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Addressing Mental Health in Communities of Color

Dr. Birnholz:

Coming to you from the ReachMD studios, this is the *Clinician's Roundtable*. I'm Dr. Matt Birnholz. On today's program I'm joined by Saleemah McNeil, a psychotherapist and founder of Oshun Family Center, which is a nonprofit based in the Philadelphia area focused on providing therapy services to women, children, and families from communities of color. Miss McNeil and her colleagues gained both local and national attention for a recent campaign to offer free therapy to black residents of Pennsylvania, New Jersey, and Maryland amid the COVID-19 pandemic and the global protests against racism, both of which have had far-reaching impacts on black communities.

Miss McNeil, welcome to you.

Ms. McNeil:

Thanks for having me today.

Dr. Birnholz:

It's great to have you with us. So, to start, I want to learn a little bit more about your practice and the communities you serve. How did you come to this particular calling in the mental health field?

Ms. McNeil:

I came to this particular calling throughout my own personal experiences with the hospital and medical system and the delivery of my son that took place 14 years ago. With that experience I felt as though I was not treated in a manner that was conducive to me being successful in my post pregnancy, so I was able to utilize that as fuel to be in maternal and child health and wellness realm professionally and then eventually starting my own organization, understanding that we will be addressing the social determinants of health in the intersection of racism and maternal health for the long-term.

Dr. Birnholz:

Interesting. That's a unique specialty if I'm not mistaken, reproductive psychotherapy specifically looking at disparities in mental healthcare. Can you speak a little bit more to that and the need for continuing care and greater attention and awareness?

Ms. McNeil:

Yes. I was actually shocked at what the rates of mortality are for Pennsylvania. The rate for black women are as high as 87.6 per 100,000 births versus our white counterparts that are 23.9 mortalities per 100,000 births for white women, so that is 3 to 4 times higher than our white counterparts, and that is really the basis of why this is such a public health crisis, because when we look at some of the things that go into those fatalities, it starts at the top, and the top being the medical system, the education system. It's all that goes into caring for a woman of color. and going into the healthcare system I'm not a stranger to it because I used to work there. And it doesn't

matter how rich you are, how much education you have, the system in which is treating you does not have the people who are in place who have your safety and your well-being all the time in the forefront, and so those are some of the things that really, really, really impact the relationship with birthing people, especially in the black community, in the medical system.

Dr. Birnholz:

Now, obviously in the field of mental health, services are going to be complex and each patient has individualized needs, but I'm curious, since you opened this practice, what patterns or trends and the types of issues you've encountered on a day-to-day basis?

Ms. McNeil:

Well, because my practice is focused on perinatal mood and anxiety disorders, that's where a lot of my referrals come from, whether they are self-referrals or from medical facilities, so they are very focused on perinatal mood and anxiety disorders, especially depression and anxiety. With the pandemic it has exacerbated those symptoms. because we don't have that sense of community anymore because we're so isolated in our homes, and what I'm seeing is around about the 12th week, especially in the COVID pandemic, women and birthing people are really feeling the effects of isolation, and the symptoms of anxiety are being exacerbated because they don't want to expose their children to that.

Dr. Birnholz:

And how would you say this overwhelming worry, this fearfulness to the traumatic events of the past weeks and months have been internalized and even expressed within the communities that you serve around Philadelphia?

Ms. McNeil:

Primarily, the population of people that I serve is those in the black community throughout all different socioeconomic statuses and education statuses. With the increase of intense racial tensions, it has piled on top of a pandemic, and people are at their wits' end with trying to understand what's going on. Looking at the '60s and the '70s where the Civil Rights Movement began and how our parents and our grandparents were a part of that, it's different from hearing their stories and their experiences to living through history right now, and so a lot of people who I'm seeing now don't fully understand how do we move forward? And so that's why I launched the initiative to treat and provide mental health support to those that are really struggling in this time with the unjust and unrest of the black community after the death of Ahmaud Arbery, Breonna Taylor and George Floyd.

Dr. Birnholz:

And let's dive right into that recent campaign and this mission to provide free therapy to residents in need. Can you speak to what you were initially hoping to achieve when you launched the campaign given this confluence of extraordinary tensions of isolation through the COVID-19 pandemic and, of course, these recent deaths and the extraordinary racial tension that has permeated every community and many around the world?

Ms. McNeil:

Yes. After Memorial Day weekend, the city of Philadelphia was on fire. There were fires literally being set in different areas in different neighborhoods all over the city, and it was playing out live on the news, on Facebook, on Instagram, because people were filming from all different sections of the city, all different angles, and what I had seen was the pain, the hurt and the devastation of my people who did not know or understand how to move forward past the unjustness of the judicial system.

And so I launched this initiative thinking, "I want to help those people heal. I'll ask for \$5,000. I will open up a day that I don't typically do therapy, and I'll see between 8 and 10 people myself." And it took off, and within 24 hours I had \$7,000. I increased the budget to ask for \$15,000, and I onboarded 2 new therapists that were going to help me out with this initiative, and it has just spiraled on, and we are so close to reaching \$100,000, which will help us set our grass roots in Philadelphia by securing a brick and mortar location in 2021.

Dr. Birnholz:

And has this support come from the local area exclusively, or has it been wider reaching? Certainly, it's gotten on the attention spans of people across the country, if not the world, but I want to learn more about where the support has been pouring from.

Ms. McNeil:

The support has been pouring from all over the world. We have gained the support from people in the UK, in the Netherlands, in Sweden, as far as Alaska and Hawaii and all across the nation. I could not have fathomed that this would have been the outcome.

Dr. Birnholz:

For those just tuning in, you're listening to the *Clinician's Roundtable* on ReachMD. I'm Dr. Matt Birnholz, and I'm speaking with Saleemah McNeil from Oshun Family Center in Philadelphia.

So, Ms. McNeil, now that this campaign has taken off beyond the wildest expectations, have there been any unexpected challenges in meeting the very high demand that's come in for these services?

Ms. McNeil:

Absolutely. Gathering my footing and strategically planning for how we are going to hire people and onboard those therapists in a timely manner to help treat the people who are soliciting the services has proved to be a challenge for me. Right now we have approximately 50 people getting services throughout the 8 therapists, but we still have 150 people on a waiting list, so that's been a really big challenge to meet the need of the people. Also looking at creating economic sustainability in growing the brand as we set our grass roots here in Philadelphia, and so making sure that we're being smart about how we are using the funds, making sure that a great portion of our budget is used to provide the services and pay the therapists and meet the needs of the people and also create that sustainability for the organization. But I have a great support system, team, and board behind me that have worked diligently to come up with a plan almost overnight.

Dr. Birnholz:

Certainly, and we can't overstate that. I think within the span of just a few weeks you were suddenly presiding over this administration that's akin to a full mental health hospital type of system and all the components that go into that administratively to figure out how to leverage the support into the most definable and meaningful action. How have patients and their families that you've brought into the practice thus far been responding to the services?

Ms. McNeil:

So far we've gotten a positive response from all the people who are receiving services. I got a little note of somebody who donated through PayPal and it said, "I can't donate a lot, but I appreciate what the organization has done. I am seeing this therapist, and she is amazing, and I don't know what I would have done had I not found this initiative." And I was like, "This is why we do the work," because there are a lot of people in the black community who are very apprehensive about therapy and if it works and what it means and what the process is, so taking away the financial barrier to experiencing therapy I think has given folks a leg up into what the healing process could look like.

Dr. Birnholz:

And we should clarify and be clear about what this therapy offering has actually crystallized into. It's not simply saying, "Come on over to our center, you'll get a session, and we'll call it a day." You are proposing to offer at least 8 free sessions to these patients in need and then continuing on with reduced sliding scale financial setup if the patients need these services and if they require financial assistance. Can you speak to that?

Ms. McNeil:

Yes. What we are doing is giving 8 free therapy sessions, because I feel like that is enough time spent with one individual where you can build a positive rapport, you can understand how this person works and if you like it. And that is not only on the client's perspective but on the clinician's perspective as well. Therapy is a vibe. We have to connect, and I feel like that can be established in 8 sessions. After those are exhausted, they talk to their clinician to come up with a discounted or sliding scale rate to continue beyond that, and then we will be ushering in another cohort after this 8 weeks is finished.

Dr. Birnholz:

Now, looking broadly from that type of campaign, do you see this extending free mental health services taking root anywhere else in the wake of such a powerful response toward your own appeal?

Ms. McNeil:

What's unique about this initiative is you have the experience of being in a private practice, meeting individually with a therapist without some of the environmental stressors that are in some larger agencies.

In some education systems, specifically in the one where I was taught for grad school, we're taught that black people are hard to retain in therapy, are hard to get to therapy and hard to treat in therapy because we're so resistant or not compliant to the service, and so I went out into the world with that lens of thinking, "Okay, if my people are hard or resistant to getting this service, what can I do to make it accessible?" So taking away the financial barrier is one of the things that I've done and I hope other people get the support and they're able to do so people in the black community especially know how valuable the service is.

Dr. Birnholz:

And along that track, are there any pieces of advice that you would give to other health professionals either considering or actively pursuing similar campaigns to address these disparities within their communities?

Ms. McNeil:

For organizations that are looking for a similar campaign to address these disparities in the community, if there isn't a financial barrier and you're just looking to connect and work with those in the black community better, one is acknowledging your own biases, understanding what stereotypes that you have had throughout your life about different cultures and different races and just doing the internal work. You can also understand the effect of stress on black bodies. Weathering, code switching, tokenism, all of those things really do impact how we function on a day-in and day-out basis. And knowing that that really does impact how black people as a whole function in America, and that needs work.

Dr. Birnholz:

Miss McNeil, I could keep you for an hour, but I know you are clearly very busy, so on that closing thought, I very much want to thank my guest, Saleemah McNeil, from Oshun Family Center for joining me to share her insights and experiences. Miss McNeil, it's been a pleasure speaking with you.

Ms. McNeil:

Thank you so much.

Dr. Birnholz:

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