



Listening to Black Californians with Mental Health Conditions

Black Californians with Mental Health Conditions Actively Tend to Their Mental Health

Black Californians with mental health conditions are more likely to devote “a great deal” or “quite a bit” of effort to focusing on their mental health

(87%) than those who do not report mental health conditions (77%). These participants also devote significant effort to actively reducing stress and speaking up about health concerns. Participants with mental health conditions are also more likely to seek out alternative approaches to health care and to meditate (see Figure 1).

About the Study

In 2021, Black-owned research firm EVITARUS conducted the Listening to Black Californians study for CHCF. In [100 individual interviews](#),¹ [18 focus groups](#), and [a statewide survey of 3,325 adult Black Californians](#),² participants described their attitudes toward their own health and their experiences with the health care system. This set of fact sheets highlights the health care experiences of specific groups within California’s Black population. This fact sheet was written by Linda Cummings, PhD.

About the Participants: Black Californians with Mental Health Conditions

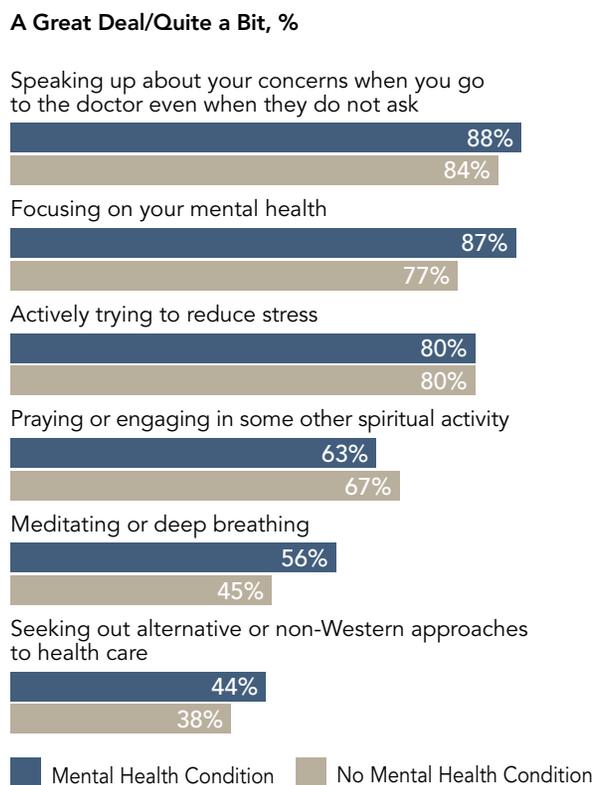
Mental illness is among the most common health

conditions affecting adults in California.³ Many participants in the *Listening to Black Californians* study have personal experience with mental health conditions. In the survey, nearly one in four Black Californians (23%) report a mental health condition, and nearly one in seven (14%) report that a household member has a mental health condition.⁴ Female respondents are more likely to report mental health conditions (30%) than male respondents (19%). However, studies have found that Black men underreport mental health conditions.⁵

Black Californians who report mental health conditions are more likely to have Medi-Cal coverage (33%) and less likely to have private insurance coverage (45%) than those who do not report mental health conditions (19% Medi-Cal, 62% private insurance).

Figure 1. Things to Maintain or Improve Personal Health

Q: Here are things that some people do because they think that these things will help them maintain or improve their health. For each one, please tell me how much effort, if any, you put into doing it.



Notes: Sample includes 3,325 Black California residents age 18 and older. Differences between groups were significant ($p < .05$) for all parts of this question except “Actively trying to reduce stress” and “Praying or engaging in some other spiritual activity.”

Source: *Listening to Black Californians*, statewide survey conducted by EVITARUS (March 5-May 8, 2022).

Black Californians’ Experiences with Systemic Racism and Discrimination Have a Significant Impact on Their Mental Health

“When you’re Black, you know how far you can take — you can speak on certain things [only] so far, and then you let it go. Because you don’t want to be fired, or you don’t want to be outcasts or anything like that at work. So, you have limitations on what you would do and say, and you’re careful on what you’re saying, how you move. And moving like that and living like that can cause a lot of stress and anxiety.”

— 48-year-old Black nonbinary person, Inland Empire

Virtually all survey respondents with mental health conditions agree that what happens to Black people in this country affects them and what happens in their lives — a concept called linked fate — “a lot” or “somewhat.” Respondents with mental health conditions (97%) believe in linked fate significantly more than respondents without mental health conditions (90%).

In interviews and focus groups, many Black participants described how racism and discrimination exert a negative toll on their mental health, from personal experiences with racism to the constant barrage of news about police brutality toward Black people to concerns about interactions with police and others in positions of power.

Other studies confirm this finding.⁶ A recent report notes, “The notion that social environments influence depressive symptoms in Black communities has been amplified in light of research showing that the increased hypervisibility of police violence, discrimination, and killings of unarmed Black men lead to detrimental spillover effects in the mental health of this population.”⁷

Black Californians with Mental Health Conditions Report Many Negative Health Care Experiences

Black Californians with mental health conditions are one of the groups most likely to report being treated poorly by a doctor or other health care provider because of their race or ethnicity (47% compared to 26% among those without a mental health condition). Respondents with mental health conditions are also more likely to report specific negative experiences during health care visits, including that their symptoms were not taken seriously (59%) and that they were not treated with respect (44%) (see Figure 2).

Figure 2. Negative Experiences with Health Care Visits

Q: Thinking more generally about your experiences with health care visits, have any of the following ever happened to you?

Those Who Answered “Yes”



Notes: Sample includes 3,325 Black California residents age 18 and older. Differences between groups were significant ($p < .05$) for all parts of this question.

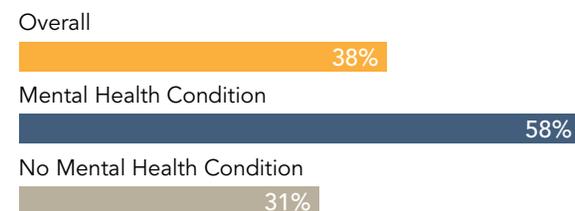
Source: *Listening to Black Californians*, statewide survey conducted by EVITARUS (March 5–May 8, 2022).

Just as concerning, Black Californians with mental health conditions (58%) are nearly twice as likely as those without mental health conditions (31%) to report not receiving adequate treatment for pain (see Figure 3).

Figure 3. Pain Not Treated Adequately

Q: Has there ever been a time when your pain was not treated adequately by a health care provider?

Those Who Answered “Yes”



Notes: Sample includes 3,325 Black California residents age 18 and older. Differences between groups were significant ($p < .05$).

Source: *Listening to Black Californians*, statewide survey conducted by EVITARUS, (March 5–May 8, 2022).

Black Californians with Mental Health Conditions Often Avoid Care or Adopt Protective Behaviors When Seeking Care

Too few Black Californians with mental health concerns seek care or support due to negative experiences in the health care system and the long-ingrained stigma associated with mental illness. In addition, Black people can be reluctant to seek help due to the very real concern that reporting a mental health condition could cause them to lose custody of their children or their job, or risk criminal persecution.⁸

“Based on my own experience . . . we as a community don’t talk about our mental health issues enough. And I think sometimes by not talking about it, people might want it to go away. But it’s such a critical issue [in] how we all maintain [our] sanity.”

— 73-year-old Black man,
San Francisco Bay Area

One researcher noted: “Research has found that the lack of cultural responsiveness from the therapist, cultural mistrust, and potential negative views from the therapist associated with stigma impact the provision of mental health services in the Black community.”⁹

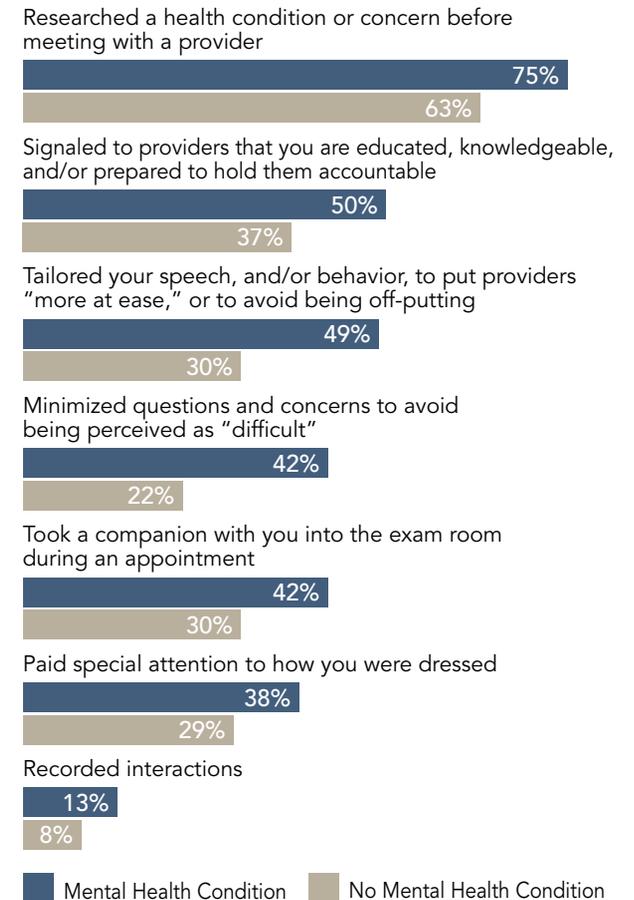
Four in 10 Black Californians with mental health conditions (40%) report avoiding care because they felt they would not be treated fairly or with respect, significantly more than those without mental health conditions (21%). Care avoidance is associated with increased risk of morbidity and mortality, especially among those with chronic, preventable, and treatable medical conditions.¹⁰

When they do seek care, Black Californians with mental health conditions deploy various strategies to mitigate poor treatment. Three in four (75%) report researching a health condition or concern before meeting with a provider, far exceeding those without mental health conditions (63%). Respondents with mental health conditions are also more likely to adopt other strategies, including “minimizing questions and concerns to avoid being perceived as ‘difficult’” (see Figure 4).

Figure 4. Strategies Used to Increase Chances of Being Treated with Respect

Q: Next is a list of things some people may do to increase the chances that they will be treated with respect when seeking health care. For each one, please indicate if you have ever used that approach or strategy when seeking care.

Those Who Answered “Yes”



Notes: Sample includes 3,325 Black California residents age 18 and older. Differences between groups were significant ($p < .05$) for all parts of this question.

Source: *Listening to Black Californians*, statewide survey conducted by EVITARUS, (March 5–May 8, 2022).

Black Californians with Mental Health Conditions Want Providers Who Listen to and Respect Them

“If it comes to mental health, I definitely want an African American therapist, just because the majority of time they’re more in tuned obviously with the African American community, the African American plight . . . the struggles and hardships that we face and deal with, African Americans in this country.”

— 37-year-old Black man,
San Francisco Bay Area

Interviews with participants with mental health conditions reveal a shared experience of not receiving adequate or compassionate care from mental health providers. As a result, almost all Black Californians with mental health conditions consider it “extremely” or “very” important to have a provider who listens to them (99%), spends time with them (98%), and talks with them about specific goals (96%). More respondents with mental health conditions (55%) consider having a Black doctor to be “extremely” or “very” important compared to those without mental health conditions (44%).

Key Areas for Action

Recent legislation has helped strengthen California’s mental health system by mandating parity in coverage of mental and physical illness and expanding Medi-Cal eligibility and the scope of mental health services. Despite these efforts, most Californians who need mental health care still do not receive it. In interviews, mental health experts recommend the following strategies to help alleviate the burden of mental illness in Black communities:

- ▶ **Normalize conversations about mental health.** While discussion about mental health has become more prevalent in recent years, mental health experts emphasize the importance of continuing to normalize conversations about mental health challenges by encouraging open dialogue in community and health care settings.
- ▶ **Create accountability for early detection and treatment of mental health conditions.** For example, [California Assembly Bill 2193](#) requires licensed health care practitioners who provide prenatal or postpartum care for a patient to screen or offer to screen mothers / birthing people for maternal mental health conditions.
- ▶ **Increase access to mental health services across all modalities.** In some cases, telehealth makes mental health care easier to access and less stressful for patients. In others, face-to-face appointments are essential. Providing a full range of modalities for mental health care can expand the pool of available providers and ensure that patients have a choice in how they receive care.

- ▶ **Partner with trusted messengers.** Experts recommend engaging with community health workers, churches, and community-based organizations to make mental health messaging more culturally accessible. Trained community health workers, peer specialists, lay counselors, doulas and more can be deployed to provide education and encouragement to patients around mental health concerns.
- ▶ **Acknowledge the impact of racism and the barrage of news about violent incidents toward Black people.** Mental health experts recognize that Black communities cannot be divorced from the news about social justice issues. They recommend that providers engage Black patients in conversations about racism and violence to help surface the impact of such events on patients’ mental health and subsequently provide appropriate care.

THE TAKEAWAY

Black Californians regularly engage with the health care system but are often mistreated because of their race, and this is especially so for Black Californians with mental health conditions. Providers can respond by acknowledging the impact that racism and incidents of violence have on the mental health of Black people, especially younger people. Communities can normalize conversations about mental health to help reduce the stigma associated with mental health conditions and encourage people to get care.

Endnotes

1. Linda Cummings, [*In Their Own Words: Black Californians on Racism and Health Care*](#), California Health Care Foundation (CHCF), January 2022.
2. Linda Cummings, [*Listening to Black Californians: How the Health Care System Undermines Their Pursuit of Good Health*](#), CHCF, October 2022.
3. Wendy Holt, [*2022 Edition — Mental Health in California*](#), CHCF, July 2022.
4. Survey respondents were asked, “Do you, or does anyone in your household, have a mental health condition such as depression, anxiety, post-traumatic stress disorder (PTSD), schizophrenia, bipolar disorder, dementia, Alzheimer’s or some other condition?”
5. Earlise Ward et al., “[African American Men and Women’s Attitude Toward Mental Illness, Perceptions of Stigma, and Preferred Coping Behaviors](#),” *Nursing Research* 62, no. 3 (May-June 2013): 185–94.
6. Jacob Bor et al., “[Police Killings and Their Spillover Effects on the Mental Health of Black Americans: A Population-Based, Quasi-Experimental Study](#),” *Lancet* 392, no. 10144 (July 28, 2018): 302–10; and Tara E. Galovski et al., “[Exposure to Violence During Ferguson Protests: Mental Health Effects for Law Enforcement and Community Members](#),” *Journal of Traumatic Stress* 29, no. 4 (Aug. 2016): 283–92.
7. Leslie B. Adams et al., “[Refining Black Men’s Depression Measurement Using Participatory Approaches: A Concept Mapping Study](#),” *BMC Public Health* 21, no. 1 (June 22, 2021): 1194.
8. [*A Right to Heal: Mental Health in Diverse Communities*](#), California Pan-Ethnic Health Network, updated February 20, 2023.
9. Thomas A. Vance, “[Addressing Mental Health in the Black Community](#),” Columbia University Department of Psychiatry, February 8, 2019.
10. Mark É. Czeisler et al., “[Delay or Avoidance of Medical Care Because of COVID-19–Related Concerns — United States, June 2020](#),” *Morbidity and Mortality Weekly Report (MMWR)* 69, no. 36 (Sept. 11, 2020): 1250–57.