

PS01/I8

Racism and mental health

March 2018

POSITION STATEMENT

Racism and mental health

The Royal College of Psychiatrists is committed to improving the quality of mental healthcare in a way that respects and values the principles of diversity and inclusion. We recognise that racism and racial discrimination¹ is one of many factors which can have a significant, negative impact on a person's life chances and mental health. We are particularly concerned about the disproportionate impact on people from Black, Asian and minority ethnic communities, notably those of Black African and Caribbean heritage. Efforts to tackle this should be urgently prioritised by Government, non-governmental organisations and professional bodies.

Racism is pervasive and can manifest in several often-overlapping forms (including personal, cultural, structural and institutional racism). Like other types of discrimination, it can lead to a profound feeling of pain, harm and humiliation among members of the target group, often leading to despair and exclusion.

In the UK, there are persistent and wide-ranging inequalities for people from Black, Asian and minority ethnic backgrounds, increasing their likelihood of being disadvantaged across all aspects of society compared to those from other backgrounds. As the Equality and Human Rights Commission has highlighted, an individual from a Black, Asian or minority ethnic background is more likely to experience poverty, to have poorer educational outcomes, to be unemployed, and to come in contact with the criminal justice system.² These, in turn, are risk factors for developing a mental illness.³ These individuals are also less likely to receive the care and support when they need it.

As the College has previously publicly recognised⁴, patients in the NHS may experience racism and racial discrimination. This has also been recognised as a problem in international healthcare systems.⁵ It can lead to substantial disparity in access to and experiences of various areas of psychiatric care, including crisis care⁶, admissions⁷, detentions⁸, pathways into care⁹, readmission¹⁰ and use of seclusion¹¹. For example, the 2014 Adult Psychiatric Morbidity Survey¹² showed that, although Black British adults had the highest mean score for severity of mental health symptoms, they were the least likely to receive treatment for mental illness. Where they do come into contact with services, it is disproportionately based on a detention order requiring them to stay in hospital.¹³

Tackling racism and racial discrimination in mental health services requires an open and frank discussion about how it can be addressed.

To support this we need:

- More high-quality data and evidence, informed by a national research priority setting exercise
- A concerted effort to raise literacy on the impact of racism on mental health
- Leadership in implementing preventive interventions and actions to eliminate the inequalities faced by Black, Asian and minority ethnic groups in accessing and using mental health services
- A mechanism to assess, on an ongoing basis, the impact of existing and new policies, as well as practices on the mental health of patients, including Black, Asian and minority ethnic groups.

We also need immediate and practical action to support the development of services in which staff are equipped to deliver culturally appropriate care tailored to individuals. This should take account of their ethnicity and the range of other factors that make individuals who they are, as well as challenge any assumptions that patients from Black, Asian and minority ethnic groups need the same care based on their race.

- To drive change and prioritise race equality across the NHS, the recommendation in The Five Year Forward View For Mental Health to appoint a cross-government equalities champion should be implemented without further delay.
- While there is welcome but slow progress in implementing the NHS Workforce Race Equality Standard¹⁴, there is no equivalent for those receiving care. As recommended by The Independent Commission on Acute Adult Psychiatric Care¹⁵, this can be addressed by implementing a race equality standard for patients and carers.
- Training needs to improve within NHS organisations about the factors that disadvantage Black, Asian and minority ethnic groups, particularly those of Black African and Caribbean descent. This should support psychiatrists in reflecting on their own perspectives, behaviours and the role unconscious bias can have on the care they provide, as well as supporting them to challenge inappropriate behaviours.

The implementation of the Mental Health Care Pathways will also provide an opportunity for commissioners and providers to strengthen action in addressing inequalities. This will be supported by an Advancing Mental Health Equality resource that sets out principles, methods and positive practice examples for changing the way services are designed and developed.

Recommendations

The Department of Health and Social Care (DHSC) should:

- Commission high quality research in line with a national research priority-setting exercise.
- Work with other government departments, professional bodies (including the medical Royal Colleges), charities, patients and carers to raise literacy on the impact of racism on mental health, and to provide leadership in implementing preventive interventions and actions.
- Establish a 'Health and Social Care Observatory' to monitor, track implementation and report on the impact of policy and practice on the mental health of patients, including Black, Asian and minority ethnic groups.
- Appoint a new equalities champion with a specific remit to drive cross-government action in addressing race equality in the NHS.

NHS England should:

- Prioritise the implementation of the patient and carer race equality standard currently being developed by the National Collaborating Centre for Mental Health (NCCMH).
- Work with the medical Royal Colleges and other organisations to promote effective training for NHS organisations to monitor and address factors that put Black, Asian and minority ethnic groups at a disadvantage.
- The Royal College of Psychiatrists will continue to lobby for these reforms on a national level. As part of our commitment to best organisational practice, we have appointed an Associate Dean for Equality, Diversity and Inclusion to inform educational developments to support psychiatrists throughout all stages of their careers. We will also develop an action plan that sets out how the College will drive through change in this area.

References

1. Racism is the act of treating someone unfairly because of their race, colour, nationality or ethnic or national origins. The Equality Act 2010 makes it illegal to discriminate against someone because of their race in various settings (e.g. in the workplace, accessing public services, in contact with public bodies etc.).
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4. Gould M (2004) Report accuses NHS of institutional racism. BMJ 328(7436):367.
5. American Psychiatric Association (2006) *Position Statement: Resolution Against Racism and Racial Discrimination and Their Adverse Impacts on Mental Health*.
6. Mind (2012) *Mental Health Crisis Care: Commissioning excellence*.
7. Bhui K et al (2003) *Ethnic variations in pathways to and use of specialist mental health services in the UK*. Systematic review. Br J Psychiatry 182(2):105-16.
8. Singh et al (2007) *Ethnicity and the Mental Health Act 1983: systematic review*. Br J Psychiatry 191(2):99-105.
9. Commander MJL et al (1999) *Mental health care for Asian, black and white patients with non-affective psychoses: pathways to the psychiatric hospital, inpatient and after-care*. Soc Psychiatry Epidemiol 34(9):484-91.
10. Priebe S et al (2009) *Patients' views and readmissions one year after involuntary hospitalisation* Br J Psychiatry 194(1):49-54.
11. Care Quality Commission (2010) *Count me in census*.
12. NHS Digital (2016) *Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England 2014*.
13. NHS Digital (2017) *Mental Health Act Statistics, Annual Figures: 2016-17, Experimental statistics*.
14. NHS Equality and Diversity Council (2017) *NHS Workforce Race Equality Standard. 2017 Data Analysis Report For NHS Trusts*.
15. Crisp et al (2016) *Old problems, New Solutions – Improving Acute Psychiatric Care for Adults in England*.