MENTAL HEALTH SURVEY OF ETHNIC MINORITIES

RESEARCH REPORT

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October 2013

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SUMMARY OF INSIGHTS

Method

A survey of 740 Black and Minority Ethnic (BME) people experiencing mental health difficulties was conducted during February to March 2013. The sample mostly fell into four groups: people of African, Caribbean, Indian, and Pakistani/Bangladeshi background (from here-on-in referred to as ‘African’, ‘Caribbeans’, ‘Indians’, ‘Pakistani/Bangladeshis’ respectively). The survey was conducted both online and face-to-face. All respondents were based in community settings.

Mental health diagnoses (Table 6, page 48)

- Half (49%) of the respondents had been diagnosed with depression. Major differences exist across the groups with Asians experiencing more depression than Black groups. Rates of depression were highest amongst Indians (61%) followed by Pakistanis/Bangladeshis (55%) than Caribbeans (44%) and Africans (43%).

- A third (31%) report a diagnosis of anxiety. The pattern of anxiety across the ethnic groups is the same as that of depression. Highest rates were found amongst Indians (44%) followed by Pakistani/Bangladeshis (35%), Caribbeans (26%) and Africans (17%).

- Schizophrenia is the third most diagnosed mental health disorder with 16% of respondents having the condition. Interestingly, the ethnic differences are reversed with more Black people being diagnosed with schizophrenia than Asians. Amongst Caribbeans the rate is 23%, amongst Africans 19%, amongst Indians 14% and Pakistanis/Bangladeshis have a relatively low level of only 6%.

Experience of discrimination (Table 11, page 8)

- This report focuses on two distinct forms of discrimination that can be experienced by BME people with mental health difficulties: racial discrimination and discrimination because of mental ill health. The survey assessed both. The results show that BME people have to cope with high levels of discrimination on two fronts.

- Discrimination as a result of mental ill health is reported across a wide range of every day activities. Only 6.8% said they did not experience any discrimination because of their mental health – so 93.2% report some form of discrimination. On average, some level of discrimination was experienced in over half the life areas measured and across ten different areas of their lives. Between a half and two thirds report discrimination in finding or keeping a job; in housing or education; and in forming relationships or having a family. Most alarmingly, a half (49%) say they experience discrimination from mental health staff. There are some slight variations across ethnic groups but the overall picture is constant: discrimination is everywhere. (Table 19, page 16).

- Discrimination due to a person’s mental ill health can come from society at large as well as from within one’s own community. For many social and cultural reasons ethnic minority people tend to function, to a large extent, within their own communities. Understanding
the extent to which discrimination comes from within one’s own community is therefore important.

- A third (32%) of BME people report experiencing either a moderate amount or a lot of discrimination from within their own communities because of their mental ill health. There is little variation across the groups with Caribbeans at 33%, Africans at 31%, Indians at 36% and Pakistanis/Bangladeshis at 29%.

- A third (32%) of respondents say they are treated less favourably, either moderately or a lot, by their own communities as compared to the general population, because of their mental health issues. There is clearly an urgent need for more work to address the stigma and discrimination surrounding mental ill health.

- Three quarters (73%) of BME people report having experienced some form of racial discrimination. Worryingly, more than a quarter (28%) have experienced it in the past 12 months. This should be of concern to everyone.

- A third (32%) of Pakistanis/Bangladeshis report experiencing racism in the past 12 months. For some, this is likely to be a reflection of their status as Muslims. This is perhaps evidenced by the fact that Indians report less, though by no means insignificant, racism at 17%.

- Black respondents with a history of well-documented experience of racism continue to be affected by it. More than a quarter of Caribbeans (28%) and almost a third of Africans (31%) have experienced racism in the past 12 months.

- The survey results show that the experience of racism is widespread amongst BME people with lived experience.

**Empowerment and Social Capital (Table 31, page 29)**

- Having a network of people you know, are at ease with, and being able to speak up for yourself, are important for one’s confidence, self-esteem and mental well-being. The survey asked the extent to which people feel connected to others and whether they are able to express their views, hopes and desires, in a confident manner.

- Only a fifth of BME people feel very able to speak to people about their mental health. This suggests that most are functioning in social circles where one of the most important parts of their lives is left unspoken.

- A similar picture emerges when seeking employment, making friends, getting help, or standing up for your rights. No more than one fifth of BME people feel very able to do these basic, everyday, activities.

- As a consequence, and unsurprisingly, a mere 17% of BME people feel very able to trust others. This impacts on their self-confidence. Only 16% feel very confident about their daily life and a mere 19% about the future.

**Awareness of Time to Change Advertising Campaigns (Table 35, page 35)**
Time to Change advertising campaigns have been run during Phase I (2008-2011) and shortly before the survey. The aim of the campaign is to encourage the general public to start conversations about mental health, to reduce the stigma and discrimination experienced by those with mental health issues. The survey assessed the extent to which people recalled seeing the advert and whether this was related to empowerment.

- Adverts taken from the Phase I campaign: A third of Asians and Africans (32%-36%) recalled seeing this campaign. Slightly more Caribbeans (45%) recalled it.

- January 2013 advertising: Only a small number of Asians and Africans (14%-18%) recalled this advert. Again rather more Caribbeans (28%) recalled this advert.

- What impact the adverts have on respondents is difficult to say. No clear association was found between awareness of advertising and feeling more empowered. However, amongst the few who felt ‘very able’ to talk about mental health, there was higher awareness of the Phase I campaign. Seeing the adverts may give people a sense that they are not alone, that people are thinking about them and supporting them. This assurance may help reduce some of the isolation BME people with mental health difficulties clearly feel.