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Goals/Objectives:

During this presentation, we will:

- Recount this author's formative experiences with racial inequity in general medical and mental health settings.
- Investigate the potential benefits of African-American medical providers in the clinical care setting through demographic data.
- Highlight representative updates in medical education and clinical practice to combat racial inequity in health.

Opening Thoughts

- **“Not everything that is faced can be changed, but nothing can be changed until it is faced.”**

-- James Baldwin



Inequality and Medicine



“Of all the forms of inequality, injustice in health is the most shocking and the most inhumane.”

--- Dr. Martin Luther King, Jr., 1966

My Journey



Health Disparities

Message = *Being black is bad for your health*

- ***Why?***
- ***What could be done?***
- ***Was race a proxy for something else?***

Bias and Mistrust



Personal Meaning

My Grandmother

Died during my first year of med school

Cause of death

- Heart failure, multiple strokes
- Long history of hypertension



Personal Meaning

Damon Tweedy – First-year med student

Diagnosed with hypertension 6 months
after grandmother's death

Early signs of kidney disease



NC Student Rural Health Coalition



A Small Town



A Smaller Clinic



A State Psychiatric Hospital



Psychiatry and Stigma



"Is Psychiatry Cool Again?"

Race, Mental Health and Stigma



Similar Stories



*Two **20-something women** present to the ED
following OTC medication overdoses*

Different Outcomes



Patient A (insured) admitted to university unit

- Fewer patients, most have depression and anxiety disorders
- Escorted by nursing staff to unit

Patient B (uninsured) transferred to state hospital

- More patients, many with mania, psychosis, or antisocial PD
- Required involuntary commitment for transport

System-Level Factors: Psychiatry



Race and Mental Health Care

African Americans:

More likely to use emergency services, higher lifetime prevalence of psychiatric hospitalization, more likely to be involuntarily committed.

Separate And Unequal

- In the 1880s, The Eastern Asylum for the Colored Insane (Cherry) and the Western Insane Asylum (Broughton) opened.
- Budget for Broughton >>> Cherry



A Common Scenario

Common Scenario



- A 50-year old black man is referred to a mental health clinic by a general medical provider
- Referral for “stress” or “anxiety” or “depression”
- Requests a “black doctor”

Racial/Ethnic Demographics

2018 U.S. Census Demographics – US vs. North Carolina vs. Durham

	US	NC	Durham
Caucasian/White	60.4	62.8	42.6
Black	13.4	22.2	37.3
Hispanic/Latino	18.3	9.6	13.7
Asian	5.9	3.2	5.5
Native American	1.3	1.6	0.9
Two or more races	2.7	2.3	2.5

Physician Demographics



Black people comprise:

- 13% of U.S. population
- 3.8% of practicing physicians

Mental Health Provider Demographics

Discipline	% Black Providers
Psychiatry	5
Psychology	2
Master's-level Social Work (MSW)	6
Marriage and Family Therapy	2
Advance Practice Nursing (NP)	3

AMA, Physician Characteristics and Distribution in the US, 2010
SAMHSA, Mental Health, United States, 2010

Limitations of data:

- Similar to prior data set, race of provider "unknown/not reported" in 10-20% of sample
- Excludes residents and federal practitioners
- Data drawn from multiple sources with different methodologies
- MSW data in report does not specify the number holding clinical licenses

Does Provider Race Matter?

Meta-Analysis Findings of 154 Studies:
2011 review of client preferences,
perceptions, and treatment outcomes



Of all groups, African-Americans most strongly:

- Preferred to be matched with African-American therapists
- Tended to evaluate such therapists more favorably
- Had "mildly better" outcomes when matched

(Smith & Cabral. *J. Couns Psychol.* 2011; 58:537)

VA Systematic Review



Studies suggest black veterans
may derive benefit from

- Having a black clinician
- Being in a treatment group
with other black veterans

*Saha 2007; Racial and Ethnic Disparities in the
VA Healthcare System: A Systematic Review*

Trailblazing Psychiatrists



Solomon Carter Fuller



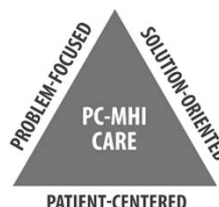
Chester Pierce

How Do We Move Forward?

Primary Care Leadership Track



Integrated Mental Health and Primary Care



A New Approach to Medical Education



A Better Future in NC?



Atrium Health, Wake Forest Baptist Health and Wake Forest University
Announce Intent to Create a Next-Generation Medical School in Charlotte
and a Transformative Academic Healthcare System for the Broader Region.

Tackling Lingering Problems

- MEDICAL EXAMINER
- **Your Medical Chart Might be Biased. Here's What Doctors Should Do About It.**
- Racial disparities in health outcomes are complicated, but this is one place to start.
- By Danielle Ofri
- May 30, 2018



Tackling Lingering Problems

- J Gen Intern Med. 2018 May;33(5):685-691.
- **Do Words Matter? Stigmatizing Language and the Transmission of Bias in the Medical Record.**
- Johns Hopkins University School of Medicine



Role of Narrative Medicine

Competence vs. Humility



Rita Charon



Sayantani DasGupta

Parting Thoughts

**"If I cannot do great things, I can do small
things in a great way."**

--- Dr. Martin Luther King, Jr.



BLACK MAN
IN A
WHITE COAT



A DOCTOR'S REFLECTIONS
ON RACE AND MEDICINE
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