Mental Health Impacts During COVID-19, and Substance Use in Vulnerable Communities

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CAPA 5th Annual Summit November 13th, 2020





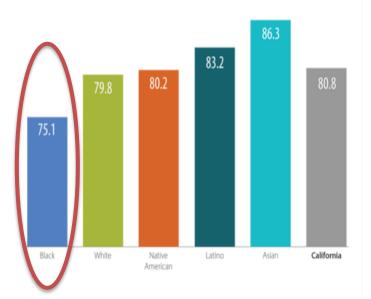
States are calling racism a public health crisis. Here's what that means

By Harmeet Kaur and Skylar Mitchell, CNN Updated 10:32 AM ET, Fri August 14, 2020





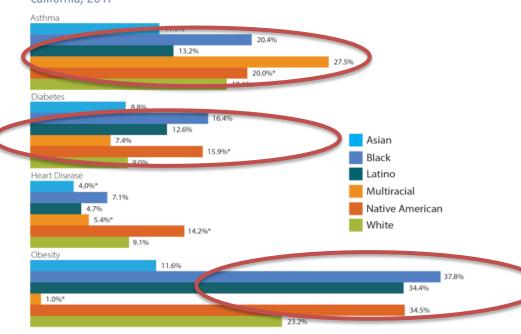
Life Expectancy, by Race/Ethnicity California, 2017



Source: "Life Expectancy by State 2019: Life Expectancy Rates in California in Years,"World Population Review, August 28, 2019, http://worldpopulationreview.com.

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Adults with Chronic Conditions, by Race/Ethnicity California, 2017



* Statistically unstable.

Notes: Source uses African American, American-Indian / Alasko Native, and Two or More Paces. Estimates are not shown for Native Hawaiian / Pacific Islander because the results were statistically unstable.

Source: "AskCHIS," UCLA Center for Health Policy Research, accessed April 12, 2019, http://ask.chis.ucla.edu.

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Public Health and Health Equity

Poverty, racism, lack of educational and economic opportunities are among the fundamental determinants of poor health and lack of safety for many communities.

- These inequities are shaped by -
 - the unequal distribution of resources
 - systemic racism, biased and discriminatory policies and practices
 - structures and systems built on white supremacy
 - trauma
 - inequities in nearly every measure of health status
 - generational cycles of poor health and limited access to care



Social Determinants of Health

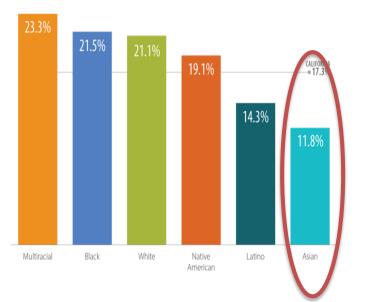
- Economic stability
- Neighborhood and built environment
- Health and health care
- Education
- Social and community context



1. Healthy People, 2030. https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health



Depression Prevalence, by Race/Ethnicity California, 2017

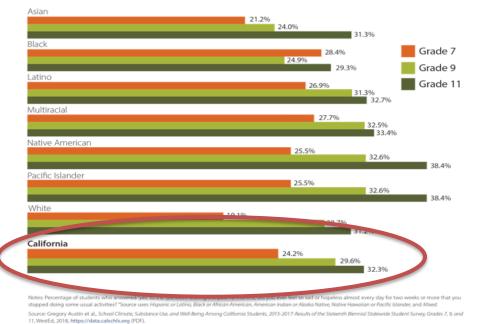


Notes: Adults who have ever been told they have a form of depression. Crude prevalence (not age-adjusted). Source uses Hispanic and American Indian or Alaskan Native. Prevalence estimates are not available for Native Hawaiian or other Pacific Islander.

Source: "BRFSS Prevalence & Trends Data," Centers for Disease Control and Prevention, n.d. www.cdc.gov.

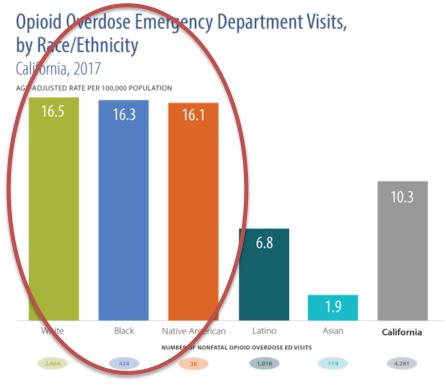
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Children with Depression-Related Feelings, by Race/Ethnicity California, 2015 to 2017



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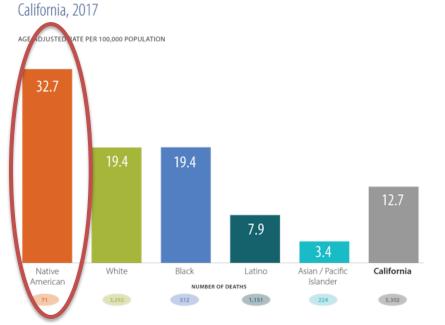




Note: Emergency department (ED) visits caused by nonfatal acute poisonings due to the effects of all opioid drugs, excluding heroin, regardless of intent (e.g., suicide, unintentional, or undetermined).

Source: "California Opioid Overdose Surveillance Dashboard;" California Dept. of Public Health, accessed April 12, 2019, https://discovery.cdph.ca.gov.

Drug-Induced Deaths, by Race/Ethnicity



Note:: Data come from registered death certificates. Deaths for persons of unknown age are included in the number but rat age-adjusted rate. Drug-induced deaths are those with ICD-10 codes that cover unintertional, suicide, homicide, and undetermined poisoning. Source user Hispanic or Lating, American Indian or Alasia Native, and Black or African American. Source: "Underlying Cause of Death 1999–2017; Centers for Disease Control and Prevention, released December 2017, accessed October 18, 2019, https://wonder.cdc.gov.

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Types of Adverse Childhood Experiences (ACEs)

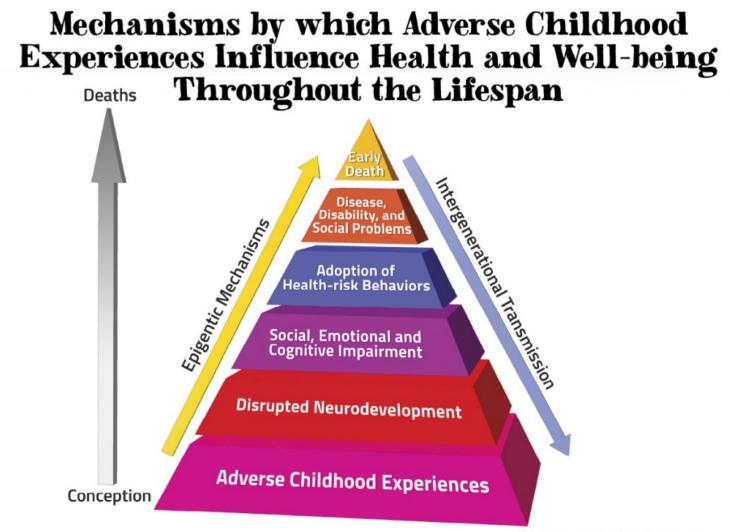




ACE's and linked outcomes (CDC)







Slide Courtesy of Rob Anda, MD, MS



Modified ACE's Pyramid



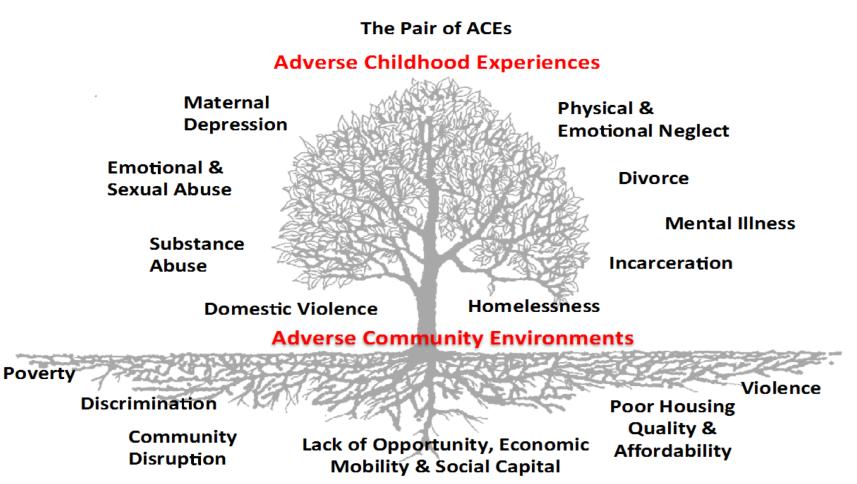


Philadelphia Expanded ACE's

The Philadelphia Expanded ACE questions look at Community-Level Adversity

Witness Violence	How often, if ever, did you see or hear someone being beaten up, stabbed, or host in real life?
Felt discrimination	While you were growing upHow often did you feel that you were treated badly or unfairly because of your race or ethnicity?
Adverse Neighborhood experience	Did you feel safe in your neighborhood? Did you feel people in your neighborhood looked out for each other, stood up for each other, and could be trusted?
Bullied	How often were you bullied by a peer or classmate?
Lived in foster care	Were you ever in foster care?





Ellis W. & Dietz W. BCR Framework. Academic Peds (2017).



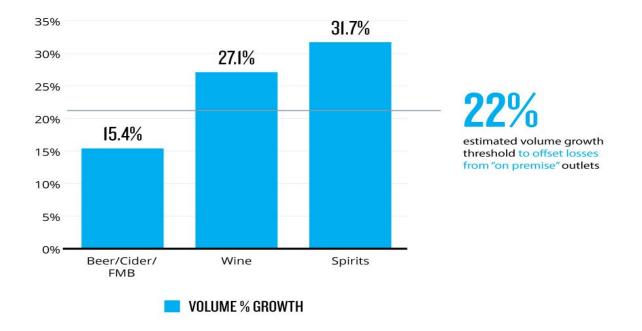
Impacts of COVID-19



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WHAT'S NEEDED TO REBALANCE THE ALCOHOL INDUSTRY AMID COVID-19 RESTAURANT RESTRICTIONS

Alcohol volume growth during COVID-19



Source: Nielsen Retail Measurement Services, Total US All Outlets Combined (xAOC) including Convenience and Liquor Stores, COVID-19 impact period from the week ended Mar. 7, 2020 to latest week ended Apr. 25, 2020 versus year-ago, FMB = Flavored Malt Beverages, "On premise" refers to outlets licensed for the sale and consumption of alcohol on the premises of the establishment.

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Partners	Under no circumstan	ces should you dr	ink any type of a	alcoholic produ	ct		
Contact us	 as a means of preven 	Under no circumstances should you drink any type of alcoholic product as a means of preventing ar treating COVID-19 infection. Consumption of alcohol WILL NOT protect you from COVID-19.					
	Avoid alcohol altogether so that you do not undermine your own immuse system and health and do not put the health of others at risk.	altogether so that you do not undermine your own immone system and health and do not put the health of others		Do not use alcohol as a way of dealing with your encotions and stress increase the risk of suicide. Pease cut al neith horiting ryon have suicidal throughts.			
	Reach out for help if you think your drinking or the drinking of someone close to you is out of control.		Never mix alcohol with medications even herbai or over-the counter remedies, as this could make them tess effective, or it might increase				
	for smoking and vice versa, as smoking is associated with more	and vice versa, as smoking		ther potency to a level where they become toxic and dangerous. Make sure that children and young people do not have access to alcohol and on ord ink their presere –			
	young people the effe	including potential violation of COVID-19-related physical			and do not driver, in their presence – be a role model. Monitor the socrean time of your children, as IV and other media are floaded with alcohol advertising and misinformation that may stimulate arily initiation and increased consumption.		
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Facing the COVID-19 (new coronavirus disease) pandemic, the countries of the world must take decisive action to stop the spread of the virus. In these critical circumstances, it is essential that everyone is informed about other health risks and hazards so that they can stay safe and healthy.

The following factsheet provides important information that you should know about alcohol consumption and COVID-19. It addresses, among other things, the misinformation that is being spread through social media and other communication channels about alcohol and COVID-19.

The most important point to remember:

In no way will consumption of alcohol protect you from COVID-19 or prevent you from being infected by it

Gen ... ar facts about alcohol and your body

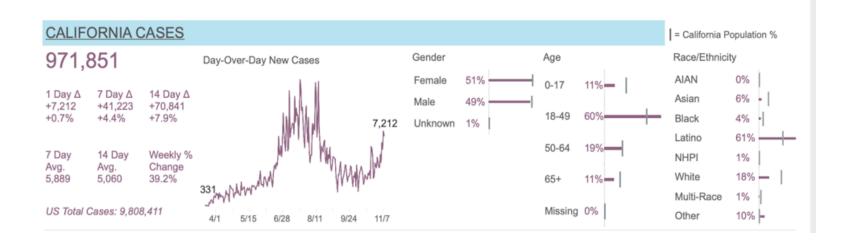
Ethyl alcohol (ethanol) is the substance in alcoholic beverages that is responsible for most of the harms that arise from their consumption, irrespective of whether it is consumed in the form of wine, beer, spirits or anything else.

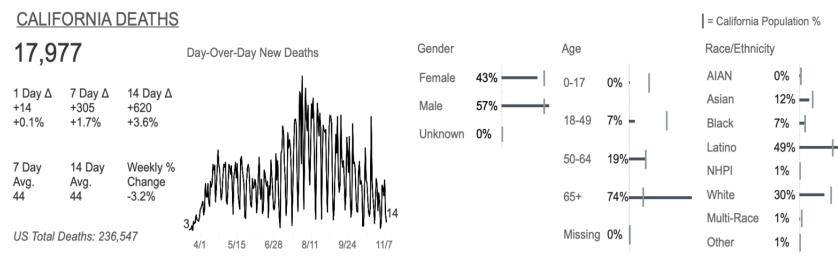
Unfortunately, other toxic substances that may smell like ethanol can be added in adulterated beverages that are produced informally or illegally; or they may be present in alcoholic products that are not intended for human consumption, such as hand disinfectant. Added substances such as methanol can be fatal even in small amounts or may lead to blindness and kidney disease, among other problems. According to media reports and anecdotal sources, deaths related to the ingestion of such alcoholic products, based on the mistaken belief that they will somehow offer protection against the virus, have already occurred in some countries during the COVID-19 outbreak.

These are the general facts you should know about the consumption of alcohol and health:

- Alcohol has effects, both short-term and long-term, on almost every single organ of your body. Overall, the evidence suggests that there is no "safe limit" – in fact, the risk of damage to your health increases with each drink of alcohol consumed.
- Alcohol use, especially heavy use, weakens the immune system and thus reduces the ability to cope with infectious diseases.
- Alcohol, even in very small quantities, is known to cause certain types of cancer.
- Alcohol alters your thoughts, judgement, decision-making and behaviour.







Note: Negative numbers are data corrections. Please contact the Local Health Department for more information.

Note: Demographic percentages may not add up to 100% due to rounding. Breakdown of deaths is a subset of total deaths as reported by law enforcement.





Morbidity and Mortality Weekly Report

August 14, 2020

Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020

Mark É. Czeisler^{1,2}; Rashon I. Lane MA³; Emiko Petrosky, MD³; Joshua F. Wiley, PhD¹; Aleta Christensen, MPH³; Rashid Njai, PhD³; Matthew D. Weaver, PhD^{1,4,5}; Rebecca Robbins, PhD^{4,5}; Elise R. Facer-Childs, PhD¹; Laura K. Barger, PhD^{4,5}; Charles A. Czeisler, MD, PhD^{1,4,5}; Mark E. Howard, MBBS, PhD^{1,2,6}; Shantha M.W. Rajaratnam, PhD^{1,4,5}

COVID-19 risk and outcomes in patients with substance use disorders: analyses from electronic health records in the United States JAMA Psychiatry | Special Communication | COVID-19: BEYOND TOMORROW Suicide Prevention in the COVID-19 Era Transforming Threat Into Opportunity dristine Moutier, MD

Quan Qiu Wang¹ · David C. Kaelber² · Rong Xu⁰¹ · Nora D. Volkow⁰



Recent Research on COVID-19 and Alcohol

- On average, alcohol was consumed 1 day more per month by 3 of 4 adults
- increase of 1 day for 1 in 5 women per month of heavy drinking
- largest increases were among, non-Hispanic whites, women, and younger pop
- range of negative physical health associations with excessive alcohol consumption
- also alcohol may worsen existing mental health problems such as anxiety and depression

^{1.} Changes in Adult Alcohol Use and Consequences During the COVID-19 Pandemic in the US Michael S. Pollard, PhD; Joan S. Tucker, PhD; Harold D. Green Jr, PhD



Suicide Prevention



Overview of Suicide Prevalence

2018 US suicide statistics

- 48,344 suicides
- Suicide rate = 14.2
- 50.6% were by firearm
- 78% male
- Rates were highest for Caucasians, lowest for Asian/PI
- Rates were highest among 55-59 year olds

2018 LAC suicide statistics

- 947 suicides
- Suicide rate = 8.5
- 41% by hanging/suffocation(31% by firearm)
- 79% male
- Rates were highest for Caucasians, lowest for Latinx
- Rates were highest among 55-64 year olds



Suicide attempt data

2018 U.S.

- 495,398
- 58.6% female
- Numbers highest for 15-19 y.o.
- Numbers highest for Caucasians
- 49% poisoning (drug)
- 27% cut/pierce

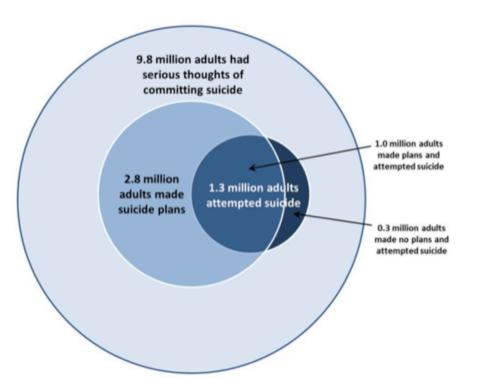
2017 LA County

- 4,556
- 56% female
- Numbers highest for 15-19 y.o.
- Numbers highest for Caucasians
- 76% poisoning (drug)



Prevalence of Suicidal Ideation – US Adults

Past Year Suicidal Thoughts and Behaviors Among U.S. Adults (2017) Data Courtesy of SAMHSA

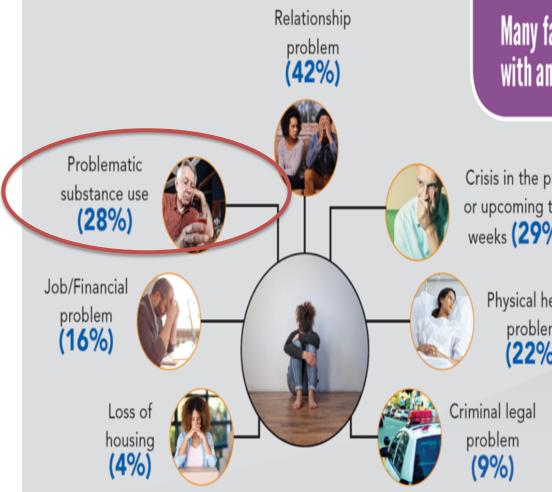


1. Graphic from the National Institute of Mental Health https://www.nimh.nih.gov/health/statistics/suicide .

2. Data from the National Survey on Drug Use and Health (NSDUH) conducted by SAMHSA the Substance Abuse and Mental Health Services Authority.



There are many reasons why...



Many factors contribute to suicide among those with and without known mental health conditions.

Crisis in the past or upcoming two weeks (29%)

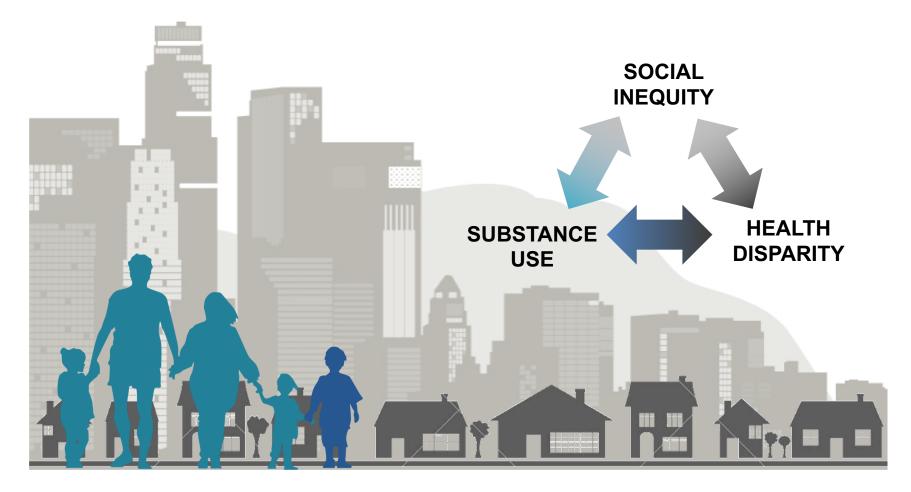
> Physical health problem (22%)

Note: Persons who died by suicide may have had multiple circumstances. Data on mental health conditions and other factors are from coroner/ medical examiner and law enforcement reports. It is possible that mental health conditions or other circumstances could have been present and not diagnosed, known, or reported.

SOURCE: CDC's National Violent Death Reporting System, data from 27 states participating in 2015.



Strong cross-sector collaboration is key to addressing complex issues like substance use.





QUESTIONS?

THANK YOU!

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