



Practice Alert

Congressional Black Caucus and Mental Health Professionals Seek to Address Racial Disparities in Access to Behavioral Health

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For several years, suicide has remained among the top 10 causes of death for ages 10 through 44. Data from the National Center for Health Statistics' *Suicide Mortality in the United States, 1999–2017* brief indicates that suicide rates in the United States increased by 33 percent during that review period (Hedegaard, Curtin, & Warner, 2018). In 2018, *JAMA Pediatrics* published a research letter titled “Racial Disparity in Suicide Rates Among US Youth From 2001 Through 2015” (Bridge et al., 2018). The letter noted that an analysis of data from the Centers for Disease Control and Prevention Web-based Injury Statistics Query and Reporting System revealed an increase in the rates of suicide amongst black youths ages five through 11. The letter also noted that there was a decrease in suicide rates among white youths in the same age group. “Analyses revealed that the suicide rate among those younger than 13 years is approximately 2 times higher for black children compared with white children, a finding observed in boys and girls” (Bridge et al., 2018, p. 698).

This letter garnered a significant amount of attention. It was picked up by 40 news outlets and started a dialogue to shed light on a topic not frequently discussed in mental health circles. Rep. Bonnie Watson Coleman (D-NJ) became familiar with this issue after viewing post after post on Facebook and Twitter about children as young as five years old completing suicide. Rep Watson Coleman became concerned about this growing trend and wanted to elevate awareness of this issue.

In April 2019, the Congressional Black Caucus formed the Emergency Taskforce on Black Youth Suicide and Mental Health with Rep. Watson Coleman at the chair. The Taskforce's goals are as follows:

- Convene experts in Washington, DC, and across the United States to collect actionable information;
- Educate members of Congress and staff on mental illness and suicide in youths through panel discussions, briefings, and other meetings;
- Identify, promote, and build resources for communities of color to identify when a child is struggling with mental illness and/or having thoughts of suicide;
- Develop legislative recommendations for the Congressional Black Caucus to bring before Congress.

The Taskforce organized a workgroup comprising mental health professionals in social work, psychiatry, and psychology to help meet these goals. The workgroup is chaired by Michael A. Lindsey, PhD, MSW, MPH, Executive Director at the McSilver Institute for Poverty Policy and Research at New York University. Other members of the workgroup include Dr. Alfiée Breland-Noble, CEO, The AAKOMA Project and Center, Associate Professor Appointment, Georgetown Psychiatry; Dr. Sherry Molock, Associate Professor, Clinical Psychology at the George

Washington University; and William B. Lawson, MD, PhD, DLFAPA, PA, Consultation Institute for Reducing Disparities Through Research, Education, and Access to Care, and Editor in Chief, *Journal of the National Medical Association*. The workgroup will develop a report to present to the Taskforce by the end of the year outlining clear legislative recommendations.

On July 10, 2019, Rep. Watson Coleman introduced H.RES. 480, “Acknowledging the racial disparities in diagnosing and treating mental health among youth in communities of color.” H.RES. 480 acknowledges that there is a racial disparity in access and treatment of mental health issues and that access should be available to everyone, regardless of race or ethnicity. The resolution calls for the U.S. Department of Health and Human Services and the National Institute on Minority Health and Health Disparities to research this issue and identify tactics that can be implemented to improve access to mental health services to children in communities of color. The resolution has support from the National Association of Social Workers (NASW), American Psychological Association, American Psychiatric Association, and American Foundation for Suicide Prevention. In addition, the resolution calls on the Department of Health and Human Services and the Department of Education to research best practices and incentives to increase diversity in professionals seeking to enter the field.

NASW supports this resolution as part of a commitment to social justice under the health and behavioral health equity priority. We will continue to follow this issue. You may access the full press release from Rep. Watson Coleman at

<https://watsoncoleman.house.gov/newsroom/documentsingle.aspx?DocumentID=1575>

References

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