African Americans in the United States are less likely to receive accurate diagnoses than their Caucasian counterparts. Schizophrenia, for instance has been shown to be over diagnosed in the African American population.

Culture biases against mental health professionals and health care professionals in general prevent many African Americans from accessing care due to prior experiences with historical misdiagnoses, inadequate treatment and a lack of cultural understanding; only 2 percent of psychiatrists, 2 percent of psychologists and 4 percent of social workers in the United States are African American.

African Americans tend to rely on family, religious and social communities for emotional support rather than turning to health care professionals, even though this may at times be necessary. The health care providers they seek may not be aware of this important aspect of person life.

Mental illness is frequently stigmatized and misunderstood in the African American community. African Americans are much more likely to seek help though their primary care doctors as opposed to accessing specialty care.

African Americans are often at a socioeconomic disadvantage in terms of accessing both medical and mental health care: in 2006, one-third of working adult African Americans were uninsured in the preceding year.

Experiences of mental illness vary across cultures, and there is a need for improved cultural awareness and competence in the health care and mental health workforce.

Across a recent 15-year span, suicide rates increased 233 percent among African Americans aged 10-14 compared to 120 percent among Caucasian Americans in the same age group across the same span of time.

Somatization—the manifestation of physical illnesses related to mental health—occurs at a rate of 15 percent among African Americans and only 9 percent among Caucasian Americans.

Some studies suggest that African Americans metabolize some medications more slowly than Caucasian Americans, yet they often receive higher doses of psychiatric medications, which may result in increased side effects and decreased medication compliance.

Social circumstances often serve as an indicator for the likelihood of developing a mental illness. African Americans are disproportionately more likely to experience social circumstances that increase their chances of developing a mental illness.

African Americans comprise 40 percent of the homeless population and only 12 percent of the U.S. population. People experiencing homelessness are at a greater risk of developing a mental illness.

Nearly half of all prisoners in the United States are African American. Prison inmates are at a higher risk of developing a mental illness.

Children in foster care and the child welfare system are more likely to develop mental illnesses. African American children comprise 45 percent of the public foster care population.

Exposure to violence increases the risk of developing a mental illness; over 25 percent of African American children exposed to violence meet criteria for posttraumatic stress disorder.

With the implementation of various programs and innovations, African Americans’ patronization rates for mental health services may be improved.

Programs in African American communities sponsored by respected institutions, such as churches and local community groups can increase awareness of mental health issues and resources and decrease the related stigma.

Programs that improve enrollment rates in safety net health care providers can result in increased mental health care due to improved mental health coverage in the African American community.

Encouragement in the community to join mental health related professions can increase the number of African American mental health care providers and increase social sensitivity among the provider community.

Overall sensitivity to African American cultural differences, such as differences in medication metabolism rates, unique views of mental illness and propensity towards experiencing certain mental illnesses, can improve African Americans’ treatment experiences and increase utilization of mental health care services.