

"Restoring Dignity: issues in Mental Health and well-being for BAMER communities" Conference

28 November 2016

Workshop 2: Racism and BAME Mental Health - notes

Devina (Goldsmiths Art Psychotherapy student): *Race is hardly ever discussed in her training; the only engagement was a single powerpoint presentation addressing issues of race that was very basic*

Suman: *Look up "Why is My Curriculum White?" – student activism challenging the Eurocentrism of reading lists and academia more generally*

Yvonne: *You need to get together as students and start speaking out about it*

(Didn't get this person's name): *In her experience there were not enough people to organise with her, the BME students she expected to support her in talking about race didn't*

Yvonne: *don't judge an ally by the colour of their skin; different races may also be able to help*

Razza (part of the BME service users collective "Kindred Minds"): *Kindred Minds are currently putting together a Mental Health Manifesto which states demands on what needs to change in policies and practices that impact BME mental health*

Yvonne: *in the 80s people were prepared to kick down doors and were much more militant – now under the current government people are less likely to speak out. New communities especially are scared to express their realities out of fear of negative consequences*

Suman: *before in psychology different perspectives were more welcome, now you have to keep quiet or you won't progress or get promoted. We need to see the political as well as scientific.*

(Same person as before): *She had an assignment about mental health where she was told not to be political in her writing*

Marva (from CRISIS): *Found as a black woman, the push back from speaking about race was quite scary, whereas when white people do it there is much less push back. In a post-Brexit time racial discrimination on the streets is back so it isn't enough to say that black people need to stand up in the workplace – there is also a need to come together with likeminded people and work out genuine, workable therapies, we need to stop working alone*

Ade (from LVSC): *From around 10 years ago the extreme right have mobilised whereas BME communities have lost their power and voice and this has worked to undermine a lot of BME activism*

Yvonne: *What are the priorities we need to embrace to change things?*

Elsa: *Join up with people doing similar things – collective support and networking. We need to believe in others but also believe in the capability of ourselves in creating change. We've lost the 50s/60s community spirit and we need to reclaim this*

Malik (Communities Empowerment Network): *we need to connect the small pockets of power that exist within boroughs at the local scale (e.g. black churches, mosques, football clubs). Gaining a critical mass is important*

Yvonne: *even though funding is an obstacle now, in the past the militant organising didn't involve funding, it involved your own energy and hope for change*

Busayo: *We should tap into the resources of well educated and professional BME young people who have power in society but also think about issues of race. Now is a good time to fight for change with the political context of the Tory government, Trump, Brexit, Black Lives Matter and increasing awareness about race issues – we need to present coherent policies now*

Yvonne: *increasingly social media is a key platform for organising*

Richard: stoneashdown@gmail.com – *Richard's email for anyone who would like to contact him and discuss ways to change things*

Lainya: *as a mental health service user and Muslim woman she has experienced the prejudice in services and can see how easy it might be for other service users who are less high functioning than her to be exploited. She can speak out against racism and sexism but ableism is harder to talk about. For her, people should come together over shared experiences of using mental health services in a way that overrides race and safe spaces should be formed to discuss lived experiences*

Karen: *we need to involve and listen to the voices of service users and their family members more*

Yvonne: *ROTA can be used as a caveat for linking up mental health organisations and people here tonight. Social problems being controlled by medication is not healthy*