

Working with intersectionality in mental health research and engagement: a local example

South London ARC intersectionality session 31.10.2023

Gargie Ahmad

PhD student, King's College London

Notes

- The content covered in this presentation includes distressing testimonies from and about people experiencing the sharp end of mental health inequalities and racism. Please feel free to leave the session if you need to.
- Some ongoing research work under review here will not be included when these slides are shared. If there are any questions about these or any follow up queries regarding any content in these slides please contact: gargie.ahmad@kcl.ac.uk.

Overview

This presentation will provide a brief overview of:

- Research and engagement work on race, ethnicity, culture, racism, and mental health;
- How intersectionality provides insights into this work.
- Challenges to doing this work.

Key terms and points used throughout the presentation:

- Health inequalities are **systematic, avoidable, and unfair** differences in health between different groups of people.
- For mental health for people from minoritised racial and ethnic groups in England, in comparison to White British people, these longstanding inequalities in mental health treatment include:
 - Being **less likely to access and receive care** for common mental health problems.
 - Being **more likely to experience coercive pathways to care**, and be detained under the Mental Health Act.

Applying intersectionality in mental health research – why is it important?

Measuring mental health – intersectional analysis strengthens different kinds of research

- A well-established research finding across international contexts is the social gradient in mental and physical health outcomes: generally, people from more disadvantaged socioeconomic backgrounds have poorer outcomes, compared with more advantaged peers.
- Research into causal explanations of mental health problems has found that social, religious, spiritual, biological, psychological, or other explanations can co-exist and be used by different people.
- The impact of social determinants on mental health, and people's understanding of their own mental health, can change over time, and vary with age, gender, disability, and generational status.



Research on social gradient and social determinants of health:

World Health Organization, 2014, Social determinants of mental health: <https://www.who.int/publications/i/item/9789241506809>

Explanatory models for mental health problems: Dinos, S. *et al.* (2017) 'Assessing explanatory models and health beliefs: An essential but overlooked competency for clinicians', *BJPsych Advances*, 23(2), pp. 106–114. Available at: <https://doi.org/10.1192/apt.bp.114.013680>

SLaM area overview: local social and mental health inequalities

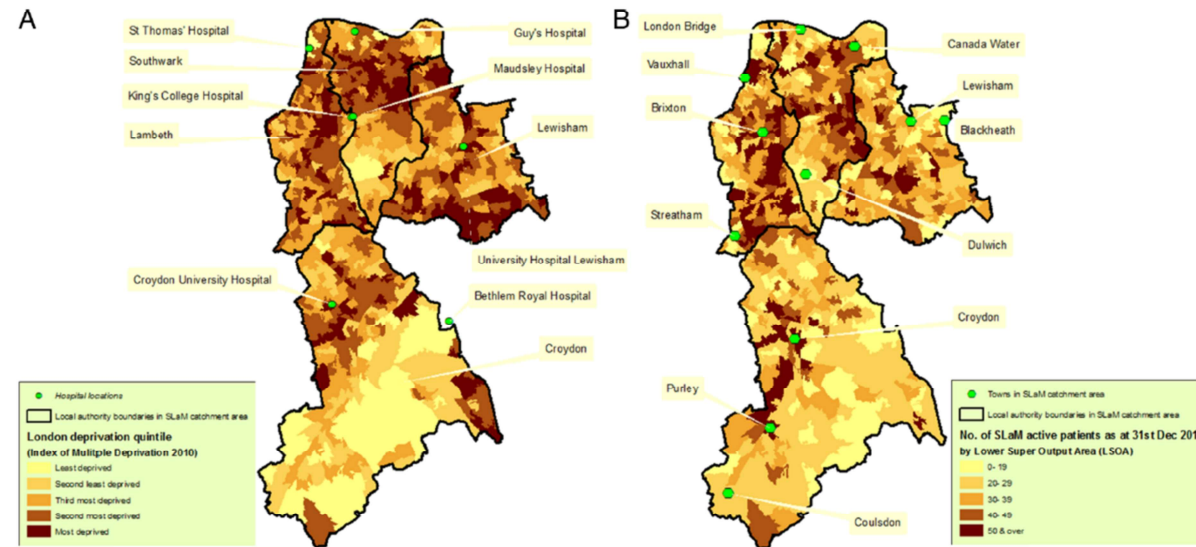


Figure 3 (A, B) Maps showing distribution of deprivation levels in the four catchment boroughs served by South London and Maudsley (SLaM), the key hospital sites and the number of active patients (on 31 December 2014) across the same geography.

In common with London as a whole SLaM catchment area represents boroughs which represent:

- People are more likely to be in both highest and lowest socioeconomic groups (also compared with England);
- People are more likely to be in unemployment
- People are more likely to have higher levels of education

Source: Perera, G., Broadbent, M., Callard, F., Chang, C. K., Downs, J., Dutta, R., Fernandes, A., Hayes, R. D., Henderson, M., Jackson, R., Jewell, A., Kadra, G., Little, R., Pritchard, M., Shetty, H., Tulloch, A., & Stewart, R. (2016). Cohort profile of the South London and Maudsley NHS Foundation Trust Biomedical Research Centre (SLaM BRC) Case Register: Current status and recent enhancement of an Electronic Mental Health Record-derived data resource. *BMJ Open*, 6(3), 1–22. <https://doi.org/10.1136/bmjopen-2015-008721>

SLaM works in a context of population ‘superdiversity’

- South London is characterised by *superdiversity*, a social research term describing the great variety of cultures, languages, faiths, and identities created in urban centres like London where people from all over the world live.
- The SLaM catchment area has substantially higher proportions of residents from minoritised racial and ethnic groups, and those who were born outside UK compared with England.
 - Compared with London as a whole, there are higher proportions of residents from Black groups, and lower proportions from Asian groups.
 - Lambeth, Southwark, and Lewisham have higher levels of both in-migration and out-migration, compared with Croydon; the latter has higher proportions of young children and older residents.
- The local population includes more recent migrants from many different countries with a relatively ‘newer’ relationship to the UK, such as Latin American communities, living alongside longer established communities of people who previously migrated from the Commonwealth and their children, such as Black Caribbean, Black African, and South Asian communities.
 - Recent SLaM data investigating racial and ethnic diversity of service users reported language interpreter bookings for Albanian, Amharic, Bengali/Sylheti, French, Oromo, Tigrinya, Dari, Kurdish/Kurdish Sorani, Mandarin, Portuguese, Somali, Spanish, Urdu, and Vietnamese.



Sources:

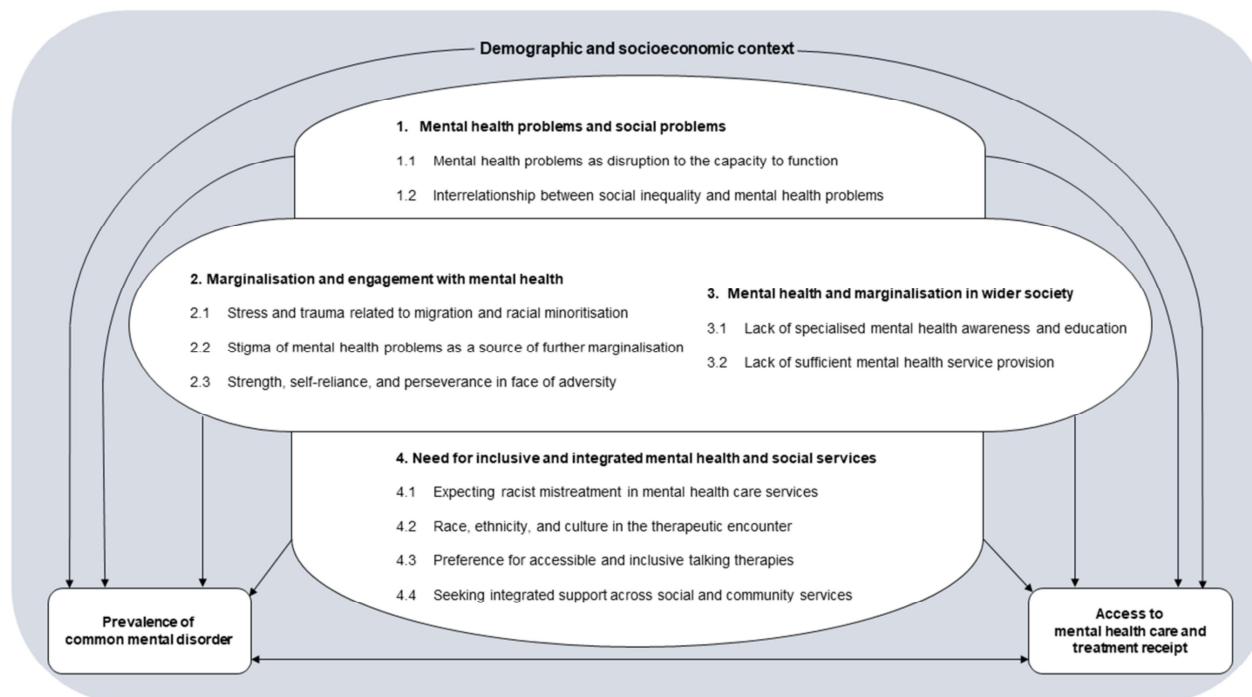
Meeting the public sector equality duty at SLaM – Southwark ethnicity information reports
<https://www.slam.nhs.uk/media/12138/2018-to-2019-southwark-ethnicity-information.pdf>
<https://www.slam.nhs.uk/media/17349/draft-2019-20-southwark-ethnicity-information.pdf>

Vertovec, S. (2007) ‘Super-diversity and its implications’, *Ethnic and Racial Studies*, 30(6), pp. 1024–1054. Available at: <https://doi.org/10.1080/01419870701599465>.
Superdiversity information: <https://www.birmingham.ac.uk/research/superdiversity-institute/index.aspx>

**Applying intersectionality in
qualitative mental health research**

Mental health problems and care: analysing perspectives of people from racialised and ethnic minority groups in south London using conceptual tool of intersectionality

Themes were generated from interviews with 32 people from different Black African, Black Caribbean, Mixed, and South Asian backgrounds in south London who have either directly experienced mental health problems, sought support, or work directly or indirectly in addressing racial and ethnic mental health inequalities.



Source: Qualitative study being prepared for publication, for work conducted for GA PhD thesis.

Authors: Gargie Ahmad, Anna Theresa-Jieman, Catherine Polling, Sally McManus, Stephani Hatch, Jayati Das-Munshi

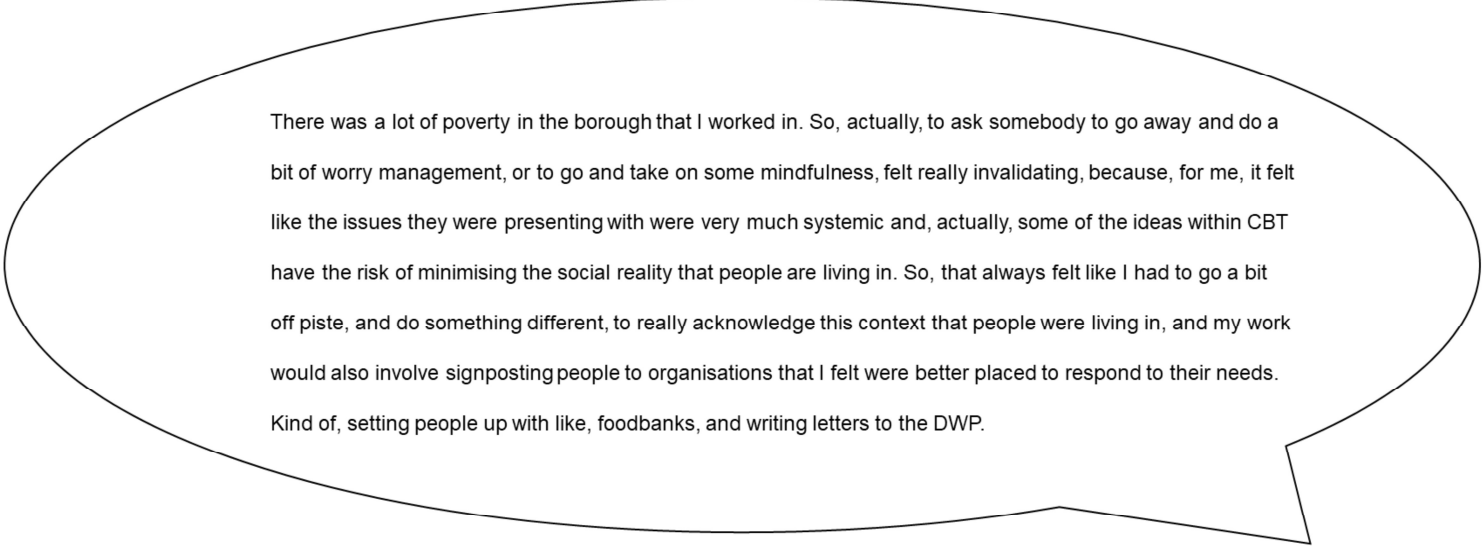
'Obviously, with that being on your record, already, being Black, getting a job, like you know... It's hard... for Black people... like if you're not the average White male, or White woman, even if you're, you are say, English, you find it hard anyway... there's a lot of stigma, like, if you've got, if it is on your record, it's even harder to get a job, so I think that's why people shy away from getting the help that they needed.'

South London community participant.

'I think, the biggest thing is trust. And in our community, when you talk to people about counselling, they think it, they just see that like, middle class White people, I don't think they see counselling - or they see it as you're gonna end up being sectioned. 'Cause that's their experience. They either see people on a couch in movies, talking to a psychiatrist, or they know of young Black boys being sectioned, 'cause of psychosis, or someone who's on a breakdown, and ends up being sectioned. They don't - yeah, so I think it's just those fears.'

Currently in counselling or therapy participant.

Participant quotations from GA PhD thesis, part of a qualitative study being prepared for publication



There was a lot of poverty in the borough that I worked in. So, actually, to ask somebody to go away and do a bit of worry management, or to go and take on some mindfulness, felt really invalidating, because, for me, it felt like the issues they were presenting with were very much systemic and, actually, some of the ideas within CBT have the risk of minimising the social reality that people are living in. So, that always felt like I had to go a bit off piste, and do something different, to really acknowledge this context that people were living in, and my work would also involve signposting people to organisations that I felt were better placed to respond to their needs. Kind of, setting people up with like, foodbanks, and writing letters to the DWP.

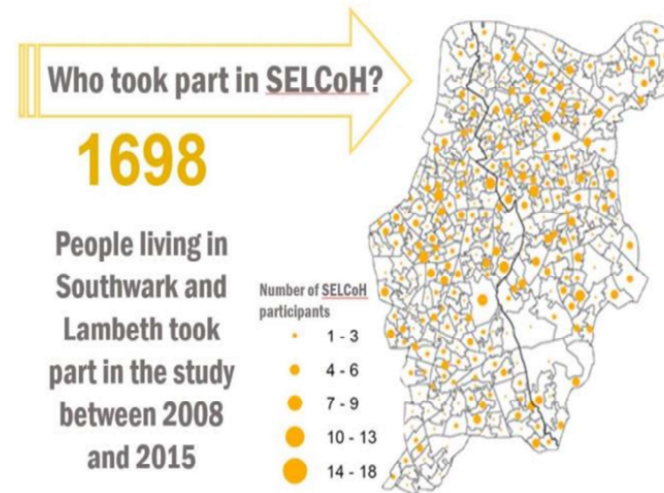
Mental health practitioner, researcher, or voluntary organisation participant

Participant quotations from GA PhD thesis, part of a qualitative study being prepared for publication

Applying intersectionality in quantitative mental health research

The Southeast London Community Health Study (SELCoH)

- SELCoH, an epidemiological study of randomly selected households and was designed to collect data from people living in Southwark and Lambeth.
- Findings clearly emphasised the importance of having local information on mental health problems and substance use is essential for service planning.
- Intersectional research has looked into inequalities including:
 - Race, ethnicity, migration status, religiosity
 - Experiences of discrimination
 - Debt and material deprivation
 - Sexuality and gender
 - Physical and mental health, wellbeing, and disability
- Almost twice the rates of common mental disorder and substance abuse compared to national figures were found, even after accounting for demographic and socioeconomic factors. Reliance on national level figures may underestimate the extent of mental ill health in urban contexts such as Lambeth and Southwark in London, home to hugely diverse communities.



Source: Hatch, S. L., Woodhead, C., Frissa, S., Fear, N. T., Verdecchia, M., Stewart, R., Reichenberg, A., Morgan, C., Bebbington, P., McManus, S., Brugha, T., Kankulu, B., Clark, J. L., Gazard, B., Medcalf, R., & Hotopf, M. (2012). Importance of Thinking Locally for Mental Health: Data from Cross-Sectional Surveys Representing South East London and England. PLoS ONE, 7(12), e48012. <https://doi.org/10.1371/journal.pone.0048012>

SELCoH publications: <https://www.kcl.ac.uk/research/selcoh>

**Applying intersectionality in
mental health engagement work**

Co-producing a seminar series on race, racism, and culture in mental health services – intersectionality in engagement

- The Maudsley Cultural Psychiatry group hosted a seminar series in spring 2023 that was co-produced with user-led and community-based organisations, including: SLaM Recovery College, Black Thrive Global, and Kindred Minds.
- Seminars covered disproportionate coercion in acute psychiatric settings; inequalities in access to talking therapies; religion and spirituality; workforce discrimination; patient safety and Seni's Law. All very complex experiences.
- What worked well:
 - Being based in a community setting and open to public reduces barriers to access to this discussion
 - Emphasising how we need meaningful co-production
- What we need to learn from:
 - Managing conflicting views in public, and minimising negative experiences for participants
 - Proactively involving a wider range of mental health service users, carer, and community partners



The Maudsley Cultural Psychiatry Group are psychiatrists, psychologists, and researchers working between King's and SLaM. We work in partnership with community, carer, and service user partners to promote awareness and action on race, racism, and culture in mental health.

Website: <https://maudsleyculturalgroup.com/about-us/>

Images: Group's own

Thank you

Any questions please contact: gargie.ahmad@kcl.ac.uk