How are African American Men Doing?

Behavioral Health
MEN’S HEALTH MONTH. HOW ARE AFRICAN AMERICAN MEN DOING?

BEHAVIORAL HEALTH

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June was Men’s Health Month. Here at the African American Behavioral Health Center of Excellence, we want to take the time to:

- bring awareness to the health disparities that African American men face—circumstances that lead to disproportionately higher rates of illness; and
- provide recommendations to eliminate these disparities.

Behavioral health data collected from Mental Health America and the American Psychiatric Association show overall that the incidence of mental health conditions among African Americans has been similar to the incidence among non-Hispanic Whites (Mental Health America, 2021; American Psychiatric Association, 2017). However, African Americans are less likely to seek behavioral health treatment, less likely to receive guideline-consistent behavioral healthcare, and less likely to receive accurate diagnosis and treatment, compared to non-Hispanic Whites (Mental Health America, 2021; American Psychiatric Association, 2017). Systemic racism, discrimination, the stigma surrounding behavioral healthcare, and social and economic inequities are some of the key factors that contribute to serious behavioral health disparities affecting African American men (Graham & Gracia, 2012). Black men face many behavioral health disparities. A few examples:

- African American men are four times as likely to die by suicide than African American women are (NIMHD & Omega Psi Phi Fraternity Inc., n.d.).
- Suicide is ranked as the third leading cause of death in Black men aged 15-24 (Black Men Heal, 2021).
- African Americans are 20% more likely to have serious psychological distress than White Americans (NIMHD & Omega Psi Phi Inc., n.d.).
- African Americans’ depressive occurrences are more disabling, persistent, and resistant to treatment than those experienced by Whites (NIMHD & Omega Psi Phi Inc., n.d.).
Compared to White people with the same symptoms, Black and African American people are more often diagnosed with schizophrenia and less often diagnosed with mood disorders (Mental Health America, 2021).

Black men with mental health conditions, especially those experiencing psychosis, are more likely to be in jail or prison instead of receiving treatment during psychosis. This could be a contributing factor to the high imprisonment rate for Black men, which is six times greater than the imprisonment rate of White men (Mental Health America, 2021).

Less than 2% of American Psychological Association members are Black, decreasing the confidence of African Americans who seek out culturally competent care (Mental Health America, 2021).

In 2018, 58.2% of Black people with serious mental illness aged 18-25, and 50.1% of Black people with mental illness between the ages of 26-49 did not receive treatment (Mental Health America, 2021).

Nearly 90% of Black people over the age of 12 with a substance use disorder have never received any treatment (Mental Health America, 2021).
WHAT CAN HEALTH CARE PROVIDERS AND PRACTITIONERS DO?

- Complete monthly diversity, equity, inclusion, and implicit bias training to become or continue to grow as culturally competent and culturally relevant behavioral health organizations and practitioners (Mental Health America, 2021).
- Adopt and use behavioral health terms that help reduce the stigma of receiving behavioral health treatment.
- Work with African American faith communities, leaders, and behavioral healthcare professional organizations to reduce the stigma surrounding behavioral healthcare.
- Collaborate with behavioral health providers, practitioners, and patients to ensure cultural competence in behavioral health service provision. Promote a workplace that is consistent with behavioral health guidelines for African American men (Mental Health America, 2021).
- Recruit, hire, and promote African American men to clinical, supervisory, and leadership positions in your organization, to make your service setting safer and more effective for Black men.
- Collaborate with health insurance providers to explore the possibility of incentivizing behavioral health visits for Black men (reduction in fees, free gym membership, etc.).
- Disaggregate your service, evaluation, and outcome data by race, gender, and culture, to improve your ability to assess and improve the cultural effects of the care you provide.
- Learn about the social and economic factors—the social determinants of health—that put Black men at higher risk of physical and behavioral health disparities (CDC, 2020).
- Research and use evidence-based programs and practices to reduce disparities and eliminate barriers to high-quality behavioral healthcare for African American men (CDC, 2020).
- Encourage Black men to visit behavioral health practitioners as needed for stress and other mental health-related services (CDC, 2020).
- Be honest and transparent, and encourage African American men to reduce the stigma surrounding behavioral health treatment (CDC, 2020).
WHAT CAN GOVERNMENT DO?

- Expand Medicaid eligibility and implement a health insurance campaign to insure Black people of lower socioeconomic status, Black people who are underinsured or uninsured, and Black residents in poverty-stricken areas.
- Become intentional in funding and conducting research that explores evidence-based practices to reduce or eliminate behavioral health disparities for African American men (CDC, 2020).
- Encourage disaggregation of program, service, evaluation, and outcome data, to promote a clear understanding of where we are on the path to health equity and where the opportunities for improvement are.
- Encourage cross-sector collaboration (e.g., not-for-profit, private, corporate, civic, governmental, philanthropic, faith-based communities) to identify and remedy social and environmental factors that contribute to physical and behavioral health disparities, through formulation and implementation of new, innovative policies and collaborative governance efforts (CDC, 2020).

WHAT CAN AFRICAN AMERICAN MEN DO?

- **Reduce the stigma:** Normalize conversations about behavioral health and receiving behavioral healthcare services. It is okay not to feel okay. Seek the services of a behavioral health practitioner to help ease your burdens.
- **Breathe:** Black men face racism and discrimination every day, and that kind of stress can have serious effects on your health. Speak with your behavioral healthcare provider to learn and practice healthy coping skills (such as exercise and slow, deep breathing techniques) to relieve some of that stress.
- **Explore resources:** Explore behavioral health resources for Black men. Please visit: African Americans | NAMI: National Alliance on Mental Illness for more resources on behavioral health and behavioral health services.


Mental Health America. (2021). Black and African American Communities and Mental Health. Retrieved from Black and African American Communities and Mental Health | Mental Health America (mhanational.org)

National Institute on Minority Health and Health Disparities & Omega Psi Phi Fraternity, Inc. (n.d.) Retrieved from Brother, You're On My Mind (nih.gov)

For more information on cultural competence and bias-eliminating practices, visit our website at AABH CoE - Home (africanamericanbehavioralhealth.org)

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