

Pandemic's effect on already rising suicide rates heightens worry

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Officers in Los Alamos, New Mexico, were called to check on an individual earlier this year, and after breaching the door realized they were too late.



"One of our suicides we had just barely missed," said Oliver Morris, operations commander for the Los Alamos Police Department, who had conducted countless checks as an officer for almost 17 years. Like many other Americans during the pandemic, the person had begun to work remotely, Morris said, and his co-workers asked police to check on him.

Los Alamos has seen an increase in suicides during the pandemic, rising from just two last year to triple that many so far this year.

The problem isn't limited to that community. Cook County, Illinois, and Fresno, California, are among those reporting similar spikes, with suicides up 13% in Cook County so far compared with the same period last year. In Fresno, suicides were 70% higher in June than in the same month last year.

The nation's <u>suicide</u> rate reached historic highs prior to the COVID-19 pandemic, with rates at the highest levels since World War II. Economic and <u>social pressures</u> this year have heightened the risks, worrying experts, <u>health officials</u> and lawmakers.

Suicide mortality rates that were rising over the past two decades combined with the current pandemic are a "perfect storm," found a study published in the *Journal of the American Medical Association* in April. Factors include economic stress, <u>social isolation</u>, reduced access to religious services, overall national anxiety, increased firearm sales and increases in health care provider suicides.

"We have people now who don't know how to feed their family who have not had that thought for a very long time. That's different than the last recession," said American Psychiatric Association President Jeffrey Geller. "There are masses of people who are quite worried today because they don't know what is going to happen to their benefits. That kind of anxiety exacerbates fragility."



The National Alliance on Mental Illness HelpLine has seen a 65% increase in calls and emails since March, according to the organization, though it is not a crisis hotline.

It's still early for government data from the Centers for Disease Control and Prevention, but some experts point to similar rises in suicide deaths during other health crises and economic recessions. Suicide increased in the United States during the influenza pandemic in 1918-19 and in 2003 in older populations in Hong Kong during the SARS epidemic.

A 2019 study in the International Journal of Social Psychiatry looking at the 2008 economic crisis found that financial crises can lead to more suicides.

"Suicide is likely to become a more pressing concern as the pandemic spreads and has longer-term effects on the general population, the economy, and vulnerable groups. Preventing suicide therefore needs urgent consideration," wrote University of Bristol suicidology expert David J. Gunnell in the June issue of *The Lancet*. "The pandemic will cause distress and leave many people vulnerable to <u>mental health</u> problems and suicidal behavior. Mental health consequences are likely to be present for longer and peak later than the actual pandemic."

CDC Director Robert Redfield also commented in July on a spike in suicides.

"There has been another cost that we've seen, particularly in high schools. We're seeing, sadly, far greater suicides now than we are deaths from COVID. We're seeing far greater deaths from drug overdose," said Redfield.

But experts also say it is too early to draw conclusions without solid data.



"There isn't any data that I've been able to find or that my colleagues in suicide prevention have been able to find to really back that up," said Julie Cerel, director of the Suicide Prevention and Exposure Laboratory at the University of Kentucky College of Social Work and a former president of the American Association of Suicidology.

Cerel said economic disadvantages, especially unemployment, can substantially contribute to suicide, as can social isolation, but other factors are also at play.

"Suicide tends to decrease in times of local or national emergency because people have that pull-together mentality," she said, citing a drop in suicides in Louisiana in the aftermath of Hurricane Katrina. Suicides in the state did begin to spike two years later.

American Association of Suicidology President Jonathan Singer uses an analogy: that everyone is weathering the same storm in different boats.

If evictions start to ramp up, "we're going to see that people are in different boats in the same storm and some of those boats are going to sink," said Singer. "I think we're going to see a rise in suicide rates."

Congressional Response

Congress is considering some initial steps to address the growing rate of suicides.

The House Energy and Commerce Committee advanced a bipartisan mental health package in July by voice vote, including four bills that would address suicide prevention and education.

"Education and front-line services are things that we can be doing right now immediately. In the same way we educate people about wearing



masks and social distancing, we should be educating people about depression," said Geller, who testified before the committee earlier this year. "There aren't enough resources because there weren't enough resources before COVID."

One bill would require the Federal Communications Commission to designate 9-8-8 as a universal telephone number for a national suicide prevention and mental health crisis hotline.

"The ongoing pandemic has only compounded our nation's mental health crisis. ... This easy to remember number will provide immediate help to a struggling population," said Rep. Chris Stewart, R-Utah, in a statement to CQ Roll Call.

The FCC recently voted unanimously to designate the number for the hotline, but it will not fully take effect until 2022.

"That is way too long a time. We need that service yesterday, not in July 2022," said Geller.

Another bill from Sens. Tim Kaine, D-Va., Todd Young, R-Ind., Jack Reed, D-R.I., and Bill Cassidy, R-La., would establish grants for training health care professionals to address mental health challenges and to identify and disseminate best-practice strategies.

The bill is named after New York Presbyterian Hospital emergency room director Lorna Breen, who died by suicide in April after struggling with the challenges that affect many front-line health workers, especially during the stress of a pandemic.

"Lorna was the toughest of the tough. This can happen to anyone, and the tide can turn in a blink of an eye," said Corey Feist, Breen's brotherin-law.



"Make no mistake that Dr. Lorna Breen was a victim of coronavirus," Kaine said. " ... she was a victim of <u>coronavirus</u> and also a victim of something that is equally pernicious and preventable."

Mental health provider groups also tout the success of Certified Community Behavioral Health Clinics, or CCBHCs, as an important tool for preventing suicides.

CCBHCs must have 24-hour crisis response services and serve people regardless of their ability to pay. The clinics offer same-day services and are able to move patients quickly into care.

Currently, more than 200 CCBHCs are in 33 states, and funding from a COVID-19 relief law will expand that to two more states.

The latest Senate COVID-19 bill would provide \$600 million more for the clinic grants, while the House version would not increase this funding.

"Obviously, we're working to make sure that, throughout this negotiation that is happening between the House and Senate, that those resources survive," said Chuck Ingoglia, president and CEO of the National Council for Behavioral Health.

Singer of AAS would like to see lawmakers create a policy that emphasizes the need for real-time data.

"If we're serious about creating real-time interventions to stop what people anticipate is going to be an increase in suicide rates, we can't have data that are two years old. And this means that we need to have federally funded, coordinated, not only data collection, but also data analysis," Singer said. "This is not a priority for the federal government, but it could be."



On-The-Ground Concerns

The spike in suicides in Cook County is especially pronounced in the Black community, which has already seen 58 suicides this year, according to the medical examiner's office. That outpaces 56 from all of 2019 and 33 during the same time period last year.

Suicide rates among young Americans and people of color were rising even before the pandemic. CDC data found that among Black children nationally, the rate jumped from 2.55 suicides per 100,000 children in 2007 to 4.82 per 100,000 in 2017.

In June, Fresno reported 17 suicide deaths in one month, the highest number in almost three years and up from 10 in June 2019.

Ahmadreza Bahrami, division manager of public behavioral <u>health</u> at the Fresno County Department of Behavioral Health, also reported increases in calls to crisis hotlines.

The long-term effects of the pandemic on the suicide rate are less clear.

"We already had a suicide problem, but the compounding of that suicide problem isn't going to go away even when we have a vaccine," Geller said.

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