



WELL TOGETHER: EXPLORING MENTAL HEALTH DISPARITIES AND SOLUTIONS IDENTIFIED BY THE COMMUNITIES AFFECTED

AFRICAN AMERICAN COMMUNITY LISTENING SESSION SUMMARY



SESSION SUMMARY

THE OPPORTUNITY

Some research shows that African Americans are more likely to experience mental health distress than white people but half as likely to get necessary treatment.¹ Other research shows that the prevalence of certain mental illnesses paralleled or was perhaps even lower than that of white people.² Regardless of the findings, there are many contributing factors that threaten the mental wellbeing of the African American community, such as a lack of financial resources, stigma, and systemic racism.³ Further, mental health stigma in the African American community may prevent many in need from seeking services.⁴ When people do reach out for help, services may not be culturally competent, creating further hopelessness for at-risk people.⁵ Some research also shows that high prevalence rates of mental health needs may be related to other serious health conditions, such as heart disease, stroke, and substance use.⁶

The Mental Health Services Oversight and Accountability Commission (MHSOAC) partnered with an African American cultural broker heavily involved in the Bay Area community to hold a **virtual listening session** in October 2020. This listening session explored these disparities and more. Listening session participants represented persons with lived experience, peers, family, faith leaders, healthcare, the justice system, and advocacy groups.

Throughout the listening session's discussion, participants voiced specific recommendations to promote wellness and expand mental health services in the African American community. Such recommendations included infusing culturally appropriate services and treatments into the existing health care system. Partnerships between faith-based organizations and mental health services was also recommended. In addition, it was suggested to focus



funding opportunities less on evidence-based practices and more toward community-based services and activities that already show positive outcomes.

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Determinants of Wellness

Listening session participants described wellness through the lens of a socio-ecological model, where determinants of both physical and mental health depend on an interplay between the person, family, community, and society.⁷ Participants stated that African Americans benefit most from holistic approaches to healing. For instance, one individual mentioned the need for support from family and loved ones. One person who shared that mental health challenges run in their family also agreed, adding that it is essential to maintain the body and mind through proper diet and exercise. Another community member with lived experience identified the importance of affirmative and appreciative language.

Participants also discussed spirituality and faith as essential to promoting wellness. Many community members congregate over a common faith, which provides consistent opportunities to support one another. Given this central gathering space, an emphasis on partnerships between faith-based organizations and mental health services was recommended. Strength-based and community-defined practices also were identified as necessary approaches when planning for programs and services. One participant recognized the need for more involvement of African American community members in planning and decision-making processes that affect the community. Several other participants emphasized partnerships throughout the community specifically among existing resources, or what was described as “undiscovered jewels at the bottom of the river.”

Another topic that several participants elevated was the ineffectiveness of evidence-based practices in non-white communities and how “they do more harm than good.” One community member and a local college professor echoed this concern and added the importance of closing that evidence gap through additional research and targeted funding that explores the uniqueness of the Black community, stating that the “emphasis on evidence-based practices has prevented the development of authentic, community-based practices.” Another community member who advocates for social justice echoed this concern and expressed that assessment tools are derived from a European Western perspective. As a solution, this person recommended “infus[ing] culturally appropriate services and treatment approaches” into the existing health system.



Breaking through Biases

Listening session participants stated that historical trauma, micro-aggressions, and experiences of implicit biases in others start at a young age for African American community members and continue through the life span. Although oppression and systemic racism was a frequently cited threat to community wellness, one participant noted how the trauma and grief associated with these experiences are not always recognized. Stigma worsens these challenges, even among community members, and can hinder creation of a safe space. One participant with lived experience shared their thoughts on stigma among their own community members:

“[It is] how we judge each other – really a Black on Black lack of psychological safety. If you’re judged by what you look like... if you don’t do drugs, if you do drugs, if you are gay, if you don’t go to church... there are so many ways in which we within our own community don’t accept each other. And to me, that is the biggest harm, if a Black person doesn’t value another Black person’s pain, anger.”

To mitigate these obstacles, participants noted the need to hold difficult and courageous conversations,

to validate one another, and to persistently ask “how can I do better.” Moving from trauma informed to healing centered engagement also was cited.

Increasing Resiliency

Increasing resiliency was an overarching theme in the discussion, especially among youth. Rather than talking about what the community lacks, participants highlighted the need to focus on strengths to identify and highlight what already exists, leveraging those supports and resources. Participants asserted that youth in their community are highly skilled and intelligent, if given a fair opportunity to thrive. With culturally honoring supports, negative behavior can be redirected so as not to become involved with punitive systems, which may further oppress African American youth.

Participants highlighted the promotion of Science, Technology, Engineering, and Mathematics (STEM) curricula for African American children, in addition to highlighting the accomplishments of their ancestors through the teaching of history and innovation to boost confidence in their abilities. Additionally, other creative outlets, such as art, movement, and physical forms of expression, can cultivate feelings of esteem and hope. These outlets

also encourage connection with support systems that underline a sense of purpose and belonging. In addition to these supports, participants also stated that there is a need for trusted mental health providers and peers from the African American community, in addition to systemic change and African American-led community-defined prevention and early intervention approaches.

CONCLUSION AND CONSIDERATIONS

African American listening session participants highlighted the need for a “whole person” approach to prevention and early intervention in mental health that recognizes body, mind, and spiritual wellness. Participants stated that African Americans experience threats to their wellbeing due to systemic oppression over their lifetime. Despite these threats, African American community members build resiliency through social connection and learning about their cultural heritage and strength. Listening session participants highlighted the need for more African American history awareness and creative outlets for youth to build self-esteem, confidence, and trust in culturally competent support systems when mental health needs arise.

This session was one of **several sessions** organized with cultural brokers from African American, Asian American and Pacific Islander, Latinx, LGBTQ+, and Native American communities to support the Commission’s project exploring opportunities in prevention and early intervention in mental health.⁸ A summary of each discussion, such as this document, will be disseminated, along with other material to support the project and its conclusions.

REFERENCES

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8. Visit www.mhsoac.ca.gov for more information.