

Mental Health and Trauma-Informed Care

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PROBLEM

Black communities are experiencing disproportionate Covid-19 impacts and heightened racial trauma, and at the same time, face many barriers to mental health care and trauma-informed care. There are existing inequities in mental health support, trauma-informed education, and trauma-informed care that are being compounded by the current disproportionate impacts of the pandemic and racial trauma. The particular groups disproportionately impacted by COVID and these inequities are:

1. Black, Indigenous, and People of Color (BIPOC)
2. Health care professionals and frontline employees who work in marginalized communities
3. BIPOC living in rural communities

If BIPOC do not address the racial trauma and mental health issues in our communities, it will continue to lead to more homelessness, incarceration, financial instability, unemployment, self-medication, addiction, grief, depression, anxiety and suicide.

Lack of Access

There is an overall lack of access to mental health for BIPOC as compared to whites due to issues like unemployment, economics, a distrust of the medical community (especially due to the history of [racism in medicine](#)), as well as a lack of cultural awareness by some white medical professionals in the health care industry.

Racial Trauma

Racial violence and injustices against BIPOC cause an increase in racial trauma. Racial trauma is [causing Black people](#) to experience PTSD and a worsening of anxiety and depression. Black people can experience racial trauma long after the initial incident and can also experience secondary trauma, if they see racism experienced by someone else. Racial violence by police against Black people and immigrants, an uptick in violence from white supremacists targeting protestors, and elected officials stoking racial fears can lead to BIPOC having feelings of worthlessness and despair, low self-esteem, and fear—of going outside, of police, of harm.

Stigma

Community stigma around mental health care—that it is a sign of weakness, unimportant, or humiliating—can hold Black people back from seeking the care or support they need to survive. When services are available, they're often underutilized by those who need them most. And even when BIPOC do seek and obtain care, it is often inferior in quality compared to care received by whites.

Lack of Representation

There is a shortage of BIPOC trauma-informed practitioners and psychotherapists. That lack of representation impacts BIPOC communities as they seek help from people who look like them and understand their experiences and points of view.

SOLUTIONS

We recommend specific and actionable policies that address these inequities in mental health and trauma informed care:

1. **Community-building** - Bring BIPOC together to educate and inform them about racial trauma, trauma informed care, and the need for mental health care in order to create effective, sustainable change in their communities.
2. **Documenting and Visual Storytelling** - Highlight the faces and voices of the South; connect the dots between the history of racism and trauma in the South; share stories of how mental health impacts Southerners, especially young BIPOC; and, tell the story of how certain structural inequalities impact the mental health of Southern communities.
3. **Case Studies** - Show the impact of education, community building and storytelling to reframe the narratives coming out of the South around mental health.
4. **Media & Digital Strategies** - Reframe the media narratives and social media narratives coming out of the South around mental health, especially BIPOC communities and young BIPOC, and make sure the narratives and stories are told by the Southerners, transplants to the South, and Southern trauma informed practitioners.
5. **Policy for organizations** - Center a mental health plan for their staff and the communities they're serving.

Questions policymakers should consider to ensure equity is a top priority

- What efforts are being made to offer new approaches in mental health to support BIPOC in processing racial trauma and racial discrimination?
- How can we make therapeutic treatments equally accessible, empathetic and competent for BIPOC, rural communities, and health care professionals who work in these communities?
- How do we educate and uplift the voices of BIPOC when it comes to mental health issues?
- How do trauma informed practitioners receive funding or financial support in bringing trauma informed education and care to BIPOC and organizations that work with marginalized groups?