Mental Health and Racial Justice in the Time of COVID-19
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Impact of COVID-19 on Physical Health Disparities

Disproportionate contagion and fatality in Black, Indigenous and Latinx and poor communities

• Role as essential workers
• Pre-existing health disparities
• Lack of access to healthcare
Impact of COVID-19 on the Mental Health of People of Color (POC)

Traditional explanations for mental health disparities:
- Pre-pandemic impact of systemic racism on mental health
- Long standing inequities in access to mental healthcare
- POC distrust in healthcare providers

Unique Impact of Covid 19
- What are the lived experience of POC jeopardizing mental health
- How must mental health treatment adapt in response to these realities?
National Online Survey: April 2020
305 Black, Indigenous & Latinx

Age
• 18 – 25 years

Gender
• 55% cisgender female
• 23% cisgender male
• 22% gender minority

Education
• 53% some college

Employment
• 36% essential workers
• 24% other employed
• 40% unemployed

Region
• 29% urban
• 39% suburban
• 32% rural
POC Basic Needs in Time of COVID

Financial Insecurity

• 46% < $31,000

• 30% “Can’t make ends meet”

Food insecurity

• 19% “Had to skip a meal...not enough money”

• 23% “Worried I would run out of food...lack of money”

Employed reported greater financial and food insecurity
Pre-existing CDC COVID health risk:
• 40% had at least 1
• Asthma, obesity, heart condition most common

Prescription Insecurity
• 36% “Unable to fill prescription”: costs, lack of insurance, unable to reach physician or pharmacy

Covid-Related Mistreatment
• 19% “Mistreated by healthcare worker...thought I had Coronavirus”

Employed were more likely to report prescription insecurity and mistreatment
POC Mental Health Disparities

Depression (PHQ-D)
• 13% moderate depression
• 22% moderately severe depression
• 56% severe depression

Anxiety GAD-7
• 18% moderate anxiety
• 67% severe anxiety

Predictors of Depression & Anxiety
• Employment
• COVID health risks
• Financial insecurity
• Prescription insecurity
**Coronavirus Victimization Distress**

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teased or bullied</td>
<td>31%</td>
</tr>
<tr>
<td>Physically threatened, hit or beaten up</td>
<td>27%</td>
</tr>
<tr>
<td>Treated rudely or unfairly</td>
<td>34%</td>
</tr>
<tr>
<td>Verbally taunted or called bad names in public</td>
<td>29%</td>
</tr>
<tr>
<td>Cyberbullied</td>
<td>32%</td>
</tr>
<tr>
<td><strong>At least 1 instance of Coronavirus Victimization</strong></td>
<td>43%</td>
</tr>
</tbody>
</table>
Coronavirus Racial Bias (CRB)

<table>
<thead>
<tr>
<th>BECAUSE OF THE CORONAVIRUS</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>The country has become more dangerous for people in my racial/ethnic group</td>
<td>50%</td>
</tr>
<tr>
<td>People of my race/ethnicity are more likely to lose their job</td>
<td>57%</td>
</tr>
<tr>
<td>People of my race/ethnicity will not receive Coronavirus healthcare as good as the care received by other groups</td>
<td>47%</td>
</tr>
<tr>
<td>People of my race/ethnicity are more likely to get the Coronavirus</td>
<td>40%</td>
</tr>
<tr>
<td>I worry about people thinking I have the Coronavirus simply because of my race/ethnicity</td>
<td>38%</td>
</tr>
<tr>
<td>Most social and mass media reports about the Coronavirus create bias against people of my racial/ethnic group</td>
<td>36%</td>
</tr>
<tr>
<td>I have seen a lot more cyberbullying of people of my race/ethnicity</td>
<td>36%</td>
</tr>
<tr>
<td>Negative social media posts against people of my race/ethnicity have increased</td>
<td>39%</td>
</tr>
</tbody>
</table>
COVID-19 Mental Health Risk Factors

- Coronavirus Victimization and Coronavirus Racial Bias beliefs increased levels of Depression and Anxiety
Coronavirus Victimization, Racial Bias, and Mental Health

COVID Health Risks

Employment

Financial Insecurity

Prescription Insecurity

Coronavirus Victimization Distress

Coronavirus Racial Bias

Depression

Anxiety
POC Mental Health Disparities in the Time of COVID-19

• Public fear and stigma has led to Coronavirus specific victimization and increased concern over racial bias among POC

• Employed POC are especially vulnerable to Coronavirus victimization and fears of increased racial bias.

• Beyond health, financial and employment factors, Coronavirus Victimization and Coronavirus Racial Bias beliefs increase racial disparities in mental health
Racial Justice & Mental Health Services in the Time of COVID

- It is not enough to talk about the twin pandemics of COVID-19 and Racism as if they are independent or simply a manifestation of a historical systemic racism.

- Rather we need to see Coronavirus specific acts of racial victimization and fears of Coronavirus influenced increases in racial bias as a syndemic in which these 2 epidemics interact synergistically in their effect on mental health.
Implications for Mental Health Justice

• Failure to acknowledge the intersecting influences of race and Coronavirus public fears in treatment, can jeopardize treatment through invalidating the lived experience of POC

• When treating POC patients, cultural competence requires mental health practitioners to quickly obtain the skills to help patients practically address COVID public reactions deleterious to their mental health.
• Mental health justice
• Employment has reversed its effect on mental health
• Treat the individual for consequences- reality