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MPS Endorses the Black Psychiatrists of America and the American Association

of Medical Colleges' Statements on Police Brutality and Racism in America

The Maryland Psychiatric Society (MPS) condemns racism in all of its forms including acts of oppression and murder of numerous Black people throughout America's history.

Over the past few years, we have seen the deadly results of the COVID pandemic collide with the devastating effects of police brutality in black and brown communities. The killings of George Floyd, Breonna Taylor, and Ahmaud Arbery have succeeded many others, including the death under police custody of Freddie Gray here in Baltimore. We recognize these killings as a manifestation of deeply-entrenched racism within law enforcement and more broadly, within our institutions and society at large.

This problem continues and COVID has further spotlighted the disparities between underserved communities of color and affluent white communities. Three years have elapsed since the tragic death of George Floyd at the hands of a Minneapolis police officer. Despite the waning of the widespread protests against police brutality in the United States, the anguish felt by Black individuals when a police officer harms or kills a member of their community persists. Statistics reveal that Black Americans are disproportionately subjected to police violence, with a rate three times higher than their white counterparts, and this grim reality has remained consistent over the years. (NYT) While half of the individuals shot and killed by law enforcement officers are White, Black Americans face a disproportionate rate of police shootings. Despite comprising approximately 14 percent of the U.S. population, Black Americans are killed by police at more than twice the rate of their White counterparts. Similarly, Hispanic Americans also experience police shootings at a disproportionate rate.(post)

Racial violence and police brutality are significantly impacting individuals, families, and communities of color. The victims, their families, and even bystanders are often left with enduring psychological wounds from these incidents. However, there is growing evidence suggesting that the impact extends beyond those directly involved. A 2021 study conducted by researchers analyzed emergency room data from hospitals in five states, uncovering a connection between police shootings of unarmed Black individuals and an increase in depression-related emergency room visits among Black communities.(NYT)

A study conducted in 2018 revealed that the police killing of an unarmed African American led to several days of poor mental health among Black individuals residing in the same state over the subsequent three months. This finding is particularly concerning considering the average annual occurrence of about 1,000 police killings, with African Americans constituting a disproportionate 25 percent to 30 percent of those incidents. According to the study's author, David R. Williams, who holds the position of Florence Sprague Norman and Laura Smart Norman Professor of Public Health and serves as chair of the Department of Social and Behavioral Sciences at the Harvard T.H. Chan School of Public Health, the cumulative toll of these distressing days throughout a year parallels the experience of individuals with diabetes.(Harvard)

On May 1, 2021, in Washington, D.C., it was highlighted that anxiety disorders stand out as one of the most common mental health challenges facing Black emerging adults aged 18 to 29 in the United States. A recent study conducted by researchers at Washington University in St. Louis, presented during the

American Psychiatric Association's Annual Meeting held online, suggests that frequent exposure to police violence among this demographic raises the likelihood of higher rates of anxiety disorders.(APA)

The Centers for Disease Control and Prevention (CDC) estimates that fatalities resulting from the lethal use of force by law enforcement officers (LEOs) constitute at least 4% of homicides in the United States annually. However, there is no comprehensive national database in place to accurately measure or document these deaths. Crisis intervention team (CIT) training, a curriculum designed for LEOs and typically instructed by mental health professionals, is frequently suggested as an intervention to reduce lethal outcomes in police encounters related to mental health. Despite the existence of approximately 2,700 CIT programs nationwide and their operation over several decades, only limited data are available to support the effectiveness of CIT in decreasing lethal outcomes.

While research findings indicate an increase in referrals to mental health services and a decrease in officers' self-perceived likelihood of using force in hypothetical mental health encounters after undergoing CIT, there is a lack of data demonstrating actual positive outcomes of CIT in reducing use-of-force incidents or lethality. Furthermore, the implementation of CIT programs varies widely in scope.

Additionally, the CIT curriculum lacks specific content addressing the influence of race and racism on the potential use of force by LEOs and on the ability of mental health professionals and LEOs to identify mental illness or assess threats. There is no dedicated CIT content addressing structural racism concerning access to mental health services or the risk of patients encountering inequities within the carceral system.(PT)

As psychiatrists, we witness how these mental stressors plague our communities of color and recognize the subsequent toll that depression, anxiety, and PTSD take on individuals of these communities across generations. As we witnessed the numerous protests in Baltimore, Washington, D.C. and around the world, we at MPS recognize that we must take a stand. We condemn violence, police brutality and institutional racism, and are committed to question our practices and listen to people of color in our community.

As we work towards our own action plan, we look to 2 statements for guidance - the press release of Black Psychiatrists of America, Inc. (BPA), dated June 3, 2020 and the American Association of Medical Colleges' (AAMC) Statement on Police Brutality and Racism in America and Their Impact on Health, dated June 1, 2020. We side with the statement from the BPA as a form of solidarity to those who are oppressed and to catapult us into action. Furthermore, we look to AAMC to encourage us to recognize the biases inherent in the medical system and within ourselves in an effort to make long lasting change.

As outlined in the BPA's call for action, we believe the following actions should be taken immediately:

- Declare racism a public health problem and establish national goals for addressing this as a health equity issue. Give priority to addressing the issues of health care disparities including the mental health needs of historically marginalized communities across the US.
- Provide adequate funding for the clinical care, training, and research needed to eliminate health disparities and require racism impact statements for all government funded services and research.

- Establish a governmental multidisciplinary and ethnically diverse commission with representatives from the major health care professional associations in medicine, nursing, psychiatry, public health, psychology, social work, etc., and the faith-based community to provide recommendations to Congress regarding policies on how best to improve the health and well-being of our nation's Black citizens.
- Declare "Civic Mental Health" a national priority and incorporate it into the educational curriculum from K- college, as well as in the training of local, state and national officials, law enforcement, and the criminal justice system.
- Establish police community review boards with power to take action in areas of police misconduct pending formal review by the appropriate authorities. This will offer a level of empowerment when communities feel they have a voice that can be heard.
 - Assure adequate insurance coverage for mental disorders and emotional distress that are the outgrowth of racism, police brutality, discrimination of all kinds and violence.

Over the next year, we are determined to design a plan with specific actions that create meaningful solutions for change and we make a pledge to implement this plan. As leaders of mental health in our state, it is imperative that we ensure that we provide quality and equitable care to our black and brown communities, and that we go beyond that work, by working on the prevention of the social causes that lead to mental health disorders, including racism. The members of the Maryland Psychiatry Society will no longer be silent and complacent as we now come together with the rest of the world to eradicate racism. We will work to ensure law enforcement officers are adequately trained in mental health awareness and receive training about trauma and anxiety.

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