

Black in Asheville
Topic: Mental Health
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The African-American community in Buncombe County suffers disproportionately from both mental health and mental health treatment.

African-American patients who were released from inpatient mental health care only received follow-up care 33% of the time, compared with 54% for whites. Cultural biases against mental health professionals and health care professionals in general prevent many African-Americans from accessing care due to prior experiences with historical misdiagnoses, inadequate treatment, and a lack of cultural understanding; only 2% of psychiatrists, 2% of psychologists and 4% of social workers in the U.S. are African-American.

For many African-Americans establishing positive self-image and self-esteem is extremely difficult due to years of painful experiences simply because of being a member of an oppressed and devalued group. The centuries of external oppression of African-Americans has led to internalized oppression that manifests into turning on themselves. The issues of chemical dependency, joblessness, gang involvement, prison, poverty, oppression, prejudices and violence have not only become a way of life, but are reflective of issues that have plagued families for generations.

The mental health services offered for Blacks in Asheville are insufficiently meeting the needs of our Black community. Because of the extreme shortage of Black physicians, this discourages the community to

trust the system. The supply of African-American clinicians is important. Studies of medical care reveal that African-American physicians are five times more likely than white physicians to treat African-American patients and that African-Americans rate their physicians' styles of interaction as "more participatory" when they see African-American physicians. (Cooper-Patrick et al., 1999)

The suicide rate among African-Americans ages 10-14 increased 233% compared to 120% of comparable non-Blacks. African-Americans are more likely to be exposed to violence-related trauma, as were the large number of African-American soldiers assigned to war zones in Vietnam (21%).

Abuse

Exposure to such traumas leads to increased vulnerability to mental disorders. Social circumstances often serve as an indicator for the likelihood of developing a mental illness.

Low incomes and no health insurance plague the mental health of the Black community. Both are barriers to access to mental health care for anyone.

However, the Black community of Asheville suffers from these two barriers at a substantially higher rate relative to the population of the white

community. Physicians do not see a need to cater to the Black community because the new funding guidelines are performance based, forcing care givers to focus on the largest quantity of easily treatable patients; not

word choice

necessarily patients from at risk communities that will take more time to help. The system is inherently flawed; protecting those with higher incomes and insurance.

The Medicaid standards and funding have deterred Black involvement in the mental health care system. Medicaid has decreased funding for individual treatment and placed more focus on group therapy. This is good in theory, but does not work in practice for Asheville's Black communities, which suffer from the disproportionately high drug and crime rate. *citation*

Caregivers do not want to *expose* risk penetrating these communities and most whites in Asheville do not know where these communities are. Medicaid has also increased the *paper* necessary to get into the system. For less educated people this is another barrier. Blacks everywhere in America, especially in Asheville, have fewer opportunities to further their education past high school. *explain* Low educational levels further limit access to mental health for Blacks in Asheville.

how many?
The number of mentally ill Blacks who go untreated or receive improper treatment has lead to an inexcusable population of mentally ill blacks in the prison system. There are a disproportionate amount of Blacks in Buncombe County prisons as compared to Whites. This is coupled with a majority of the population in the Buncombe County prisons as being diagnosed with *how many?*

mental illness. In the U.S., 64% of inmates in state and federal prisons have symptoms or recent history of mental health problems. 24% percent of inmates reported at least one symptom of a psychotic disorder, 77% percent had at least one symptom of mania, and 77% percent had at least one symptom of a major depressive disorder, 4-10% percent of the population in jail and prisons are developmentally disabled. City and county jails seldom conduct the appropriate screenings for mental or developmental disabilities.

Citation

Blacks face not only more financial barriers to mental health care but also cultural barriers to the institution. So, many without access to mental health care are caught and labeled 'social deviants' by the Department of Justice.

Citation

Also, African-Americans comprise 40% of the homeless population; individuals who experience homelessness are at a greater risk of developing a mental illness.

With the implementation of various programs, mental health treatment and care services for African-Americans in Buncombe County could improve greatly. Programs like CIT (Crisis Intervention Training) are a pre-booking jail diversion program. CIT is a community partnership of police and sheriff's deputies working with mental health consumers, family members, and mental health professionals to provide safety, compassion, understanding and treatment for the mentally ill. CIT involves

*Buncombe
Co.
Sheriff's*

communication skills, special training in working with mentally ill individuals, and mental health treatment services. Many officer interactions with the mentally ill involve minor disturbances such as trespassing, public nuisance, loitering. The mentally ill do not do well in jail, they usually receive no medication and they find it difficult to comply with demands.

The inappropriate incarceration of people with mental illness adds to overcrowding of jails and the courts. CIT is an alternative program to handle the mentally ill which can result in early treatment and fewer inmates in our jails and courts. Other programs sponsored by institutions, such as churches and local community groups, can increase awareness of mental health issues provide help resources and decrease the related stigma. The investment in the treatment and stabilization of mental disorders is of serious economic consequence, not to mention the human consequence. The majority of mental illnesses are treatable and those living with the illnesses can have productive, happy, healthy lives. Each and everyone of us can make a difference in the lives of the less fortunate if we raise hard questions with the intention to know, think outside the box, push the envelope, complicate our thinking, question dominant paradigms and ideologies and be willing to adjust to change. And, most importantly, be willing to change. By providing

better healthcare, mental & physical, to Blacks in Asheville, we can move beyond simple compassion to providing effective, life changing solutions.

Mental Health Statistics You Should Know

Source of info?

Suicide is the third leading cause of death among young people aged 15-24 and the 2nd leading cause of death among college students.

Suicide is the eight leading cause of death in the United States.

Mental disorders are the leading cause of disability in the United States and Canada for ages 15-44.

Twenty-two to twenty-six percent of all Americans, eighteen years or older, experience some mental disorder each year.

Twenty percent of children in the U.S. have a mental disorder.

Ten million Americans suffer from a serious mental illness.

More than 19 million Americans suffer from anxiety disorders.

*any of these by
STATS
RACE*

More than 19 million Americans each year suffer from clinical depression.

Bibliography
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needed