

Rt Hon Sajid Javid MP
Secretary of State for Health and Social Care
Department of Health and Social Care
39 Victoria Street London
SW1H 0EU

cc Gillian Keegan MP, Minister of State for Care and Mental Health; Dominic Raab MP, Secretary of State for Justice

December 2021

Re: Institutional Racism in Mental Health Act Reform

Dear Secretary of State,

We, as members of the Mental Health Alliance, a coalition of organisations working in the mental health sector, are voicing our concerns about the UK Government's commitment to addressing institutional and structural racism within the context of the reform of the Mental Health Act (MHA).

One of the drivers of the reform of the MHA was racial disparities in the use of the Act. The data speaks for itself: Black people are four times more likely to be detained under the Mental Health Act and ten times more likely to be discharged from hospital under a Community Treatment Order. As Professor Sir Simon Wessely stated in the Independent Review of the Mental Health Act, "we have to accept the painful reality of the impact of that combination of unconscious bias, structural and institutional racism, which is visible across society, also applies in mental health care".

However, the Government's response to the public consultation only mentions racism once, in passing. There were no consultation questions specifically addressing the impact of MHA reform on people from racialised communities ("individuals who identify as BAME"). Nevertheless, many members of the Mental Health Alliance, who represent service users, carers, professionals and communities, raised institutional racism in their responses to the public consultation. We did not see these contributions adequately reflected or responded to within the Government's response.

We cannot ignore such oversight, especially in light of the Commission on Race and Ethnic Disparities (CRED) report which has been described by the Royal College of Psychiatrists as doing "a huge disservice to decades of research and work into all inequalities, in particular race and ethnic inequality".

While we welcome proposed initiatives such as culturally appropriate Independent Mental Health Advocates, the introduction of a Patient Carer Race Equality Framework (PCREF), and a small number of new research projects, they do not go far enough and do not all have clear long-term resourcing. Only by acknowledging and addressing structural factors and providing significant investment in alternatives are we going to be able to improve access, experience and outcomes for mental health care, especially for racial minorities.

Notwithstanding the proposed changes in related areas within the white paper which many stakeholders have welcomed, the dial will not shift on tackling racial disparities in mental health services until the existence and impact of structural and institutional racism are acknowledged and challenged.

We therefore ask the Government to take the following steps:

- 1. Publically acknowledge institutional racism in the use of Mental Health Act.**
- 2. Commit to concretely improving disparities in detention rate by ethnicity, with publishing of clear annual targets to progressively reduce disparities by 2025¹.**
- 3. Commit to long-term resourcing of all the recommendations pertaining to racialised groups outlined in the MHA Review.**

In order to build towards a future of just, equal and humane treatment for all, addressing racial disparities within mental health services is critical. The evidence tells us a story of deep and systemic inequality, and it is only through concrete actions that we can shift these patterns and achieve more equitable services.

To address current failings in the mental health sector, we must name the problem. You spoke in September on “ending historic injustices by updating our Mental Health Act, ensuring people in acute mental distress are still met with the compassion and choice they deserve.” We urge you to commit to addressing the structural and institutional racism that results in the racial disparities seen in detention under the Mental Health Act as an integral part of the reforms.

We look forward to receiving your response.

Yours, sincerely,

Mind
Liberty
Rethink Mental Illness
Association of Mental Health Providers
National Survivor User Network
British Institute of Human Rights
Young Minds
OCD Action
VoiceAbility
Ethnic Health Forum
McPin Foundation

¹ We are aware however that decontextualised decrease in admission can be tantamount to or hide neglect. Any commitment to decreasing detention rates needs resourcing. This commitment needs to take place alongside the increased provision of alternative mental health support in the community.

SANE
 Platform
 British Association for Counselling and Psychotherapy
 DCC-i
 The Survivors Trust
 The British Psychological Society
 Adferiad Recovery
 Together
 BASW England
 AMHP Network
 UK Council for Psychotherapy
 Centre for Mental Health

