

Women in Mind: briefing on women's mental health

May 2017

Women's mental health

Mental ill health amongst women has increased, with women more likely than men to face mental health problems, particularly conditions like eating disorders, self-harm, anxiety and depression.

Young women are at the greatest risk of developing problems. One in five 16-to-24-year-olds has self-harmed and 13% have post-traumatic stress disorder.¹

Black, Asian and Minority Ethnic women face additional inequalities and challenges to their mental health, such as racism and stigma, and black women are at increased risk of mental ill health².

Sexual exploitation, abuse and violence are huge drivers of trauma and poor mental health in women. More than half of women with mental health problems have experienced abuse.³

Women and girls at risk

Women and girls who have suffered violence and abuse across their lives can be deeply traumatised and go on to face multiple problems like poor mental and physical health and turning to drugs and alcohol as coping mechanisms.

Agenda's Hidden Hurt report⁴ found one in 20 women have experienced extensive physical and sexual violence as both a child and an adult: that's 1.2million women in England alone. More than three quarters of these women will have experienced life-threatening trauma; half have a common mental health condition; one in three have an alcohol problem and one in five have been homeless.

For some of these women abuse, violence, and disadvantage combine meaning they have very complex, overlapping needs. Poor mental health underpins many of the other issues they face.

Without the right support women can spiral from crisis to crisis, with huge resulting costs to them, their families and society as a whole.

Mental health services

Women with more severe mental health problems, especially those who have experienced violence and abuse, need holistic support to tackle the underlying issues they face.

Yet many struggle to get that support from mental health services. Agenda's own research shows that mental health trusts are failing to take into account women's specific needs. Only one trust who

¹ NHS Digital (2014) *Mental Health and Wellbeing in England*. Available here:

http://content.digital.nhs.uk/catalogue/PUB21748/apms-2014-full-rpt.pdf

² Ibid

³ Scott, S. & McManus, S. 2016. *Hidden Hurt: Violence, abuse and disadvantage in the lives of women.* DMSS research for Agenda. Available here: http://weareagenda.org/wp-content/uploads/2015/11/Hidden-Hurt-full-report1.pdf

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⁴ Scott, S. & McManus, S. 2016. *Hidden Hurt: Violence, abuse and disadvantage in the lives of women.* DMSS research for Agenda. Available here: http://weareagenda.org/wp-content/uploads/2015/11/Hidden-Hurt-full-report1.pdf

responded to an FOI request⁵ had a women's mental health strategy, while fewer than half had a policy on asking about experiences of violence and abuse. The vast majority of trusts had no policies on offering proactive support to women who disclose abuse, beyond meeting their basic safeguarding responsibilities.

Worryingly, women and girls are regularly and repeatedly physical restrained in mental health settings, including in a face-down position.⁶ Using physical restraint risks re-traumatising women who have experienced physical or sexual abuse and violence. Awareness of women's needs is vital to promoting women's recovery.

What is Women in Mind calling for?

We are calling for women and girls' needs and experiences to be taken into account by mental health services and support given to tackle the underlying issues they face by:

- 1. The development of a national women's mental health strategy.
- 2. Every mental health trust having a clinical lead for women's mental health and a women's mental health strategy.
- 3. Women-only dedicated specialist services available in every area to provide a safe, therapeutic space and women being offered the choice of a female practitioner.
- 4. Frontline NHS workers being trained to understand that women's mental health, trauma and abuse are often closely linked and services taking a trauma informed approach
- 5. 'Routine enquiry', where trained staff ask patients about women's experience of violence and abuse, to be standard practice across mental health services and be accompanied by proper support and pathways into care.
- 6. The use of face-down restraint to be ended and other forms of physical restraint used only as a last resort.

About Agenda

Agenda is an alliance of more than 70 organisations who have come together to campaign for change for women and girls at risk. We believe society is failing to adequately protect and support women and girls who face the most extensive violence, abuse, trauma and inequality. We are calling for systems and services to be redesigned with women and girls at their heart so that they can access the support they need to rebuild their lives and reach their full potential.

To support our Women in Mind campaign or to find out more about our work please contact lisa@weareagenda.org, go to www.weareagenda.org or follow us on Twitter @agenda_alliance

⁵ Agenda (September 2016) *Women's needs in mental health services: A Response to an FOI Request.* Available here: http://weareagenda.org/wp-content/uploads/2016/11/Mental-health-briefing-FINAL.pdf

⁶ Agenda (March 2017) *The use of restraint on women and girls in mental health units: a Response to an FOI Request.* Available here: http://weareagenda.org/wp-content/uploads/2017/03/Restraint-FOI-research-briefing-FINAL1.pdf