<u>The scandal of BAME mental health</u> <u>inequality</u>

When I began to look into the topic of BAME mental health, what surprised me was how little research had been done into it. There is even less when it comes to intersectional groupings. Even with the information that there is, it's not widely accessible or 'showcased'. I got the impression, from an initial trawl of the Internet, that the subject isn't deemed to be particularly 'headline grabbing.'

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However, I know, from anecdotal evidence and my engagement with some of the key thought leaders in the realm of mental health, that there is inequity that needs to be evaluated and addressed.

I've heard from people like:

Ameen Marquis, a Head Teacher who is a regular speaker on male BAME and child migrant/refugee mental health



Patrick Regan, founder of urban youth work charity XLP and mental health charity, Kintsugi Hope



Aasiyah Faryal, a presenter and producer who speaks about her experiences of mental health in the Arab and Asian community



In addition, after many hours of reading research papers, Government reports and statistical analyses, I've come up with some facts that should be 'headline grabbing' but are nowhere near the front page*.

- 1. **PTSD is higher in women of black ethnic origin** and this is related to the higher levels of sexual assaults that they experience[1]; however, women of black ethnic origin are less likely to report or seek help for assaults or trauma.[2]
- 2. Women of Pakistani and Bangladeshi origin are at an elevated risk of schizophrenia.[3]

- 3. BAME people are more frequently subjected to involuntary psychiatric hospitalisation than others, particularly young, black men.[4]
- 4. Black adults have the lowest treatment rate of any ethnic group, at 6.2% (compared to 13.3% in the white British group).[5]
- 5. People from black ethnic minority backgrounds to have a higher prevalence of psychosis compared with the white majority population.[6]
- 6. More than one in five Black, Asian and minority ethnic LGBT people (22 per cent) have experienced an eating disorder in the last year compared to 11 per cent of white LGBT people.[7]
- 7. Particular communities at higher risk of attempting to take their own lives include 8 per cent of Black, Asian and minority ethnic LGBT people, 11 per cent of non-binary people and 8 per cent of LGBT disabled people (compared to one in twenty within the general adult population).[8]
- 8. Asylum seekers and refugees are more likely to experience poor mental health than the local population, including higher rates of depression, PTSD and other anxiety disorders.[9]
- 9. Asylum seekers are five times more likely to have mental health needs than the general population and more than 61% will experience serious mental distress.[10]
- 10. More than half of trafficked children (56%) screen positive for depression, a third (33%) for an anxiety disorder and a quarter (26%) for PTSD.

The Liberal Democrats have been fighting for parity between physical and mental health services for a long time and our pledge is to fund mental health provision through adding 1p in the pound to income tax.

This is core to our beliefs.

So, as voters, members, supporters and candidates, what can we do to make a difference when it comes to the treatment of BAME groups within the mental healthcare system?

As Liberal Democrats, let's be the ones exposing the scandal of BAME mental health inequality and leading change in this area.

Here are some ideas:

- Join the Liberal Democrats we are committed to improving mental health provision and are committed to ending the stigma and shame that too often surround discussions on mental health. If you're already a member consider joining Liberal Democrat Campaign for Race Equality and benefit from being part of a team that is committed to change making in this area.
- 2. If you have any expertise in this area, contribute to policy making by joining a policy working group or working on a Motion on this subject.
- 3. **Connect with mental health charities and activists in your area** and support their cause by campaigning on local BAME mental health issues.
- 4. Write to your local newspaper about how this has affected you or people

you know.

- 5. Contribute to radio and telephone call-in shows and comment on the subject.
- 6. Contact me to participate in/attend a panel discussion I'm organising in relation to migrant women this Summer (details to be announced shortly).

When I've spoken to people who've been personally affected by the 'patchy' levels of quality in BAME mental healthcare, I've been struck by three things that seem to affect BAME groups more than others:

- 1. The social isolation they've experienced within their own communities
- The stigma attached to having a mental illness from their own communities
- 3. The perception, by healthcare professionals, that they would largely '...be looked after by their own'.

Something has to be done about this - and it has to be done now.

As Liberal Democrats, let's be the ones exposing the scandal of BAME mental health inequality and leading change in this area.

[1] Black, M.C., Basile, K.C., Breiding, M.J., Smith, M.J., Walters, S.G., Merrick, M.T., & Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 summary report. US Department of Health and Human Services, National Center for Injury Prevention and Control, & Centers for Disease Control and Prevention. Retrieved from cdc.gov/violenceprevention/nisvs/ [Accessed 23/08/16].

[2] Ullman, S.E., & Filipas, H.H. (2001). Predictors of PTSD symptom severity and social reactions in sexual assault victims. Journal of Traumatic Stress, 14, 369–389.

[3] Kirkbride, J.B., Barker, D., Cowden, F., Stamps, R., Yang, M., Jones, P.B. & Coid, J.W.(2008). Psychoses, ethnicity and socio-economic status. The British Journal of Psychiatry, 193(1), 18–24.

[4] Modernising the Mental Health Act Increasing choice, reducing compulsion: Final report of the Independent Review of the Mental Health Act 1983 – December 2018

[5] Lubian, K., Weich, S., Stansfeld, S., Bebbington, P., Brugha, T., Spiers, N. ... & Cooper, C. (2016). Chapter 3: Mental health treatment and services. In S. McManus, P. Bebbington, R. Jenkins, & T. Brugha (Eds.), Mental health and wellbeing in England: Adult Psychiatric Morbidity Survey 2014. Leeds: NHS Digital.

[6] Qassem, T., Bebbington, P., Spiers, N., McManus, S., Jenkins, R., & Dean, S. (2015). Prevalence of psychosis in black ethnic minorities in Britain: Analysis based on three national surveys. Social Psychiatry and Psychiatric Epidemiology, 50(7), 1057–1064.

[7] LGBT in Britain: Health Report - Stonewall, 2018

[8] LGBT in Britain: Health Report - Stonewall, 2018

[9] Fazel, M., Wheeler, J., & Danesh, J. (2005). Prevalence of serious mental disorder in 7,000 refugees resettled in Western countries: A systematic review. The Lancet, 365, 1309–1314. Tempany, M. (2009). What research tells us about the mental health and psychosocial wellbeing of Sudanese refugees: A literature review. Transcultural Psychiatry, 46, 300–315.

[10] Eaton, V., Ward, C., Womack, J., & Taylor, A. (2011). Mental Health and Wellbeing in Leeds: An Assessment of Need in the Adult Population. NHS Leeds.

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It's Groundhog May... again.

Well, it's confirmed. Theresa May is on manoeuvres again and will try to force the Withdrawal Agreement through Parliament in the week starting 3rd June. Anyone else think this is getting a bit embarrassing?

For those keeping count, this will be attempt number 4 at pushing this failed deal through Parliament. Each and every time it's been put to the Commons so far, it's been rejected – twice by record margins.

So if MPs can have a chance to change their minds on Brexit, why can't the British people?

Having lost the support of her own party, the Prime Minister has had to reach out to Labour. More and more Remainers are already seeing Labour for the pro-Brexit front they are. If Jeremy Corbyn helps the Tories push through this disastrous deal, it'll mark yet another betrayal of Labour supporters across the UK.

Trump, Boris, Corbyn... they want Brexit.

Liberal Democrats want to stop Brexit. Join our campaign to end this mess now > <u>https://t.co/Mp2XkNJx4v</u> <u>pic.twitter.com/GD1VN3NoQH</u>

- Liberal Democrats (@LibDems) May 15, 2019

Liberal Democrats demand better.

We know there's no deal better than our membership of the European Union. That's why we've been fighting to stop Brexit for nearly 3 years. Staying in the EU lets us focus on the real issues – like fixing our economy, rebuilding our public services and fighting the climate crisis. We're the party of Remain – and proud of it.

You — not politicians — should have the final say on Brexit. Over 250,000 people from all parties and none have joined our Exit from Brexit campaign. Let's put an end to this national embarrassment. Join our campaign to stop Brexit today.

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Who said it: Corbyn or Farage?

Corbyn's dodgy comments.

Trying to stitch up a deal behind closed doors.

Shadow ministers bragging how they're bailing the Tories out on Brexit.

Jeremy Corbyn has teamed up with the Tories to drag us out the EU at any cost. Labour is a pro-Brexit party.

Let's compare and contrast that to the Liberal Democrats.

Every vote for the Liberal Democrats is a vote to stop Brexit.

Our message has always been clear - we want to stop Brexit.

We've been fighting to **stop Brexit** since the day after the referendum in 2016.

Every vote for the Liberal Democrats is a vote to stop Brexit.

We're the biggest, strongest pro-Remain party. Every day, more and more people are giving up on Jeremy Corbyn's pro-Brexit Labour party. They're becoming Liberal Democrat voters — many for the first time.

The EU elections next Thursday are a chance to send a message – we don't want **Brexit**. We're surging in the polls and heading for an amazing result, but every vote will count. Say you're with us – vote Lib Dem on the 23rd May.

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<u>Jeremy Corbyn's a friend of Tories,</u> <u>not Remainers</u>

We launched a new poster in London today, calling out Jeremy Corbyn's dodgy Brexit voting record.

<u>Mental Health Awareness Week: A</u> <u>Forgotten Disorder</u>

Content warning: this blog post will discuss issues relating to eating disorders

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