Welcome to 2019 NAMI National Convention

A New Approach to Communicating and Breaking Barriers to Mental Health in Black Communities

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Disclosures

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None

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Why this talk and why now?

• This is an age of change
• Proactive approaches are needed to deal with
  • Barriers to mental health care
  • Cultural differences that need to be considered to adequately reach the Black Community
  • The need for a customized approach (the traditional approach may not be the best one)

• Bad things happen to our people and we need to do something about it.
Prevalence in African-American Community

- 20% more likely to have a mental health issue
  - Poverty
    - Lower income
  - Racism
  - Slavery
  - Intergenerational Violence
  - Homelessness
  - Violence exposure, high crime
  - Hazard waste landfills
Mental Illness and Taboo

• “It’s not just you”

• Mental illness is seen in all communities
  • We don’t talk about it

• Understanding and coping can be different

• Culture of ignoring or avoidance
What causes mental health problems?

• “Why did I get this?”
• Many factors…
  • Biological
  • Family history
  • Stress
  • Substance abuse
  • Illness
  • Parental smoking, alcohol use
  • Environmental exposure
  • Food deserts
  • Racism
Why does treatment matter?

- Changes in behavior
- Unable to adapt to your environment
- Causes significant issues in your daily living
- Decreased quality of life
- Interruption of dreams and goals
Mental Health is a matter of LIFE and DEATH

• Shortened life expectancy
  • Depression, 5-10 years
  • Bipolar Disorder, 15 years
  • Schizophrenia, 25-30 years

• Most common cause of death
  • 10-24: Suicide 2nd cause of death
  • 25-44: Suicide 3rd cause of death
Truth to the Mistrust

• Lower quality of care

• Less likely to be diagnosed correctly
The value of a therapist that looks like them

- Finding a Black mental health professional
- Questioning the ability of the therapist to understand
- Cultural norms and expectations
Our misconceptions

• Not discussing mental health

• Belief that mental illness doesn’t happen to us

• Faith and healing vs. lack of faith

• Not seeking mental health care until it is critical
  • Emergency services
  • Juvenile or Incarceration
  • School trouble
How do I know if I have a mental illness? (Practical signs)

- Changes in behavior
- Unable to adapt to your environment
- Causes significant issues in your daily living
- Inability to grow
“What can I do outside of taking medication?”

- Spirituality, religion
- Therapy
- Decreasing stress
- Hobbies, activities
- Friends
- Sleep
- Eating habits
- Getting away
- Prayer and Meditation
Barriers and Stigma

• Lack of information

• Mistrust of the medical model of mental health treatment

• Different presentation
  • More likely to describe physical versus mental health symptoms
  • More likely to use different descriptions and communication styles
    • Dependent on education and use of words
Connecting on the Right Level?!

- Communicating in their language
- Bringing yourself to the patient and community
- If you don’t know…ask questions
- Be an authority, but be respectful of the individuals wishes
- Discussing options and giving answers
- Integrate family and community supports into treatment
- Finding creative ways to do this
The Need to Connect to the Masses

• Decoding Mental Health
• Explaining mental health to the people who need it
• Something useful to our people that connects at another level
• Demystifying mental health
• Useful for patients, families, caregivers, clergy, law enforcement and the general community
• Empowerment of entire communities
MIND MATTERS

A Resource Guide to Psychiatry for Black Communities

Otis Anderson III, MD • Timothy C. Benson, MD • Malaka Berkeley, MD • Delane Casiano, MD
Ericka Goodwin, MD • Napoleon E. Higgins, Jr. MD • James Lee, Jr. MD • Michael Pratts, MD
Varriam Salam MD • Too Farra Strawn MD

HOW AMARI LEARNED TO LOVE SCHOOL AGAIN
A STORY ABOUT ADHD
Available on Amazon!
Multiple Ended Approach

- Directly providing care in a culturally sensitive way that involves and takes into account personal and community supports
- Educating the community to enhance and provide empowerment
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Resources


• http://www.mentalhealthamerica.net/african-american-mental-health


Myths of “STRENGTH” and Slavery

• Psychological distress
  • Racism
  • Socioeconomic pressures
  • Discrimination

• The “STRONG” Black Woman

• Defining masculinity
  • Not to talk about feelings
  • Not supposed to cry
  • Not able to feel hurt or shame
  • Accepting anger as an emotion?
Generational Trauma and Secrecy

- Pains of slavery
  - Shaming
    - Slavery, Jim Crow, Voting Rights Act, #MAGA, Terrorism
    - Hiding the pain
- Post Slavery Syndrome
  - Internal destruction
  - Promotion of our own distress
- Recurrent reminders (media)
  - Not being able to speak and/or hiding “YOUR TRUTH”
- Perpetual LIES OF HISTORY…

“Just forget about it”
Barriers and Stigma

• Mistrust
  • Wait and see
  • Discuss alternatives with family, church, pastor, elder, etc…
  • Seeing the doctor as the last alternative

• History of discrimination
  • More likely to face more invasive treatments
  • Less likely to receive alternatives
    • Lack of physician trusting the patient to make needed changers
    • Assumptive thoughts and stereotypes
Our Spiritual Misconceptions

• Suffering is seen as an sign of strength

• Fatalistic thinking
  • Believing of being punished by sins
  • “If it’s God’s will”

• Shame
  • Spiritual battle
  • What did I do wrong?
Difficulties between the Blacks, Psychiatrists and the Religion

- Psychiatrists are less religious than the general population
- Least likely of medical professions to “BELIEVE”
- Lack of comfort due to a lack of knowledge
- Widespread prejudice against religion
- Inability to integrate into care
- Heavy biological basis of illness and treatment models
- Freud – “neurosis”
Benefit of a Church Home/Community

• Churches provide:
  • Mentoring
  • Developing self-regulatory abilities
  • Fostering identity development
  • Providing a supportive and stable community
  • Offering a relationship with a loving and powerful God
Future role of Psychiatry and the Church

• Open dialogue
• The invitation to treatment
• Mutual dialogue
• Increase training for psychiatry students and resident
• Increase training of the church membership and clergy
• Move from EITHER/OR to AND/AND
Resiliency factors

• Church
  • Prayer, belief and scriptural study
  • Dance, crying, shouting, singing
  • Group therapy
• Family
• Supportive community
• Ability to walk between communities
• Cognitive abilities
• Education
• Positive role models/mentors
Breaking Barriers

- Mental health education
  - Education and socio-economic status

- Dispelling ignorance and lies about mental illness
  - ADHD and black boys
  - Emotion is a sign of weakness

- Culturally competent physicians and providers
  - Understanding beliefs, culture
  - Need for more African-American providers
What does “Psychiatry” mean

- Psychiatry
- psyche (soul)
- iatros, iatric
  (doctor, treatment of)
Breaking Barriers

• Understanding there is a problem
• Information
  • TODAY!!!!
  • Dialogue
• Delivery
  • Community groups
  • Churches
  • Having honest conversations
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