Mental Health of Ottawa’s Black Community

About the Study:
Using a mixed-method approach – a total of 130 people from Ottawa’s ACB community participated in surveys (n=100) or face-to-face interviews (n=30) conducted by Ottawa Public Health. Study explored facets within four broad themes.

Sociodemographic Profile of Study Participants
- **AGE**: Under 40 (87%); Over 40 (13%)
- **GENDER IDENTITY**: Male (44%); Female (54%); Non-binary/Other (1%)
- **LANGUAGE**: English (75%); French (2%); Both (23%)
- **BORN IN CANADA**: Yes (34%); No (64%)
- **Socio-Economic Status**: Employed or Self-employed (74%); Income less than $60K (43%); $60K-90K (10%); Over $90K (15%)

There is a lack of representation in current data on the perceptions, experiences and needs of Ottawa’s ACB community in accessing mental health services. This study was designed to address gaps in our understanding of the barriers to access, which are both structural and systemic in nature. Findings reveal a number of significant obstacles: stigma, rooted in cultural sensitivities and racism, employment and financial security, and lack of access to care providers with cultural competence or similar cultural and racial identity, among others.

Beliefs and Perceptions of Mental Health

- **Six-in-ten (59%)** are ‘knowledgeable’ or ‘very knowledgeable’ about mental health (self-assessed)
- 3/4 feel ‘worried’ or ‘sad’ when they hear that someone has a mental illness

**Protective and Risk Factors**

**Protective** factors that ACB people identified as important to maintain good mental health
- Employment and financial security
- Secure housing and access to social services
- Support from immediate family and health care providers
- Representation and a sense of belonging
- Faith and spirituality

In Ottawa and Canada, one of the things that is really hard for me is racism and oppression. It’s so difficult to see people consistently striving and working and just feeling like we can’t get ahead because of the system. It is really overwhelming and that creates a lot of hopelessness which is one of the signs of depression. (Male, 50-59)

- 9/10 feel connected to their community (‘very strongly/strongly/somewhat’)

**Risk** factors that may increase the likelihood of adverse mental health outcomes for ACB people
- Financial instability and absence of upward mobility
- Stigma, racism, discrimination & daily microaggressions
- Service providers not understanding our needs
- Service inequities, police brutalities, trauma & injustice
- Witnessing violence in the community
- Addiction

- 48% have experienced some prejudice or unfair treatment in the past 12 months.

72% In ACB community rate own mental health as somewhat good/excellent

3/4 feel ‘worried’ or ‘sad’ when they hear that someone has a mental illness

6/10 Six-in-ten (59%) are ‘knowledgeable’ or ‘very knowledgeable’ about mental health (self-assessed)

66% agree most people think less of a person who has a mental illness

40% agree taking treatment for a mental health problem is a sign of personal failure

91% attribute the cause of mental illness to difficult experiences. 69% also believe that genetics plays a part.

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Over $\frac{1}{3}$ of survey respondents had tried to access mental health services, either for themselves or on behalf of someone else.

Most ACB people would likely access mental health services through:
- **55%** Hospitals
- **50%** Community Health Centres
- **30%** Faith-based Centres
- **29%** Private Clinics

**Facilitators**
- A provider who understands one’s needs: 74%
- Having culturally sensitive staff: 71%
- Providing affordable services: 71%
- Ensuring easy access: 59%

**Barriers**
- Cost of service: 66%
- Provider not understanding needs: 57%
- Long wait times: 49%

**Perceived Facilitators and Barriers to Mental Health Services (in order of frequency)**

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Nearly $30\%$ of those who tried to access mental health services felt prejudice or negative attitude towards them from their service providers.

Providers with similar cultural or racial backgrounds are under-represented in the system, leading to longer wait times for ACB people which exacerbates the situation, sometimes with extremely tragic outcomes.

**Issues included:**
- Provider not understanding needs: 66%
- Long wait times: 57%
- Cost of service: 49%

Participants described instances encountering providers whom they felt were dismissive and disrespectful – they felt rushed through their appointment. This leads to other critical issues whereby clients leave without a clear understanding of the instructions and explanations being given by providers.

"I perceived a negative attitude about me based on my sexual orientation and based on my race. I feel that those types of prejudices exist and that they compound my experience because of pervasive homophobia and anti-Black racism that is both conscious and unconscious."

(Male, 20-29)