

COVID-19 and Racial Mental Health Disparities

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The COVID-19 pandemic is disproportionately affecting [people of color](#), in terms of [number of cases](#), [mortality rates](#), [pay cuts](#), and [job loss](#). The health and economic devastation of this outbreak, in addition to the distress raised by the recent [killing of George Floyd](#) and many others, are significantly contributing to the [stress of the nation](#) and disproportionately impacting the mental health of [people of color](#). Given that [people of color face social and systemic barriers](#) to engaging in mental health services, it is important to equitably and justly address the anticipated influx of mental health needs in America.

POLICY RECOMMENDATIONS TO CONSIDER

Health insurance coverage and access to paid family and medical leave (FMLA). The loss of health insurance by unemployment due to the COVID-19 pandemic is estimated to raise the population of uninsured Americans from [9% to 43%](#). These recent economic hardships compound existing racial and ethnic disparities in the rates of [people who are uninsured](#) and have [access to paid FMLA](#). These disparities affect not only risk for severe illness from COVID-19 but also access to and use of services for managing related stress. To address these disparities, policymakers could consider:

- Extending health insurance coverage to populations who are underinsured or uninsured, such as undocumented or recent immigrants.
- Increasing subsidies for public and private [Medicaid mental health professionals](#).
- Including allowance for workers to attend mental health appointments.

Mental health services within and beyond public sector clinics. Only [10-20% of people of color](#) with mental health problems receive professional care. Efforts are required to better connect people of color experiencing mental health problems with effective treatment. Possible solutions include:

- Expanding services provided within public sector mental health clinics (e.g., child care, transportation) to reduce barriers to participating in mental health treatment.
- Extending mental health assessment and treatment to non-traditional settings – for example, [screen for mental health problems in primary care](#) to aid early detection and prevention.
- Promoting partnerships between mental health clinics and community organizations (e.g., places of worship, libraries, barbershops) to support societal mental health and wellness.

Stigma toward mental illness and mental health treatment. Stigma is a major barrier to mental health service use. People of color tend to [stigmatize mental illness](#) more than White Americans and are thus [less likely to seek help](#) for mental health problems. Efforts are required to [improve public perceptions](#) about engaging in mental health services to address the societal distress precipitated by the COVID-19 pandemic. Possible actions include:

- Developing large-scale public health campaigns to [disseminate information](#) about mental health.
- Disseminating [fact sheets](#) and other mental health and wellness resources in multiple languages to constituents.

