

Change in Mental Health Trends in Scotland, UK pre- and post-COVID-19

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Abstract. The COVID-19 pandemic and national lockdowns have had profound impacts on population mental health in Scotland. In this study, we examine the impact on the relationship between the number of patients receiving in-patient care for mental health related diagnoses and the number of patients on waiting lists for treatment. The relationship between waiting lists and in-patient treatment changed during the COVID-19 pandemic, and this may be contributing to additional pressures on hospitals and mental health services in Scotland.

Keywords. Mental health, COVID-19, Data analysis, Hospital admissions

1. Introduction

The COVID-19 pandemic and subsequent national lockdowns in Scotland had profound impacts on population mental health (MH) [1,2]. Hospital admissions and the average length of hospital stay for MH-related diagnoses in Scotland have been falling [3]. However, the COVID-19 pandemic increased waiting times for MH treatment [4]. In this study, we investigated whether the number of patients receiving in-patient care for MH related diagnoses in Scotland correlates with the number of patients on waiting lists for MH therapies, and the effect of the COVID-19 pandemic on that relationship.

2. Methods

We used Public Health Scotland national registers of patient data from Apr '14 to Mar '23 for MH treatment [5]. We used ICD-10 codes F00–F99 for MH conditions [6].

3. Results

Prior to national lockdown, the numbers of in-patients were decreasing, or remaining flat, while numbers of patients waiting for MH treatment were increasing (Fig 1). Following

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the national lockdown, this relationship changed dramatically with numbers of patients waiting for treatment and hospital admissions increasing for stays up to 28 days, and decreasing for stays of over 28 days.

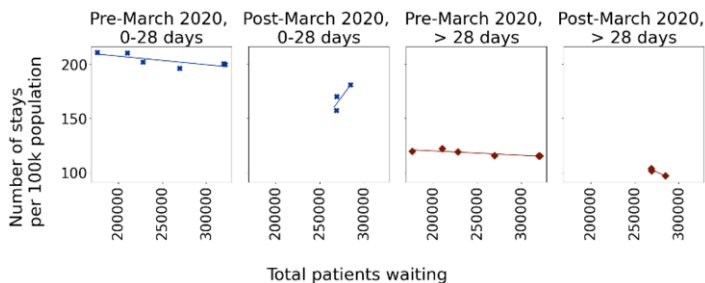


Figure 1. The number of in-patient stays by length of stay, normalised by population size, and their relationship with patients waiting for MH treatment, pre- and post-national lockdown.

4. Discussion and Conclusions

The impact of the COVID-19 pandemic and subsequent national lockdowns may have changed the relationship between patients waiting for MH treatment and the number of patients requiring hospitalisation for treatment, which may put additional pressure on hospitals and MH services. Further work is required to better understand the impact of the pandemic and lockdowns and whether these patterns will continue in future.

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