

North Sound Youth and Family Coalition

2020 Needs & Strengths Assessment



North Sound Youth and Family Coalition (YFC) aims to support the statewide Family Youth System Partner Round Table (FYSPRT) in its mission to contribute to the continuous improvement of children’s behavioral health services and supports. The COVID-19 pandemic has complicated these efforts since many of the systems that families, children, and youth rely on have dramatically altered their operations. It is still not clear what these systems will look like in the months and years to come.

The following needs and strengths assessment attempts provide information that will help the region’s system of care regain equilibrium. First, the report aims to help the region accurately anticipate the behavioral health service needs of children and youth by examining baseline levels of functioning prior to the pandemic. Second, the report aims to identify social and healthcare inequities based on race, sexual orientation, and gender. Third, community strengths and resources are identified with the goal of isolating actions YFC can take to further support and improve the regional system of care over the next year.

Scope of the Issue

Every single person is impacted in some way by the COVID-19 pandemic. This report focuses on children and youth with identified behavioral health needs with the understanding that behavioral health symptoms at the community level are strongly predicted by baseline functioning prior to the pandemic. That means the need for existing services will increase. Young people who never needed services in the past will start to show symptoms. So will family members and other caregivers. So will workers in several industries that young people rely on. These include physical and behavioral health professionals, essential workers, first responders, teachers, and many others.

Right now, young people are experiencing significant psycho-social stressors. For instance, learning to wear masks in public places can be very difficult for younger children, and next to impossible for young people with sensory sensitivities. Staying at home most of the time while parents and other caregivers are under stress can increase the rates of child abuse and the chances a child will witness intimate partner violence. Many parents and caregivers are trying to work from home while helping their kids with distance learning. As such, children might not get the support they need to learn. Some parents have lost work, and the possibility that government support programs and eviction moratoriums will end looms large in many families' minds. Diminishing childcare options are also impacting family stability. Increased concerns about police violence has led to widespread social unrest. That, against an already charged political environment fraught with divisiveness has made it that much more difficult for families to function at their best. Finally, wildfires and the accompanying smoke all along the West coast have further taxed children, youth, and families.

The Influence of Racial Injustice

The impacts of the pandemic are not experienced equally across all communities. People of color are disproportionately affected by COVID-19. To be clear, a person's race, ethnicity, or nationality does not, itself, put them at greater risk of COVID-19. Rather, the impact is considered a consequence of systemic racism whereby communities of color have more limited access to resources to protect themselves from the impacts of the pandemic. For some, the persistent stress or trauma related to experiences of ongoing injustice and oppression, including witnessing police violence on the news, will likely lead to a correspondingly disproportionate increase in mental and emotional suffering.

Overview of Behavioral Health Post-Disaster Needs

Disaster experts have proposed a model for community behavioral health impacts following a disaster that shows populations moving through several predictable phases: heroic, honeymoon, disillusionment, and reconstruction. According to the Washington State Department of Health, Washington state moved into the disillusionment phase in August 2020. This phase is marked by widespread fatigue and the realization that recovery is likely to take a long time. It is during this phase that behavioral health issues related to the pandemic will begin to emerge. Provided that rates of infection do not significantly increase, symptoms should return to baseline levels about fourteen months after the initial outbreak - April or May of 2021. If COVID-19 cases do dramatically increase, a corresponding *trauma cascade* wherein parts of the recovery cycle are repeated or prolonged will likely lead to a reduced ability to emotionally recover from the disaster for many people.

Data from previous disasters has demonstrated that the incidence of depression and rates of suicide rise alongside the rates of alcohol and drug use. An increase in anxiety and Post-Traumatic Stress Disorder (PTSD) symptomology related to fears of illness or death from the virus is expected if cases go up in September and October of 2020. Finally, instances of aggression including bullying and lawbreaking behavior are expected to increase during the disillusionment phase, and wind down once the weather becomes cooler and rainier.

The information in the sections below consider high-level baseline data from each of the five counties in the North Sound region. Pre-pandemic baseline data is presented in each of the following categories: suicide, substance use (with a special focus on alcohol due to its statistical relationship to suicide), anxiety and traumatic stress, and aggressiveness and lawbreaking. Relevant state and regional data are repeated in each section. Finally, several baseline protective factors are identified, including opportunities for prosocial community involvement, participation in after school activities, and family protective factors including whether students feel they can have fun with their parents.

Community Strengths and YFC's Role in the Recovery Process

Fortunately, the North Sound region has several protective factors in place to help cushion the impact. Reports from local behavioral health providers show that no-show rates have decreased while engagement in services is increasing – particularly for online group treatment. Community organizations

running support groups, like NAMI, have also reported increased participation during the pandemic. Prevention coalitions report strong relationships with school communities, which gives them the ability to offer good tools to families. Bellingham has a youth suicide prevention program that continues to offer training and support remotely. The Lummi Nation shared that their spiritual support offerings are very strong right now, and that they are offering virtual activities to help keep families connected. Community behavioral health supports are doing what they can to foster social connections while providing participants opportunities to find a sense of purpose, increase their flexibility in solving problems, and offer some hope for the future.

Further, the data suggests that many of the behavioral health impacts of COVID-19 can be mitigated through increasing social connections, encouraging the development and use of positive coping skills, and providing information and support to people based on both their symptoms and their personal and professional roles. YFC is in a good position to support community efforts to promote connection and hope for children, youth and families. Not only are YFC meetings great opportunities to connect with others, but YFC also strives to share information about resources in the community. YFC's emphasis on encouraging the development of active coping skills among families, young people, and system partners – especially those working on behavioral and other health professions, teachers and other school system employees, first responders, and paid caregivers - will, we hope, reduce symptoms of depression and other behavioral health responses to COVID-19.

Recommendations for the 2021 Annual Work Plan

- Provide meaningful opportunities for youth and families to engage with YFC:
 - Identify, outline, and post volunteer roles on YFC's website
 - Connect with educational and juvenile justice programs that might offer credit for engagement with YFC
 - Plan to regularly survey youth and families for ideas on:
 - Presentations they would like to attend
 - Incentives that would help them contribute to YFC's work
 - Their perspectives on community strengths and needs
 - Keep an eye out for opportunities to enter partnerships with other organizations on projects that promote social connectedness (grant opportunities, initiatives, etc.)
 - Plan to address racial injustice by contracting for technical assistance:

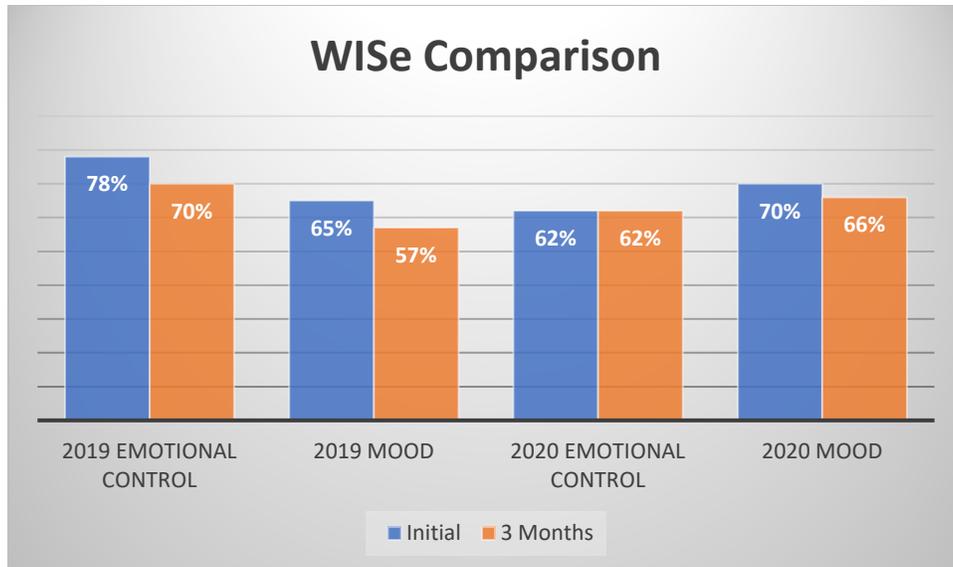
- Update YFC's Charter and Ongoing Goals
- Develop Comfort Agreement
- Update & Approve Five Year Strategic Plan Cultural Humility Goal
- Help identify and guide data gathering and analysis
- Facilitate discussion of data at meetings and identify potential issues or policy recommendations
- Solidify the role of community partners (including both members and people we want to be members) – identify who needs to be included and how to invite them to the conversation
- Develop plan for constant evaluation and assessment
- Share resources to help youth and families stay connected with others on the YFC website and group email announcements:
 - Specifically seek out and promote resources for LGBTQ+ youth
 - Utilize YFC members, the Whatcom County Youth Behavioral Health meeting, and other resources to identify programs and opportunities
 - Create space for open discussion on each regional meeting agenda to facilitate connections

Island County

Suicide

Statewide Considerations – The highest risk of suicide is between October and December 2020. This is due to a confluence of several different factors. First, this timeframe is consistent with known disaster response patterns. Second, shorter days have been associated with a type of depression known as Seasonal Affective Disorder.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, a slowdown in indicators of treatment effectiveness is notable between 2020 data and 2019 data from the same period.



HEALTH EQUITY HIGHLIGHT - Pre-pandemic, LGBTQ+ (lesbian, gay, bisexual, transgender, queer and questioning) youth were at a much higher risk of suicidal thoughts and attempts as compared to the rest of the population. According to the Trevor Project’s *National Survey on LGBTQ Youth Mental Health 2020*:

- 48% of LGBTQ youth reported engaging in self-harm
 - 60% of those identified as transgender and non-binary reported self-harm
- 52% of transgender or non-binary youth considered suicide compared to 34% of cisgender youth
- 55% of LGBTQ youth reported symptoms of major depressive disorder in the past two weeks
 - 2 out of 3 transgender or non-binary youth reported the same symptoms
- Nearly 15% of LGBTQ youth attempted suicide over the past 12 months
 - 1 in 5 transgender and non-binary youth attempted suicide

The 2018 Washington State Healthy Youth Survey shows that, in Island County:

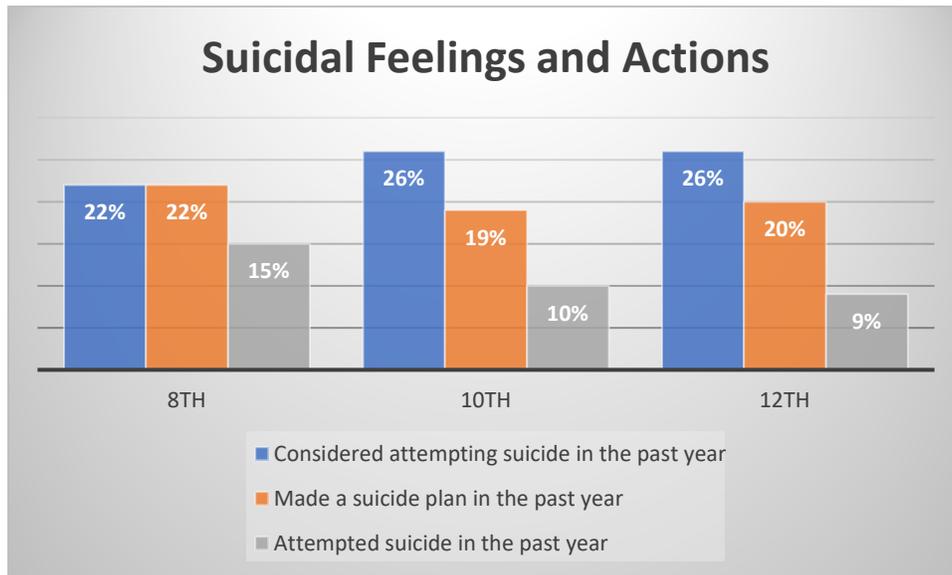
- 20% of students identified as gay, lesbian, bisexual, questioning/not sure, or stated that something else fits better
- 2% of students stated they were transgender or questioning/not sure.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows:

Depressive Feelings:

Support from Trusted Adults:

- 36% of 8th Graders
- 41% of 10th Graders
- 41% of 12th Graders
- 53% of 8th Graders
- 66% of 10th Graders
- 56% of 12th Graders



Substance Use

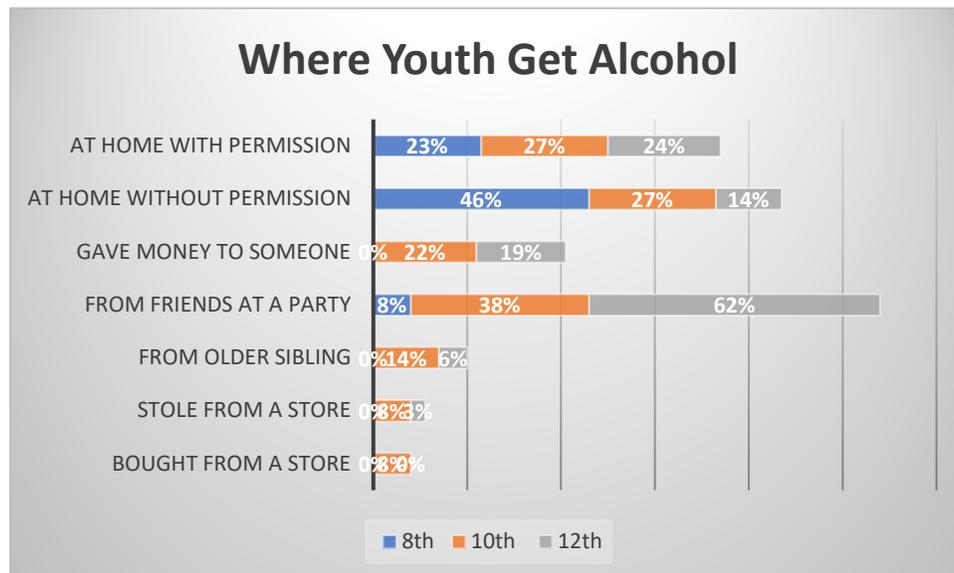
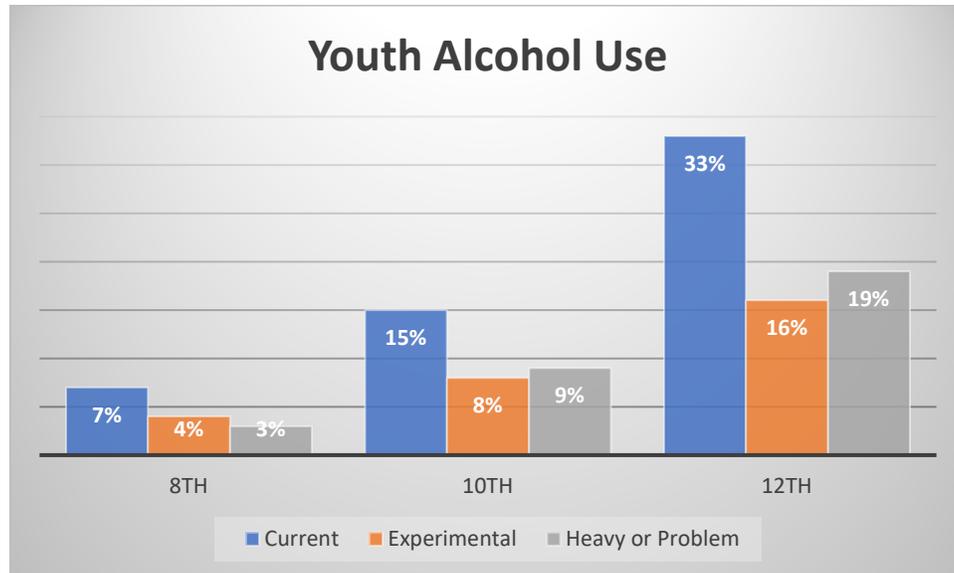
Statewide Considerations – The Department of Health data notes a trend toward individuals turning to substances to cope with the current stressors. This includes those individuals who already have a mental health diagnosis. Prior to COVID-19, 24% of individuals with mood disorders reported using alcohol or drugs in this way, while 10% of those with an anxiety disorder reported using alcohol, and 21% of individuals with PTSD used alcohol and other substances to relieve symptoms. As compared to 2019 data, cannabis tax collections were up 31% by June of 2020.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, only 8% of enrollees since the inception of the program identified substance use at the initial screening, while 83% identify it as an issue at 3 months. This may reflect ongoing stigma concerning substance use poses a challenge in helping youth engage in treatment.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows

	8th	10th	12th
Cigarettes	3%	5%	8%
Alcohol	7%	15%	33%
Marijuana	8%	16%	28%
Rx Pain Killers	3%	2%	3%

Unprescribed Rx	6%	6%	8%
Over the Counter Drugs	9%	6%	5%
All Other Illegal Drug Use	1%	3%	5%



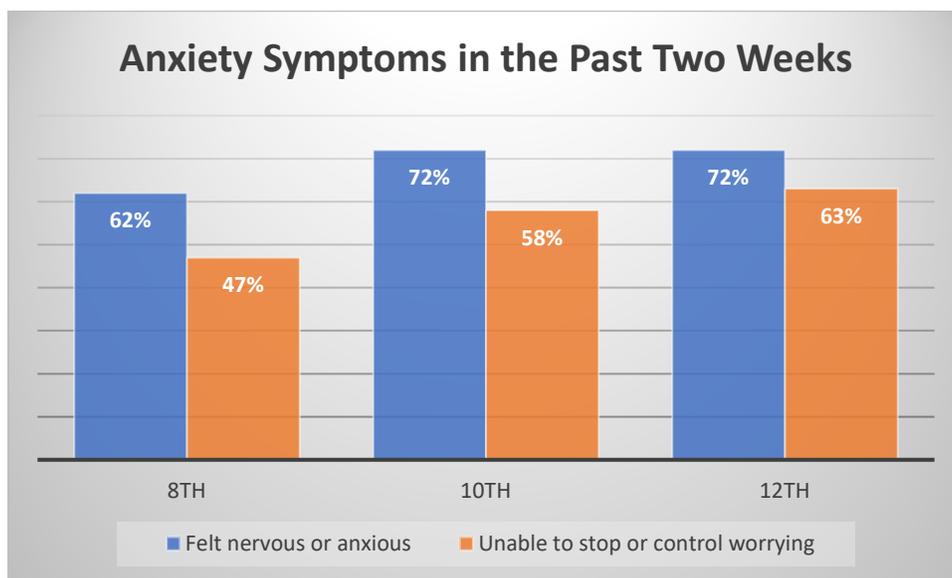
Anxiety and Traumatic Stress

Statewide Considerations – Symptoms of anxiety and acute stress are expected to be the second most common mental health response to COVID 19. If there is a dramatic increase in the number of COVID 19

cases in the Fall, communities should anticipate increased symptoms of anxiety and post-traumatic stress related to fears about illness or death. As noted above, an increase in child abuse, intimate partner violence, images of police violence and deaths at the hands of law enforcement, concerns about the fires and the health impacts of the smoke, and political unrest as the 2020 presidential election draws near also have a marked impact on perceived levels of anxiety and trauma response symptoms. That people have concerns for the future is reflected in the drastic increase in handgun sales this year. From March-July 2020, people bought 61% more guns than they did for the same period in 2019.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, indicators of trauma are identified through the course of treatment. While 54% of enrollees identify trauma as an issue during the initial screen, 83% note that trauma is a factor at the 3 month mark. This may be partly explained by youth discontinuing services early on.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows students have difficulty controlling worry as they age:



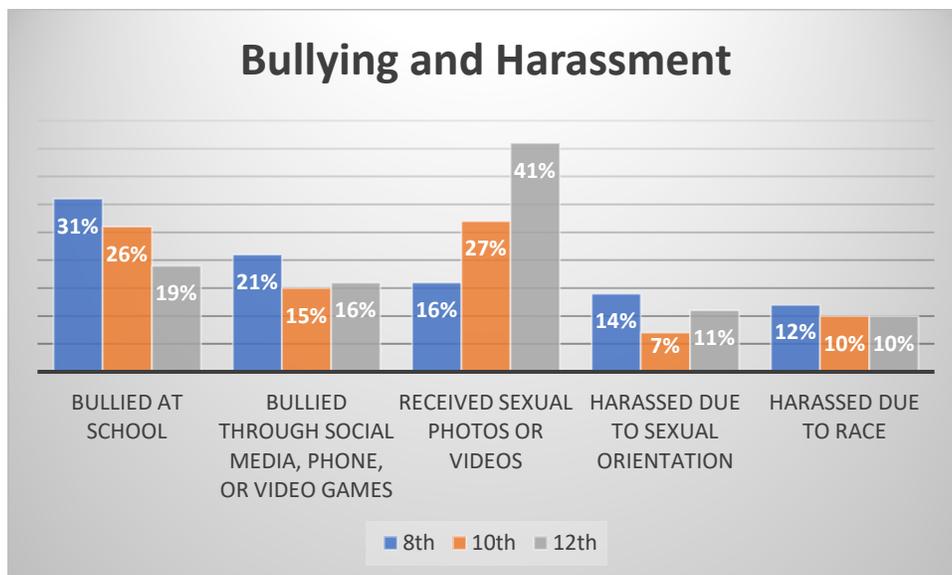
Aggressiveness and Lawbreaking

Statewide Considerations – Lawbreaking and other antisocial behavior is expected to intensify during the current disillusionment period. According to the Washington State Department of Health, most acting out behavior related to the pandemic will occur during hotter days and decrease as the weather becomes rainy and cool. The 25-30% of law enforcement agencies surveyed a 14% increase in reports of

intimate partner violence, though experts believe that number is much higher. The increase in handgun sales noted in the previous section will likely correlate to an increase in both gun violence and suicide.

Regional WISE Data – Conduct is another treatment need that becomes obvious over the course of treatment. While 26% of enrollees indicate conduct is an issue they need to work on at the initial screening, 71% indicate this is a need at the 3 month mark. Similarly, intended misbehavior is 27% at the initial screen and 73% at 3 months, school behavior is an issue for 48% at the initial screening at 67% at 3 months, and crime is an issue for only 10% at the initial screening, while 63% indicate crime is an issue they are addressing at 3 months.

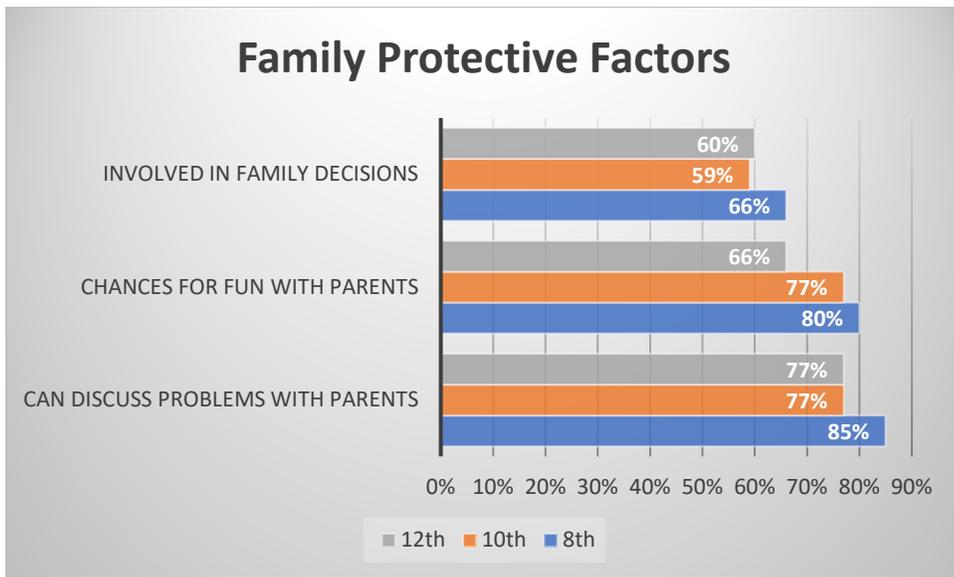
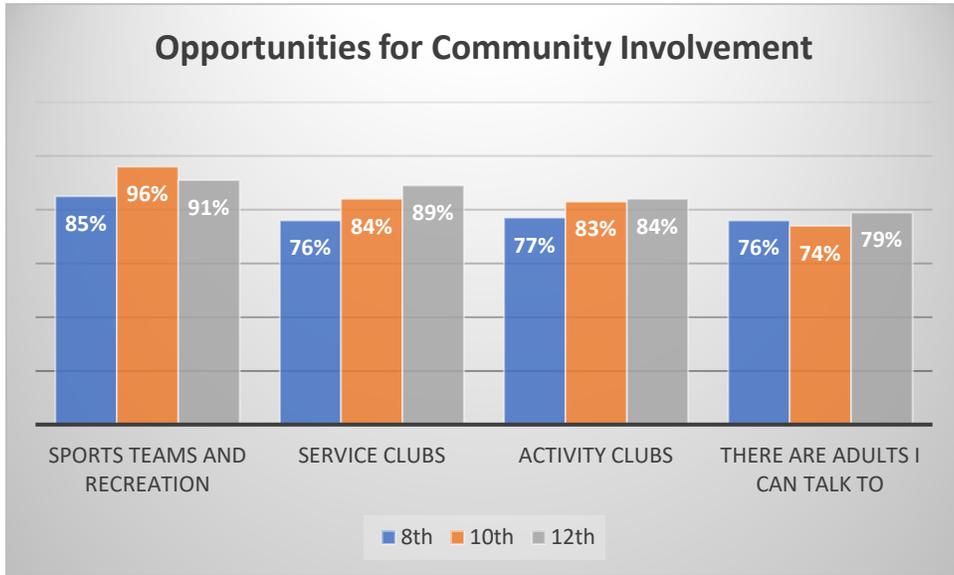
County Baseline – The Washington State Healthy Youth Survey from 2018 shows that while reports of bullying decrease as youth get older, there is an increase in students receiving unsolicited sexual materials from others, and harassment due to sexual orientation and race remains largely unchanged from 8th – 12th grade.



Community Strengths and Protective Factors

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that young people believed there were several ways they could get involved in their community, and over half of all students indicated they were involved in after school activities (64% of 8th graders, 68% of 10th graders, and 61% of 12th graders). Finally, most students indicated that their parents were people they could talk

to and have fun with. They scored their ability to be involved in family decision-making a bit lower, averaging 61% for all three grade levels.



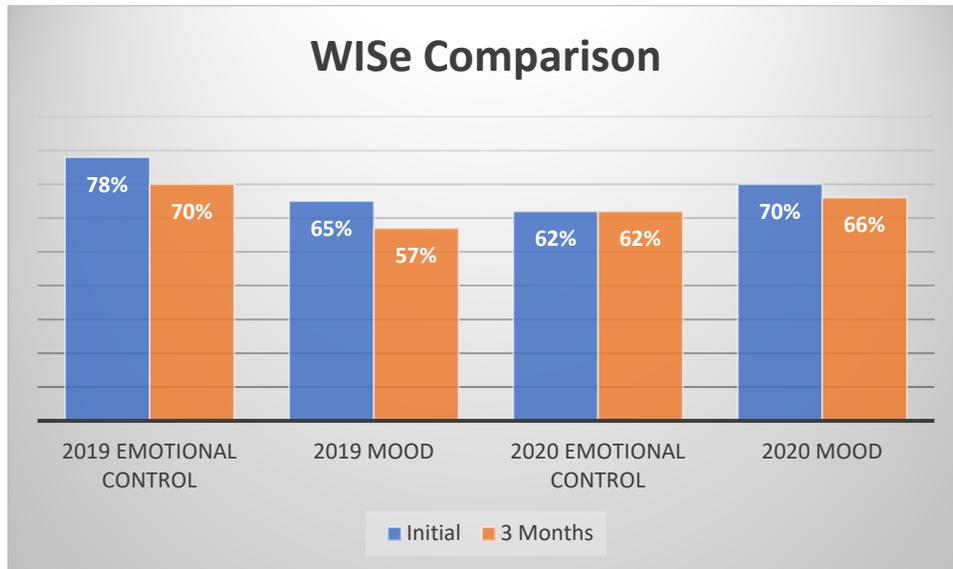
San Juan County

Suicide

Statewide Considerations – The highest risk of suicide is between October and December 2020. This is due to a confluence of several different factors. First, this timeframe is consistent with known disaster

response patterns. Second, shorter days have been associated with a type of depression known as Seasonal Affective Disorder.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, a slowdown in indicators of treatment effectiveness is notable between 2020 data and 2019 data from the same period.



HEALTH EQUITY HIGHLIGHT - Pre-pandemic, LGBTQ+ (lesbian, gay, bisexual, transgender, queer and questioning) youth were at a much higher risk of suicidal thoughts and attempts as compared to the rest of the population. According to the Trevor Project’s *National Survey on LGBTQ Youth Mental Health 2020*:

- 48% of LGBTQ youth reported engaging in self-harm
 - 60% of those identified as transgender and non-binary reported self-harm
- 52% of transgender or non-binary youth considered suicide compared to 34% of cisgender youth
- 55% of LGBTQ youth reported symptoms of major depressive disorder in the past two weeks
 - 2 out of 3 transgender or non-binary youth reported the same symptoms
- Nearly 15% of LGBTQ youth attempted suicide over the past 12 months
 - 1 in 5 transgender and non-binary youth attempted suicide

The 2018 Washington State Healthy Youth Survey shows that, in San Juan County:

- 25% of students indicate they are gay, lesbian, bisexual, questioning/not sure, or feel something else fits better.
- 4% of students indicate they are transgender or that something else fits better.

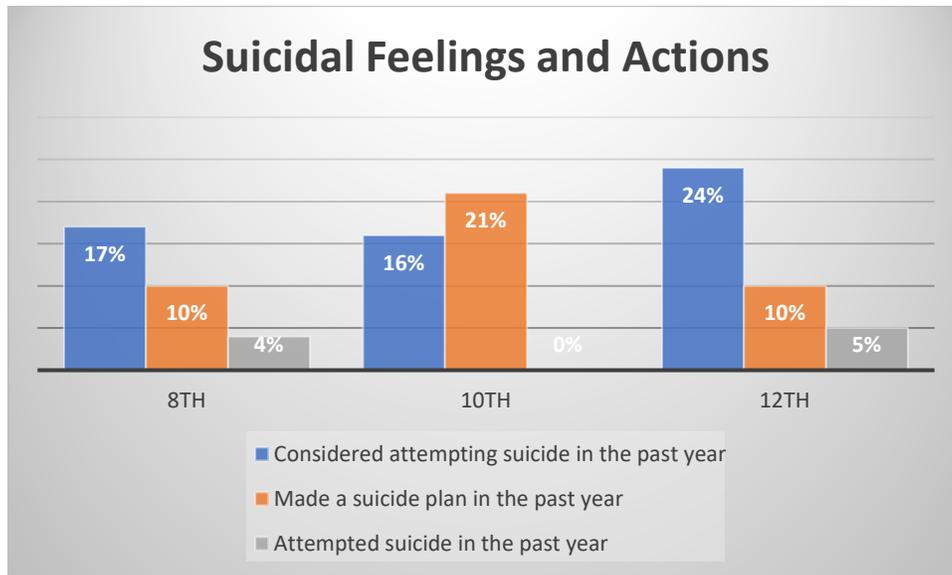
County Baseline – The Washington State Healthy Youth Survey from 2018 shows:

Depressive Feelings:

- 26% of 8th Graders
- 35% of 10th Graders
- 48% of 12th Graders

Support from Trusted Adults:

- 50% of 8th Graders
- 63% of 10th Graders
- 60% of 12th Graders



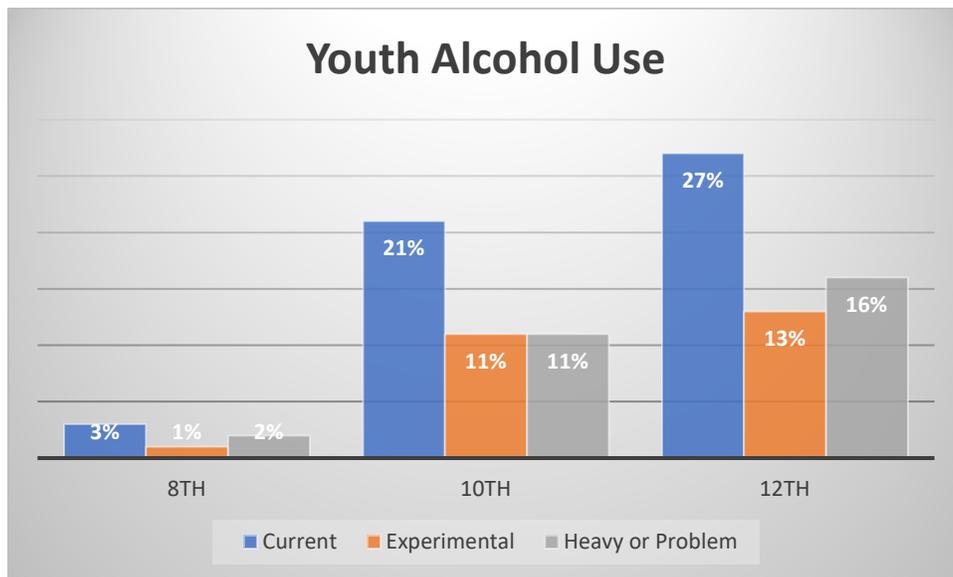
Substance Use

Statewide Considerations – The Department of Health data notes a trend toward individuals turning to substances to cope with the current stressors. This includes those individuals who already have a mental health diagnosis. Prior to COVID-19, 24% of individuals with mood disorders reported using alcohol or drugs in this way, while 10% of those with an anxiety disorder reported using alcohol, and 21% of individuals with PTSD used alcohol and other substances to relieve symptoms. As compared to 2019 data, cannabis tax collections were up 31% by June of 2020.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, only 8% of enrollees since the inception of the program identified substance use at the initial screening, while 83% identify it as an issue at 3 months. This may reflect ongoing stigma concerning substance use poses a challenge in helping youth engage in treatment.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that youth substance use substantially increases between 8th and 10th grades. Use continues to grow into 12th grade, particularly alcohol and marijuana.

	8th	10th	12th
Cigarettes	2%	6%	6%
Alcohol	3%	21%	27%
Marijuana	2%	15%	28%
Rx Pain Killers	2%	1%	1%
Unprescribed Rx	2%	3%	5%
Over the Counter Drugs	5%	6%	0%
All Other Illegal Drug Use	2%	0%	2%



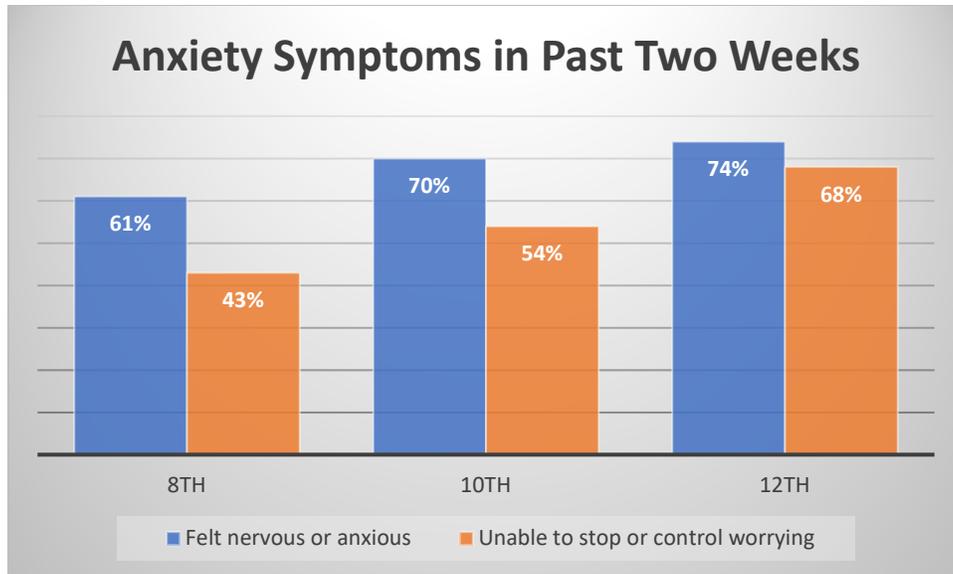


Anxiety and Traumatic Stress

Statewide Considerations – Symptoms of anxiety and acute stress are expected to be the second most common mental health response to COVID 19. If there is a dramatic increase in the number of COVID 19 cases in the Fall, communities should anticipate increased symptoms of anxiety and post-traumatic stress related to fears about illness or death. As noted above, an increase in child abuse, intimate partner violence, images of police violence and deaths at the hands of law enforcement, concerns about the fires and the health impacts of the smoke, and political unrest as the 2020 presidential election draws near also have a marked impact on perceived levels of anxiety and trauma response symptoms. That people have concerns for the future is reflected in the drastic increase in handgun sales this year. From March-July 2020, people bought 61% more guns than they did for the same period in 2019.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, indicators of trauma are identified through the course of treatment. While 54% of enrollees identify trauma as an issue during the initial screen, 83% note that trauma is a factor at the 3 month mark. This may be partly explained by youth discontinuing services early on.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that subjective perception of anxiety increases steadily as youth age:

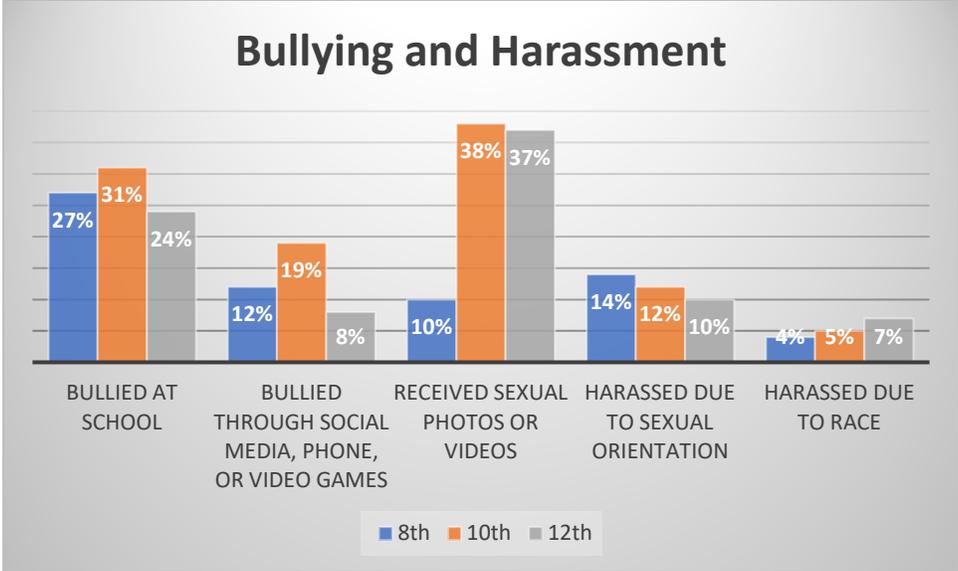


Aggressiveness and Lawbreaking

Statewide Considerations – Lawbreaking and other antisocial behavior is expected to intensify during the current disillusionment period. According to the Washington State Department of Health, most acting out behavior related to the pandemic will occur during hotter days and decrease as the weather becomes rainy and cool. The 25-30% of law enforcement agencies surveyed a 14% increase in reports of intimate partner violence, though experts believe that number is much higher. The increase in handgun sales noted in the previous section will likely correlate to an increase in both gun violence and suicide.

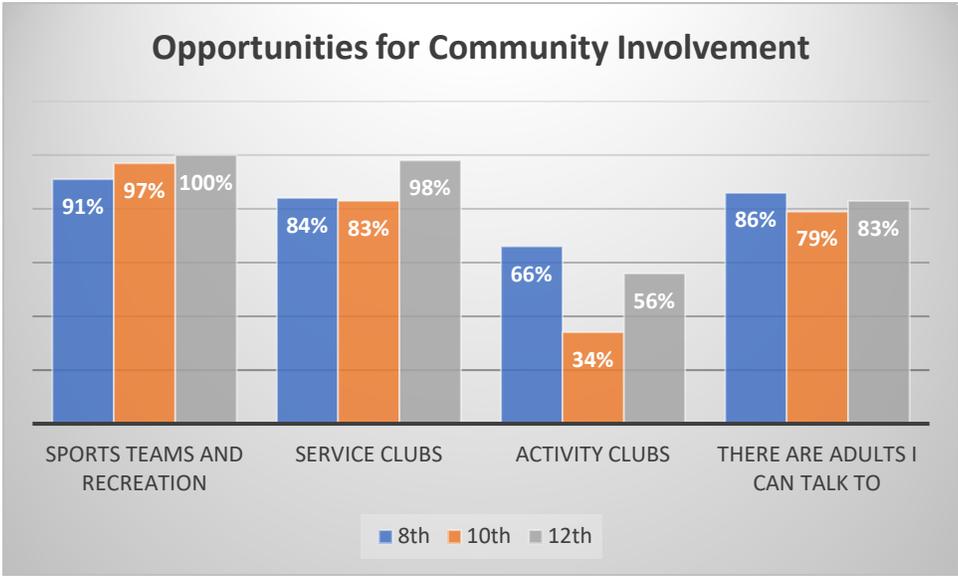
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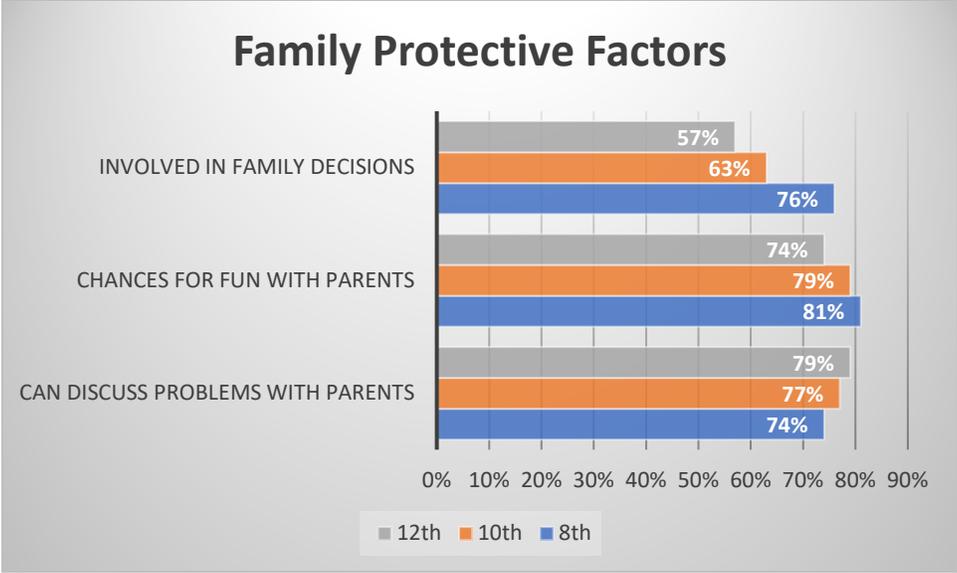
County Baseline – The Washington State Healthy Youth Survey from 2018 shows increasing concerns with students receiving unsolicited sexual photos or videos in 10th and 12th grades.



Community Strengths and Protective Factors

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that young people believed there were several ways they could get involved in their community, and well over half of all students indicated they were involved in after school activities (68% of 8th graders, 69% of 10th graders, and 76% of 12th graders). Finally, most students indicated that their parents were people they could talk to and have fun with. They scored their ability to be involved in family decision-making a bit lower, averaging 65% for all three grade levels.



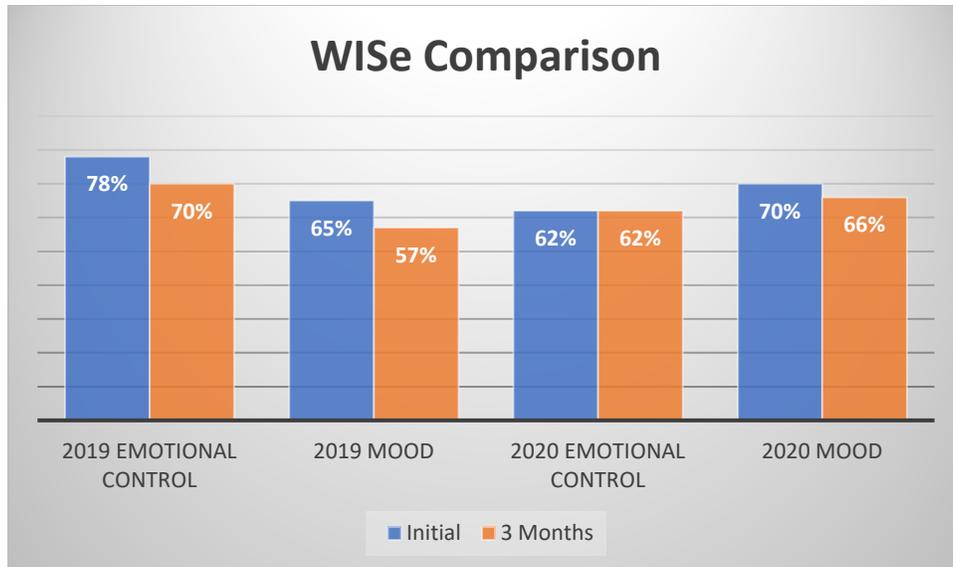


Skagit County

Suicide

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 - 2 out of 3 transgender or non-binary youth reported the same symptoms
- Nearly 15% of LGBTQ youth attempted suicide over the past 12 months
 - 1 in 5 transgender and non-binary youth attempted suicide

The 2018 Washington State Healthy Youth Survey shows that, in Skagit County:

- Among 8th graders, 15% identify as gay, lesbian, questioning/not sure, or indicated something else fits better. Among 10th and 12th graders that number is 18%.
- Among 8th and 10th graders, 4% identify as transgender, questioning/not sure, or indicated that something else fits better. Among 12th graders that number is 5%.

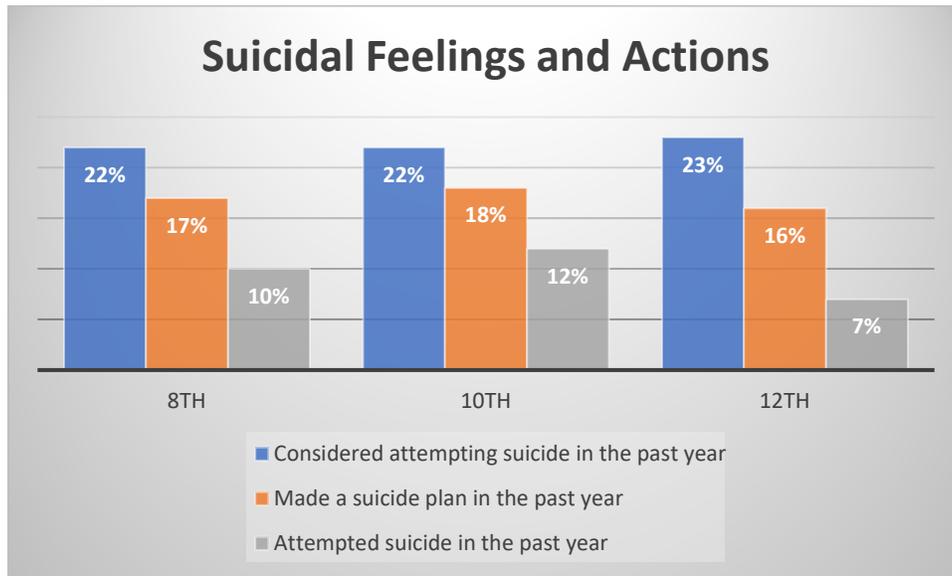
County Baseline – The Washington State Healthy Youth Survey from 2018 shows:

Depressive Feelings:

- 35% of 8th Graders
- 38% of 10th Graders
- 42% of 12th Graders

Support from Trusted Adults:

- 47% of 8th Graders
- 51% of 10th Graders
- 57% of 12th Graders



Substance Use

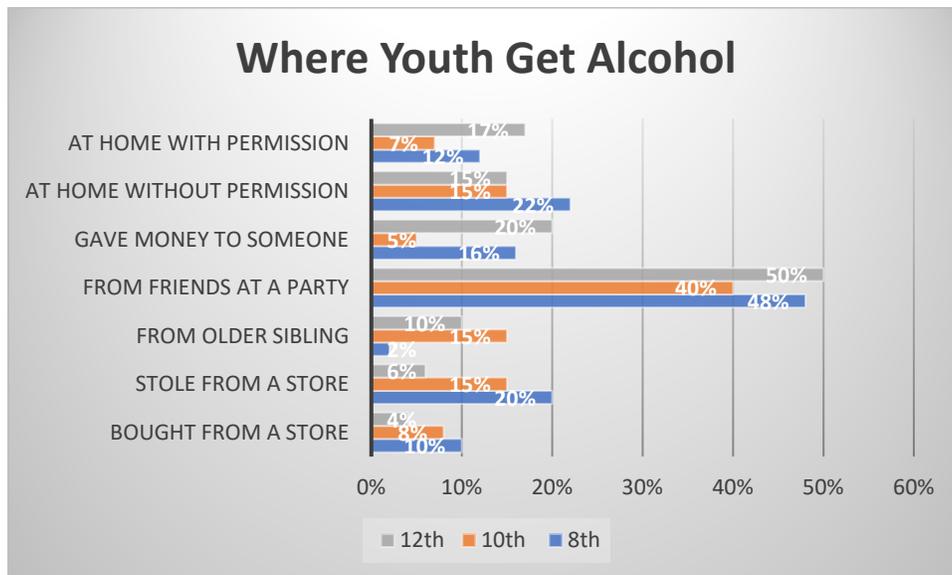
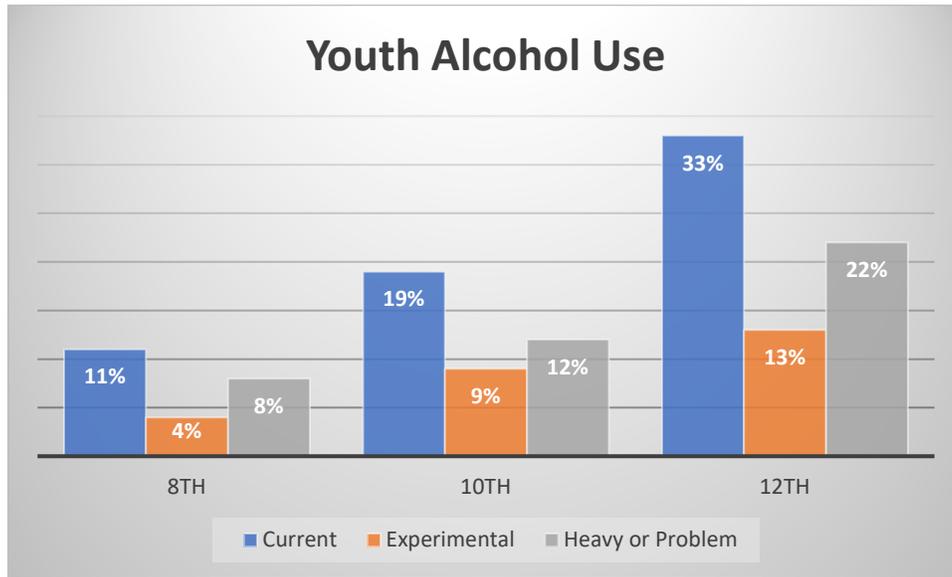
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Alcohol	11%	19%	33%
Marijuana	10%	18%	30%

Rx Pain Killers	3%	5%	4%
Unprescribed Rx	6%	7%	6%
Over the Counter Drugs	6%	5%	4%
All Other Illegal Drug Use	6%	7%	8%



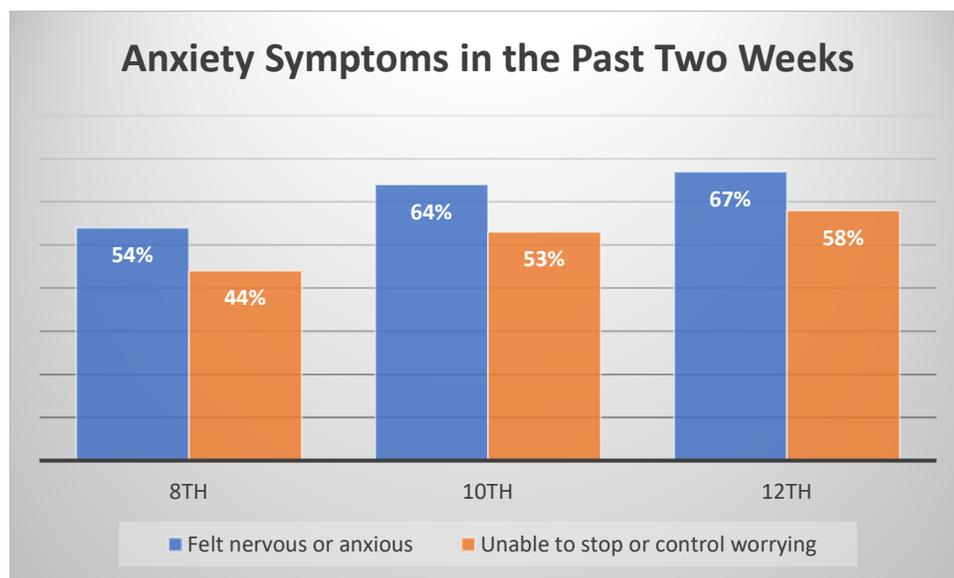
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County Baseline – The Washington State Healthy Youth Survey from 2018 shows that subjective perception of anxiety increases steadily as youth age:



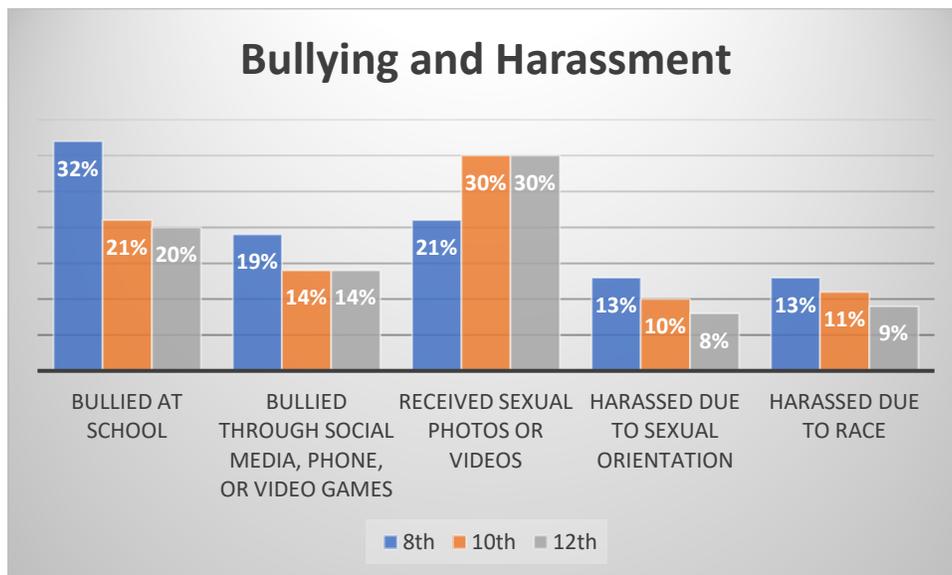
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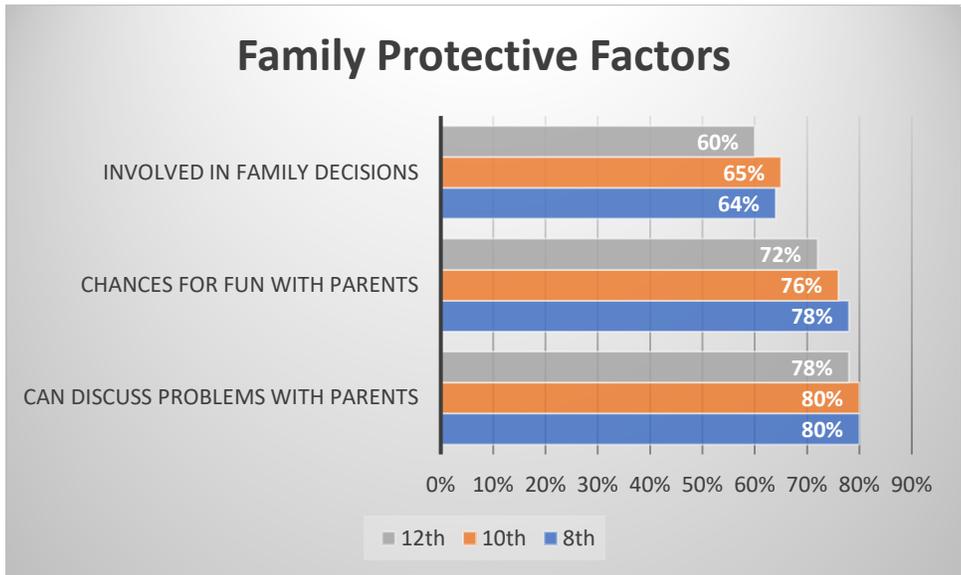
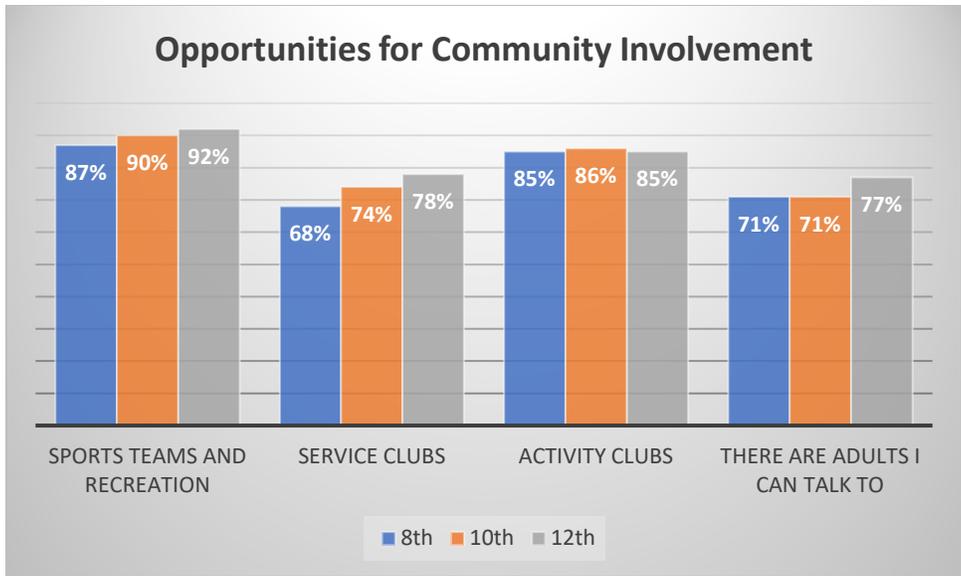
Regional WISE Data – Conduct is another treatment need that becomes obvious over the course of treatment. While 26% of enrollees indicate conduct is an issue they need to work on at the initial screening, 71% indicate this is a need at the 3 month mark. Similarly, intended misbehavior is 27% at the initial screen and 73% at 3 months, school behavior is an issue for 48% at the initial screening at 67% at 3 months, and crime is an issue for only 10% at the initial screening, while 63% indicate crime is an issue they are addressing at 3 months.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that while reports of bullying decrease as youth get older, there is an increase in students receiving unsolicited sexual materials from others, and harassment due to sexual orientation and race slowly decreased from 8th – 12th grade.



Community Strengths and Protective Factors

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that young people believed there were several ways they could get involved in their community, and over half of all students indicated they were involved in after school activities (60% of 8th graders, 65% of 10th graders, and 64% of 12th graders). Finally, most students indicated that their parents were people they could talk to and have fun with. They scored their ability to be involved in family decision-making a bit lower, averaging 63% for all three grade levels.

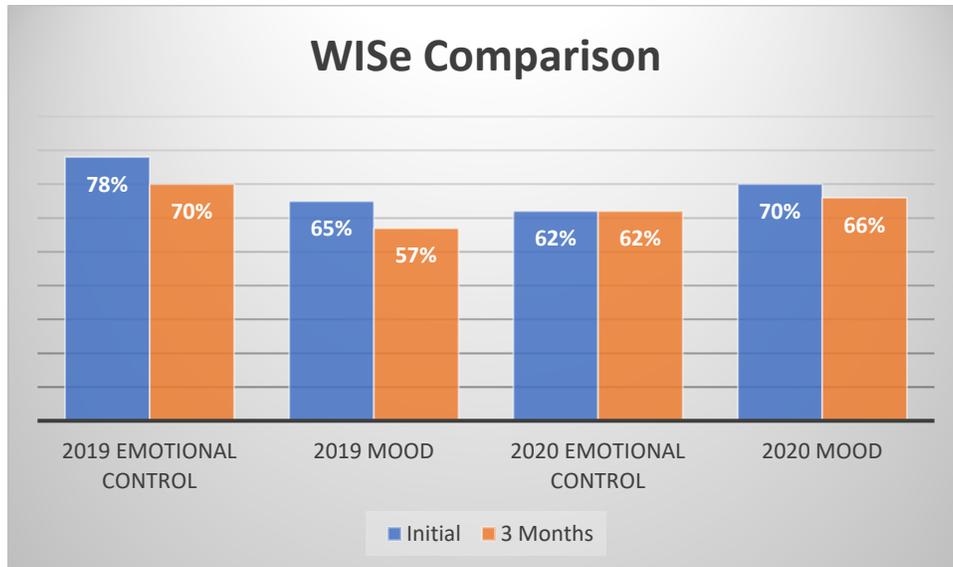


Snohomish County

Suicide

Statewide Considerations – The highest risk of suicide is between October and December 2020. This is due to a confluence of several different factors. First, this timeframe is consistent with known disaster response patterns. Second, shorter days have been associated with a type of depression known as Seasonal Affective Disorder.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, a slowdown in indicators of treatment effectiveness is notable between 2020 data and 2019 data from the same period.



HEALTH EQUITY HIGHLIGHT - Pre-pandemic, LGBTQ+ (lesbian, gay, bisexual, transgender, queer and questioning) youth were at a much higher risk of suicidal thoughts and attempts as compared to the rest of the population. According to the Trevor Project’s *National Survey on LGBTQ Youth Mental Health 2020*:

- 48% of LGBTQ youth reported engaging in self-harm
 - 60% of those identified as transgender and non-binary reported self-harm
- 52% of transgender or non-binary youth considered suicide compared to 34% of cisgender youth
- 55% of LGBTQ youth reported symptoms of major depressive disorder in the past two weeks
 - 2 out of 3 transgender or non-binary youth reported the same symptoms
- Nearly 15% of LGBTQ youth attempted suicide over the past 12 months
 - 1 in 5 transgender and non-binary youth attempted suicide

The 2018 Washington State Healthy Youth Survey shows that, in Snohomish County:

County Baseline – The Washington State Healthy Youth Survey from 2018 shows:

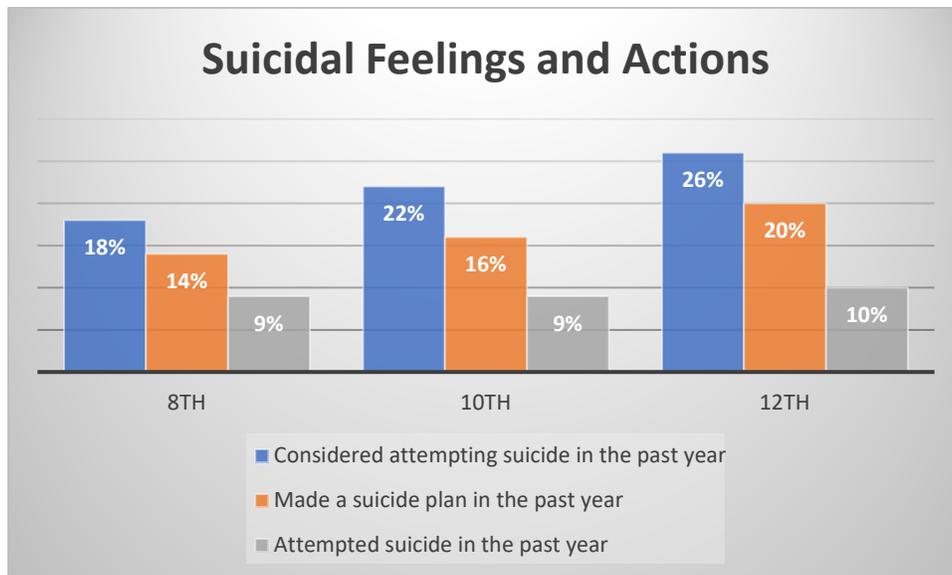
- Among 8th and 10th graders, 16% identify as gay, lesbian, questioning/not sure, or indicated something else fits better. Among 12th graders that number is 19%.
- Among 8th, 10th, and 12th graders, 3% identify as transgender, questioning/not sure, or indicated that something else fits better.

Depressive Feelings:

- 31% of 8th Graders
- 38% of 10th Graders
- 44% of 12th Graders

Support from Trusted Adults:

- 50% of 8th Graders
- 52% of 10th Graders
- 53% of 12th Graders



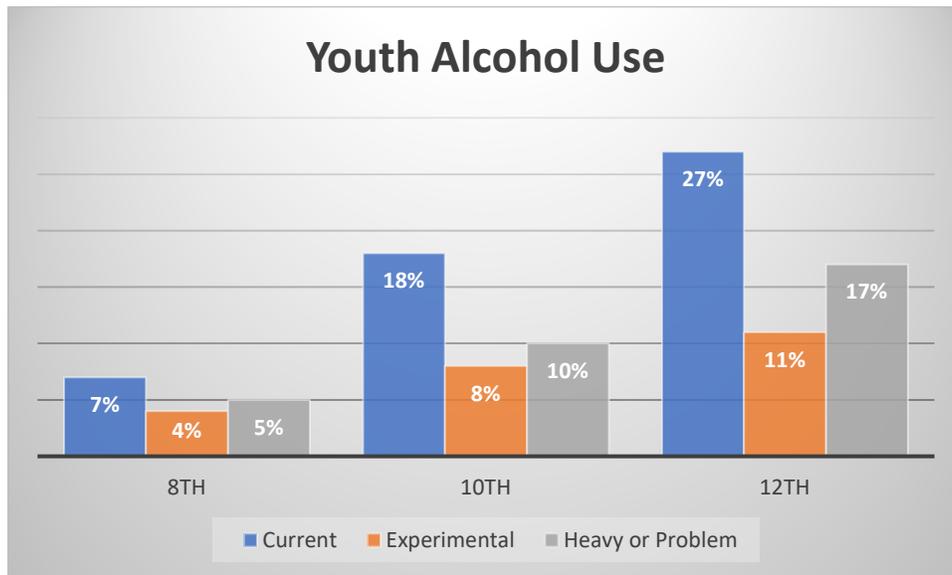
Substance Use

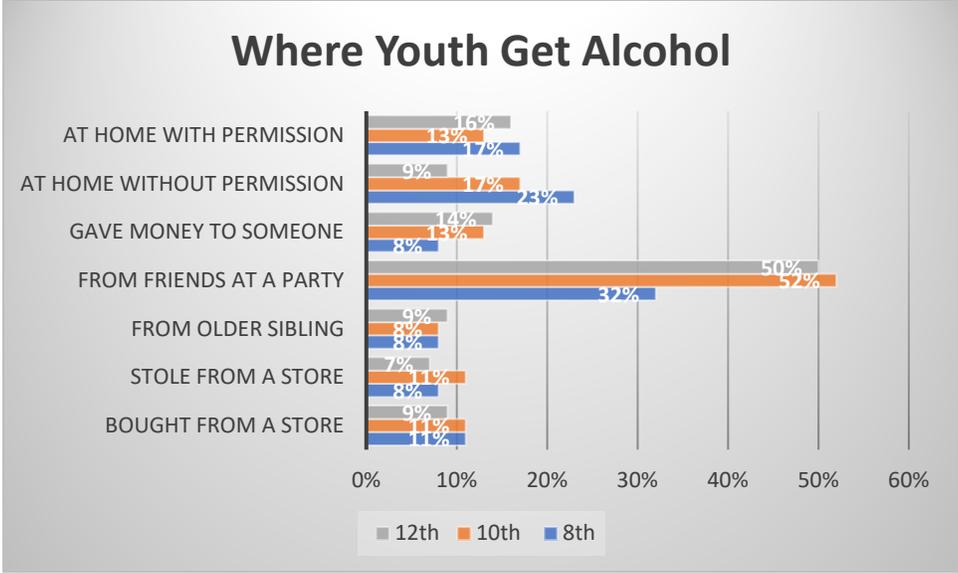
Statewide Considerations – The Department of Health data notes a trend toward individuals turning to substances to cope with the current stressors. This includes those individuals who already have a mental health diagnosis. Prior to COVID-19, 24% of individuals with mood disorders reported using alcohol or drugs in this way, while 10% of those with an anxiety disorder reported using alcohol, and 21% of individuals with PTSD used alcohol and other substances to relieve symptoms. As compared to 2019 data, cannabis tax collections were up 31% by June of 2020.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, only 8% of enrollees since the inception of the program identified substance use at the initial screening, while 83% identify it as an issue at 3 months. This may reflect ongoing stigma concerning substance use poses a challenge in helping youth engage in treatment.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows

	8th	10th	12th
Cigarettes	3%	5%	7%
Alcohol	7%	18%	27%
Marijuana	6%	17%	25%
Rx Pain Killers	2%	4%	4%
Unprescribed Rx	4%	6%	5%
Over the Counter Drugs	5%	5%	3%
All Other Illegal Drug Use	3%	6%	5%



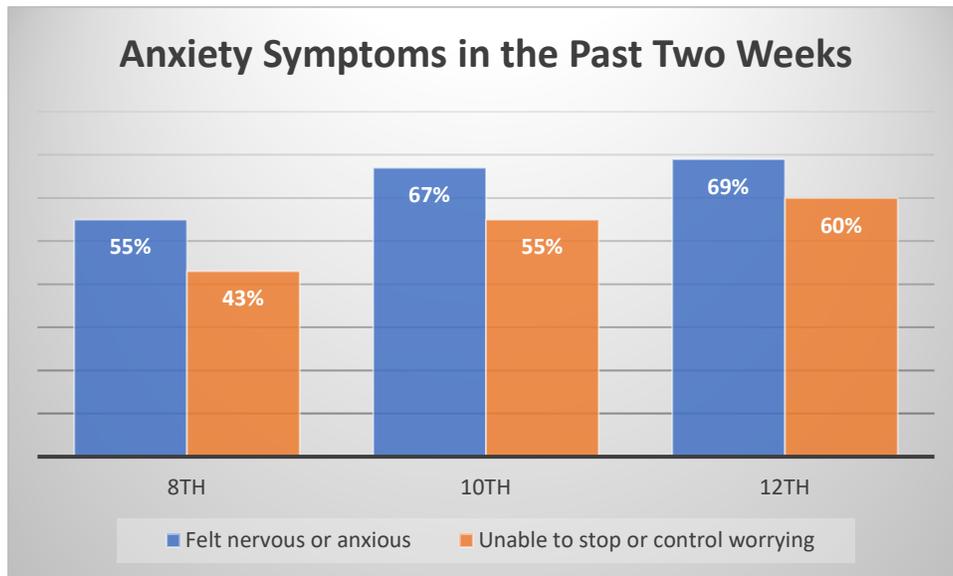


Anxiety and Traumatic Stress

Statewide Considerations – Symptoms of anxiety and acute stress are expected to be the second most common mental health response to COVID 19. If there is a dramatic increase in the number of COVID 19 cases in the Fall, communities should anticipate increased symptoms of anxiety and post-traumatic stress related to fears about illness or death. As noted above, an increase in child abuse, intimate partner violence, images of police violence and deaths at the hands of law enforcement, concerns about the fires and the health impacts of the smoke, and political unrest as the 2020 presidential election draws near also have a marked impact on perceived levels of anxiety and trauma response symptoms. That people have concerns for the future is reflected in the drastic increase in handgun sales this year. From March-July 2020, people bought 61% more guns than they did for the same period in 2019.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, indicators of trauma are identified through the course of treatment. While 54% of enrollees identify trauma as an issue during the initial screen, 83% note that trauma is a factor at the 3 month mark. This may be partly explained by youth discontinuing services early on.

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that subjective perception of anxiety increases steadily as youth age:



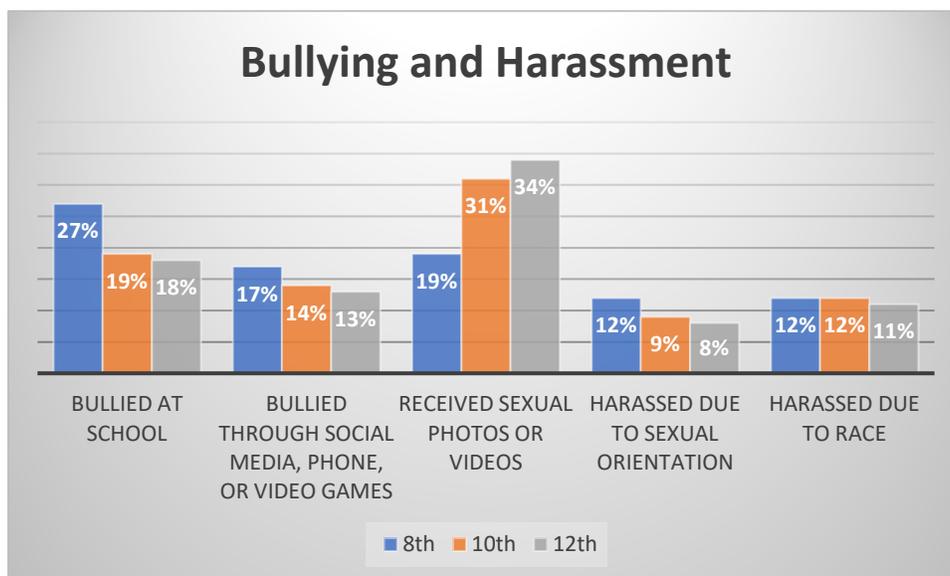
Aggressiveness and Lawbreaking

Statewide Considerations – Lawbreaking and other antisocial behavior is expected to intensify during the current disillusionment period. According to the Washington State Department of Health, most acting out behavior related to the pandemic will occur during hotter days and decrease as the weather becomes rainy and cool. The 25-30% of law enforcement agencies surveyed a 14% increase in reports of intimate partner violence, though experts believe that number is much higher. The increase in handgun sales noted in the previous section will likely correlate to an increase in both gun violence and suicide.

Regional WISE Data – Conduct is another treatment need that becomes obvious over the course of treatment. While 26% of enrollees indicate conduct is an issue they need to work on at the initial screening, 71% indicate this is a need at the 3 month mark. Similarly, intended misbehavior is 27% at the initial screen and 73% at 3 months, school behavior is an issue for 48% at the initial screening at 67% at 3 months, and crime is an issue for only 10% at the initial screening, while 63% indicate crime is an issue they are addressing at 3 months.

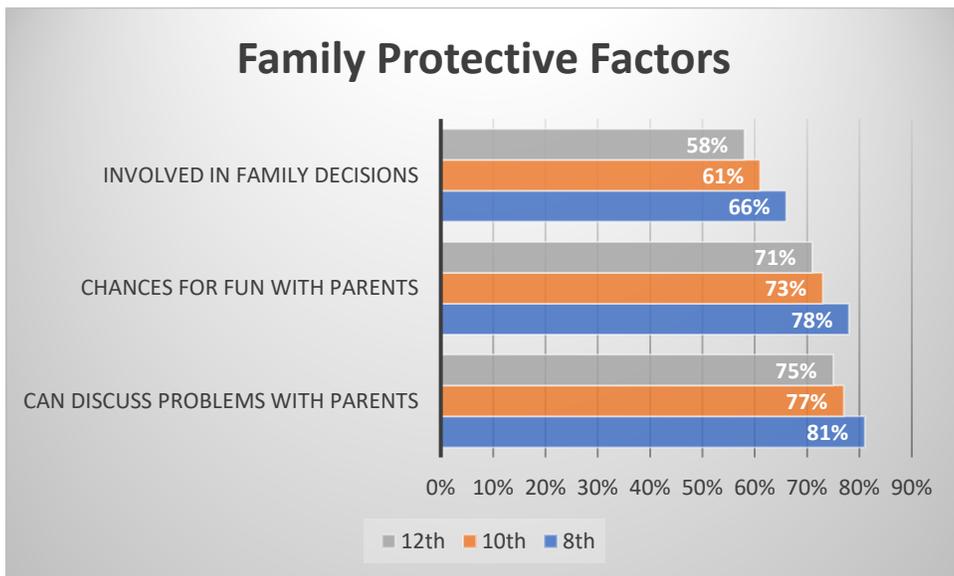
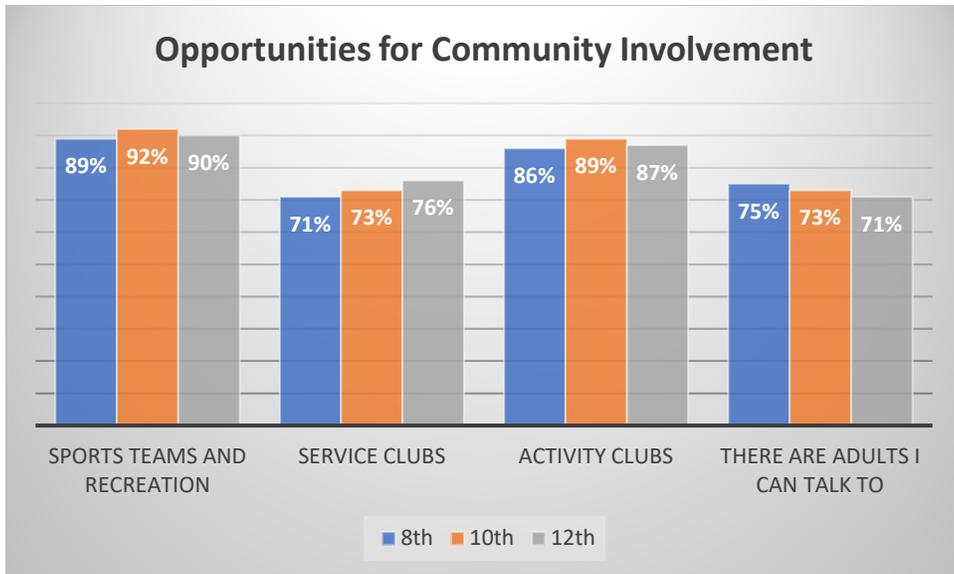
County Baseline – The Washington State Healthy Youth Survey from 2018 shows that while reports of bullying decrease as youth get older, there is an increase in students receiving unsolicited sexual

materials from others. Whereas harassment due to sexual orientation gradually decreased from 8th – 12th grades, harassment due to race remained largely unchanged.



Community Strengths and Protective Factors

County Baseline – The Washington State Healthy Youth Survey from 2018 shows that young people believed there were several ways they could get involved in their community, and over half of all students indicated they were involved in after school activities (58% of 8th graders, 61% of 10th graders, and 58% of 12th graders). Finally, most students indicated that their parents were people they could talk to and have fun with. They scored their ability to be involved in family decision-making a bit lower, averaging 61% for all three grade levels.

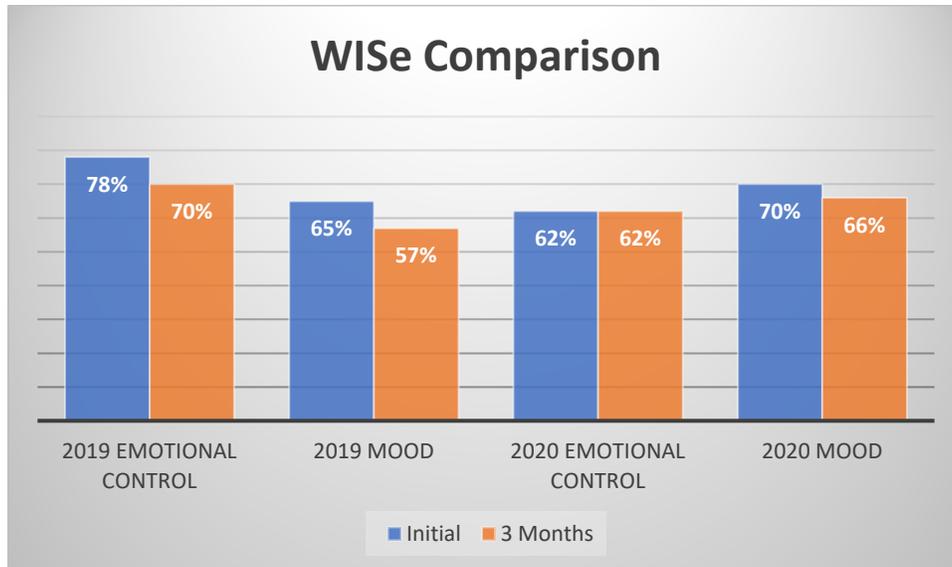


Whatcom County

Suicide

Statewide Considerations – The highest risk of suicide is between October and December 2020. This is due to a confluence of several different factors. First, this timeframe is consistent with known disaster response patterns. Second, shorter days have been associated with a type of depression known as Seasonal Affective Disorder.

Regional WISE Data – according to the *WISE Quality Management Plan, CANS 5+ Quarterly Report for Quarter 2, 2020 North Sound*, a slowdown in indicators of treatment effectiveness is notable between 2020 data and 2019 data from the same period.



HEALTH EQUITY HIGHLIGHT - Pre-pandemic, LGBTQ+ (lesbian, gay, bisexual, transgender, queer and questioning) youth were at a much higher risk of suicidal thoughts and attempts as compared to the rest of the population. According to the Trevor Project’s *National Survey on LGBTQ Youth Mental Health 2020*:

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- 52% of transgender or non-binary youth considered suicide compared to 34% of cisgender youth
- 55% of LGBTQ youth reported symptoms of major depressive disorder in the past two weeks
 - 2 out of 3 transgender or non-binary youth reported the same symptoms
- Nearly 15% of LGBTQ youth attempted suicide over the past 12 months
 - 1 in 5 transgender and non-binary youth attempted suicide

The 2018 Washington State Healthy Youth Survey shows that, in Whatcom County:

- 16% of youth surveyed identified as Gay, Lesbian, Bisexual, Questioning/Not Sure, or indicated that Something Else Fits Better

- 4% of youth surveyed identified as Transgender, Questioning/Not Sure, or indicated that Something Else Fits Better

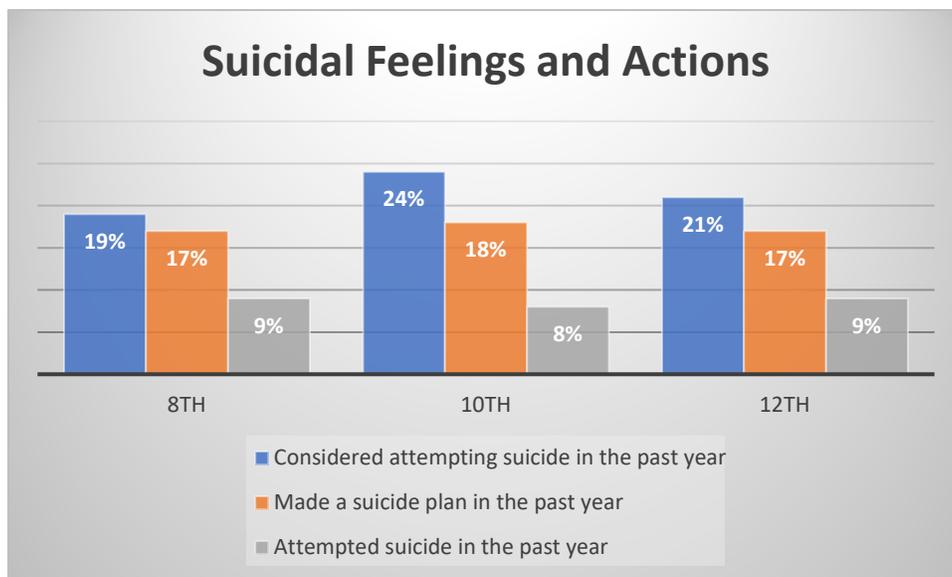
County Baseline – The Washington State Healthy Youth Survey from 2018 shows:

Depressive Feelings:

- 29% of 8th Graders
- 38% of 10th Graders
- 38% of 12th Graders

Support from Trusted Adults:

- 48% of 8th Graders
- 54% of 10th Graders
- 60% of 12th Graders



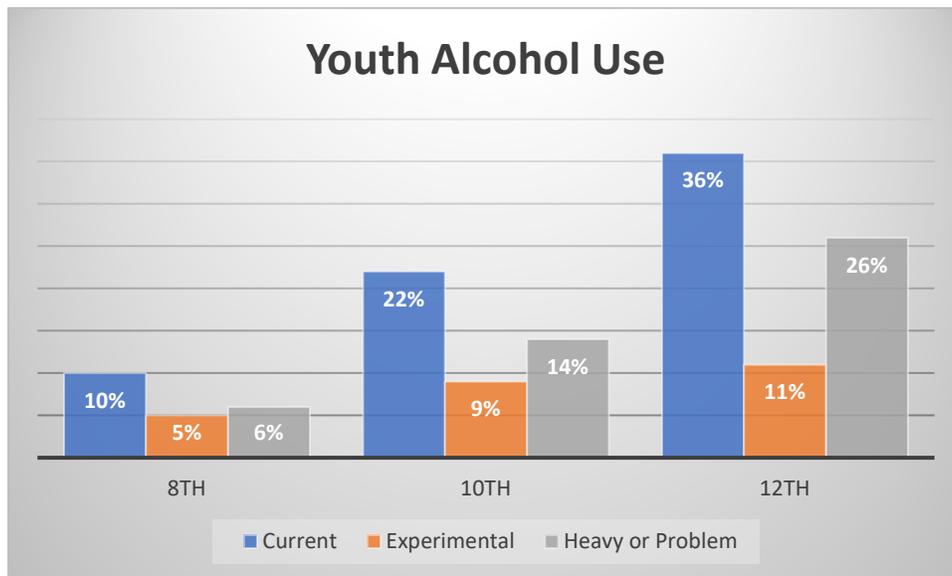
Substance Use

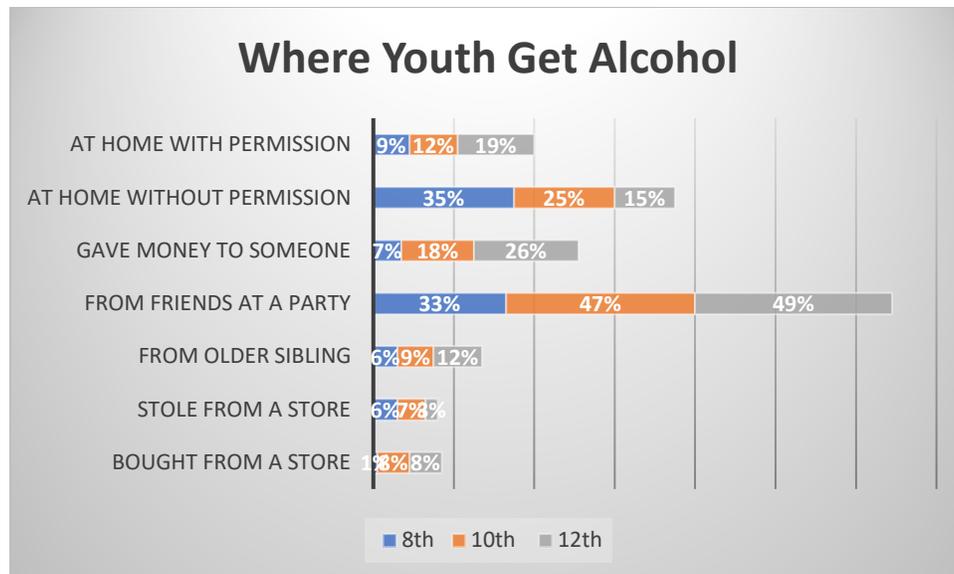
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County Baseline – The Washington State Healthy Youth Survey from 2018 shows that youth substance use substantially increases between 8th and 10th grades. Use continues to grow into 12th grade, particularly alcohol and marijuana.

	8th	10th	12th
Cigarettes	1%	7%	11%
Alcohol	2%	22%	36%
Marijuana	1%	20%	28%
Rx Pain Killers	N/A	4%	4%
Unprescribed Rx	N/A	7%	7%
Over the Counter Drugs	N/A	5%	3%
All Other Illegal Drug Use	1%	7%	8%



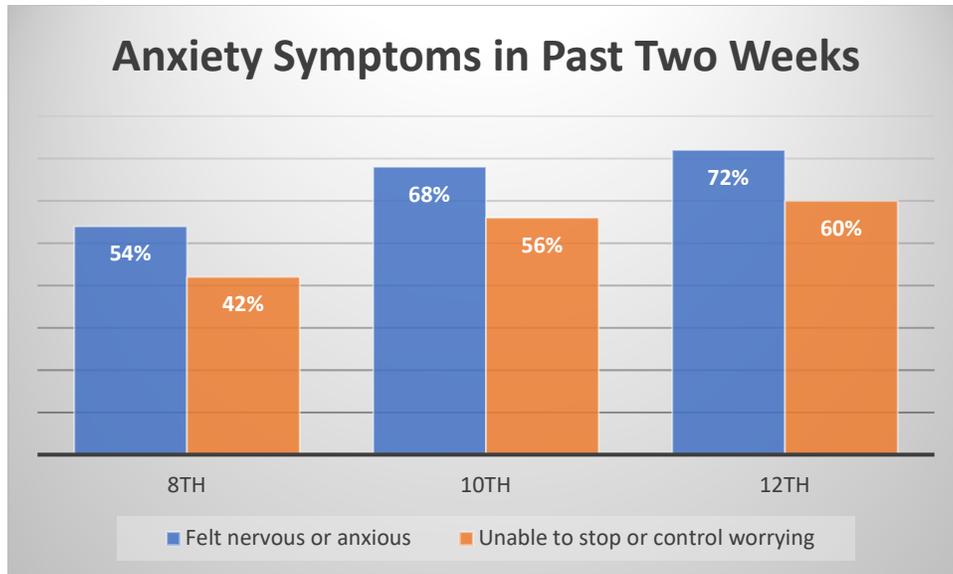


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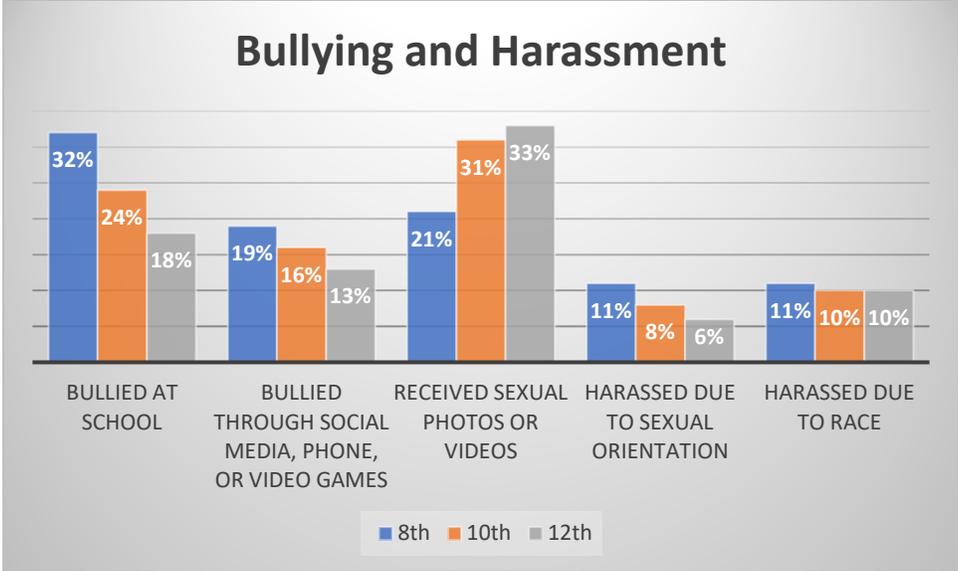


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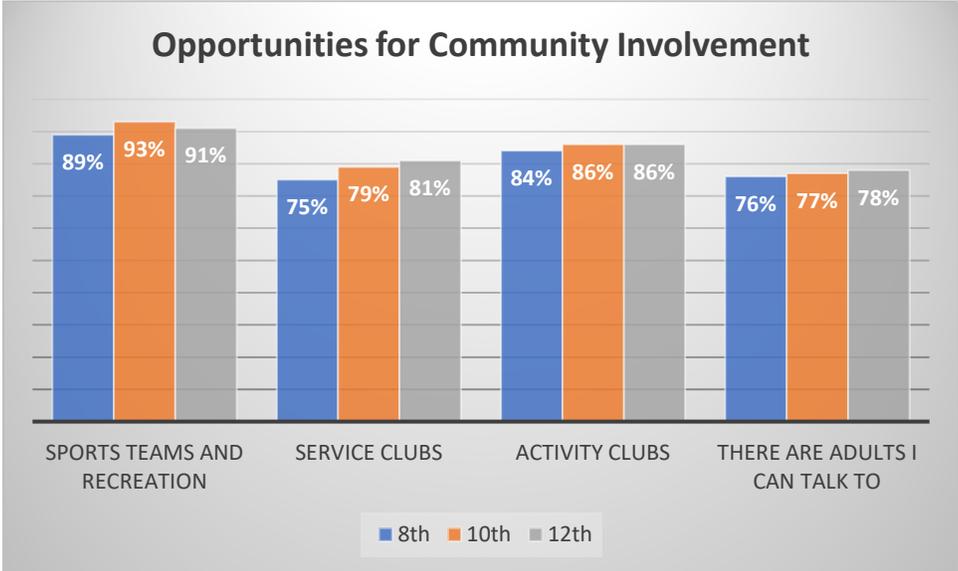
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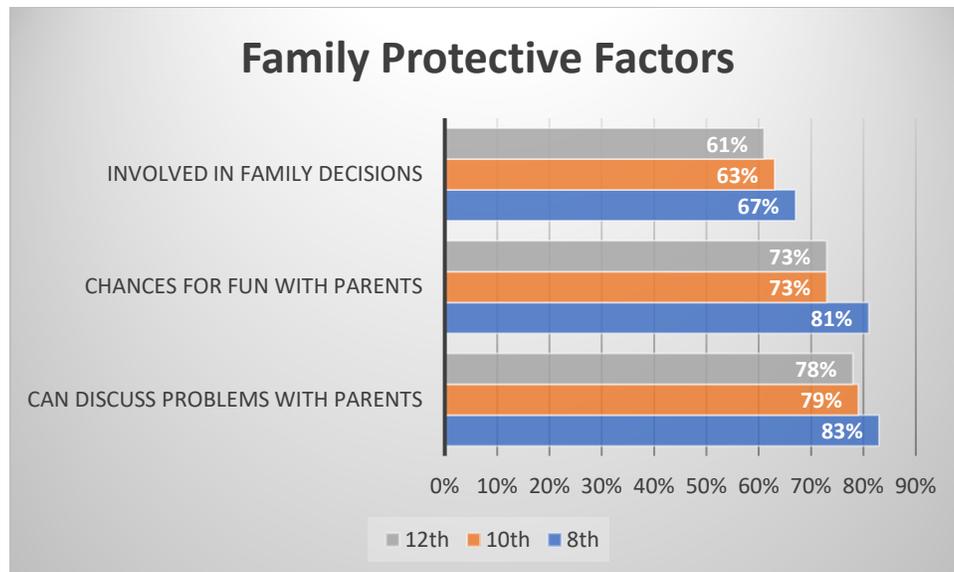
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County Baseline – The Washington State Healthy Youth Survey from 2018 shows that young people believed there were several ways they could get involved in their community, and over half of all students indicated they were involved in after school activities (63% of 8th graders, 67% of 10th graders, and 65% of 12th graders). Finally, most students indicated that their parents were people they could talk to and have fun with. They scored their ability to be involved in family decision-making a bit lower, averaging 65% for all three grade levels.





Data sources:

- [Washington State Healthy Youth Survey \(2018\)](#)
- [The Trevor Project's 2020 Survey](#)
- [August Update: Statewide High-Level Analysis of Forecasted Behavioral Health Impacts from COVID 19](#) (Washington State Department of Health, 2020)
- [COVID-19 Behavioral Health Group Impact Reference Guide](#) (Washington State Department of Health, 2020)
- [COVID-19 Behavioral Health Toolbox for Families](#) (Washington State Department of Health, 2020)
- North Sound Youth and Family Coalition Meeting Evaluations (2020)
- Whatcom County Youth Behavioral Health Meeting Notes (2020)