

## **The power of institutions and the mental health of racially minoritised people**

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What power do institutions hold over racially minoritised people with severe mental illness? In this talk, I argue that to begin to solve the problem of racial inequalities in mental illness and mental healthcare, we need to change the way we conceptualise how they are created in the first place. We must broaden our understanding to include state institutions as sites of racial inequality that impact on mental illness and mental healthcare over the life course.

In the UK and the Global North more broadly, there is a crisis of high rates of severe mental illness and harmful psychiatric treatment for racially minoritised people. Time and time again, we hear about the elevated rates of severe mental illness (SMI) amongst racially minoritised people compared with white people, how this often goes untreated until people reach crisis point, and how the treatment they receive is both physically and mentally harmful (Kapadia *et al.*, 2022). These higher rates of SMI are due to racial discrimination experienced over the life course (Karlsen *et al.*, 2005; Nazroo, Bhui and Rhodes, 2020), and also due to diagnosing bias with racially minoritised people being diagnosed with more severe and stigmatising diagnoses than white people (Misra *et al.*, 2022). At the point at which racially minoritised people seek help or enter mental health services, they are often subjected to some of the most harmful types of mental healthcare. Typically, racially minoritised people experience high rates of compulsory detention (or sectioning) with the use of the Mental Health Act (Halvorsrud *et al.*, 2018) sometimes with police involvement. Further, once they are being treated on psychiatric wards, they are subjected to more violence and restraint than their white counterparts. Research to date has shown the persistence of these racial inequalities in mental healthcare, with devastating effects on racially minoritised people, particularly Black people. However, these inequalities in severe mental illness and mental healthcare are not produced at the site of the psychiatric hospital. There is a much deeper history of 1) how people come to develop

mental illness and 2) how they come to receive some of the most harmful types of treatment. We must ask, what has happened to racially minoritised people over the life course to make them so unwell? And after that, we must ask, why do they continue to be treated so badly by mental health services? The answers, to some extent, lie in the interactions that racially minoritised people have with state institutions that can influence their mental health and their mental health care trajectory. However, much research to date has neglected what is happening outside mental health services to understand racial inequalities. More recent research has shown that these inequalities are created outside the mental health system when people interact with state institutions such as the education system, the criminal justice system, and social services. To tackle racism in mental health, we need to continue to understand and acknowledge the way in which powerful institutions are shaping racially minoritised people's mental illness and mental healthcare.

### **References (if you need them!)**

- Halvorsrud, K. *et al.* (2018) "Ethnic inequalities and pathways to care in psychosis in England: A systematic review and meta-analysis," *BMC Medicine*, 16(1), pp. 1–17.
- Kapadia, D. *et al.* (2022) *Ethnic Inequalities in Healthcare: A Rapid Review*. NHS Race & Health Observatory. Available at: <https://www.nhsrho.org/publications/ethnic-inequalities-in-healthcare-a-rapid-evidence-review/>.
- Karlsen, S. *et al.* (2005) "Racism, psychosis and common mental disorder among ethnic minority groups in England," *Psychological Medicine*, 35, pp. 1795–1803.
- Misra, S. *et al.* (2022) "Structural Racism and Inequities in Incidence, Course of Illness, and Treatment of Psychotic Disorders among Black Americans," *American Journal of Public Health*, 112(4), pp. 624–632. Available at: <https://doi.org/10.2105/AJPH.2021.306631>.
- Nazroo, J., Bhui, K.S. and Rhodes, J. (2020) "Where next for understanding race/ethnic inequalities in severe mental illness? Structural, interpersonal and institutional racism," *Sociology of Health & Illness*, 42(2), pp. 262–276.

