Mental Health

2018 DELAWARE STATE EPIDEMIOLOGICAL PROFILE: SUBSTANCE USE AND RELATED ISSUES

Prepared by the

University of Delaware Center for Drug and Health Studies
&
Its State Partners
for

The Delaware SPF-PFS Program,
The Delaware Division of Substance Abuse and Mental Health,
&
The State Epidemiological Outcomes Workgroup
(SEOW, formerly the Delaware Drug and Alcohol Tracking Alliance/DDATA)

Sponsored by Award SP020704 to the Division of Substance Abuse and Mental Health, Delaware Health and Social Services, from the Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration. Please address all inquiries to: Laura Rapp, PhD, University of Delaware Center for Drug and Health Studies, Department of Sociology and Criminal Justice; lrapp@udel.edu.
Introduction:
The Role of the Delaware SEOW and the Purpose of the Epidemiological Profile

All States, including Delaware, have received support from the Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) Center for Substance Abuse Prevention (CSAP) to establish a statewide epidemiological workgroup or SEOW. In Delaware, the Division of Substance Abuse and Mental Health (DSAMH) in the Delaware Department of Health and Social Services is the recipient of a Strategic Prevention Framework-Partnerships for Success Grant (SPF-PFS) and the SEOW is part of this initiative. The SEOW (formerly known as the Delaware Drug and Alcohol Tracking Alliance, or DDATA) is a group of stakeholders representing organizations that collect and use data on substance use, associated behaviors, and their consequences in order to establish and monitor indicators related to substance abuse prevention. The SEOW’s mission is to bring this data to the forefront of the prevention planning process. Its goals are:

- To build monitoring and surveillance systems to identify, analyze, and profile data from state and local sources;
- To provide current benchmarks, trends, and patterns of substance consumption and its consequences;
- To create data-guided products that inform prevention planning and policies;
- To train agencies and communities in understanding, using, and presenting data effectively in order to support prevention efforts.

This annual report highlights the most recently available data on substance use and related issues in Delaware. It also includes special topics, such as populations that experience disproportionate risk for substance use or related behaviors. The information is intended to help decision makers and stakeholders throughout Delaware accomplish their goals related to needs assessments, strategic planning, and evaluation. The 2018 report consists of twelve sections: a state demographic background; tobacco and electronic cigarettes; alcohol; marijuana; opioid use; other illegal drugs; substance exposed infants; gambling; mental health; substance use and adverse childhood experiences (ACEs); substance use among the LGBQ population and new data on Transgender youth in Delaware; and protective factors.

The 2018 Delaware Epidemiological Profile is available, along with all SEOW data products, from the Center on Drug and Health Studies at the University of Delaware website.
Thank You, SEOW Collaborators

for your participation and commitment to data-driven prevention planning, practice, and evaluation!

atTAcK Addiction
Christiana Care Health Systems
Delaware Academy of Medicine
Delaware Criminal Justice Council
Delaware Coalition Against Domestic Violence
Delaware Council on Gambling Problems
Delaware Criminal Justice Information System (DELJIS)
Delaware Afterschool Network
Delaware Courts – Office of the Child Advocate
Delaware Department of Education
Delaware Department of Health and Social Services
Division of Medicaid and Medical Assistance
Division of Public Health
Division of Services for the Aging and Persons with Disabilities
Division of Substance Abuse and Mental Health
Delaware Department of Homeland Security
Division of Alcohol and Tobacco Enforcement
Division of Forensic Medicine
Delaware Department of Services for Children, Youth and their Families
Division of Prevention and Behavioral Health
Trauma Informed Care
Delaware Information and Analysis Center
Delaware Office of Controlled Substance Division of Professional Regulation, Prescription Monitoring Program
Mental Health Association of Delaware
Delaware Prevention Coalition
Delaware State Police
DEMCO
La Esperanza
KIDS COUNT in Delaware, University of Delaware Center for Community Research & Service
Latin American Community Center
Nemours Health and Prevention Services
Open Door, Inc.
Wesley College
West End Neighborhood House
University of Delaware
Student Health and Wellness Promotion

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Mental Health

Overview

There are high public and social costs associated with mental illness and poor mental health. People with poor mental health and/or serious mental illness may find it challenging to navigate social and economic systems and follow daily routines. For example, in 2015 only one in five adults ages 21-64 served by Delaware’s public mental health system were employed (SAMHSA, n.d.). Untreated mental illness can have fatal results. Annual averages from 2014-2015 indicate that 4% of all adults in Delaware seriously contemplated suicide. In 2016, the suicide rate in Delaware was 11.5 deaths per 100,000, which is slightly lower than the national suicide rate of 13.5 during the same time period (CDC, n.d.). Centers for Disease Control and Prevention estimates from 2016 indicate that Sussex County had the highest rate of suicide in the state (PolicyMap [CDC data], n.d.).

According to the Behavioral Risk Factor Surveillance System (BRFSS), in 2016, Delawareans surveyed reported that on average they did not have good mental health on 3.6 days out of the last 30 days. Disparities in reporting of the number of poor mental health days varied by location, income level, high school attainment, race, and gender. The largest disparities are related to income, educational attainment, and age. Those who reported making $25,000 dollars or less had more than twice the number of days in a month where their mental health was not good than those who made $75,000 or more. Similarly, people who had less than a high school diploma had 75% more poor mental health days as college graduates. Statewide, suburban residents reported a slightly greater number of poor mental health days than other residents. Adults over the age of 65 reported fewer days when their mental health was not good as compared to other age groups (Delaware Health Tracker, n.d.).

From 2014-2015, approximately 3.8% of adults in Delaware suffered from a serious mental illness, compared to 4.1% of adults in the United States. A little less than half (48.8%) of the people surveyed who reported having any mental illness received treatment or counseling within the past year (SAMHSA, n.d.).
Delaware Youth

In 2015, Delaware had 228 mental health providers per 100,000 people. The Department of Services for Children, Youth and their Families has also deployed behavioral health consultants in most middle schools throughout the state since 2013 to provide screening and other preventative services on site. Nonetheless the needs remain great, particularly for specialized services and for southern Delaware; according to the Health Resources and Services Administration (HRSA), Sussex County has a shortage of mental health facilities, and received a Health Professional Shortage Area score of 18 or above, which qualifies as a high priority area by HRSA (HRSA, 2017).

Data from the 2017 High School Delaware Youth Risk Behavior Survey indicate that approximately 27% of Delaware high schoolers report they had felt sad or hopeless for two weeks or more in the past year. Additionally, nearly 14% of high school students in Delaware reported that they had purposely hurt or cut themselves during the past year. An even greater percent of students (16%) reported they had seriously considered attempting suicide during the past year, while 12% of students reported having a plan for suicide, and 7% reported that they had actually attempted suicide in the past year. Among middle school students, more than one in ten report having made a plan to attempt suicide, and almost 7% indicate they have attempted suicide. These numbers illustrate that there is a profound need for mental health services for youth as well as adults in Delaware.
2017 Youth Risk Behavior Survey
Percentage of High School Students who felt sad or hopeless for almost every day for two weeks or more in the past year

![Percentage of high school students who felt sad or hopeless for almost every day for two weeks or more in the past year](image)

Figure 129 Percentage of high school students who felt sad or hopeless for almost every day for two weeks or more in the past year

Note:
Weighted data

Source:
“2017 Delaware Youth Risk Behavior Survey (YRBS).” Centers for Disease Control and Prevention. Administered by the Center for Drug and Health Studies, University of Delaware.

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Note:
Weighted Data


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Figure 131 Percentage of high school students who seriously considered attempting suicide in the past year

Note:
Weighted data
Source:
“2017 Delaware Youth Risk Behavior Survey (YRBS).” Centers for Disease Control and Prevention. Administered by the Center for Drug and Health Studies, University of Delaware.

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Percentage of Middle School Students who made a plan about how they would attempt suicide in their lifetime

Figure 132 Percentage of middle school students who made a plan about how they would attempt suicide in their lifetime

Note:
Weighted data

Source:
“2017 Delaware Youth Risk Behavior Survey (YRBS).” Centers for Disease Control and Prevention. Administered by the Center for Drug and Health Studies, University of Delaware.

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Percentage of High School Students who made a plan about how they would attempt suicide in the past year

![Bar chart showing the percentage of high school students who made a plan about how they would attempt suicide in the past year, categorized by gender, grade level, race/ethnicity, and total.

Figure 133 Percentage of high school students who made a plan about how they would attempt suicide in the past year

Note:
Weighted data

Source:
“2017 Delaware Youth Risk Behavior Survey (YRBS).” Centers for Disease Control and Prevention. Administered by the Center for Drug and Health Studies, University of Delaware.
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Note:
Weighted Data


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Figure 135 Percentage of middle school students who attempted to kill themselves in their lifetime

Note:
Weighted data

Source:
“2017 Delaware Youth Risk Behavior Survey (YRBS).” Centers for Disease Control and Prevention. Administered by the Center for Drug and Health Studies, University of Delaware.

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Percentage of High School Students who attempted suicide in the past year

Note:
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Source: “2017 Delaware Youth Risk Behavior Survey (YRBS).” Centers for Disease Control and Prevention. Administered by the Center for Drug and Health Studies, University of Delaware.

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Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm


Marijuana


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm


**Opioids**


Anderson, Tammy L., Martin, Steve, Fang, Yiqian and Jiamin Li. (2016). *Report to the Delaware PDAC on Criteria of High Risk Prescribing for RIPAID* [Centers for Disease Control Grant].


Neuman, W. (May 3, 2018). De Blasio moves to bring safe injection sites to New York City. New York Times. Retrieved from Figure 8 Percentage of high school students who reported smoking in the past 30 days, by sexual orientation


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm


**Other Illicit Drugs**


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm
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Lesbian, Gay, Bisexual and Questioning Youth


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<td>Monitoring the Future</td>
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In addition to the data sources for the figures and tables in the 2018 report, the following data sources are also cited throughout the narrative:

- America’s Health Rankings
- Bureau of Labor Statistics
- Centers for Disease Control and Prevention
- Delaware Health Tracker
- Delaware State Police/Delaware Statistical and Analysis Center
- Health Resources and Services Administration
- Kaiser Family Foundation
- KIDS COUNT in Delaware
- PolicyMap
- Prescription Behavior Surveillance System at Brandeis University
- Tobacco21.org
- U.S. Department of Health and Human Services
- U.S. Census Bureau