

MENTAL HEALTH ISSUES: Close To Home and Bigger Than You Think

Written by Jeffrey L. Boney Associate Editor
Wednesday, 17 April 2013 00:00



The issues surrounding mental health challenges have dominated the news headlines recently and it appears that the issue of mental health is becoming increasingly problematic.

Last week, national best-selling author of “The Purpose-Driven Life,” and pastor of Saddleback Church in Orange County, Rick Warren and his wife, Kay, lost their 27-year old son, Matthew, to suicide. Word of the suicide first came in a brief statement Warren made via his church’s website shortly after the tragedy.

In the statement, Warren stated, “[Matthew] struggled from birth with mental illness, dark holes of depression, and even suicidal thoughts. In spite of America’s best doctors, meds, counselors, and prayers for healing, the torture of mental illness never subsided. Today, after a fun evening together with Kay and me, in a momentary wave of despair at his home, he took his life.”

Mental health issues are not only affecting high-profile individuals, they are affecting regular people, even in the African American community.

CLOSE TO HOME

Houston Rockets rookie Royce White, 21, was the 16th pick in the June, 2012 draft. White had

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demanded a mental health protocol with the Rockets, causing White to be suspended when the two parties could not find common ground on his mental health issue.

White suffers from Generalized Anxiety Disorder, defined by the National Institute of Mental Health (NIMH) as a disorder in which people “go through the day filled with exaggerated worry and tension, even though there is little or nothing to provoke it. They anticipate disaster and are overly concerned about health issues, money, family problems or difficulties at work. Sometimes just the thought of getting through the day produces anxiety.”

White went public with his mental health struggles one year ago, becoming an advocate for mental health and the rights of those who suffer from mental illness. The Rockets eventually reinstated White in January and announced the two sides had reached an agreement.

Then there is Verna McClain, the 30 year old African American female, who was charged with capital murder for allegedly killing Kala Golden Schuchardt and abducting her 3-day-old baby after suffering a recent miscarriage last year. After her arrest, McClain made statements that speak to possible mental health challenges.

“Right now, I’m so paranoid I don’t know who to trust,” said McClain. “Mentally, I’m borderline.”

Her fiancé showed the media text messages that he says that McClain sent him before the murder.

One of them reads: “I love you so much you will see us tomorrow ok i promise im [sp] depressed and everything crying very emotional i dont [sp] want everyone to see me like this.”

Another text said: “Im [sp] ok babe just feel like a big a... baby today even had my gun out no bs so my mind frame is totally off.”

A third text read: “Sorry if your [sp] mad i understand ok but this is the first time ive [sp] had post

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partum depression and it sucks.”

At the time, community activist Quanel X said, “The text messages absolutely indicated that this lady needed some help and she was mentally and psychologically, totally unstable,”

McClain’s mental status is expected to be part of her defense team’s strategy.

AFRICAN AMERICAN IMPACT

Mental health treatment is often underutilized, with patients reluctant to seek these services and insurers reluctant to pay for them. Research has suggested that less than one-half of people with serious mental illness receive treatment.

There are several issues that impact the African American community directly.

First, the poverty level has an impact on the mental health status of all Americans. In 2010, adults living below the poverty level were three times more likely to have serious psychological distress as compared to adults over twice the poverty level. Secondly, minorities have less access to, and less availability of mental health services. Poverty level affects mental health status. African Americans living below the poverty level, as compared to those over twice the poverty level, are 3 times more likely to report psychological distress.

The following statistics were taken from the “Mental Health: Culture, Race and Ethnicity Supplement” to the 1999 U.S. Surgeon General’s Report on Mental Health.

*Historical adversity, which includes slavery, sharecropping and race-based exclusion from health, educational, social and economic resources, translates into the socioeconomic disparities experienced by African Americans today. Socioeconomic status, in turn, is linked to mental health: People who are impoverished, homeless, incarcerated or have substance abuse problems are at higher risk for poor mental health.

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*Racism continues to have an impact on the mental health of African Americans. Negative stereotypes and attitudes of rejection have decreased, but continue to occur with measurable, adverse consequences. Historical and contemporary instances of negative treatment have led to a mistrust of authorities, many of whom are not seen as having the best interests of African Americans in mind.

*African Americans may be less likely to suffer from major depression and more likely to suffer from phobias than are non-Hispanic whites. Expressions of symptoms of physical illness that cannot be explained in medical terms are more common among African Americans (15%) than among whites (9%).

*While non-Hispanic whites are nearly twice as likely as African Americans to commit suicide, suicide rates for young black men are as high as those for young white men. Moreover, from 1980 - 1995, the suicide rate among African Americans aged 10 to 14 increased 233%, compared to a 120% increase among comparable non-Hispanic whites.

*African Americans of all ages are more likely to be victims of serious violent crime than are non-Hispanic whites. One study reported that over 25% of African American youth exposed to violence met diagnostic criteria for post-traumatic stress disorder (PTSD). Among Vietnam War veterans, 21% of black veterans, compared to 14% of non-Hispanic white veterans, suffer from PTSD, apparently because of the greater exposure of blacks to war-zone trauma.

*African-American physicians are five times more likely than white physicians to treat African-American patients. African-American patients who see African-American physicians rate their physicians' styles of interaction as more participatory. African Americans seeking help for a mental health problem would have trouble finding African American mental health professionals: In 1998, only 2 percent of psychiatrists, 2 percent of psychologists and 4 percent of social workers said they were African Americans.

*The public mental health safety net of hospitals, community health centers, and local health departments are vital to many African Americans, especially to those in high-need populations.

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*African Americans of all ages are underrepresented in outpatient treatment but over-represented in inpatient treatment. Few African-American children receive treatment in privately funded psychiatric hospitals, but many receive treatment in publicly funded residential treatment centers for emotionally disturbed youth.

*Nearly 1 in 4 African Americans is uninsured, compared to 16% of the U.S. population. Rates of employer-based health coverage are just over 50% for employed African Americans, compared to over 70% for employed non-Hispanic whites. Medicaid covers nearly 21% of African Americans.

*Overall, only one-third of Americans with a mental illness or a mental health problem get care. Yet, the percentage of African Americans receiving needed care is only half that of non-Hispanic whites. One study reported that nearly 60% of older, African-American adults were not receiving needed services.

*African Americans are more likely to use emergency services or to seek treatment from a primary care provider than from a mental health specialist. Moreover, they may be more likely to use alternative therapies than are whites.

Mental Health America, the leading advocacy organization addressing the full spectrum of mental and substance use conditions and their effects nationwide, works nationally and locally to raise awareness about mental health and ensures that those at-risk for mental illnesses and related disorders receive proper, timely and effective treatment. MHA incorporates culturally competent strategies to ensure that it is effectively addressing the treatment and psychosocial needs of consumers and families with diverse values, beliefs, sexual orientations, and backgrounds that vary by race, ethnicity and/or language.

In 1996, MHA commissioned a national survey on clinical depression. The survey explored the barriers preventing Americans seeking treatment and gauged overall knowledge of and attitudes toward depression.

This survey revealed that:

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-63 percent of African Americans believe that depression is a personal weakness; this is significantly higher than the overall survey average of 54 percent.

-Only 31 percent of African Americans believed that depression was a “health problem.”

-African Americans were more likely to believe that depression was “normal” than the overall survey average.

-56 percent believed that depression was a normal part of aging

-45 percent believed it was normal for a mother to feel depressed for at least two weeks after giving birth

-40 percent believed it was normal for a husband or wife to feel depressed for more than a year after the death of a spouse.

-Barriers to the treatment of depression cited by African Americans included:

-Denial (40 percent)

-Embarrassment/shame (38 percent)

-Don't want/refuse help (31 percent)

-Lack money/insurance (29 percent)

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-Fear (17 percent)

-Lack knowledge of treatment/problem (17 percent)

-Hopeless (12 percent)

-African Americans were less likely to take an antidepressant for treatment of depression; only 34 percent would take one if it were prescribed by a doctor.

ADDRESSING THE MENTAL HEALTH ISSUE

Real Urban Ministry Founder/President Robert Gilmore states that the tragic loss of African Americans such as Whitney Houston, Don Cornelius, Michael Jackson, along with lesser-known individuals from children to senior citizens due to mental illness or substance abuse, has no limits. Gilmore believes we have to be more responsive and educated to address this issue and that the community must be accountable for the survival of itself.

“The reality of mental illness, it is not going away,” Gilmore said. “If I don’t do anything else in the course of this time period, I want them to realize they need to have programs in place for the next generation of people affected.”

Gilmore and his group are in the process of implementing the National Call to Action for Recovery, Health and Wellness. Real Urban Ministry, through a network of over 800 clergy and community stakeholders, are focused on providing training, technical support and education for programs addressing mental illness and substance abuse and has adopted the National Prevention Strategy; America’s Plan for Better Health and Wellness, to increase the number of Americans who are healthy at every stage of life.

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Gilmore, an Air Force veteran who grew up here in Houston's Third Ward, overcame drug addiction and two suicide attempts as a young man to focus on a better life for himself. He suffered PTSD (Post-Traumatic Stress Disorder) after his military service in the Vietnam War, and later became a nationally licensed professional counselor and a licensed chemical dependency counselor. Gilmore said he began to study mental illness because of his late mother's bipolar disorder, which affected him profoundly as a teenager.

"It really made me understand the magnitude of the problems that veterans were going to face in the new war that we were involved in," said Gilmore. "This issue of mental health affects so many people and unless we are proactive about addressing it, we will see way more incidents of murder, suicide and troubling behavior continue."

The realities and the results of mental health issues are starting to become more and more of an issue within the African American community and people need to know where to go to get assistance.

Gilmore says that the Mental Health Association of America www.nmha.org and the National Alliance on Mental Illness www.nami.org are two examples of groups which offer invaluable resources for families and communities being underutilized within the African-American community.