

Speaker 1 ([00:00](#)):

Did we accept that last year 44,000 people took their own lives twice, as many as lives that were taken. And we knew that our mental health programs in our country is inadequate. And the whole idea of separating the head from the body and treating mental health over there as if the head is completely detached from the body was one of the mistakes that must be corrected in health and healthcare. In the 20%, the American heart associations mission is to be a relentless force for a world of longer healthier lives. And our pursuit of that mission. We're having some amazing conversations along the way. Welcome to the special edition series on equity, honoring the life leadership and legacy of Bernard J Tyson. These are the stories of the relentless.

Speaker 2 ([01:07](#)):

This is the social equity series honoring the legacy of Bernard J Tyson. I'm Tanya Odom. I'm an aha volunteer. And I'm also my day job, as I've been saying is a diversity equity and inclusion consultant. It's my honor, and privilege to be continuing this important conversation, really to honor and highlight the legacy and work of Bernard Tyson. This episode is about how inequity impacts mental health and wellbeing. And here's what we know from a research perspective. The state of mental health in our country is increasingly fragile. Their percentage of adults with mental illness who are uninsured, has increased. There are still unmet need for mental health treatment among youth and adults. Suicidal ideation among adults is increasing. And of course the pandemic of COVID-19 has impacted the number

doctor. Can you share with us any research or information about the correlation between racism, structural racism and mental and physical health?

Speaker 3 ([04:30](#)):

Oh, absolutely. I mean, there's are this notion I mentioned earlier of total health, which is mind, body and spirit. One of the elements that's embedded in that is again, what people experience on a day-to-day live basis. And while people have had, uh, a reluctant ability to, uh, some people have had a reluctant or reluctance to acknowledge the presence of racism's a day in an interpersonal way in a, in a structural way or more, is more damaging to your question in an internalized way where people because of longstanding and recurrent exposure to, uh, oppression and discrimination begin to internalize the bleeds to start thinking there's something wrong with them, as opposed to something wrong with the society and the belief systems of people they're interacting with. And so what it amounts to from a medical model standpoint is ongoing, uh, almost unrelenting exposure to stress and stress as an important role in the human body, uh, in mind.

Speaker 3 ([05:27](#)):

Uh, but when it is excessive and continuous, it then begins to have a toxic impact. And there's been increasing research in this area to show that in terms of mental health, depression, uh, uh, people, uh, uh, having panic attacks, uh, and then from a physiological standpoint, uh, also some evidence through

Bernard about four and a half years ago when he gave me the opportunity to help lead a national

that includes, um, things for young people and teenagers as well. And I think they're today more than a hundred thousand people have taken the self screening tools for depression on the website. I think also related to this is, you know, as the pandemic continues to really impact our lives, we have recently, um, also there's evidence to really support how physical health again is tied to mental health. So there's a recent study that, um, I just read this week published in the Lancet psychiatry journal, where after analyzing the electronic medical records of, of 69 million people in the United States, including more than 62,000 cases of COVID-19, they found that within three months following testing positive for COVID-19 one in five survivors recorded having a first time ever diagnosis of anxiety, depression, or insomnia. So it was really, you know, a stark reminder to us about how our physical health and our emotional health are intertwined. And Bernard was really the trailblazer. Um, in regards to this,

Speaker 2 (13:19):

Thank you for talking about how related this is to the current climate. Um, in one of the other interviews, we talk about that too, that this mental health awareness, right? This, this awareness to focus on that, particularly those who are impacted by COVID and, or, um, you know, having I live in New York city as, as people have heard in the other interviews and what that has meant right. Living in New York city with people around me, either being positive or losing people to COVID. So how do we keep that top of mind versus saying, Oh, no, I have to keep going. That that's part of my wellness and awareness. So you said this, and I think you talked about his leadership and pioneering leadership. What do you think his legacy will be as it relates to mental health? And how could we build upon it, this website that you mentioned, and I'm so glad you sort of, you know, talked about it because I hope that people will go and look for it after they listened to you. I'm curious, what else do you think his legacy will be and how can we continue in our own lives to build on it?

Speaker 4 (14:16):

I love this question because for an AR really did, um, set up a legacy. He really challenged the greater Kaiser Permanente community to think outside of the norm. And he asked everyone to submit ideas for how the organization could have a truly big impact on the community. And after receiving thousands of ideas, mental health, and wellness really Rose to the top, and it became a strategic priority and a focal point, um, especially from some very new and exciting work focused on adverse childhood experiences or what we call ACEs. So the national data shows that at least 38% of children have experienced at least one adverse childhood experience. And we know that preventing ACEs supports children's and families across racial, ethnic, and socioeconomic groups that earlier Seminoe research that Kaiser Permanente did showed us how these negative and traumatic experiences during childhood have that direct relationship with poor health later in life.

Speaker 4 (15:24):

So for instance, we, a few of the things that we learned, those with four or more ACEs are 10 times more likely to use IB drugs. Those with six or more ACEs have a 20 year shorter life expectancy that's big. And those with four or more ACEs are 12.2 times more likely to attempt suicide. And in addition to that, these childhood (o)-9.6 8.9 (e)-3 (.)-1 (rc)-1.9 (h)2.3 (w T (h)2.2 0.7 (i)(i)2.(f)13.5)5.2 (a)25ni)TJ-0 (f)10.2 (d)5.3 ()TJ-0.001 dr inoe likhho likhrahlin Aelowh a-2.9 (h)2.2 ((e)-3 TJT (ab (g)2.5 (s9n)13.1 (o)4.2)11 (e)-.1 8)-3odws9nh (e)-3 al (rie)-3 (

affecting not only the children, but also, um, the adults who are working really hard to care for those children.

Speaker 4 ([16:40](#)):

I was just going to do? Let me, let me just come in because, um, I think it's important and I don't know where this fits in, um, DHEA, because we interviewed Churchwell who also talks about social determinants of health. So I just, DIA can you tell me where this fits in? Can I mention that interview and then if so,

Speaker 5 ([20:56](#)):

Absolutely because ultimately we're going to see a through-line of issues and themes happening throughout these conversations. So, um, feel free to it's okay. If things repeat themselves, because they're all still true and everybody may not hear all the episodes, you know,

Speaker 4 ([21:16](#)):

So, cause I thank you for outlining, um, the ACEs so that people have a better understanding of them. You also mentioned trauma a little bit earlier. Can you talk a little bit more about trauma and the impact trauma has on us physically? Sure. So, you know, we know people experienced trauma, they, um, have a

ceremony for Bernard that was held at the chase center in San Francisco. And the event was produced and staffed and manage all my KP employees and, you know, being able to participate in that way, you know, to, um, it really provided a meaningful Avenue, both for people to honor Bernard, um, but also to begin a very important healing process. So, um, we had other ways that employees were supported as well. We had, um, really encouraged our managers and team leaders and staff meetings to have, we

I used to argue early on that it was about equality that everybody has to be treated equally. And I later discovered that's not the right framework. That's not

Speaker 2 ([33:07](#)):