



Public Policy Priorities

The overarching priority of the National Coalition for Mental Health Recovery (NCMHR) is to advocate for a recovery-focused mental health system that prevents crisis, protects rights, and promotes social justice, wellness, economic empowerment, and social inclusion.

Goal 2: Promote Racial and Social Justice

Promote racial and social justice and equity in our movement for recovery-focused mental health services by protecting the rights of and promoting the inclusion of people of color, LGBTQIA+ individuals, and multiply marginalized people with mental health diagnoses.

"We don't seek help because people don't look like us"

2/3 of Black people in need of mental health services don't receive care [1].

6% of psychiatrists identify as Black [2].

Black, Indigenous, and other people of color significantly underutilize mental health services compared to their White peers. This is due to various reasons, such as the lack of Black and multiply marginalized mental health providers. Plus, when people of color do seek mental health services, they may receive racially biased and discriminatory treatment [1].

- "50% of people killed by law enforcement have a disability — primarily a psychiatric disability — with Black, Indigenous, and other people of color at the greatest risk." Yet, law enforcement still respond to the majority of mental health crises in the United States [3].
- People with psychiatric disabilities are 16 times more likely to be killed in encounters with police than non-disabled people [4].
- 55% of Black Americans with disabilities, primarily psychiatric disabilities, are arrested by age 28 [5].
- People with mental health conditions, especially those who are people of color, may avoid mental health treatment because of fear of stigma, cultural mistrust, and the significant lack of racial and ethnic representation across mental health services [6].

Heed the voices of people of color, people with mental health conditions, and those at the intersection.

Critical Actions

- 01.** Increase diversity in the mental health workforce by removing barriers to education, training, and certification.
- 02.** Ensure peer specialists and other mental health service providers reflect the composition of the communities they serve.
- 03.** Promote the inclusion of Black, Indigenous, and people of color at the highest levels of every hierarchy and center the voices of those who are the most impacted.
- 04.** Develop better solutions to support people of color with mental health conditions by recognizing the historic and current harmful impacts of police involvement in crisis care response.
- 05.** Involve individuals with lived experience, particularly those who are people of color, in the planning and implementation of alternatives.
- 06.** Expand culturally competent community-based and peer-led mental health services, including non-clinical services like supported housing, ongoing peer support, and supported employment.

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 4. Stout, C. (n.d.). *How mental illness affects police shooting fatalities*. International Bipolar Foundation. <https://ibpf.org/how-mental-illness-affects-police-shooting-fatalities/>
 5. McCauley, E. J. (2017). The Cumulative Probability of Arrest by Age 28 Years in the United States by Disability Status, Race/Ethnicity, and Gender. *American Journal of Public Health*, 107(12), 1977–1981. <https://doi.org/10.2105/ajph.2017.304095>
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