Suicidal Ideation in the Youth of Brooklyn Across Three COVID Timeframes

Objective: Emergency department visits among youth for suicidal ideation (SI) have increased since the start of the COVID-19 pandemic, especially among females and Black or AA youth. Our earlier work examined rates of SI pre and during the pandemic and showed a nonsignificant increase in rates of SI. We extended the time frame of our analyses to test the hypothesis that rates of SI would increase in the second year of the pandemic.

Methods: This chart review included patients aged 3-18 evaluated in the Comprehensive Psychiatric Emergency Program in NYCHHC Kings County from Jan-Feb in 2020 (hereafter pre-COVID), and the corresponding months in 2021 and 2022 (hereafter COVID-1 and COVID-2 respectively). We compared SI measured by the Columbia Suicide Severity Rating Scale (C-SSRS), individual items and total, between cohorts using chi-squared and One-Way ANOVA.

Results: There were 523 patients with no significant differences in age (M= 13.67 SD= 3.184), sex (M= 56.2% female), and race (M= 74.8% Black or AA) between cohorts. 505 (97%) patients completed the C-SSRS with staff and were included in analyses (235: pre-COVID, 130: COVID-1, 158: COVID-2). While there were no between group differences in “wish to be dead” or “suicidal thoughts,” significantly more patients in COVID-2 compared to pre-COVID and COVID-1 endorsed SI with a method but no intent (X2(4, N= 158)= 17.94, p< .001) and SI with a specific plan and intent (X2(4, N= 158)= 14.44, p< .006).

Conclusion: Patients having a specific plan and method for SI was highest in 2022 compared to pre-COVID and the first year of the pandemic. Our current analyses did not permit investigation of causality. It is possible that youth returning to in-person school after quarantine in COVID-2 led to significant stress. Also, the rising destigmatization of mental health in the media may have empowered more youth to report their SI. Our further analyses will examine association of clinical characteristics and rising rates of SI.