

EPISODE 2

[INTRODUCTION]

[00:00:01] RC: Hello and welcome to Collectively Us Unpacking Racism, a show about understanding and embracing our racial and ethnic diversity. We are your hosts –

[00:00:13] JRD: Julie Radlauer-Doerfler.

[00:00:15] RC: And I'm Ryon Coote. Today, we're going to talk about the impact that COVID 19 pandemic is having on black and brown communities. We'll discuss some of the many historical, medical and societal factors in an attempt to provide our listeners with an understanding of how they can contribute to our collective efforts by being an ally.

[00:00:38] JRD: Collectively Us Unpacking Racism is sponsored by the Historical Fiction Novel, *The Accidental Suffragist* by Galia Gichon, available for sale on Amazon, and bookshop.org. Historical Fiction is a contemporary voice, in a time when the obstacles of women from any background are insurmountable, a fictional character discovers her voice and dreams of equality in a male-dominated society. It's an amazing book by an amazing author.

[00:01:06] RC: Thank you for that, and thank you for our sponsor.

[INTERVIEW]

[00:01:10] RC: Hello, and welcome to another episode of Collectively Us Unpacking Racism. We are your hosts –

[00:01:17] JRD: Julie Radlauer-Doerfler.

[00:01:18] RC: And I'm Ryon Coote.

[00:01:20] JRD: Collectively Us Unpacking Racism is sponsored by the Historical Fiction Novel, *The Accidental Suffragist* by Galia Gichon. It's available at Amazon, and bookshop.org.

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[00:01:47] RC: Today's show, we have a twist today. We have some questions that were submitted by our listeners for today's topic of behavioral health. And who better to answer some of these questions than our wonderful cohost, Julie. Let's get into it.

[00:01:59] JRD: Thanks, Ryon. So, last time, we talked about COVID. And which really kind of led us into this space about talking about behavioral health, because mental health and substance use issues are pretty prevalent based on what's happened in our world over the past couple of years.

[00:02:15] RC: So, when we last spoke, thank you. But I do believe this is a topic that needs to be discussed. And when we last spoke, we were really focusing on the impact of the pandemic is having on these lower socio-economic communities. What do you think contributes to mental health issues in low socio-economic communities?

[00:02:31] JRD: Well, I mean, that's a really good question. I think that first of all, since pandemic, since COVID, low socio-economic communities have lost more people. So, just the fact that, you know, everybody in those communities knows somebody, loves somebody, could be a direct family member, so that's impacting children or people have lost their spouses, or a lot of people lost their parents. That has to be impacting mental health, for sure.

The other issue is that many people in low socio-economic communities are living day by day. And so, one of the interesting things is right, when the pandemic started, one of the first things that we did as a society is, we mobilized food resources. In the past, it was so challenging for people, you could only go to a food bank on certain days, or certain times. All of a sudden, food was available everywhere, which was a beautiful thing. It really was how we as a nation kind of rallied, and though we couldn't find toilet paper –

[00:03:23] RC: I remember that, or paper towels.

[00:03:27] JRD: We were able to – food lines were available, food was available, because people in low socio-economic communities don't have access. They can't get their basic needs met. So, when you can't get your basic needs met, you're really not going to be thinking about your mental health issues, you're not going to be thinking about seeking treatment or support for your mental health issues. You're thinking about, “Am I going to have lights? Am I going to have food?” So, not having access to financial resources makes things more difficult, which also impacts your mental health.

So, just by virtue of all those social determinants of health, mental health is a piece of that. In addition, though, you have to take into consideration the belief systems of many of the people that live in lower socio-economic communities. This is where that structural racism piece comes in, where it's like, the belief systems about I don't want to use these formal institutions to get support, as well as what's happening in the community with stigma and everything else. So, there's a lot going on there.

[00:04:21] RC: Our listener asked the question, what are some of the issues within those communities with that?

[00:04:24] JRD: Yeah, well, actually, I just completed a research study that talked a little bit about that. I'm happy to share the findings. I was focusing specifically on African-Americans in this study, and what they side with a lot of it comes from historical trauma. Many of the people of African-American descent, they were not thought of as equal. They were not thought of as having the capacity to even have mental health conditions. And so, when the system was designed, the system wasn't designed for them, it was designed for white people. And so, they didn't get support through the system.

Because of the struggles of African-Americans, they were taught not to need help and support. They were just had to be strong and they were taught that if they showed any sign of weakness, it could actually mean death. So, that kind of was passed on from generation to generation. And so, in addition to not wanting to ask for help, also many of the lower socio-economic communities, black and brown communities are very faithful. For example, in the African-American community, they believe that, well, my research shows that they believe that if you're experiencing any kind of mental health issue, you should just go to church and pray it away. But

also, that if you're experiencing a mental health issue, it means you don't have a good relationship with God. So, then it becomes a sign of weakness to discuss mental health.

[00:05:40] RC: It took me until my 30s, to really realize that mental health is just as important as physical health, because it was never discussed in my household. It was something that my parents, especially my grandpa, forget my grandparents, but my parents will just never discuss. I'm not saying that they didn't care about it, it's something for them that they didn't see the importance of it, right? Because they had to worry about making sure there's a roof over their kid's heads. They had to go out and work. They had to do these things, to ensure that the next generation was better off. But at the same time, I don't think they realized that the stressors that they were experiencing, were affecting them and us. Listen, I have wonderful parents. My parents are outstanding. What I'm saying is right, they didn't teach us the importance of keeping our mental health in balance.

[00:06:27] JRD: I think that's so common. I mean, thank you for sharing that. I think that's so common. I don't think that that is specific to black families, or I didn't learn about mental health growing up, either. I think that was the generation. I have to think about how did I get into this field, obviously, it's because, it was something that was important to me that I recognized that I needed some support. When I went through my master's degree, I felt like that was like free therapy. I was learning about it. I learned about my father. All of those things that you do. That was all part of my schooling, which I really appreciated.

But I think that not talking about mental health is something in the past, because if COVID has taught us anything, it's that everybody is experiencing some level of added stress. And for some people, that's what pushes them over the edge and leads them to support. For other people, you just realize, I really need to practice good self-care, so that I can get through this. But because we're dealing with stress, that's everybody's experiencing it, people that are in lower socio-economic communities, that is really an added stressor to them, because they don't have the financial resources. They're worried about putting the roof over their head, and they're experiencing the changes in their life and the loss of family members, and possibly not having a job.

[00:07:48] RC: I have a relative who obviously had mental health issues growing up, and because they were left unchecked, or they said, “Well, you got to pray it out. You got to go to church.” I have nothing against church. I think churches need to be more active, especially black and Hispanic churches need more active in this field and find those parishioners who are in the field to help the other parishioners get over these things and make sure they're getting the right services. But back to my story, so everybody would ignore it, they wouldn't discuss it. Now, this person started to self-medicate. Can you imagine, Julie, getting diagnosed in your 40s with schizophrenia? You've had this all your life. Come on, man. There's a problem here.

[00:08:26] JRD: Ryon, you said so much there. When you think about the institutions that failed your family member, that's the structural racism piece. The research shows that if you have black skin or brown skin, you're less likely to receive support in the school, less likely to receive mental health treatment. You're more likely to be arrested. You're more likely to be in the foster care system. I mean, that's the structural racism piece that's unacceptable and that's what we really need to be working on now. So, it's not either or. It's not that the systems are not designed, it's not that people are not taking responsibility, it's really both and. The systems need to be fixed and we have to figure out collectively how to do that.

And on the personal level, and on the familial level, and on the community level, we have to be able to talk more about mental health. We have to feel comfortable talking about it, and we have to seek help early. The problem is, so one of the big findings from one of the research studies I just conducted around faith is that in the African-American community, if you're experiencing mental health issues, and you go to church, or you go to seek support from a pastor, if they don't support mental health, then you no longer feel that you can get support from that. You can no longer talk about mental health with that pastor, maybe you might not even go to church, because you feel that people are looking down upon you because you're experiencing that. Then you don't feel comfortable going to these formal structures, going to an office and talking to a white person to get therapy. And that's the way the system is designed, which is a whole another issue, right? So, that's when you turn to drugs and alcohol. If you don't have family support or social support, and you don't have access professional support, what's left?

[00:10:02] RC: Churches, whether black, Hispanic, white, whoever they are, that are in the field that work in the field and create a group within the church to help anybody else that's going to

this church who may have issues and are seeking issues from the past in the past and say, you let me turn you to this person who works in the field, because I said it before I'll say it again. There's nothing wrong with having faith, right? Nothing wrong with it. But we know scientifically, what helps people.

So, faith combined with the trained professional provides the best service for that person in this situation, right? The churches, the synagogues, the temples, the mosque, they all have to start identifying those members in their church and engaging them to see if they're willing to be part of a group to help the other members who are suffering from mental health issues. Because in lower socio-economic communities, the church plays a huge role in daily life and does everything. But I'm going to say it again, mental health was not discussed in our home. It was not a topic of discussion in our home.

I remember, when my grandparents, my granddad would say some things that was as crazy. As a kid, you didn't think anything of it. But as an adult, it blows your mind now, because they weren't educated. They did not know. This is all they knew. And you're talking about a generation that grew up when it was a million times more difficult as a person, in a black and brown skin to move through this world. So, for them, they probably had some PTSD, more than likely, and they taught their children what to do to move forward without really teaching them how to really check the mental side of things, because they weren't taught to. I don't get mad at them for that. All I can do is share my story about my personal experience, and how I see somebody who I grew up with a person a couple years older than me, who I saw grew up every day suffer, because he did not get the right treatment. As a child, it wasn't identified. It wasn't reinforced in the home. And as a man, he grew up and developed substance abuse issues. And it took him to be a man in his mid-40s, to really get the proper diagnosis and see what's going on.

[00:12:12] JRD: I mean, it's so difficult, because on one hand, yes, you could be frustrated with your family or frustrated that people weren't able to recognize what was happening, or know what to do about it. But then you also have to look at them, the professional side of it. The behavioral health system needs a lot of work. I mean, I'm not kidding you. Literally, last week, the American Psychological Association came out with an apology for the part that they've played in structural racism. I mean, this is years after George Floyd, 50 years after that the

system identified that there were problems within the system. They're just now coming out and saying, "We contributed to structural racism. All the testing tools out to us through the APA, those are all racist." I mean, they literally just came out with like this 47-page historical perspective of how racism has existed within the American Psychological Associations and within the system.

So, I don't really blame like your parents or whoever within your family, didn't feel that going to a professional to seek mental health care was the way that they were going to get this need met, because the system was not equitable. And in fact, for many people going to seek services was more harmful.

[00:13:27] RC: Exactly. Because then they were seen as something as wrong and if the employer found out or anything else found out or their community found out, they will be seen as weak. I always like to throw history in there. But you know, you look at the history of mental health prior to during slavery, when slaves would run away, they say they had a mental health defect called drapetomania. And then the therapy for it was weapons.

So, mental health, it's throughout the history of this field, just so important to everybody. It has some really messed up checkered past which we need to address and resolve. Some of the questions from our listeners. So, this is a really good one. Julie, I want to ask you this, because this is your wheelhouse. How can people in low socio-economic communities that are experiencing mental health issues get help? If there's no church and the church isn't working, how can they get help?

[00:14:15] JRD: That formal behavioral health system needs to go through an evolution. It needs to look at their internal structures. And that's really what we talked about in the last episode was looking at how do we make changes structurally. So, if I were black, impoverished, living in low socio-economic community, and I was experiencing mental health conditions, me personally, my first place that I would go to would be my social support systems. And that includes your family, your faith, your friends, and that's what my research of is that's how you know, black and brown people prefer to have their needs met. That means we have to be comfortable talking about mental health.

So, part of it is just a language thing too. I might say I'm experiencing mental health issues, that's taboo in a lot of cultures. But if I say I'm feeling really sad or like your relative who is experiencing schizophrenic symptoms, I would want to say what does that look like? What does that feel like? And so, let's just say that it's he hears voices, then having a conversation with you, a relative to say, it's really strange, but I hear voices. I literally hear somebody. Just explaining to somebody what they're experiencing without saying, I have a mental health issue. Because once you put those words, mental health, there is a stigma attached to it. But if I just share with you my experience of what I'm feeling, and I'm vulnerable and willing to do that, which again, a lot of cultures vulnerability, is that okay? So that's a challenge. There are so many barriers to this. But being authentic, and expressing yourself and asking for help is the best thing that somebody can do, who's experiencing mental health issues. And I promise you, the majority of people that you decide to reach out to, are also experiencing, especially now they're also experiencing mental health issues.

Not necessarily to the same caliber, the same level, but we all experiencing some level of added stress, which makes us more empathic to people that are struggling more.

[00:16:05] RC: Especially now.

[00:16:07] JRD: Especially now, talking to people. Just being willing to take that first step to say, "I'm having a bad day." I don't believe I've ever really experienced depression, like clinical depression. But I can tell you over the last year and a half since COVID started, there were days where I woke up with a really heavy heart. The first thing I noticed when I woke up is that my heart was really heavy. I thought this must be what it feels like to be depressed. I can imagine if they did this day, after day after day, to a different level than what I've experienced, that would be true clinical depression, and gave me a lot of empathy to experience that.

[00:16:46] RC: I want to commend you for that, for sharing that, Julie. And I want to thank you for that, the statement about speaking with your circle, right? Either your peers, your circle, your network, and share what's going on. I want to share when I spoke to you a couple days ago about something that was going on with me, and my wife, she's my champion, she's my cheerleader, my wife. I shared with her, and I want to hear from somebody, I don't want to hear other folks I shared with you. I'm just really stressed out on what's going on everything in life

and everything. It's a combination of a lot of things. And I was able to have a conversation with you, have a conversation with my wife, have a conversation with my best friend, and they listen, open up. When you're feeling a certain way, have a conversation with people. Don't internalize it, because then it affects you even more. Have those conversations.

I almost think those lessons, not almost. I know for a fact those lessons that I learned in therapy, about how to really figure out what's going on with me, helps me professionally and personally. I truly believe the same effort that we put into educating people on diabetes and high blood pressure, we also need to put the same effort into educating people on why it's important to speak about what's going on in our lives, and how to have that conversation, and most importantly, how to be a listener, if somebody is having that conversation with you. And not to prejudge and not to say things like, "Well, go to church, or just go work out. Just put it out of your mind and work through it." We love to say these things to people, because we think that's the answer, because that's the way we deal with it. But that may not be the way Ryon deals with it to get ahead.

So, I think there needs to be a concerted effort where we start educating communities who tip all communities about how to have those discussions because we're living in a world right now where our children are the most affected right now. I think the mental health of our children, to me as a father is so scary, because there's so many – I don't want to call them weapons, but there's so many things coming at them left and right to really break down their mental health and their psyche, their self-esteem. Social media, for one of them, all these different things our kids are listening and watching, man. We have to do a better job of protecting them and it starts by us learning how to protect ourselves, and let's learn how to have a conversation about these things.

[00:19:02] JRD: Yeah, I think one of the things that I struggle with around this is that different people seek help in different ways. So, for one person, going and talking to somebody, therapy might be a solution. For another person, going to church and praying might be a solution. For another person, going to the gym, like you mentioned might be a solution. And so, I think, you know, I do a lot of work around self-care, training on self-care, helping organizations develop self-care plans within. I think that that's really important is if people can just try to identify what

are the things that will help them when they're struggling, so that they have those go to things. That's huge.

The next largest group of people that are being impacted by COVID are children. The numbers of suicide rates are way up. It's affecting girls more than boys. We really need to be paying attention to this and trying to figure out a way. But I think about like, why is it affecting our kids so much? Well, first of all, because they're social creatures, and that's what they have, in school spend an issue. But also, they don't have the perspective of years of their lives. I mean, for some of our children who were like a middle school, two years out of their 11 years of life, that's a big percentage of the time that they've been on this earth. So, they're not able to look back and go, "Well, this is just a point in time and things are going to be different a couple of years from now." They're looking at this as like, "I don't like the way that this life is right now, and I don't know how to get out of it." Because there is no getting out of it. We're just all in it together while we're working through everything.

[00:20:29] RC: The world will become more advanced and more things will come at them. We have to do a better job of educating them and sit down with them and let them know it's okay to talk to me. Let me know what's going on. This has been a good topic, Julie. I know I share a lot of personal stuff with this one. But I think, I want anybody listening, I don't care if you're black, brown, you're white, you're Christian, you're Jewish, or Muslim, whatever you are, take your mental health seriously, and talk to your kids if you have children. Talk to your parents about it. Because a lot of our parents are walking around here with mental health issues that are unchecked, because they didn't think it was important.

[00:21:03] JRD: Or just listen. I think that's a big thing, too. If you're feeling that you need support, find somebody that you feel like you can trust and talk to them. And if somebody reaches out to you, don't try to solve the problem for them, just be a listener, because we don't have all the solutions. People are struggling with really challenging issues.

One of the things that I always say this is, "Oh, everything happens for a reason." That's not really helpful. It's really not. So, think about what your response to somebody is going to be when they talk to you. I've really been pretty conscious about not doing that anymore, because that's just me trying to ease somebody's pain, but not being a good listener in the process. So,

that's something I'm working at is like paying attention to my listening skills to make sure that if somebody does reach out to me and does feel comfortable talking to me, that I could just listen and hold space with them and be a support.

[00:22:01] RC: I think, if I had any takeaway from today, I would say to people, if there are people in your life that you feel you can trust and have a conversation with and if something is going on, please have that conversation. Please do. Because the other side of it is much worse. Have a conversation. Holding it is much worse. Thank you. The word escaped me. The phrase escaped me. But have that conversation. Be transparent. Teach yourselves. Teach those new circles how to have those conversations too. That's what we can do as individuals. That's my table of individuals. And as far as the system, I share my cousin's story, how the school system failed him, the penal system failed him, and all these things failed. I think we need to really take a deep, hard look at what we're doing in the system. And the individuals, the people who work within the system, it starts with them, first. Increase your cultural competency, increase your knowledge of working with black and brown people in communities where mental health may not be something that they want to talk about. Go to some of these churches and say, "Hey, we can bring a program to your church." These are small things that we can do without having large government involved to start solving things.

[00:23:05] JRD: Ryon, thank you so much for sharing so much today. I know that our listeners – I'm sure that you have inspired some of our listeners to reach out and talk to somebody, certainly to talk to their children. We are going to provide some behavioral health resources in the show notes. So, if people are looking for somebody that they can call, there'll be links to websites and phone numbers, so they can reach out if they're experiencing a mental health crisis and they want some support.

[00:23:30] RC: Yes, Julie, we'll definitely provide some information about ways people can get the help that they need to move forward. If you look in the show notes, you'll see the link to where you can actually submit your question. We want your questions, because we want to be able to have a real genuine conversation about this with ourselves. But with the listening audience. We definitely, as I mentioned, we cannot do this without our sponsors. So, Julie, we'd love to thank our sponsor once again.

[00:23:51] JRD: Absolutely. *The Accidental Suffragist* by Galia Gichon. Shout out for a great book.

[00:23:57] RC: Thank you guys, and remember, be good to each other.

[OUTRO]

[00:23:59] JRD: That's our show for today. We hope we inspired some of our listeners to engage in meaningful conversation about race. We want to thank our sponsors. Again, in the historical fiction novel, *The Accidental Suffragist* by Galia Gichon, available for sale at Amazon and bookshop.org.

[00:24:17] RC: And most importantly, we want to thank our listeners. Tune in next time as we discuss structural racism and behavioral health. Thanks again.

[00:24:26] JRD: Remember, be good to each other.

[END]