baby formulas or medically necessary dietary components. Physical responses from this type of stressor may build up significantly over time, and impact sleep, diet, and overall health. Gas prices are influencing choices and options about work, travel, and how families can meet expenses by making different transportation choices. For some people, difficult financial conditions may also make it harder or impossible to leave an unsafe or unhealthy living environment in cases of abuse or domestic violence. In addition to those daily considerations, many families may have to make decisions about how to take time off from work and working overtime which influence levels of burnout as well as family vacations and recreational activities during the summer months. Families and communities may be affected by these issues in different ways. It is important to recognize that systemic factors of marginalization and socio-economic status also intensify the effect of these economic concerns for children, adults, and families who may already be at higher risk for behavioral health issues.

2. **Seasonal and socio-political patterns in the shift to the final quarter of 2022.**

As we transition into the fall and early winter months, there are a few calendar-related patterns that tend to influence behavioral health trends in Washington. As we approach the end of daylight savings, hours of daylight steadily decrease as the weather also shifts. Symptoms of depression related to seasonal affective conditions may also increase.^{2,3} People may spend less time outdoors and be less physically active as we approach the holiday season. This may increase stress levels and create or add to problems with sleep. The holiday season itself is something that often provokes stress for many. This year may be particularly challenging for those who have lost loved ones, friends, or communities, as a function of the pandemic. “Anniversary reactions” may also emerge as weather, seasons, and holidays remind individuals of those they’ve lost to the pandemic.

In addition to real losses of loved ones, there are also many families and communities who have experienced significant emotional fractures:

- a. People who are no longer speaking with one another due to social and/or political differences
- b. People who may be more isolated than they were in previous years from family and friends who are still living but may be distanced or estranged
- c. People who are more angry, sad or frustrated based on the underlying factors that have influenced social and political discontent and division

The holiday season may highlight these relational experiences to a new degree that is very unsettling, particularly when coupled with the economic conditions that may make “gift giving,” and larger, more extravagant holiday meals more challenging to enjoy or experience for many families.

The midterm elections may also contribute to a sense of anger, unease, or upset for many. Political division and contention is a significant driver of stress for many individuals.¹

Focusing on control over the *process we use* to engage with the world around us is one active coping technique that may be helpful during the final quarter of 2022. Looking for ways to ***express compassion for others, lend a helping hand in our own communities, and respond with empathy*** when possible are all examples of how we can engage with personal empowerment right now. In addition to focusing on empowerment with our process of engagement in our local community, it may also be beneficial to establish and maintain healthy boundaries around personal exposure to media (including social media) and news generally.

4. Youth Behavioral Health in the context of the current academic year.

Behavioral health concerns for children and youth have remained high in our state throughout the summer months, which is atypical during most years. This year there was some decrease in demand for youth behavioral health services (both outpatient and inpatient), but this decrease was less than in pre-COVID days. The number of children and teens needing behavioral health services, particularly crisis services, has also remained higher than was typical before the pandemic.

There has been an additional surge in youth presenting with suicidal ideation and self-harm to emergency departments (ED) statewide as the new school year has approached. Error! Bookmark not defined. The Northwest Healthcare Response Network has been gathering data on available acute care and intensive care beds for youth from all hospitals who admit pediatric patients. Numbers of children who are “boarding” in acute care beds and in ED have created significant impact on the overall healthcare system for pediatric patients. Children with other illnesses are often unable to transition out of intensive care and when they present to the ED may not have access to an acute bed. This lack of access is particularly concerning with the onset of “respiratory season” when influenza and RSV become more prevalent and cases of COVID will also likely increase. There was a decrease in youth boarding in emergency rooms and hospital beds during the summer, but the numbers have begun to increase as youth returned to school.

This quarter, in keeping with seasonal increases, significant percentages of ED beds may be utilized by behavioral health boarders.

Traditionally, most years have seasonal increases in behavioral health symptoms and the need for behavioral health services in the fall and winter. For children and youth, this tends to coincide with the increase in academic demands related to the shift from review to learning new material, in addition to the newness of being back with friends having worn off and interpersonal issues taking focus.¹ It is anticipated that the combination of the high acuity

experienced this spring along with the typical increase in symptoms for many children and youth in the fall months will negatively and disproportionately impact this population. This is likely to additionally tax an overstressed health care and educational system throughout the academic year 2022-2023.

Many children and adolescents have struggled with increased social isolation, disruption in school, and loss of connection to teachers and peers. However, if there are concerns about safety, seek professional support and assistance. For more detailed information on this topic, see the [Behavioral Health Toolbox for Families: Supporting Children and Teens During the COVID-19 Pandemic](#).^a This resource provides general information about common emotional reactions of children, teens, and families during disasters. It also has suggestions on how to help children, teens, and families recover from disasters and grow stronger. Parents and caregivers can also use the [National Parent Helpline](#)^b to access telephone support (1-855-427-2736) and additional resources.

Active suicide prevention should be promoted through sharing information on recognizing [warning signs](#)^c and other related resources, and checking in with colleagues, friends, family members, and neighbors. When someone is expressing thoughts of self-harm, [access to dangerous means of harm should be removed](#),^d and medications, poisons, and firearms should be stored safely. Suicides consistently account for approximately 75% of all firearm-related fatalities in Washington.^e [Storing firearms safely](#) and [temporarily removing them from the home](#) of an at-risk person during a crisis can save lives.

^a <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/BHG-COVID19-FamilyToolbox.pdf>

^b <https://www.nationalparenthelpline.org/>

^c.

<https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention/HelpSomeoneElse#common>

^d. <https://www.seattlechildrens.org/health-safety/keeping-kids-healthy/prevention/home-checklist/>

^e. Washington State Department of Health. (2019). *Annual Report: Firearm Fatality and Suicide Prevention – A Public Health Approach*. <https://www.doh.wa.gov/Portals/1/Documents/8390/346-087-SuicideFirearmPrevention.pdf>

Behavioral health symptoms will continue to present in phases.^{f,g} The unique characteristics of this pandemic trend towards anxiety and depression as significant behavioral health outcomes for many in Washington. These outcomes have been shown throughout the Behavioral Health Impact Situation Reports published by DOH, which are available on the [Behavioral Health Resources & Recommendations webpage](#)^h under the “Situation Reports” dropdown. Behavioral health symptoms of anxiety, impulsivity, reduced frustration tolerance, anger, depression, and post-traumatic stress disorder (PTSD) are likely to increase with any significant increases in infection and hospitalization rates.^{i,j} As the emergency nature of the COVID pandemic shifts for most groups into an endemic management process, our social, economic, political, and relational recovery will look very different amongst and between different populations and communities in Washington. Many families and individuals who are immune compromised may continue to face additional risks in the fall and winter months when respiratory illnesses are typically at their highest. In the long-term, recovery processes related to behavioral health may be extensive and complex, particularly as regional and local disasters and critical events continue to occur and layer with pandemic cascade effects.

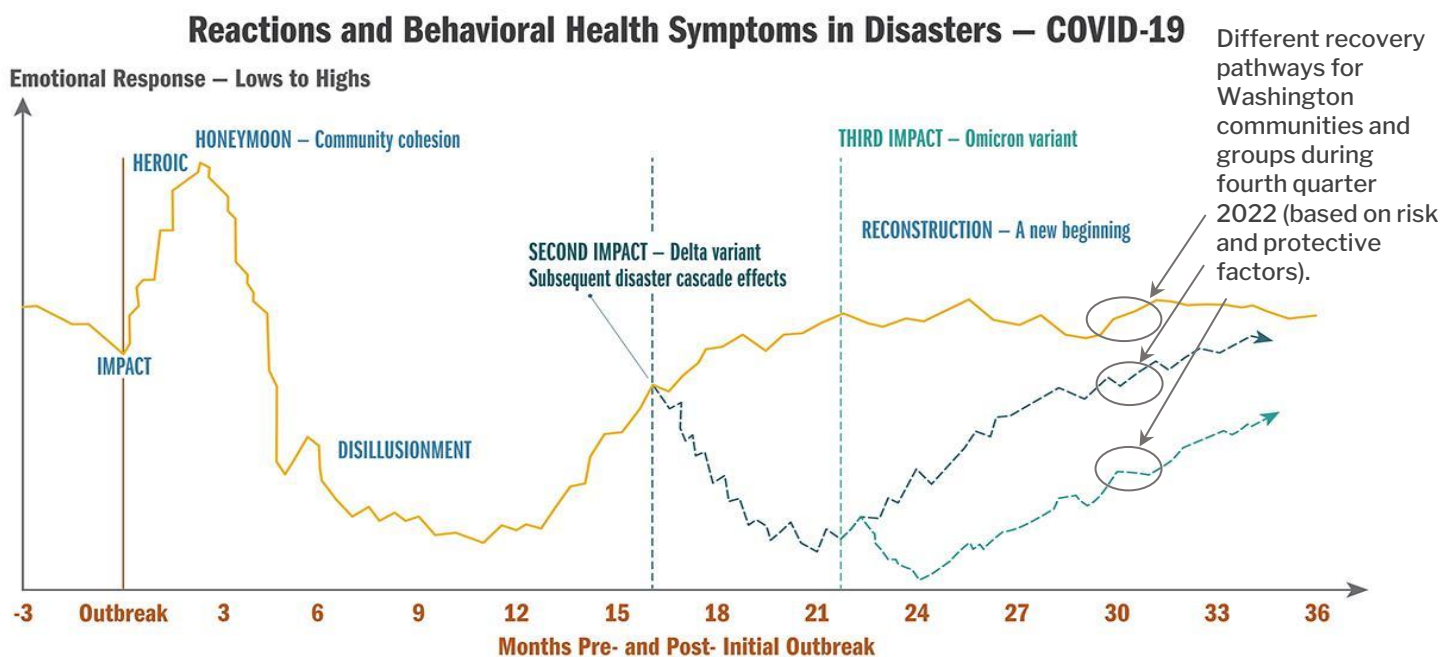


Figure 1: Phases of reactions and behavioral health symptoms in disasters. The dotted graph line represents the response and recovery pattern that may occur if the full force of a disaster cascade is experienced by a majority of the population (i.e., the disaster cascade pathway). Protective factors are characteristics, conditions, or behaviors that reduce the effects of stressful life events. They also increase

^{f.} Substance Abuse and Mental Health Services Administration (SAMHSA). (2015). *Supplemental research bulletin - Issue 5: Traumatic stress and suicide after disasters*. https://www.samhsa.gov/sites/default/files/dtac/srb_sept2015.pdf

^{g.} Centers for Disease Control and Prevention. (2018). *The continuum of pandemic phases*. CDC. <https://www.cdc.gov/flu/pandemic-resources/planning-preparedness/global-planning-508.html>

^{h.} <https://www.doh.wa.gov/Emergencies/COVID19/HealthcareProviders/BehavioralHealthResources>

^{i.} Anesi, G. L. & Manaker, S. (2020). *Coronavirus disease 2019 (COVID-19): Critical care issues*. <https://www.uptodate.com/contents/coronavirus-disease-2019-covid-19-critical-care-issues>

^{j.} Bhatraju, P. K., Ghassemieh, B. J., Nichols, M., Kim, R., Jerome, K. R., Nalla, A. K., Greninger, A. L., Pipavath, S., Wurfel, M. M., Evans, L., Kritek, P. A., West, R. E., et al. (2020). COVID-19 in Critically Ill Patients in the Seattle Region. *New England Journal of Medicine*. 10.1056/NEJMoa2004500. <https://www.nejm.org/doi/full/10.1056/nejmoa2004500>

a person's ability to avoid risks or hazards, recover, and grow stronger. Adapted from the Substance Abuse and Mental Health Services Administration (SAMHSA).^k

Additional Resources

- Anyone concerned about depression or other behavioral health symptoms should talk with their **healthcare provider**.
- [Washington Listens](https://www.walistsens.org/)^l: Call 833-681-0211 to talk to a support specialist who will listen and help you cope with the stress of COVID-19.
- **Health Care Authority: [Mental health crisis lines](https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/mental-health-crisis-lines)**^m
- [National Suicide Prevention Lifeline](https://suicidepreventionlifeline.org/):ⁿ Call 800-273-8255 (English) or 1-888-628-9454 (Español).
- [Crisis Connections](https://www.crisisconnections.org/24-hour-crisis-line/):^o Call 866-427-4747.
- [Crisis Text Line](https://www.crisistextline.org/):^p Text HEAL to 741741.
- **Department of Health: [Crisis lines for specific groups](https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention/HotlinesTextandChatResources)**^q
- [TeenLink](https://www.crisisconnections.org/teen-link/):^r Call or text 866-833-6546
- **A Mindful State**^s: <https://amindfulstate.org/>
- [Washington Warm Line](https://www.crisisconnections.org/wa-warm-line/):^t Call 877-500-9276
- **Washington State COVID-19 Response: [Mental and emotional well-being webpage](https://coronavirus.wa.gov/wellbeing)**^u

Acknowledgements

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^k Substance Abuse and Mental Health Services Administration (SAMHSA). (2020). *Phases of Disaster*.
<https://www.samhsa.gov/dtac/disaster-behavioral-health-resources>
https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/pep21-02-01-001.pdf

^l <https://www.walistsens.org/>

^m <https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/mental-health-crisis-lines>

ⁿ <https://suicidepreventionlifeline.org/>

^o <https://www.crisisconnections.org/24-hour-crisis-line/>

^p <https://www.crisistextline.org/>

^q <https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention/HotlinesTextandChatResources>

^r <https://www.crisisconnections.org/teen-link/>

^s <https://amindfulstate.org/>

^t <https://www.crisisconnections.org/wa-warm-line/>

^u coronavirus.wa.gov/wellbeing

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