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African-American Mental Health Community: Information Needs, Barriers, and Gaps

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African-American Mental Health Community: Information Needs, Barriers, and Gaps

Abstract

This paper articulates the importance of African Americans regarding mental health: how they obtain information, lack of available resources, internal and external pressures of receiving help, and the gathering of their information from non-traditional sources in comparison to traditional. Historically, the community has faced stereotypical pressures, which they actively fight against to be viewed as equal. After segregation being abolished and many sources and organizations offering support for many different races, there is still an imbalance in what is offered and available for African Americans. A mix of current and dated studies and texts will be highlighted to discover findings, note critical gaps of information, and create a discussion. Information has been gathered using databases such as National Center for Biotechnology Information (NCBI), PsychNet, Science Direct, as well as organizations focusing on mental health like National Alliance of Mental Illnesses and Mental Health America (MHA). Through this search, smaller organizations named the Association for Black Psychologists, HBCU Center for Excellence in Behavior Health, and BlackGirlsSmile were found. The organization, BlackGirlsSmile, was created in response to the lack of available resources for African Americans and females in terms of mental health. Larger organizations like the National Alliance of Mental Illnesses have created a symposium in 2004 focusing on African Americans and mental illnesses and recovery, to close the gap. The resulting findings indicate that while there have been advances made towards creating more resources and support in mental health awareness for the African American community, it is imperative to form an understanding of what African Americans face with limited resources due to racism, discrimination, poverty, the social climate, and even the community itself.

Keywords

African Americans, Mental Health, Mental Illness, Information Community

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About Author

Stephanie has a BA in English with a concentration in Creative Writing and a minor in Music from Hollins University. She is certified to teach Piano and English as a Second Language. She was a grant researcher/writer intern at Hampton Roads Academy, and volunteered in various places including the Norfolk Botanical Garden's library before becoming employed with the Norfolk Public Library. Stephanie is currently a Library Associate II and is working towards her MLIS at San Jose State University.

Introduction

African Americans are less likely to seek professional help for mental health education and treatment, despite the availability of numerous resources. Because of this, members of the community can sometimes experience more severe forms of mental health conditions or might go undiagnosed or treated due to these unmet needs. This is partially because of barriers such as racism, discrimination, and financial restraints and also due to reliance upon traditional information seeking behaviors. Many may choose to turn towards family, church, schools, and news from potentially non-reliable sources online before focusing on professional medical support (Anderson, 2003).

African Americans seeking mental health information form a specific information community based on a shared interest and need. Durance (2001) explains information communities as those being “united by a common interest in building and increasing access to a set of dynamic, linked and varying information resources” (p.164). People suffer with mental illness for various reasons, from genetics, to environmental hardships, such as stress from the workplace, finances or relationships. Those in the African American mental health community have various options for support and information, but the information is not currently easily, reliably or accessibly shared.

A mental illness may occur in all races and all ages at different stages of life. This literature review gathers research studies and texts which focus on African Americans and their information seeking behaviors when it comes to mental health. Highlights will include the effects of poverty and racism on information seeking behaviors, as well as the overall stigma of mental illnesses within the community and how this influences information seeking behavior. This review focuses on information needs and barriers, information sources, and information gaps.

Literature Review

Information needs and the related stigma

In the current literature, several trends emerge in mental health information needs and services for African Americans: a lack of understanding due to a sense of shame, limited access due to internal and external pressures, using faith and religion as a predominant resource, and large gaps of information specific to the community. Talking about mental health or suffering from a mental illness is quieted in the African American community as other environmental stress factors have long loomed larger, in terms of the move towards equity and civil rights.

On top of this, even beyond the African American community alone, mental illness is frequently stigmatized. In the United States’ current political and social climate, mental health funding is always at a risk of being cut off, due to not being viewed as crucial as physical health. For African Americans, access to resources for mental illnesses is hard to come by, both from internal and external sources.

Polaha, Williams, Heflinger, and Studts (2015) state that “although stigma may be a leading barrier to care among rural individuals, many factors influence an individual’s decision to access mental health services” (p. 1096). External pressures

push African Americans with mental health concerns to look toward family, church, schools, and various sources of text before turning to professional medical support. These would be considered non-traditional sources of information as not coming from a well-founded medical focal point. Community stigma toward children with mental health problems and their families was a frequently endorsed perceived barrier to help-seeking (Murry, Heflinger, Suite, and Brody, 2011).

The African American community obtains pressure from others inside its own community, but many of these pressures starts in the home, with the parents. Polaha et al. (2015) mention in their study that parents of children with a mental illness used phrases like “some people might look down on me,” “my child’s teacher would treat him/her unfairly,” and “I would be worried that people in town would find out” when seeking mental health services for their children. Results showed that the more stigma parents perceived, the less willing they were to seek services for their children in traditional (mental and behavioral health services and private practices) and even in no-traditional settings (school, primary care, church, and teleconference).

Information seeking needs and behaviors

Social and cultural influences are also a leading factor in a mental illness among African Americans and specifically for African American women. In the book *In and Out of Our Right Minds: The Mental Health of African American Women*, authors Brown and Keith (2003) state “African American women have historically combined employment, childrearing, and family roles, thus increasing the likelihood of role overload and role conflict, particularly in circumstances where coping resources are limited” (p. 7). Bates (1989) theorizes in her article outlining the information seeking process of berrypicking that those who search for information won’t have a specific search term or ideas in mind, they will just find relevant pieces of information, but might miss out on a bigger picture or information that might interrogate assumptions. Erdelez (1999) believes that many gain information just by stumbling upon it. Both these theories highlight that information seeking is not always fully intentional or developed and might be more ad-hoc. When it comes to mental health or medical information this is concerning.

Information barriers including poverty and living situations

Poverty is a factor in whether African Americans seek and accept support for their mental health. There are many reasons as to why a family may live in poverty which includes, but are not limited to homelessness, multiple moves, lack of health insurance, and stress of raising a family in poverty. This in turn can affect a child’s mental state and many children might go untreated for mental health or environmental stress related issues.

In addition, living in a rural area might impact the information seeking behavior. Hartley, Korsen, Bird, and Agger’s (1998) focus their research on the different types of treatment and referral patterns for those diagnosed with depression in rural areas. Results have found that long wait times, lack of services, and reimbursement issues were among accepting referrals to mental health providers. Some referrals would be to health centers with a reputation for treating

those with serious or chronic mental illnesses. There were many incidents where referrals weren't even provided.

For African Americans, living areas may affect how easily or difficult it is to gain resources and assistance for mental health, as well as work toward recovery (Murray, Heflinger, Suite, & Brody, 2011). Angold et. al. (2002) examined psychiatric disorders and mental health services in rural African American and Caucasian youth. The parents of those selected to participate in the study, engaged in a phone questionnaire about their children's behavior problems. The subsequent research found African American and white youth were equally likely to have psychiatric disorders, but African Americans were less likely to use specialty mental health services. Lack of time, funding, transportation, and long travel distances, as well as a lack of ethnical and racial diversity in behavior health specialists can be added to the long list of information barriers.

Racism and discrimination among information seeking

An obstacle that cannot be ignored is the experience and perception of racism, be it overt or basic lack of perspective on the part of the providers for mental health services to identify the specific needs of members of the community (Anderson, 2003). Hankerson, Suite, and Bailey (2015) state that everyday forms of discrimination may be more stressful than overt acts of racial discrimination because they are repetitive and subtle. A lasting barrier between African Americans and seeking help for their mental illness dates to the medical experimentation on African Americans during slavery, which laid a foundation of mistrust toward health care providers.

Pitman's (2011) explores passive and active reactions to racism and how anger does not fit into either category. In fact, Pitman (2011) points out that the one adjective that has most often been used to describe African Americans is *angry* or some other variation on the word. Pittman's (2011) research highlighted in this article includes a survey to track from acute to chronic how African Americans perceive racial discrimination they have faced, and in correlation created a linear graph to highlight the effectiveness (or ineffectiveness) anger is as a coping mechanism.

Information source through faith and religion

African American communities have a long history of ties to the church and therefore often view the church as a place of solace and comfort. As previously stated, African Americans are more likely to turn to family and the church to gain support for their mental health. African Americans have the highest church attendance rate of any ethnic group in the US and faith-based organizations are the most sought-after source of support among African Americans (Hankerson, Suite, and Baily, 2015).

Hastings, Jones and Martin (2015) concur that religion is an important factor in the everyday lives of African Americans, and as such, is a pivotal role in attending to a mental illness. One of the book's sections, dealing with a mental illness: community interventions and innovative programs for African Americans,

highlights the strong connections of African Americans and their faith. However, while seeking out a “higher” source of help to essentially, pray away their dark feelings or the sins that may have caused their mental health issue is encouraged, the stigma against mental illness remains if religion is not the sole cure (Hastings, et al., 2015). As part of the emerging changes in the African American mental health community, Mental Health Ministries was founded by Reverend Susan Gregg-Schroeder after fighting her own battles against depression (Hastings, et al., 2015). She used her struggles to create an opportunity to help break the stigma of mental illnesses in the church and faith-based organizations (Hastings, et al., 2015).

Weaknesses and gaps of information

The articles and texts in this literature review were published in a span of eighteen years, which accounts for some gaps in information. The growth of technology demands research and information to be updated at breakneck speed, so foundational texts such as Hasting, et al. have not been updated to account for this rapidly changing world of information, so much is missing in the analysis that relates to the way online resources have changed information seeking behaviors.

Mental health has seen a surge in research in the past few years, but information for mental health services specifically for African Americans may continue to be slow on the uptake. Some members of the community may not know how to access the little information available due to lack of computer skills and illiteracy, or not feeling comfortable enough just to find that one person to talk to (Stansbury, Simpson, & Martin, 2011). In addition, information is still hampered by under-representation in the clinical research. Studies are being created and show that more information is desired, but they are far and in between that specifically focus on African Americans. Finding ways to address mental health information in an appropriate manner in connection to a specific culture causes an information needs gap, which makes it difficult for practitioners to provide the best medical assistance (Mishra, Lucksted, Gioia, Barnet, & Baquet, 2008).

In 2004, the National Alliance of Mental Illness (NAMI) created the symposium “African Americans: Facing Mental Illness: Experience recovery,” to create access to information, resources and support. The symposium focused on finding new paths to recovery and held panels on Access to Culturally Competent Mental Health Services, African Americans and Suicide, Historical and Mental Health Perspectives of the African American Community, Research Updates and Culturally Proficient Treatment, and much more. As of 2019, this symposium has only been held once, reinforcing the continuing gap in time for regularly updated information to be offered.

To this point, BlackGirlsSmile founder Lauren Carson created the organization in 2010 after noticing “gaps of information she found throughout her mental health journey as a young African American female with clinical depression” (*BlackGirlsSmile*, 2012). The organizations mission and vision are to focus on African American females to receive support and resources to have mentally healthy lives. This literature review finds that identifying and developing updated strategies to address mental health information for the specific African American community is the major gap in research; as lack of recent research makes

it difficult for practitioners to provide the medical assistance and for information seekers to track down reliable medical advice (Mishra, et. al., 2008).

Methodology

I explored a variety of text and resources to gather as much information as possible on African Americans and mental health as an information community. Starting with databases, ranging to text acquired from a catalog search from my library, to seeking out other mental health related sites through NAMI and Mental Health America as a launching pad. Some of the journals I found were from *Psychiatric Services*, *Archives of General Psychiatry*, *American Journal of Public Health*, *Archives of Pediatric and Adolescent Medicine*, *Journal of Health. Care for the Poor and Underserved*, *Community Mental Health Journal*, and *Journal of Youth and Adolescence*.

Most texts were found through EBSCO using San Jose State University's Martin Luther King Jr's Library online catalogue through the Library and Information Science section. I also accessed SJSU library's online catalogue to locate non-fiction and academic books, which in turn would take me to WorldCat to see if my library owned a copy or I could receive one through Inter Library Loan (ILL). I was able to gather a lot of helpful information using the following keywords: *African Americans*, *mental health*, *mental illness*, *racism*, *discrimination*, *poverty*, *privacy*, *African Americans and depression and online*, *African Americans and depression and religion*, *African Americans and depression*, *African Americans and anxiety*, *African Americans and mental health and seeking behavior*, *African Americans and mental health*, *African Americans and privacy*, *African Americans and mental health and information*. *These keywords may have been shortened, and some interchangeable, but I wanted to be as specific as possible to try and find new and relatable information. Other online searching sources included National Center for Biotechnology Information (NCBI), PsychNet, Science Direct, and Google Scholar.*

For research on community sources, I started with Google. I used some of the same keywords in my search including: *African Americans and mental health*, *African Americans and depression*, and *African Americans and mental health and information*. I did narrow my focus on information that many would not readily find, so I decided to bypass the first two pages of sources and focused on page three and beyond to find any information that would catch my eye. This, in turn, helped me locate smaller organizations or groups that may or may not appear as easily on the first page of a search engine based on keyword use. I was able to find BlackGirlsSmile, Association for Black Psychologists, and HBCU Center for Excellence in Behavior Health.

Conclusion

The African American community faces a lot of deterrents when finding access to resources and information regarding mental health. Including general stigmatization of mental illnesses, the African American community experiences additional barriers to access, to information specifically directed to the community, and to research based on the community's specific needs.

The literature review demonstrates that additional research be undertaken to investigate the specific needs for African Americans and their mental health is needed and may result in new studies to create numerous pathways for further development. Research has not developed a clear strategy or recommendation on change in perception of information resources and tends to focus on what is currently available.

For many, mental health situations can be life changing and beyond their immediate physical health and state of mind, can lead to longer-term negative life-changes, such as involuntary psychiatric hold or arrest due to acting out from their illness, or worse. Libraries and other information-based organizations are crucial, now more than ever, as institutions for supporting the information needs and information seeking behavior of African Americans and mental health. Additional research into how African Americans experiencing mental health conditions seek information currently would benefit the creation of new community resources, organizations, information sources and online.

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