

Depression in the Black Community

Topaz Sampson, MD
Array Behavioral Care

March 25, 2021



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network

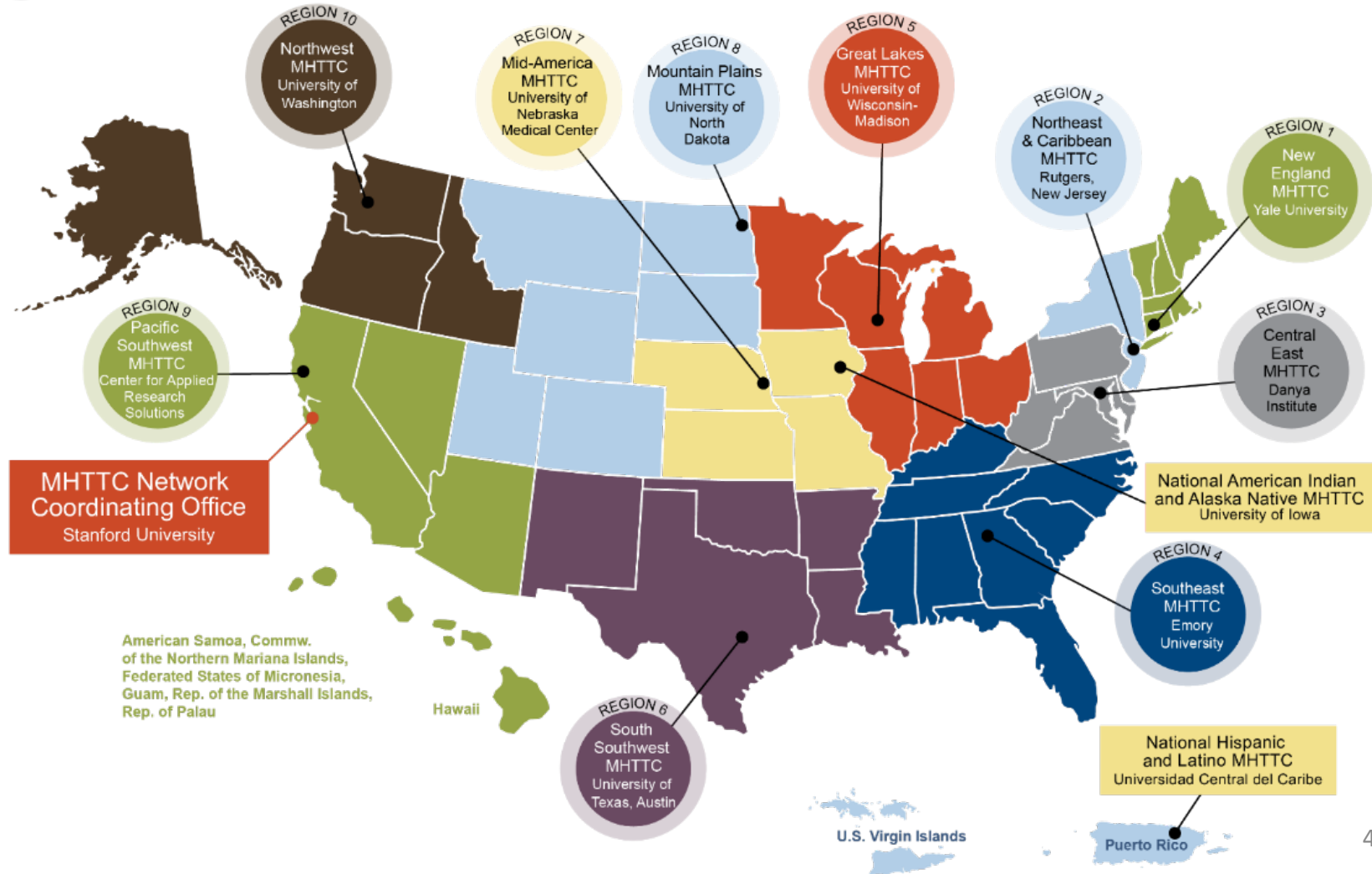


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MHTTC Purpose

The MHTTC Network vision is to unify science, education and service to transform lives through evidence-based and promising treatment and recovery practices in a recovery-oriented system of care.

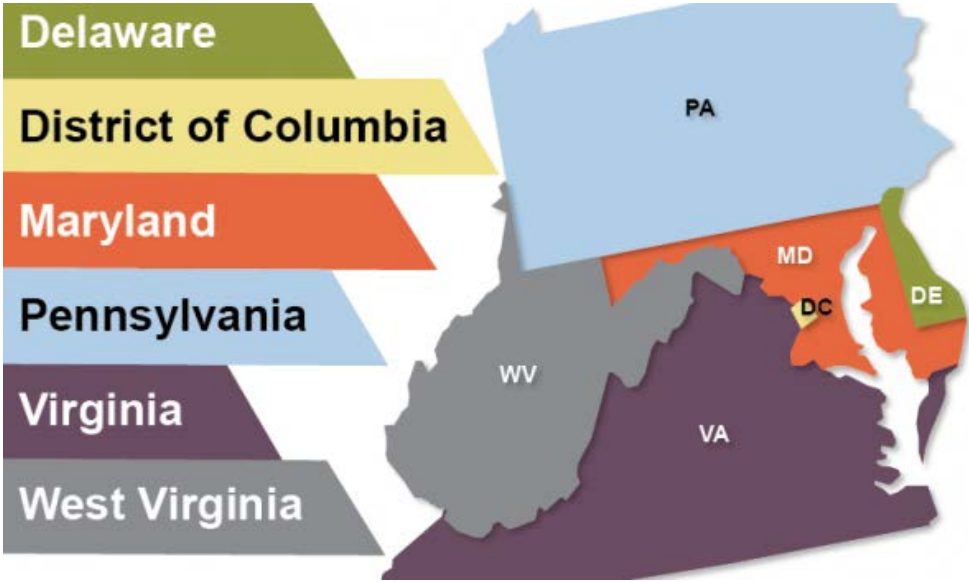


Central East MHTTC Goals

Funded by SAMHSA to:

- **Accelerate** the adoption and implementation of mental health related evidence-based practices
- **Heighten** the awareness, knowledge, and skills of the behavioral health workforce
- **Foster** alliances among culturally diverse practitioners, researchers, policy makers, family members, and consumers
- **Ensure** the availability and delivery of publicly available, free of charge, training and technical assistance

Central East Region 3



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At the time of this presentation, Tom Coderre served as Acting Assistant Secretary for Mental Health and Substance Use at SAMHSA. The opinions expressed herein are the views of the speakers, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

Depression in the Black Community

Topaz Sampson, MD
Secretary, Black Psychiatrists of America

Health Equity Webinar Series

March 25, 2021

Moderator:
Annelle B. Primm, MD, MPH
Black Psychiatrists of America, Council of Elders



COVID-19: Unprecedented Disaster

- Public health crisis and economic suffering in the context of racial strife
- Catastrophic impact on Black and other marginalized communities with disparate levels of exposure, illness, death, and unemployment superimposed on layers of pre-existing inequities
- Distancing from loved ones including those who are sick and dying which intensifies despair
- Rise in anxiety, substance use, and depression



Today's Program

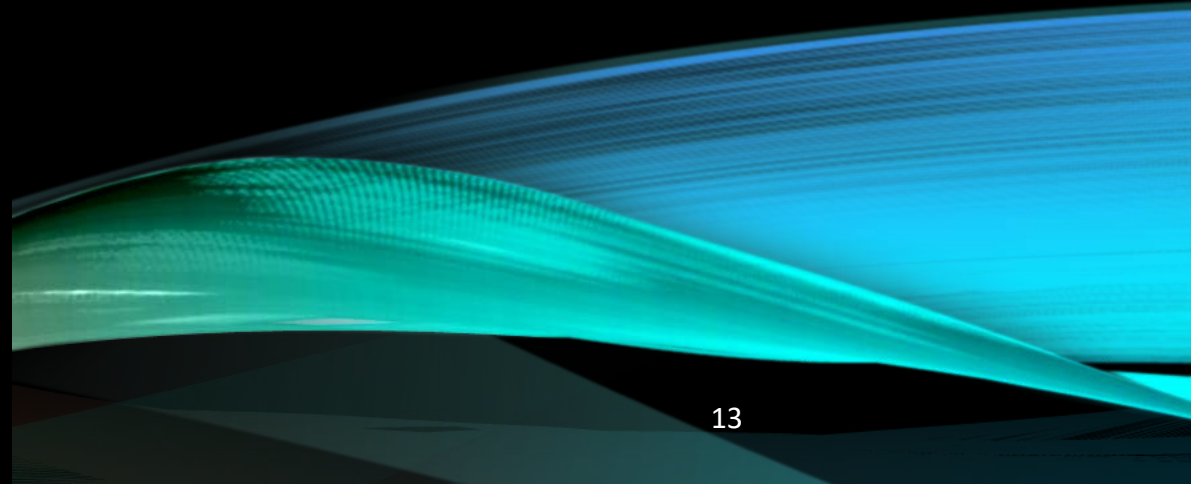
- Special thanks to the Danya Institute for its support of this third of several webinars in the Black Psychiatrists of America Health Equity SME Series
- Today's program features Topaz Sampson, MD, Secretary of the Black Psychiatrists of America





DEPRESSION IN THE BLACK COMMUNITY

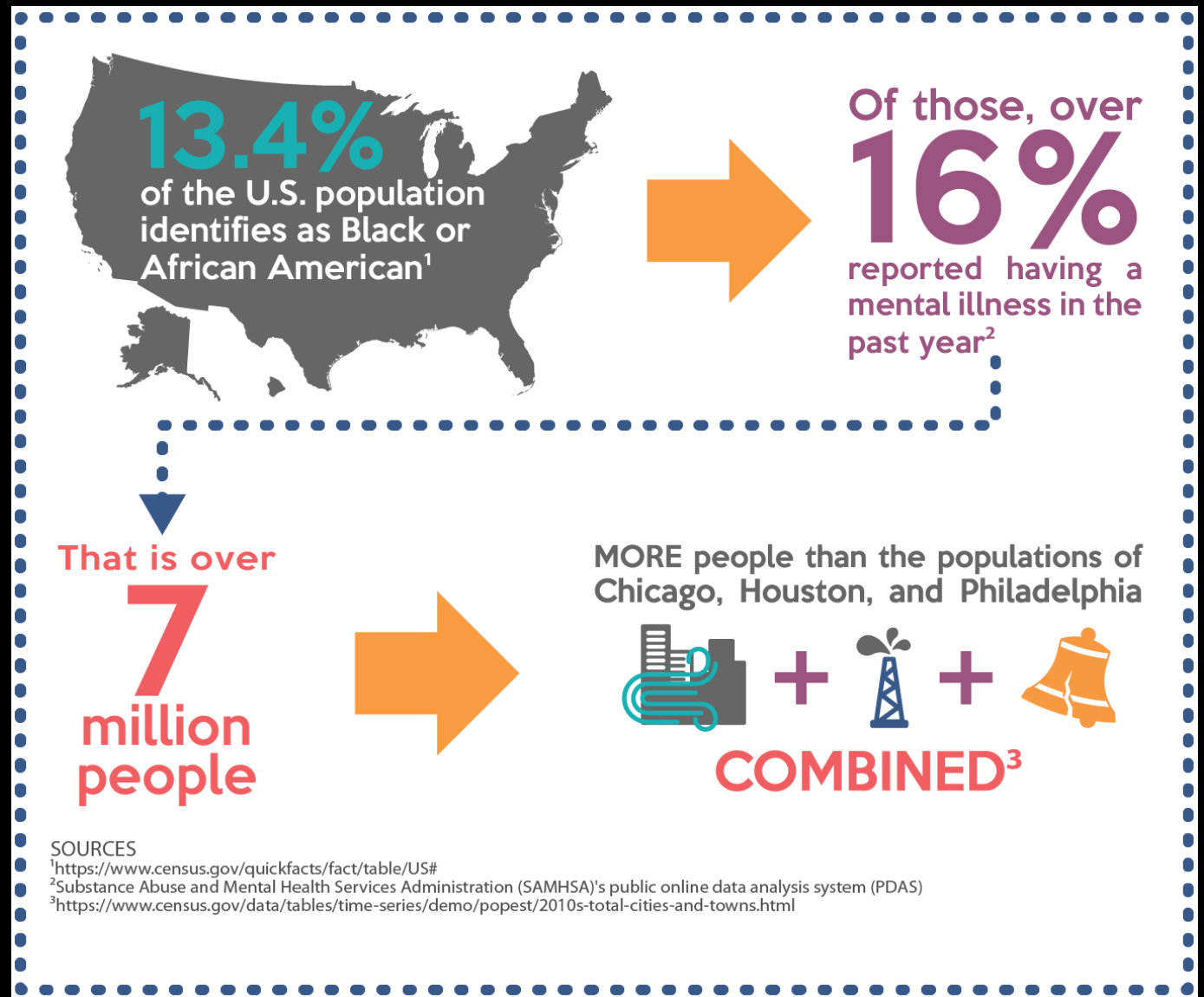
By: Topaz Sampson, MD



OBJECTIVES

- Define Major Depressive Disorder (MDD)
- Identify the signs and symptoms
- Discuss pharmacologic treatment
- Discuss non-pharmacologic treatment
- Review the risk assessment for suicide

- Prevalence of depression is similar between Black and white communities
- Black people face societal pressures that may increase their risk for depression
- Significant differences in the rates of access, diagnosis and treatment → negatively impact health
- Suicide rates among Black youth has increased over the past 20 years
- **MENTAL HEALTH CRISIS** in the Black Community!



WHAT IS MAJOR DEPRESSIVE DISORDER (MDD)?

- Common
 - One in 15 adults (6.7%) in a year
 - One in 6 will experience depression in their lifetime
 - Can occur anytime
 - W>M
 - Heritability (40%) among 1st degree relatives
- Serious Medical Illness → Feel, Act
- Disorder= Impact ability to function work (school) & relationships

CAUSES OF MDD

- Regardless of race, the most common causes of depression include:
 - Genetic Factors
 - Biological Factors
 - Environmental Factors
 - Psychological Factors



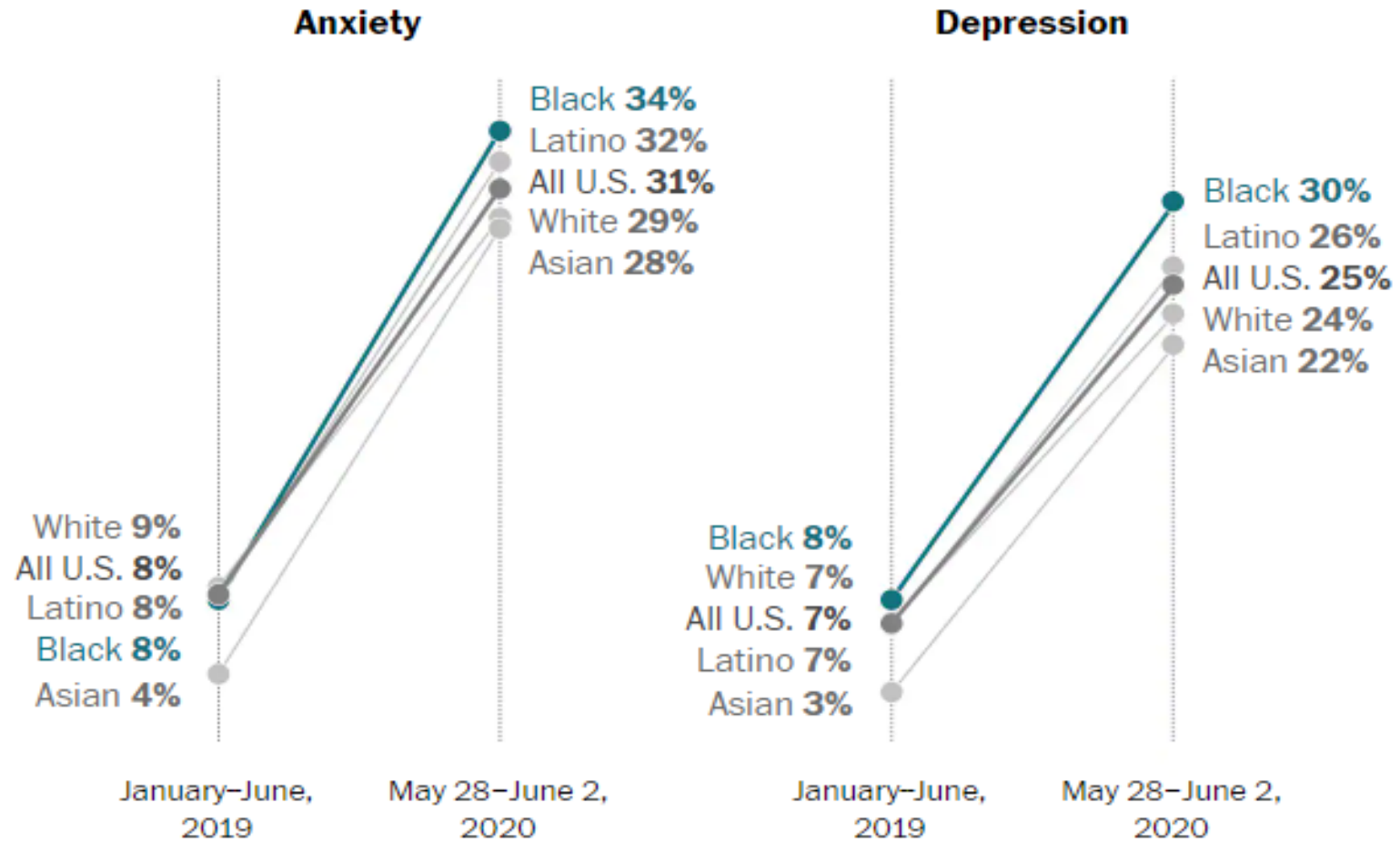
RISK FACTORS FOR DEPRESSION AFFECTING BLACK PEOPLE



- Exposure to racial trauma
- Difficult life circumstances due to racism
- Racial barriers to access to care, including racism from care providers and mental health stigma

Anxiety and depression symptoms have more than tripled since 2019, with black Americans shouldering the heaviest burden

Percent screening positive for anxiety or depression



WHAT DOES MDD LOOK LIKE?

- Low mood
- Anhedonia (low interest in activities)
- Changes in appetite
- Changes in sleep
- Poor Concentration
- Low Energy
- Excessive feelings of Guilt
- Hopelessness
- Suicidal Ideation

WHAT DOES MDD LOOK LIKE?

- Symptoms must last at least 2 weeks
- Must rule out medical conditions (ie thyroid problems)

WHAT DOES MDD LOOK LIKE?



- For Black People, *"Functional Depression"*
- "Going Through the Motions"
- Relying heavily on Alcohol & Drugs to cope
 - Self-medicate
 - Secondary disorder
- Withdrawing from family & friends

TOOLS TO USE TO MEASURE DEPRESSION

- PHQ-9
- Hamilton Depression Rating Scale
- Beck Depression Inventory

		Not at all	Several days	More than half the days	Nearly every day
1.	Little interest or pleasure in doing things	0	1	2	3
2.	Feeling down, depressed, or hopeless	0	1	2	3
3.	Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4.	Feeling tired or having little energy	0	1	2	3
5.	Poor appetite or overeating	0	1	2	3
6.	Feeling bad about yourself — or that you are a failure or have let yourself or your family down	0	1	2	3
7.	Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8.	Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9.	Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

TOOLS TO MEASURE DEPRESSION: PHQ-9

Table 4. PHQ-9 Scores and Proposed Treatment Actions *

PHQ-9 Score	Depression Severity	Proposed Treatment Actions
0 – 4	None-minimal	None
5 – 9	Mild	Watchful waiting; repeat PHQ-9 at follow-up
10 – 14	Moderate	Treatment plan, considering counseling, follow-up and/or pharmacotherapy
15 – 19	Moderately Severe	Active treatment with pharmacotherapy and/or psychotherapy
20 – 27	Severe	Immediate initiation of pharmacotherapy and, if severe impairment or poor response to therapy, expedited referral to a mental health specialist for psychotherapy and/or collaborative management

* From Kroenke K, Spitzer RL, Psychiatric Annals 2002;32:509-521

DEPRESSION IS SERIOUS!

- Can lead to Suicidal Ideation
- How to assess for suicide?...MORE ON THIS LATER!

PHARMACOLOGICAL TREATMENT

- The good news there's treatment!
- Antidepressants – help balance brain chemistry of various neurotransmitters
- Efficacy takes 4-6 weeks
- Recommend treatment for 6 months or more (at least)



NON-PHARMACOLOGIC TREATMENT



- Psychotherapy or “Talk therapy”
 - Cognitive Behavioral Therapy (CBT)
 - Thoughts → Feelings → Actions
- Electroconvulsive Therapy (ECT)
 - 60-80% effective for uncomplicated, but severe mood disorders
 - Used when needing rapid response i.e. suicide or pregnancy
 - Brief electrical stimulation of the brain while under anesthesia
 - Other Brain Stimulation Treatments ie Transcranial Magnetic Stimulation (TMS) and Vagus Nerve Stimulation (VNS)

SUICIDE RISK ASSESSMENT

- Not predicting the future!
- Assessing level of risk: low, moderate, severe
- Risk vs. Protective Factors
- Columbia-Suicide Severity Rating Scale (C-SSRS)



RISK FACTORS FOR SUICIDE

- Known Mental Health Condition
- Previous suicide attempts
- Gender, M>F
- Access to firearms
- Single/Limited support
- Substance abuse (Intoxication)
- Serious or chronic medical illness
- Family hx of suicide



MODIFIABLE VS. NON-MODIFIABLE RISK FACTORS

- Non-Modifiable
 - Gender
 - Family hx
 - Previous suicide attempts
- Modifiable
 - Mental Health Condition
 - Substance Use
 - Access to Weapons
 - Support
 - Serious or chronic medical condition



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BEST PRACTICES!

- Generalized or Eurocentric treatment approaches may not easily align with the Black Community
- Examining how perceived racial discrimination may contribute to depressive symptoms
- Consider that Black patients may feel dismissed/ignored by mental health professionals who misperceive expressions of emotions in Black people
- Educating one self on the experiences of Black patients within the local community
- Using a bio-psycho-social-cultural-political model to evaluate patients
- Keep talk therapy at the center of treatment choices

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THANK YOU!

QUESTIONS?



Upcoming Event with Dr. Topaz Sampson

Anxiety in the Black Community

April 15, 2021

11:00am – 12:00pm

[Registration link](#)

Appreciation



Contact Us



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