Statement on Systemic Racism and Mental Health Disparities and Commitment for Action
Touchstone Mental Health Board of Directors and Agency Leadership
November 2020

2020 has been an extraordinarily challenging year by any standard. Against the backdrop of a pandemic and the worst economic crisis since the Great Depression, systemic racism and police brutality have had a profound impact on Minnesota, our nation, and our world. George Floyd's horrific murder in May on the streets of Minneapolis set off shockwaves around the globe as millions stood up to demand justice and call for change.

The U.S. presidential election has added another layer of turbulence to a nation already grappling with a historic convergence of challenges. While we are hopeful that the election of Joe Biden and Kamala Harris will create more meaningful progress toward equality, we also recognize that no matter who is in the White House, there is much work to be done. The past several months has been a painful and shocking reminder of just how far we still must go to create a more just and equitable society.

Research indicates that racism and discrimination adversely affect both physical health and mental health.[1] At Touchstone, we believe that recovery from mental illness requires a focus on whole-person wellness, not simply treating mental illness in isolation. We also understand that throughout history, Black, Indigenous and people of color have been repeatedly traumatized by racism and racist structures and these issues deeply affect the whole-person wellness of those we serve. Upwards of 39% of our clients[2] are from groups that are traditionally affected by racism; therefore, our focus on the whole person demands that we also address the impact of racism.

Additionally, disparities exist in access to mental health care, and these disparities are quite literally a matter of life and death. In the Advancing Health Equity in Minnesota report, the Minnesota Department of Health found that people with serious and persistent mental illness die, on average, 25 years earlier than those who have not had that experience.[3]

As a community mental health organization, Touchstone is committed to helping people recover from mental illness and develop the skills they need to live well in their communities. We are working toward a future that is equitable and safe for everyone. And we are actively working to identify and dismantle bias in the mental health system. Here is how we're taking action:

• We commit to continuing our work in our community to improve access to mental health services and reporting on our impact.
• We commit to working with our partners in the cities and counties in our community to improve the response to mental and behavioral health crises and reducing our reliance on 911 for a police response.
• We commit to on-going diversity, equity and inclusion (DEI) training for our staff and board of directors and reporting on this initiative. This education will cover topics such as systemic racism and other forms of bias and culturally responsive care.
• We commit to examine, implement, and report on human resources practices that focus on

improving the recruitment and retention of individuals that are Black, Indigenous or people of color.
• We commit to continue to diversify our leadership staff and board of directors and reporting on our progress in our annual report.

We recognize that solutions for deeply entrenched issues, such as systemic racism, are not fast or simple. But we remain committed to acting as a force of positive change in our community, working for wellness, justice, and peace.

Signed,

Touchstone Mental Health Board of Directors

Erica Taylor-Radtke, *Chair;* *Bethany Burzynski*, *Vice-Chair;* *John Fritz*, *Treasurer* *David McGraw Schuchman*, *MSW, LICSW (Emeritus Inactive), Secretary;* *Jamal Adam*, *Ph.D.;* *Gena Braaten*; *Lyndsay Capeder;* *Christine Clifford*; *Nikki Hill*; *Ann Marie Johnson*, *MA, PHR;* *Antonia Johnson*, *BSW, MPNA;* *Harvey D. Linder*, *Ph.D., LP;* *Sanchayita Ray;* *Liina Roth*; *Pia Teabout*; *and* *Ben Weisbuch*, *Esq., MA*

Touchstone Mental Health Leadership Team

Ellie Skelton, *MA, CEO / Executive Director;* *Chris Tomshine*, *BA, CFO / Vice President of Finance;* *Khu Thao*, *PsyD, LICSW, LP, Vice President of Community Mental Health;* *Michelle Wincell O'Leary*, *MA, LICSW, Vice President of Community Housing Services;* *Deb Hesli*, *LICSW, Director of Housing Innovations & Intentional Communities;* *Kari Scanlon*, *PHR, Director of Human Resources;* *Michele McGee*, *BS, Director of Operations;* *Anne Boone*, *LMFT, Director of Case Management/ Care Coordination;* *Deb Gruel*, *LSW, Director of New Hope Apartments;* *Katie Muehlen*, *LICSW, Director of Rising Cedar;* *Keara Nadeau-Grandy*, *MSW, LICSW, Director of Residential Treatment Bloomington;* *Linda Stenstadvold*, *MSW, LICSW, Director of Lyric Lane Residential Treatment & Crisis Stabilization;* *Linda Olsen*, *LICSW, Director of Residential Treatment Minneapolis and* *Chris Westergaard*, *MSW, LGSW, Director of Minnehaha Commons*

1. U.S. Department of Health and Human Services. (2001). Mental Health, Culture, Race and Ethnicity. Retrieved from: http://www.ncbi.nlm.nih.gov/books/NBK44243/
2. Touchstone Mental Health. (2020). Touchstone Mental Health 2019 Annual Report. Retrieved from: https://www.touchstonemh.org/wp-content/uploads/2020/09/Annual_Report_2019_web-1.pdf
3. Minnesota Department of Health and Human Services. (2014). Advancing Health Equity in Minnesota: Report to the Legislature. Retrieved from: https://www.health.state.mn.us/communities/equity/reports/ahe_leg_report_020114.pdf