Comparing the mental health between African Americans and Whites in 2019 (before COVID-19) and 2020 (during COVID-19) using NSDUH in the United States

Author: Khulud Khudur DrPH (c), MSLIS, MPH, BBH
Chair Advisor: Dr. Hosain;
TL1 Advisor: Dr. Som Saha

BOSTON CONGRESS OF PUBLIC HEALTH
ACADEMY

Background

- Although African Americans make up roughly 13 percent of the U.S. population, they account for **one in three people** who have been **hospitalized** with COVID-19 and **3.7 times more likely** to succumb to **COVID-related deaths than Whites.**

- The CDC reports that African Americans are dying at more than twice the rate of other races.

- For many reasons, African Americans are at an elevated risk of **COVID-19 exposure** and **related hospitalization** and **death.**

- COVID-19 pandemic has further unveiled the distressful reality of racial disparity in the United States.

- African Americans are bearing a disproportionate burden of **morbidity** and **mortality** due to COVID-19.

- In many cities like Chicago, although African Americans are only **30% of the population**, they make up more than **50% of COVID-19 cases** and about **70% of COVID-19 deaths**.

Background

- "COVID-19 pandemic triggers 25% increase in prevalence of anxiety and depression worldwide"

- African Americans are experiencing trauma and mental health issues for many different reasons during the COVID-19 pandemic.

- These include: Anxiety from not being able to follow stay-at home recommendations to protect themselves from COVID-19 due to their job situation. Separation from friends and family, especially those who are sick or in the hospital. Grief over the loss of friends and family members. Emotional stress of close living situations and finding care for children out of school. Financial stress of health care costs, job loss, and more. Ongoing difficulties accessing health care services.

- This increase in the prevalence of mental health problems
- Coincided with severe disruptions to mental health services, leaving huge gaps in care for those who need it most.

- For much of the pandemic, services for mental, neurological and substance use conditions were the most disrupted among all essential health services

Background

- The U.S. Department of Labor reports that only 18% African Americans have jobs that allow telework, compared with 26% and 32% for Whites and Asian Americans, respectively.

- African Americans are more likely than White people to live in cities and in close quarters, where COVID-19 spreads more easily.

- In addition, African Americans are **twice as likely** as Whites to have **no insurance.** They may worry about the cost of care and avoid seeking health care when sick. These socio-economic pressures and health risks can put African Americans at greater risk for trauma, grief, and other mental health issues.

Background

- What is the specific issue or controversy?
  - Mental health between Whites and Blacks
- How will this study help?
  - Strengthen mental health and psychosocial support services as part of strengthening preparedness, response and resilience to COVID-19 and future public health emergencies. Also adopt the updated Comprehensive Mental Health Action Plan for the future.

Research Question/Aims/Hypotheses

- Are African Americans Adults more likely than Whites to have Mental health issues in the last year 2019 (before COVID-19 pandemic) and during 2020 COVID-19 pandemic?

Methods

- Study Design: Secondary data analysis from the National Survey on Drug Use and Health (NSDUH)
- Study Sample/ Subjects: African American and White 2019 and 2020
- Recruitment (if applicable): NSDUH 2019 and 2020
- Main Measures:
    - Major Depressive Episodes (MDE)
    - Drug use
    - Taking meds prescribe for mood

Methods

Analysis

- Quantitative Methods
- Independent variables: **The primary independent variable of interest is race.** All the indicator (race, sex, insurance, region)
- Dependent variables: **Mental health. Major Depressive Episodes (MDE)**
- Covariables: The primary independent variable of interest is race. All the indicator (race, gender, insurance, sex,)
- The data analysis will be conducted using **univariate analysis** describing the study population. **Bivariate analysis** will be performed using chi-square. Since our dependent variable will be dichotomous we will be using **several logistic regressions.**

Results

```
. tab1 age2

-> tabulation of age2
|
          RECODE - FINAL EDITED AGE |       Freq.       Percent          Cum.
-------------------------------------+----------------------------------------
        7 - Respondent is 18 years old |       1,912          4.47          4.47
        8 - Respondent is 19 years old |       1,769          4.14          8.61
        9 - Respondent is 20 years old |       1,688          3.95         12.56
       10 - Respondent is 21 years old |       1,682          3.94         16.50
    11 - Respondent is 22 or 23 years old |       3,444          8.06         24.56
    12 - Respondent is 24 or 25 years old |       3,731          8.73         33.29
13 - Respondent is between 26 and 29 ye |       3,907          9.14         42.43
14 - Respondent is between 30 and 34 ye |       4,694         10.98         53.41
15 - Respondent is between 35 and 49 ye |      11,134         26.05         79.46
16 - Respondent is between 50 and 64 ye |       4,880         11.42         90.88
17 - Respondent is 65 years old or olde |       3,898          9.12        100.00
-------------------------------------+----------------------------------------
                              Total |      42,739        100.00
```

Results

```
. tab1 irsex

-> tabulation of irsex

    GENDER - |
  IMPUTATION |
     REVISED |       Freq.        Percent         Cum.
-------------+-----------------------------------------------
    1 - Male |      19,932          46.64          46.64
  2 - Female |      22,807          53.36         100.00
-------------+-----------------------------------------------
       Total |      42,739         100.00
```

Results

```
. tab1 newrace2

-> tabulation of newrace2

        RC-RACE/HISPANICITY RECODE (7 |
                       LEVELS) |      Freq.        Percent          Cum.
-------------------------------+-------------------------------------------
            1 - NonHisp White |     25,226          59.02          59.02
       2 - NonHisp Black/Afr Am |      5,475          12.81          71.83
    3 - NonHisp Native Am/AK Native |        546           1.28          73.11
4 - NonHisp Native HI/Other Pac Isl |        228           0.53          73.64
            5 - NonHisp Asian |      2,147           5.02          78.67
    6 - NonHisp more than one race |      1,455           3.40          82.07
                 7 - Hispanic |      7,662          17.93         100.00
-------------------------------+-------------------------------------------
                        Total |     42,739         100.00
```

Results

```
. tab1 coutyp4

-> tabulation of coutyp4

          COUNTY |
  METRO/NONMETRO |
    STATUS (2013 |
       3-LEVEL)  |       Freq.       Percent          Cum.
-----------------+-------------------------------------------
1 - Large Metro  |      19,254         45.05          45.05
2 - Small Metro  |      15,147         35.44          80.49
   3 - Nonmetro  |       8,338         19.51         100.00
-----------------+-------------------------------------------
           Total |      42,739        100.00
```

Discussion/Resources for Coping with COVID-19

- American Psychiatry Association: Coronavirus and Mental Health: Taking Care of Ourselves During Infectious Disease Outbreaks https://www.psychiatry.org/news-room/apa-blogs/apablog/2020/02/coronavirus-and-mental-health-takingcare-of-ourselves-during-infectious-disease-outbreaks
- National Medical Association: COVID-19 Resources https://www.nmanet.org/page/COVID-19-Resources
- NAACP Coronavirus Resources: Report discrimination, tell your story, submit a question, and other resources https://naacp.org/coronavirus/coronavirus-resources/
- ESSENCE Wellness House Virtual Summit: Videos about COVID-19 and how to stay well, including a video with Patrice A. Harris, MD, MA, psychiatrist and President of the American Medical Association:
  - https://wellnesshouse.essencestudios.com/
  - https://wellnesshouse.essencestudios.com/session/ a-look-inside-covid-19

- Crisis Text Line: How to Handle Coronavirus https://www.crisistextline.org/topics/get-helpcoronavirus/#dealing-with-coronavirus-1
- Suicide Prevention Lifeline: Emotional Wellbeing During the COVID-19 Outbreak https:// suicidepreventionlifeline.org/current-events/ supporting-your-emotional-well-being-during-thecovid-19-outbreak/
- World Health Organization: Mental health and psychosocial considerations during the COVID-19 outbreak: https://www.who.int/docs/defaultsource/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_2
- Centers for Disease Control and Prevention: COVID-19 in Racial and Ethnic Minority Groups https://www.cdc. gov/coronavirus/2019-ncov/need-extra-precautions/ racial-ethnic-minorities.html

Conclusion

- Strengthen mental health and psychosocial support services as part of strengthening preparedness, response and resilience to COVID-19 and future public health emergencies.
- Also adopt the updated Comprehensive Mental Health Action Plan for the future.

Q&A

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