

Developing a Better Understanding



Black History Month, also known as African American History Month, is an annual celebration of the achievements by African Americans and a time for recognizing their central role in U.S. history.

This celebration grew out of "Negro History Week," the brainchild of noted historian Carter G. Woodson and other prominent African Americans.

Every U.S. president since 1976 has officially designated the month of February as Black History Month.

This month can also be a time to reflect and commit to eliminating behavioral health disparities for the Black community.

According to the American Psychological Association, only 1 in 3 African Americans who need mental health care receive it. SAMHSA highlights that African Americans with substance use disorders are doubly stigmatized by their minority status and their substance use and there is a general lack of culturally responsive and respectful care for seek services.

Addressing Behavioral Health Disparities in the Black Community

Mental illness does not discriminate - it affects people of all races, ethnicities, and socioeconomic backgrounds. According to NAMI, 1 in 5 U.S. adults experience mental illness each year, while 1 in 6 U.S. youth aged 6-17 experience a mental disorder each year. While behavioral health issues are widespread, there is a disparity in treatment and a lack of access to quality culturally competent care. African Americans are less likely to be offered evidence-based medication therapy or psychotherapy but have a higher use rate of services when compared to non-Hispanic whites. African Americans are also less likely to receive guideline-consistent care, less likely to be included in research, and more likely to use emergency rooms or primary care rather than a mental health specialist.

There are disparate rates in substance use disorder as well. A study of Ohio, Kentucky, Massachusetts, and New York found that rates of opioid deaths among the African American population increased 38% from 2018 to 2019, while other groups did not rise. Another study found that African Americans and Hispanics who entered publicly-funded substance abuse treatment programs were far less likely to complete treatment and these outcomes were largely explained by differences in socioeconomic status, including greater unemployment and housing instability. The Substance Abuse and Mental Health Administration highlights that African Americans with substance use disorders are doubly stigmatized by their minority status and their substance use, and there is a general lack of culturally responsive and respectful care for those who seek services.

Racism manifests directly and indirectly across all levels of society. Most conversations on racism focus on the individual level (internalized or interpersonal racism). However, systemic racism (institutional or structural) is an even more pervasive driver of disparities in behavioral health. Systemic racism has created a system where African Americans are more frequently diagnosed with schizophrenia and less frequently diagnosed with mood disorders when reporting the same symptoms as their white peers.

Systemic Racism (Structural Racism or Institutional Racism) is the normalization and legitimization of an array of dynamics - historical, cultural, institutional, and interpersonal - that routinely advantage some, while producing cumulative and chronic adverse outcomes for people of color. This type of racism encompasses the systems that support society. It is more difficult to locate because it involves reinforcing effects of multiple institutions and cultural norms, past and present. It is not an individual act of racism, but is embedded in the power and policy dynamics in the system through sustaining racial inequity between or among racial groups.

The effects of this type of racism are so normalized and commonplace that it is hard to see the forest from the trees. However, being open to examining our society and learning from marginalized groups can help us see the pervasiveness of systemic racism and provide opportunity to address it.

Misdiagnosis can have further impact because Black people with a mental health diagnosis such as schizophrenia, bipolar disorders, and other psychoses are more likely to be incarcerated than people of other races. Studies also have also shown that physicians are 23% more verbally dominate and 44% less patient centered in communicating with African American patients than with white patients.

The system has started to recognize and rectify itself. In October 2021, the American Psychological Association (APA) adopted a resolution as an apology to People of Color for their role in promoting, perpetuating, and failing to challenge racism, racial discrimination, and human hierarchy in the U.S. This resolution recognizes the role psychology has had in harming people of color and affirms APA's commitment to promote diversity in the field and engage communities of color in equitable and ethical research.

Excerpt from APA's Resolution

“WHEREAS psychology cannot harness its potential to disarm and dismantle racism without addressing its own history of racism and support for human hierarchy (APA, 2021c). Since its origins as a scientific discipline in the mid-19th century, psychology has, through acts of commission and omission, contributed to the dispossession, displacement, and exploitation of communities of color. This early history of psychology, rooted in oppressive psychological science to protect Whiteness, White people, and White epistemologies, reflected the social and political landscape of the U.S. at that time. Psychology developed under these conditions, helped to create, express, and sustain them, continues to bear their indelible imprint, and often continues to publish research that conforms with White racial hierarchy (Cummings Center, 2021; Helms 2003; Luther et al., 1996; Santiago-Rivera et al., 2016).”

The APA adopted an additional resolution that same month that describes their commitment to actively work toward dismantling systematic racism against people of color and “to identify psychology’s role in helping to expose, understand, and ultimately dismantle racism that is operating across all levels in each of the following systems of society—education, science, health care, work and economic opportunities, criminal justice, early childhood development, and government and public policy, as addressed below, while acknowledging that systemic racism also has impact beyond these sectors” (APA).

Dr. Fiona Godless, editor-in-chief of the British Medical Journal (BMJ), has stated, “Racism is suddenly and at last everyone’s business and acting against it is everyone’s responsibility.”

How can you act against systemic racism and work to eliminate health disparities for Ohio’s Black community? Many opportunities exist to work to build a more equitable behavioral health system that will benefit all Ohioans.

- Learn more about African Americans who have made contributions to the behavioral health field such as Joseph L. White, Ph.D., Beverly Daniel Tatum, Ph.D., Howard Stevenson, Ph.D., and Gayle Porter, PsyD.
- Continue to hear and learn from those with lived experience to better understand the barriers and challenges to obtain quality culturally competent care.
- Partner and support community level initiatives.
- Encourage culturally competent training for all sectors of society from healthcare and education, to law enforcement.
- Encourage local governmental bodies to use data to uncover and address local disparities in behavioral health.
- Expand culturally relevant prevention efforts in primary and secondary education.
- Continue to enhance access to Medicaid to ensure that Ohioans with the most need are able to access physical and behavioral healthcare services.
- Allocate funds specifically to address the behavioral health needs of African Americans and other communities of color.

Sources

American Journal of Public Health
American Psychological Association
The British Medical Journal

National Alliance on Mental Illness
National Institute of Health
Substance Abuse & Mental Health Services Administration