FOR THE
SAKE
OF ALL

Improving the health and well-being
of African Americans in St. Louis and
why it matters for everyone

Washington
University
in St.Louis

FOCUS
St. Louis
Leadership
for a Thriving Region

DISCUSSION GUIDE:

Investing in mental health and substance use awareness, screening, treatment, and surveillance in St. Louis

⬇ PURPOSE

This *Discussion Guide* focuses on the recommendation to "invest in mental health and substance use awareness, screening, treatment, and surveillance." We encourage you to use the *Action Toolkit* that accompanies this *Discussion Guide* to identify ways to bring this conversation to your community and take steps to invest in behavioral health in the St. Louis community. A digital version of both the *Discussion Guide* and the *Action Toolkit*, with additional resources, is available at http://forthesakeofall. org/take-action/.

⬇ BACKGROUND

Behavioral health, which encompasses mental health and substance use problems, is an important part of our overall health. It touches every part of our lives, including how we think, feel, and act. It can also affect our physical well-being by increasing the risk of disease and death. On average, adults living with serious mental illness die 25 years earlier than other Americans, largely due to treatable medical conditions.[1]

The impact of behavioral health begins early. Research on toxic stress and trauma has found that children who experience stressors such as abuse, neglect, or household dysfunction have increased chances of developing health risks and disease later in life.[2]

In addition to its impacts on individuals, behavioral health affects our communities. In 2013, one in five Americans was living with a mental illness,[3] defined as a condition that affects thoughts, feelings, mood, the ability to relate to others, and the ability to function.[4] In addition to health-related costs, serious mental illness costs our country $193.2 billion in lost earnings each year,[5] $6.8 billion of which is lost in Missouri.[6]

One of the greatest challenges surrounding behavioral health is ensuring that appropriate care and resources are available to those who need it. The stigma and misconceptions surrounding mental illness (see *Myths vs. Facts* sidebar) continue to prevent many, including many African Americans, from seeking help.[7,8]

A lack of appropriate screening and poor access to cost-efficient treatment options also prevent many from getting the help they need. Often, individuals first receive diagnosis and care for a mental illness in the emergency room.[7] A high proportion of mental health care also occurs in the criminal justice and child welfare systems.

Most Americans do not receive the necessary treatment, and the problem is even worse for African Americans and those living in poverty.[9]

myths vs. facts about mental illness

myth › Mental health problems don't affect me.

fact › Nearly half of Americans are at risk for developing a mental health disorder in their lifetime.[10] Individuals who do not develop a disorder can still be affected by behavioral health problems their loved ones experience.

myth › Children don't experience mental health problems.

fact › Many mental health disorders have their roots in childhood, as half of all chronic mental illnesses begin by the age of 14.

myth › A mental illness is a sign of weakness or a character flaw.

fact › Mental illness is no more a sign of weakness than a physical ailment, and many people need help in order to get better. Mental health problems can be the result of many factors, including biology, family history, and life experiences, such as trauma and abuse.

Source: U.S. Department of Health & Human Services[11]

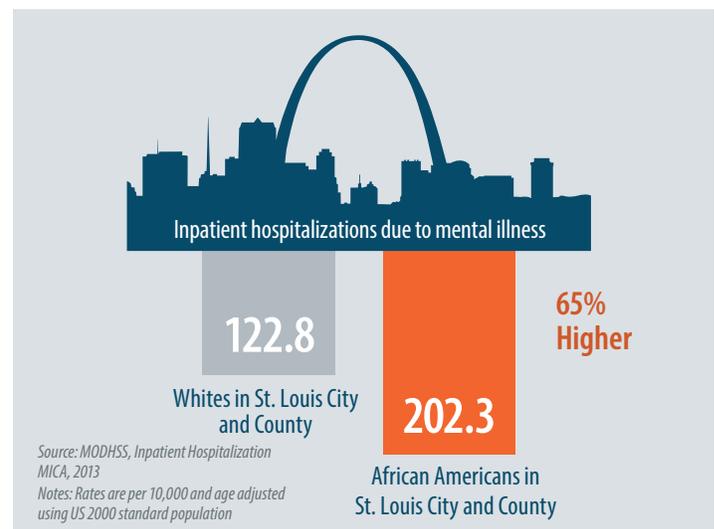## The state of behavioral health in our region

Many of the behavioral health trends seen on a national level are also present in St. Louis City and County. While mental illness does not discriminate, access to treatment and services is not always equally available.

Based on 2013 emergency room data from across the St. Louis region, African Americans visit the ER for behavioral health conditions at a rate more than double that of whites, indicating a lack of access to more effective and cost-efficient options.[12]

African Americans are underrepresented in outpatient treatment but overrepresented in inpatient treatment. Once they seek treatment, African Americans are hospitalized for mental illness more frequently than whites are. For example, in 2013, African Americans in St. Louis were hospitalized at a rate of 202.3 per 10,000, versus 122.8 for whites.[13] This higher rate of hospitalization was seen across several forms of behavioral health problems, such as alcohol and substance use problems, depression, anxiety, and psychosis.[13]

As a result, the cost of treating African Americans makes up a disproportionate share of charges for hospital-based behavioral health treatment.[14] While African Americans represent 30% of the region's population,[15] they accounted for 44% of hospital-based

> **Inpatient hospitalization rates due to behavioral health conditions are 65% higher for African Americans than for whites**

Inpatient hospitalizations due to mental illness

122.8
Whites in St. Louis City and County

65% Higher

202.3
African Americans in St. Louis City and County

Source: MODHSS, Inpatient Hospitalization MICA, 2013
Notes: Rates are per 10,000 and age adjusted using US 2000 standard population

mental health treatment costs in 2013.[14] These costs affect us all and demonstrate a need to re-examine the delivery of behavioral health services to best serve all populations, regardless of race or socioeconomic status.

STRATEGIES

Recognizing the gaps that exist in our current behavioral health system, what can be done to improve the behavioral health of all in our community, particularly those who have been underserved?

Start young

Just as with physical health, emotional well-being begins in childhood with preventative services, screening, treatment, and support. These investments can have significant effects later in life in terms of stopping negative cycles, reducing chronic disease, and improving overall emotional well-being.[16]

Traditional models of community-based behavioral health care for children need improvement, and there are research-based opportunities for increasing their effectiveness. For example, collaborative care teams, which merge primary care and behavioral health services, have been found to improve access to services.[17]

Investing in evidence-based practices, through funding, training, and measurement, is key to improving the quality of care for all children.

Local examples include:

• Approved by St. Louis County voters in 2008, the St. Louis County Children's Service Fund was created in response to reduced state and national funding for behavioral health

services. Each year, the fund collects and distributes approximately $40 million to 80 agencies providing behavioral health services to children and youth. The Saint Louis Mental Health Board operates a similar fund for agencies serving the City of St. Louis. These funds make it possible to target investment towards initiatives that fill gaps in our region and produce the best outcomes.
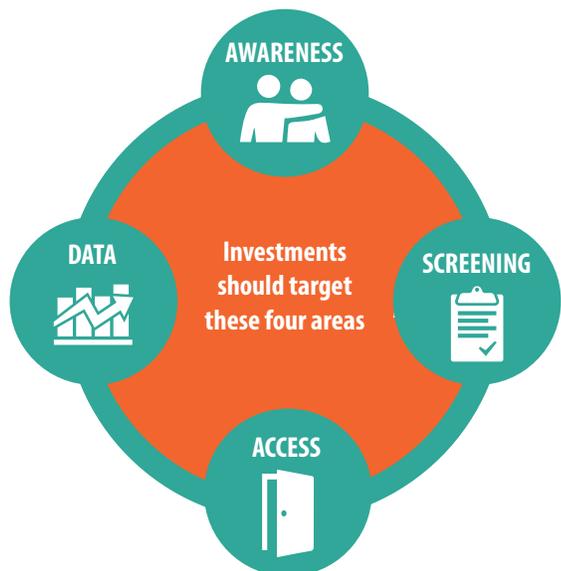
Increase awareness and screenings

Overcoming the stigma surrounding mental illness is one of the first steps to improving outcomes. To do this, our community must be willing to engage in an open and ongoing dialogue about behavioral health.

This can begin with public education and outreach, both on an individual level and through stigma awareness training for health care providers, religious leaders, schools, and other community organizations.[7]

Outreach efforts should focus on dismantling the stigma of mental illness and educating the community on the effects of toxic stress and trauma. By helping the community understand the role that stress and trauma play in behavioral health, and providing strategies for building resilience, we can help to create healthier environments.[18]

> There is a significant need for accessible, community-based behavioral health services in the St. Louis region

AWARENESS

DATA

Investments should target these four areas

SCREENING

ACCESS

needed services is limited by an individual's financial situation or location, creating behavioral health disparities in our region.[19] One solution is to proactively reach out to underserved groups instead of waiting for them to seek services.[18]

Beyond access, we also must address the quality of treatment to improve outcomes. Too often, the services that are available are less than effective due to lengthy wait lists, staff turnover, fragmentation, and inconsistent use of evidence-based treatment.[19] Collaborative treatment teams and integrative services have been shown to improve access and outcomes.[20]

Local examples include:

• The Hospital Community Linkages project, established by the Behavioral Health Network, was designed to improve care coordination for underserved and high-risk populations. Each year, approximately 700 patients are successfully connected with community treatment, helping to reduce future emergency room visits and hospitalizations for behavioral health issues.

Build effective tracking and reporting systems

Local examples include:

• Launched by the St. Louis Regional Health Commission (RHC), Alive & Well STL is a community-wide effort focused on reducing the impact of toxic stress and trauma on the region's health and well-being. Through media and public outreach, trainings, events, and ambassadors who represent the community, the initiative is working to shape St. Louis as a trauma-informed community and improve overall emotional health.

The importance of awareness also extends to prevention and early intervention, which can stop behavioral health conditions from becoming chronic problems.

While healthcare personnel like primary care physicians and emergency room staff play an important role in screening, with appropriate training, others in the community can also assist with early intervention.

Local examples include:

• Mental Health First Aid of Missouri provides certification courses designed to teach the general public how to recognize symptoms of mental health problems, how to offer and provide initial help, and how to guide a person towards appropriate treatments and other supportive help.

Improve access for high-risk populations

Screenings are only one part of the equation; behavioral health treatment and services must be accessible to those who need it.

Individuals in St. Louis City and County face barriers to accessing services, such as a shortage of behavioral healthcare providers in the City of St. Louis.[19] These barriers force some residents to seek services through the emergency room (or not at all).[19] Access to

One barrier to improving access and quality of behavioral health services is the lack of consistent and widely shared information. Too often, this means that behavioral health needs in our community go under-reported or unidentified, and care is not properly coordinated.[19] Quite simply, people slip through the cracks.

By establishing regional systems for tracking, screening, and reporting, we could develop a clearer picture of the needs in our community and respond accordingly.[19]

Local examples include:

• Behavioral Health Network (BHN) collects behavioral health data for the RHC "Access to Care" data book, which includes hospital inpatient (acute) psychiatric care, crisis services, and community-based provider operating statistics. BHN creates a centralized database for the region's Hospital Community Linkages initiative, fostering care coordination between hospitals and community-based providers. Additionally, BHN is collecting data to better understand regional behavioral health resources and capacity as well as the costs and cost savings for delivered services. BHN is engaging service providers to assess the opportunities for data sharing and care coordination across the region as well as the state.

⤓ SUMMARY OF KEY POINTS

- Behavioral health is a critical part of everyone's overall well-being, affecting everything from our ability to connect with others to our daily activities.

- The majority of people who need behavioral health services do not receive them, due to factors such as lack of awareness, negative perceptions, cost, and availability. These barriers disproportionately affect African Americans in our community, creating behavioral health disparities.

- Addressing the issue of mental health should begin at an early age and requires a comprehensive approach, from public education and screening to tracking and reporting.

⤓ DISCUSSION QUESTIONS

1 What experiences in your life shape or inform how you think about behavioral health?

2 What role do you think, or have you seen, race and socioeconomic status play in discussions about behavioral health?

3 What misconceptions do you think exist around behavioral health and mental illness?

4 Do you feel there is a stigma around mental illness in our community? If so, what could be done to help reduce this stigma?

5 What impact do you believe toxic stress, trauma, and mental illness have on our region?

6 Where do you see gaps in our region's behavioral health services and resources?

7 What do you think is the greatest barrier to improving access to behavioral health services in our region?

8 What role do you think the general public can or should play in early intervention on behavioral health issues?

9 Who in the St. Louis community is currently working to improve behavioral health? What could be done to support these efforts?

10 What would you be willing to do to improve behavioral health awareness, access, and treatment in our community?

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