



PUBLIC HARMS

Racism and Misogyny in Policing, Education, and Mental Health Services

Supported by



Acknowledgements

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Racism and Misogyny in Policing, Education, and Mental Health Services

Authors: Anita Acquaah and Lizzie Ville

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About us

The **Fawcett Society** is the UK's only member-powered organisation working to end sexism and misogyny in all its forms. Our vision is a feminist future where every woman and girl has the power to make her own choices and thrive. www.fawcettsociety.org.uk

The **Black Equity Organisation (BEO)** is an independent, national Black civil rights organisation created to dismantle systemic racism in Britain, drive generational change and deliver better lived experiences for Black people across the country. We exist to promote economic, legal, social and political equality for Black communities in Britain in order to ensure equal opportunity for progress and prosperity. Our efforts will endorse and amplify Black talent, Black enterprises, and Black greatness in Britain. Our vision is to realise the empowerment, self-determination, and welfare of Black people in the UK, and to be a credible and effective catalyst for dismantling structural racism within British society.

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Executive Summary

This research explores racism and misogyny (collectively termed as misogynoir), in the public institutions of policing, education and mental health services. It discusses the findings of two separate exercises. Firstly, we conducted a call for evidence that engaged with the voices of mostly Black women, but also some women of different ethnicities to understand where some experiences converge or diverge. With this first approach four themes emerged (which are discussed in detail below), these are:

- Excessive force and detention.
- Adultification and 'the strong Black woman' trope.
- The erasure and invisibility of Black women's experiences.
- A 'one size fits all' approach to public services.

These themes emerged across all of the institutions that we included in our analysis. In summary, too often Black women are treated excessively harshly, not listened to, assumed to possess a higher threshold of resilience and their stories are either missing or downplayed in data, research and/or institutional reviews.

These themes were also reflected in the second part of this research, a meta-analysis of key reviews in policing, education, and mental health services. Here we found that many of these do discuss racism and sexism, but often in insufficient depth and ways that do not articulate as to how these intersect. Given the above we propose the following recommendations, which we believe would start to better address some of these longstanding challenges.



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Recommendations

We call for public institutions to:

- Ensure that reform is co-created with Black women, places their voices at the centre of solutions and change. Throughout the report a key theme is the erasure and invisibility of Black women's voices, ideas, and struggles. It is critically important to reverse this trend by placing Black women's voices and ideas at the centre of the solutions. This means moving beyond consultation and taking meaningful steps to engage Black women at the heart of policy changes. As we discuss below, power is not only hierarchical but exists everywhere. It is therefore important to recognise the power of Black women and ensure that institutional spaces recognise this.
- Conduct specific and nuanced reviews into misogynoir within public institutions, rather than relying on a 'one size fits all' approach. As shown below, some of the reports below do mention race and/or sexism. However, examining these separately does not provide the depth required to understand the challenges or to explore the solutions. There is a need to conduct targeted, intersectional, in-depth reviews that focus specifically on misogynoir within mental health, policing and education focused institutions which would lead to stronger recommendations that improve the lived experience of Black women.
- Better intersectional data that takes account of Black women's experiences: Across all of the public institutions discussed in the report, it is clear that the data on Black women's experiences is poor. There need to be active and intentional steps to address these data collection gaps both on a qualitative and quantitative level. It is unhelpful to consistently separate analysis on racism and sexism, particularly as they often intersect with each other to further exacerbate inequalities.
- **Implement Valerie's Law:** There is clearly an empathy and knowledge gap in terms of Black women's experiences of harm. Valerie's law calls for mandatory cultural competency training to address this. Implementing Valerie's Law would mean that public institutions would have to engage with misogynoir.
- Think beyond training and improve accountability in public institutions: While training is important, it is clearly not sufficient in and of itself to create change. There need to be stronger accountability measures to tackle misogynoir within public institutions. This requires stronger legislation and rights for Black women, enshrined in law.
- Stronger legislation to address misogynoir outside of public institutions and in society more broadly. Public harms do not exist in a vacuum, however they emerge through harmful societal discourses. For example, research by Glitch which examines the dehumanisation of Black women on social media showed how hateful narratives and abuse which may begin on obscure platforms infiltrates mainstream bigger platforms and then helps to normalise these discourses in everyday life¹. This moves the norms of what is deemed socially acceptable into several mainstream spaces towards more harmful language against Black women. Strong enforcement measures from key regulators such as Ofcom are required to address harmful societal discourse that could move into public institutions.

Glitch. The Digital Misogynoir Report: Ending the dehumanisation of Black women on social media. 2023. https://glitchcharity.co.uk/wp-content/uploads/2023/07/Glitch-Misogynoir-Report_Final_18Jul_v5_Single-Pages.pdf



The news is full of cases of public services causing real harm, particularly to Black women and girls – from the treatment of Child Q in an East London school, to a culture of misogyny and racism in the Met Police, to the disproportionate use of detention and restraint in mental health wards.

Inquiries and reviews have been conducted on individual issues, but progress remains slow in addressing the underpinning structural issues which lead to the specific controversies preceding an inquiry. Thus, with an anti-racist and feminist lens, this report critically reviews a selection of reports into education, policing, and mental health services, drawing out the similar harms caused to women across these different public services. In addition, we conducted a call for evidence in which women shared with us their experiences of policing, education, and mental health, and we highlight some of those stories here.

There are a several concepts threaded throughout this report which are central to our analyses, namely public harms, power, intersectionality, and insitutional racism and misogyny, which we define and discuss here.

Public Harms

The public sector in the UK comprises institutions providing *public goods* – such as healthcare, education, and criminal justice – which aim to meet people's needs and promote the wellbeing of individuals and broader society. However, we know that these services are often not fit for purpose, do not serve different groups equitably, and can embed systems and practices which serve to perpetuate harm.

This report focuses on *public harms*, that is, actions, decisions, or situations linked to public services or institutions that result in harm to individuals and particular groups, and which can result in wider negative consequences that impact society as a whole. We focus on the gendered and racialised public harms caused to women, and particularly Black women, whose experiences are often de-centred and deprioritised, and who are often at the sharpest end of these harms. In this report we focus on the experiences of women who come into contact with public services, but we also acknowledge the important work often conducted by women working within public services, and recognise that they also experience harm as a result of a system which is not fit for purpose.

Power

Power, including its operation, misuse, and abuse, is a central concept in the exploration of public harms caused to women and girls. This is because public institutions, such as the NHS, police forces, schools, and governing bodies, necessitate the trust of their users. All of us require these services to serve our basic human needs on different occasions throughout our lives – as schoolchildren, patients, victims of crime or even as offenders, and so public services often hold power over what happens to us in our most vulnerable moments.

However, a view of power as simply top-down, or a discussion which is always in the context of the abuse of power can be limiting. The philosopher Foucault provides a broader description of power as everywhere and embedded in complex social forces. These forces include social norms, knowledge and 'discourse' (i.e. the way we talk

about things), and move in different directions, rather than simply in a hierarchy. This provides a more complex but more hopeful view which means that when abuse of power does occur, it can be resisted, reclaimed and refound. Therefore, while we discuss hierachies and power held by institutions in this report, we do not think it is simply held by one person or institution at a time, but can be held by communities, present in everyday interactions, and resisted as well as reinforced.

Intersectionality

Intersectionality, first coined in 1989 by American civil rights advocate and leading scholar of critical race theory, Kimberlé Williams Crenshaw, is the term used to describe the overlapping or intersecting social identities in relation to discrimination and oppression². When Crenshaw first used the term, it was to explain the oppression against African-American women and inequalities they face as a result of both sexism and racism. Since its original usage, the term 'intersectionality' has also been expanded to include intersections between a range of 'social categories' in addition to race and gender, such as disability, sexual orientation, occupation and socio-economic disadvantage, and wider life experiences³. It is important for institutions to recognise the distinct harms experienced by people with multiple categories of identities to effectively prevent, combat and provide relief to the effects of these harms.

Institutional racism and misogyny

The Stephen Lawrence Inquiry by Macpherson defines institutional racism as:

"The collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture, or ethnic origin. It can be seen or detected in processes, attitudes and behaviour which amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racist stereotyping which disadvantage minority ethnic people".⁴

The presence of the term *institutional racism* is of central importance when discussing public harms to Black and minoritised women and girls. That is, the refusal to accept the term to describe insitutions such as the police force, the NHS and the Department for Education preserves the status quo. Denying an institutional or systemic issue means individuals can be blamed as opposed to looking at racism as a pervasive and systemic issue. Many reports which analyse racism in institutions will not draw a conclusion of institutional racism as this is an admission that the institution is inherently flawed and discriminative, undermining its existence and effectiveness to undertake the duties it was created for.

Similarly, and often intersecting with racism is institutional misogyny, which is reflected both in the harms caused to Black and minoritised women across public life and in an underlying culture and system which facilitates this within institutions. Baroness Casey's review into the Met Police was a landmark in the way that it did name institutional racism and misogyny, including citing the *"over-policing of Black*"

² FYS 101: Intersectionality. Syracuse University Libraries. Accessed 2024. https://researchguides.library.syr.edu/ fys101/intersectionality#:~:text=Intersectionality%20(or%20intersectional%20theory)%20is,oppression%2C%20 domination%2C%20or%20discrimination.

³ Using intersectionality to understand structural inequality in Scotland: evidence synthesis. Scottish Government. Accessed 2024. https://www.gov.scot/publications/using-intersectionality-understand-structural-inequalityscotland-evidence-synthesis/pages/3/

⁴ Macpherson W. The Stephen Lawrence Inquiry. UK Government. 1999. https://assets.publishing.service.gov.uk/ media/5a7c2af540f0b645ba3c7202/4262.pdf Section 6.34.

communities and the under-protection of women and girls"⁵ but it is not often that these terms are used in public inquiries. Thus, we explore the use of these terms in the inquiries we analyse in this report.

This project

Women's needs and rights to education, safety, justice, and wellbeing – and their experiences across the different public services which should provide these – are inextricably linked. Contact with public services is often overlapping, for example, female prisoners have poorer mental health than both women in the general population and male prisoners,⁶ those who are more likely to be excluded at school are more likely to encounter the criminal justice system as adults, and there is a growing literature linking police brutality to mental health.⁷ Moreover, it is clear that different public services let women, particularly Black women, down in similar ways. The Modernising the Mental Health Act report notes that:

"We are in no doubt that structural factors which engender racism, stigma and stereotyping increase the risk of differential experiences in ethnic minority communities. There is no single or simple remedy to resolve this situation, which is not unique to the health service in general, or mental health services in particular. A similar and equally depressing picture can be painted within our schools or criminal justice system or other aspects of modern society."⁸

This quote suggests that there are similar structural underpinnings to the racism and misogyny seen in policing, education, and mental health services – but there remains a need to identify and untangle these commonalities. **Thus, in this report** we draw out the common themes in the harms propagated across these different public services. Specifically, with the central ideas described above underpinning our thinking (power, intersectionality, and institutional racism and misogyny), this project sought to answer the question "What are the similar ways in which women – particularly Black women – experience harm across different public services?", via:

• A call for evidence on women's experiences of harm across policing, education, and mental health services. In spring 2024, Fawcett and BEO launched a call on social media for women aged 18 and over to share their experiences. Selected responses are shared in our first chapter, *Public Harms: What are the common themes?*

⁵ Casey. Baroness Casey Review Final Report: An independent review into the standards of behaviour and internal culture of the Metropolitan Police Service. Metropolitan Police. 2023. https://www.met.police.uk/police-forces/ metropolitan-police/areas/about-us/about-the-met/bcr/baroness-casey-review/ p. 332

⁶ Agenda & Department of Health & Social Care. The Women's Mental Health Taskforce: Final report. 2018. https://assets.publishing.service.gov.uk/media/5c18e0f0ed915d0b8a31a424/The_Womens_Mental_Health_Taskforce_-____final_report1.pdf p. 13

⁷ Glasser N, Tung E & Peek M. Policing, health care, and institutional racism: Connecting history and heuristics. Health Services Research. 2021; 56(6): 1100-1103. https://doi.org/10.1111/1475-6773.13888

⁸ UK Government. Modernising the Mental Health Act: Increasing choice, reducing compulsion. Final report of the Independent Review of the Mental Health Act 1983. 2018. https://www.gov.uk/government/publications/modernising-the-mental-health-act-final-report-from-the-independent-review p. 20.

• A critical review of selected inquiries and major reports across policing, and education, and mental health services. We identify the key harms common to these public services as indicated by these reports, and explore their approach to issues including power, intersectionality, and institutional racism and misogyny.

In the subsequent chapter, *In-depth review of reviews*, we delve more deeply into these key themes in each public service in turn, exploring how the reviews we have read approach key issues including power, intersectionality, and institutional racism and misogyny.

Methods

Call for evidence

Between 23rd February and 21st April 2024, Fawcett and BEO launched a call on social media for women aged 18 and over to share their experiences of harm in contact with policing, education, and mental health services. We are deeply grateful to all of these women for their honest and open accounts, which help us to connect individual experiences to broader, systemic and deep-rooted issues in our public services.

Responses from 25 women were received online via our form or by email in multiple formats: written text, supporting documents, audio, and video. These included 8 responses from women of Black Ethnicity (including 3 Black African, 3 Black Caribbean, and 2 unknown), 4 of Mixed Ethnicity, 1 of Pakistani or Bangladeshi heritage, 9 of White British background, and 3 of Another White Background. Responses were kept confidential and stored securely in accordance with GDPR. Respondents were signposted to relevant resources and support services when completing the form.

Review of reviews

We identified a series of recent reviews and inquiries into policing, education, and mental health, commissioned by those institutions or by Government in response to specific events or controversies, or broader issues of national concern. The exception to this is in our section on education, where there were not sufficient recent reviews of this nature with a focus on race and gender. We have included a review from the charity Agenda, a charity advocating for women and girls with multiple complex needs, which sets out key evidence on education.

The independence of reviews commissioned by Government or institutions is crucial for ensuring transparency, accountability, and public trust. The reviews included in this report offer varying degrees of independence via independent investigators, clear terms of reference, and transparency in methodology. However, it is important to note that in some cases the reports were conducted by those who commissioned them, and/or the terms of reference were set by or agreed with commissioners. **Table 1** shows the reviews included in this report, alongside who commissioned and conducted them and set the terms of reference, where applicable.

Table 1. Reviews included in this report.

Theme	Review	Commissioned by	Conducted by	Terms of reference
Policing	Baroness Casey Review Final Report (2023)	Dame Cressida Dick QPM, Metropolitan Police Service.	Baroness Casey, peer and former Victim's Commissioner.	Agreed by Dame Cressida Dick QPM and Baroness Casey
	The Police Race Action Plan (2022)	National Police Chief's Council (NPCC) and the College of Policing	NPCC and the College of Policing. Includes input from the Independent Scrutiny and Oversight Board (ISOB) Chair.	N/a
Education	Local Child Safeguarding Practice Review: Child Q (2022)	City & Hackney Safeguarding Children Partnership (CHSCP)'s Independent Child Safeguarding Commissioner (ICSC)	Jim Gamble QPM, Independent Child Safeguarding Commissioner (ICSC) and Rory McCallum, Senior Professional Advisor	Set by Jim Gamble QPM and Rory McCallum
	Girls at risk of exclusion (2021)	Agenda (charity)	Agenda (charity)	N/a
Mental health	Independent Review of Greater Manchester Mental Health NHS Foundation Trust (2024)	NHS England	Professor Oliver Shanley OBE, former Regional Chief Nurse for London	Set by Professor Oliver Shanley OBE and the independent review team, with input from patients, families, trust staff, trust commissioners, and NHS England.
	Modernising the Mental Health Act (2018)	Theresa May's Government	Simon Wessely, former president of the Royal College of Psychiatrists	Set by Theresa May's Government
	The Women's Mental Health Taskforce (2018)	Theresa May's Government	Katherine Sacks- Jones, Agenda, and Jackie Doyle-Price, former Parliamentary Under-Secretary for Mental Health	N/a

Strengths and limitations

Whilst this review offers in-depth analysis of the themes present within the reviews and women's stories of harms across policing, education, and mental health services, we note some limitations. First, whilst we discuss the recommendations put forward by each review, we do not audit the extent to which these recommendations have since been carried out, as this was beyond the scope of this review. We suggest that this is an important future piece of work, which would enable researchers and policy makers to gain a more comprehensive understanding of the current level of progress made to improve public services for women and girls, and particularly Black women and girls.

Second, to provide sufficient depth in our analyses, we have decided to focus on particular aspects of policing, education and mental health services, which comes at the exclusion of other issues. For example, for mental health we focus on the Mental Health Act and experiences on wards to a greater extent than we explore experiences of primary care or treatment in the community. Third, whilst we explore experiences of migrants in some areas, we lack data in our call for evidence on this topic. We suggest an in-depth exploration and data collection of the experiences of migrants across public services as vital future research. Fourth, we focus primarily here on the experiences of women who are service users but recognise that understanding and researching the experiences of women, particularly Black women, who work in public services is of crucial importance for gathering insight into the operation of systemic issues.



Public Harms: The common themes

Twenty-five women from varying walks of life shared their experiences with us in multiple formats: written text, audio, and video recordings. In this chapter, we connect a selection of these individual experiences to broader, systemic, and deep-rooted issues in our public services, identified via our analysis of the following major inquiries and reviews:

- Baroness Casey Review Final Report (2023)
- The Police Race Action Plan (2022)
- Local Child Safeguarding Practice Review: Child Q (2022)
- Girls at risk of exclusion (2021)
- Independent Review of Greater Manchester Mental Health NHS Foundation Trust (2024)
- Modernising the Mental Health Act (2018)
- The Women's Mental Health Taskforce (2018)

We share gendered and racialised experiences of public services alongside evidence from the reviews under headings representing four key themes: *Excessive force and detention, Adultification and the 'Strong Black Woman' trope, The erasure and invisibility of Black women's experiences* and *A 'one size fits all' approach to public services.* In drawing together experiences of policing, education, and mental health under each theme, we identify the ways in which different public services harm women in similar ways.

For more detail about each public service and the reports we reviewed, see our *Indepth review of reviews chapter.*

Excessive force and detention

The overuse of restraint, force, and detention against Black women was common to each of the three public services we explored through our call for evidence and major inquiries and reviews – mental health, policing, and education.

Modernising the Mental Health Act, a review commissioned by the government in 2017, explores the disproportionate detention of Black people under the Act – legislation which gives professionals including medical staff and police the power to detain people due to their mental health. The report acknowledges the significance of the level of power held by professionals employing the Mental Health Act as different to any other provision of healthcare. That is, the act provides the power to physically detain and deprive people of their freedom when at their most vulnerable, but for the purposes of their own safety or that of others. However, the type of institutional power provided by the Mental Health Act operates among and is inextricably linked to, existing societal structures of power – such as racism and misogyny – which leaves it vulnerable to misuse.

Compared to white people, people of Black African and Caribbean heritage are disproportionately detained and given community treatment orders⁹ under the

⁹ A community treatment order (CTO) involves compulsory, supervised treatment in the community, rather than at hospital, in which a person can be recalled to hospital if they don't follow the conditions of the CTO.

Mental Health Act. The Independent Review of Greater Manchester Mental Health NHS Foundation Trust (referred to hereafter as the Independent Review) – commissioned to investigate failings within the Greater Manchester NHS Trust – provides a specific account of abuses taking place, with patients from ethnic minorities more likely to experience restraint and seclusion, and in a punitive rather than therapeutic manner. Similarly, the report's data indicates that women were being secluded at higher-thanexpected rates across the trust, with seclusion rooms at Edenfield kept to very poor standard.

Furthermore, the Women's Mental Health Taskforce report, commissioned by the government in 2017, describes how being physically restrained by professionals on a mental health ward is frightening for anyone, but can be especially re-traumatising or triggering for women, especially Black women, who are more likely to have experienced domestic abuse or excessive force at the hands of public services such as the police in their past. In particular, the report outlines evidence of high rates of sexual assault or harassment in mental health services (457 incidents between April and June 2017, according to the Care Quality Commission), which the report describes as an alarming figure.

The over-use of restraint and detention in mental health settings strongly mirrors Black women's experiences of policing. Black communities are disproportionately subject to policing brutality, with reports indicating that Black people are seven times more likely to die than white people following use of restraint by the police.¹⁰ There is also direct overlap in the services – the police can use their emergency powers under Section 136 of the Mental Health Act to detain people in hospital, police cells, and other settings, with people of Black or Black British ethnicity the most likely to be placed under a section 136 order.¹¹

In this report we also analyse the Baroness Casey Review, which was commissioned to explore the standards and culture of the Metropolitan Police Service, in recognition of grave public concerns after the kidnap, rape, and murder of Sarah Everard by a serving Met officer. The report points to a broad culture of racism in the Met, including Stop and Search statistics which point to the systemic over-policing and excessive force used against Black communities, and feed into police distrust. As highlighted by the Police Race Action Plan which we also review, this issue is not limited to the Met, and a broad range of action needs to be undertaken to rebuild and work with Black communities to promote de-escalation and reduce over-policing and excessive use of force.

This over-policing extends to education settings, where controversially, police are often present in schools. Freedom of Information requests from the Runnymede Trust to police forces in 2023 found that there were 979 police officers operating in UK schools, and they were more likely to be in locations with greater numbers of Black and minoritised children.¹² The Local Child Safeguarding Practice Review: Child Q, which points to a stark individual example of the harm this systemic over-presence of police can generate, in a context of combined racism and misogyny. That is, a young Black girl was strip searched at school by police, that is, criminalised and treated as an adult in a setting where she was supposed to be protected from harm.

¹⁰ Prasad R. I can't breathe: Race, death & British policing. Inquest. 2023. https://www.inquest.org.uk/Handlers/ Download.ashx?IDMF=edfc7c01-e7bb-4a17-9c33-8628905460e6

¹¹ Mental Health Act Statistics, Annual Figures 2022-23. NHS England. 2024. https://digital.nhs.uk/data-andinformation/publications/statistical/mental-health-act-statistics-annual-figures/2022-23-annual-figures/uses-ofsection-136

¹² Over-policed and under-protected: the road to Safer Schools. Runnymede Trust. 2023. https://www. runnymedetrust.org/publications/over-policed-and-under-protected-the-road-to-safer-schools

This over-use of force is reflected in one woman's response to our call for evidence, in which she shared with us her experience of being strip searched by the police whilst on her period. She was profiled and mistaken for knowing a man who had simply walked past her, due to both being Black.

"The police van that drove past assumed on the basis that we were both black we were meeting each other. Despite the young black man expressing that he doesn't know me (they found weed on him), they insisted they wanted to strip search both of us. I of course became heightened and was scared because I repeatedly said I do not know this man, even after my cousin came and spoke to them stating the same thing. They abused their power and strip search me on my period. This left a very bad stain on my heart towards the police, I was advised by one of the women officers (who apologised profusely) I should put in a complaint but I never did as I thought what was the point."

[Woman, 31, Black British]

Each of the findings outlined by the reviews we have analysed repeat similar stories of excessive force, detention, restriction and criminalisation across policing, education, and mental health – which reflect troubling underlying institutional issues common to each. They underline a need for government and institutions to enact cultural and legislative change to promote gender sensitive and trauma-informed practice and reduce the racial profiling associated with disproportionate restrictive practices.

Adultification and the 'Strong Black Woman' trope

The excessive use of force across services as described above is strongly linked in the reports to *othering*, or harmful stereotypes of Black people as aggressive, and Black women in particular as strong and devoid of vulnerability. In the case of mental health services, this can mean Black women are more often seen as a threat to others and are then more likely to be detained or restrained. This can be compounded by a culture of risk aversion, identified in Modernising the Mental Health Act, leading to overuse of the Act by professionals to avoid making a faulty risk assessment which might result in blame and investigations. The Independent Review of Greater Manchester Mental Health NHS Foundation Trust spotlights how these types of systemic and cultural issues can be compounded by lack of training and workforce pressures to generate specific incidents of harm. For example, staff described a Black patient who was attacked by a white patient, but the Black patient was assumed to be the attacker by the response team.

Black women and girls are denied the empathy and support offered to their white counterparts. The Girls at Risk of Exclusion report describes how adultification – viewing young Black girls as older than their age, less innocent and a risk to others rather, than as a vulnerable child – leads to less emotional support and more punitive responses. This was identified as a key factor in the strip search of Child Q by the Safeguarding Review, in her receipt of police involvement and an extreme disciplinary response from the adults who had a duty of care to protect her. This individual incident links to broader systemic issues across educational stages, for example, Black children are more frequently identified as having Special Educational Needs and Disabilities (SEND) but not provided adequate SEND support or timely diagnosis.¹³

¹³ Global Black Maternal Health. Black Child SEND. Accessing special educational needs and disabilities (SEND) provision for Black and mixed Black heritage children: Lived experiences from parents and professionals living in South London. 2024 https://www.blackchildsend.com/_files/ugd/6e0914_096b4feb22b84593bf7db08f3c23ef26.pdf

Similarly, our call for evidence outlined examples whereby Black women's victimhood was recast as aggression by the police, with their need for help dismissed. One woman shared her experience of an abusive marriage in which, after a violent attack by her husband against her, the police were called but reported her as the attacker.

"As the primary caregiver for my children, the police should have prioritised their safety and well-being. Instead, they listened to my ex-husband, who had violently attacked me in front of our children and accepted his refusal to let them go. The power dynamics in my case were evident. My ex-husband's words, as a White male, seemed to carry more weight than my own, or the visible signs of trauma and shock I showed."

[Woman, 46, Black African]

Another woman, of mixed ethnicity, described her experience of seeking mental health support from her GP after experiencing stress-induced fibromyalgia, only to be denied a fit note and for him to say that she "looked strong".

"I cried and told him I really was suffering terrible stress and wasn't sleeping well or coping with anything and my family and friends were worried. He refused to consider more time off and said I looked strong to him."

[Woman, 54, Mixed Ethnicity]

Experiences of lack of adequate care were common amid "strong" stereotypes, with one woman describing how despite being known to mental health services from her teenage years, she was never advised regarding the support that she was entitled to.

"As a young black woman we were never made a priority. Plus being from a culture where black women are made or viewed to be strong this also played into the stigma."

[Woman, 31, Black British]

The erasure and invisibility of Black women's experiences

The erasure of the experiences of Black women is pervasive across all three public services. Our call for evidence submissions revealed, within policing, that women who report crimes do not feel listened to nor heard. Feeling undermined, dismissed and without a voice are all contributing factors to the overall poor treatment of women by the criminal justice system. End Violence Against Women (EVAW) describes how "One of the reasons for victim withdrawal from prosecutions is due to poor treatment of survivors, throughout the justice process".¹⁴ The treatment of victims being a determinant of prosecution – as opposed to a 'fair trial' – highlights the importance of the justice process and why it is paramount that victims are not made to feel invisible and unheard. This failure to listen to women's experiences links to a systemic under-prioritisation of tackling violence against women and girls identified by the Casey report. Casey notes that the Met has not tackled violence and knife crime has been. The report describes the underrepresentation of Black women in the Met, which feeds into a culture whereby Black women are not listened to.

¹⁴ Latest data shows the criminal justice system isn't working for women. End Violence Against Women. 2023. https://www.endviolenceagainstwomen.org.uk/latest-data-shows-the-criminal-justice-system-isnt-working-for-women/

Agenda's Girls at Risk of Exclusion report suggests that girls who are at risk of exclusion due to 'behavioural issues' are often ignored when they have sought help or assumed to be problematic, the idea that there may be wider circumstances contributing to their behaviour are not explored, again erasing their experiences. Similarly, Modernising the Mental Health Act outlines how service users felt they had a lack of say in their own care, particularly when being detained under the Mental Health Act – including not being provided opportunities to discuss their care plan with practitioners, or in advance of a detention under the act. Women and particularly Black women in the Women's Mental Health Taskforce report, described their need to be heard and understood in terms of their past experiences with sexual abuse and domestic violence, and for services to be culturally sensitive and inclusive, acknowledging their specific needs and past experiences.

Many of the women who shared their stories in our call for evidence expressed not being listened to by different public services. Often, they felt invisible and completely ignored. For example, one woman described being dismissed after arriving at her home with her son to find her locks changed due to a dispute between the landlord and estate agent.

"I called the police as I didn't know what was going on when the police arrived my son and I were sleeping on the door step they threatened to arrest me with trespass if we didn't leave. they wouldn't listen to a thing I said."

[Woman, 45, Black African]

Another woman described how, as a 17-year-old schoolgirl, a man over the age of 21 with whom she had previously been involved in a relationship, was hired for a teaching position at her school, despite expressing her concerns to senior staff.

I was then called into the office of the deputy head where I was confronted, I was made to feel incredibly uncomfortable and dismissed. I was not asked how I feel attending a school where this person worked, I was simply told that this was happening and that I should not make them feel uncomfortable working at the school. Being a child at a time speaking to a senior member of staff I struggled to advocate for myself. I mentioned that this situation will make me feel uncomfortable but I was told that school need to hire this person and I am not allowed to discuss this with fellow students as it will spread rumours and make negatively effect this new teachers experience -- I felt almost violated that a place that is consider to be a safe space where I am safe guarded was not taking my safety or comfort into consideration. I am certain if I was a white girl I would have been treated with more dignity and compassion. I spent the rest of my school days feeling uncomfortable and icky walking through corridors where I would bump into this person.

[Woman, 23, Mixed Ethnicity]

The negative responses and reactions Black women and girls have received – when they are not ignored – from the police, education, and mental health services – act as a deterrent to using these services. Instead of being viewed as a source of relief or support, these institutions often reinforce harm.

The data or lack thereof tells us that Black women and girls are not listened to, and their voices and experiences are erased and discounted. The act of erasing these stories, contributes to a lack of data on Black women's experiences, without evidence a problem does not exist, reinforcing the stifling and avoidance of reform and policy changes by these institutions.

This failure to hear and acknowledge the experiences of Black women is reflected in the institutions' historic failure to acknowledge or name institutional racism and misogyny. Naming the issue serves as a foundational step towards accountability, trust, and effective change: by openly recognising issues as systemic, institutions can dismantle the myth that issues are unconnected to one another or caused only by individuals, and begin to listen, take responsibility for the harms caused, and make change. Among the reports we have reviewed, the Police Race Action Plan acknowledges that policing contains racism and that people believe it to be institutionally racist, but not that it is institutionally racist. However, notably, the Casey report strongly identifies and names institutional racism, misogyny, and homophobia in the Metropolitan Police Service. Modernising the Mental Health Act also acknowledges institutional racism, although qualifies it as "mainly unconscious" and "not deliberate", which, whilst a good first step, diminishes the strength of the statement and the required accountability.

A 'one size fits all' approach to public services

Linked to the erasure of women's voices, and particularly Black women's voices, is a lack of sensitivity to intersectional experiences and needs, built into institutions responsible for public services. This also includes, but isn't limited to institutions responsible for policing, education, and mental health, in which we see a systemic lack of gender and race sensitivity built into the training, design, and leadership of institutions. One of the various impacts of intersectionality not being considered by these institutions, is that they often have monolithic approaches in their treatment of the individuals they are trusted to serve. Not one size or solution fits all women, and not one size or solution fits all Black women, institutions erase experiences and discount data when they categorise all Black women into a homogenous group.

The data from the Agenda Alliance, explored further in the in-depth review of education highlights that in 2021/22, Black Caribbean girls were excluded at double the rate of white British airls, at 0.12. The figure for Black African airls or other Black ethnicities were not shared, which is indeed part of the problem. Often, the experiences of Black African and Caribbean groups are amalgamated, however experiences are unique which necessitates solutions to be unique. For Agenda Alliance to obtain the disaggregated data on ethnicity and sex, they had to apply for a Freedom of Information request, as these figures which explore intersectionality are not routinely made available by the Department for Education. A lack of deep data which combines ethnicities and gender reinforces the incorrect approach that 'one size fits all', this often means treatments and solutions whether in an educational or mental health context are not tailored and patient-centred. In addition to disaggregated data, cultural competency training is necessary to ensure Black women's experiences are understood and supported in an holistic way. A campaign run by charity Sistah Space, which provides domestic violence support for women of Caribbean or African heritage, advocates for Valerie's Law, which would make cultural competency training mandatory for police, relevant government agencies and those working in women's refuges.

These negative encounters can be intensified for migrants, refugees, and asylum seekers. The reports we analysed do not adequately discuss the unique experiences faced by migrants, and the institutions in question which fail them. Within the arena of policing, a report from the House of Commons notes that *"two specific issues are faced by migrant victims and survivors of domestic abuse: support for people whose immigration status means they have 'no recourse to public funds', and the challenges involved in reporting domestic abuse to the police. Migrant survivors of domestic abuse with an insecure immigration status have been recognised as particularly*

vulnerable"¹⁵ The report discusses the ways in which victims' immigration status can be a source of abuse as perpetrators of domestic abuse and controlling behaviour may withhold documents, threaten to report the victim to immigration enforcement and/or fail to act on sponsorship duties. Migrant victims and survivors may also be hesitant to report crimes against them to police in fear of their details being passed on to immigration enforcement. Migrants may face unique and significant barriers, necessitating a 'not one size fits all' approach and solution, cultural competency training should be paramount for professionals irrespective of the fields they work in, be it education, policing, or mental health. We suggest an in-depth exploration of the experiences of migrants across public services as an important avenue for future research.

In mental health services, research points to a lack of acknowledgement that racism and discrimination can be a causal factor in mental health issues, alongside a lack of cultural competency and sensitivity within services. The Women's Mental Health Taskforce report highlights the under-acknowledgement by mental health services of social context, including insensitivity to a person's role as a mother, or genderrelated trauma such as domestic abuse or sexual violence. In particular, the Greater Manchester Mental Health NHS Foundation Trust highlights a lack of trauma-informed care training for staff, which can make it more likely for services to retraumatise women who have experienced prior abuse.

This 'one size fits all approach' identified by these reports mirrors the experiences women shared with us in our call for evidence. For example, one woman described her struggles for her trauma to be heard and understood, amid a lack of cultural knowledge from practitioners and being the only person of colour in the therapy room.

"Another thing that I found very hard was dealing with people who were not familiar with my cultural background and sometimes would make me feel uncomfortable to discuss the traumas / issues I was facing. It wasn't until my third suicide attempt at 23 where I was hospitalised did I receive proper mental health support. I was diagnosed with BPD, Depression, PTSD, and anxiety. It took the mental health services 10 years before I was diagnosed therefore, my condition effectively could have been supported a lot sooner. I participated in group and one-to-one therapy. In my group therapy I was the only person of colour in the room which made me think is there a lack of provision to the black community or is it because we are not coming forward."

[Woman, 31, Black British]

Another woman, a teacher herself for sixteen years, shared her daughter's experiences of racism and cultural insensitivity at school, which led to a mental health crisis.

"She decided she wanted to wear a headscarf. She went to school and was asked if she had been forced into marriage over the weekend. Her teacher was a white middle aged woman known for her lack of cultural sensitivity amongst the students. My daughter felt isolated and unseen. At the time she shared it amongst her social media and friends. She had a breakdown the following week and took herself to hospital as she was a mental health champion. The consultant gave me a letter. However, on return to school they did not let her drop her fourth A-level. The following month she attempted suicide, then it was lock down. She has been in therapy for a few years. I never had the courage to

¹⁵ House of Commons Library. Criminalisation of victims of violence against women from ethnic minority and migrant communities. 2023. https://researchbriefings.files.parliament.uk/documents/CDP-2023-0149/CDP-2023-0149.pdf p. 8.

follow up with the school. I was devastated and exhausted from holding space for her. My daughter is articulate and sociable. This destroyed her. I sought private support. NHS tried but had little sensitivity. More support is need for POC."

[Woman, 52, Pakistani or Bangladeshi]

In summary

This evidence, both from women's lived experience and from significant inquiries and reviews, sheds light on the widespread institutional racism and misogyny present within policing, education and mental health services. We identify the excessive use of force, pervasive stereotyping or othering, the erasure of women's voices, and the absence of intersectional and tailored solutions as key commonalities between these different public services. We have identified the ways in which each of these issues go beyond the one-off cases and incidents giving rise to these inquiries, instead reflecting deeprooted problems which manifest in similar ways across different public institutions.

In-depth review of reviews

The following sections provide greater in-depth analysis of the key harms identified in each public service in turn and explore how the reviews we have read approach key issues including power, intersectionality, and institutional racism and misogyny.

1. Policing

The following section explores two reports: *The Baroness Casey Review* (2023)¹⁶ and *The Police Race Action Plan* (2022).¹⁷

The Baroness Casey Review published in March 2023, is a review into the standards of behaviour and internal culture of the Metropolitan Police Service. Recognising the grave levels of public concern following the kidnap, rape, and murder of Sarah Everard by a serving Met officer and other deeply troubling incidents, the Metropolitan Police Service (the Met) appointed Baroness Louise Casey to lead an independent review of its culture and standards of behaviour. The review began in February 2022 and completed in March 2023, when the final report and recommendations were published.

The Police Race Action Plan published in May 2022 outlines the ambition of police chiefs in England and Wales to build what they refer to as an anti-racist police service and to address race disparities affecting Black people working within or interacting with police. Deputy Assistant Commissioner Dr Alison Heydari is the appointed Programme Director for the Police Race Action Plan, her role is to lead the direction of the plan and work with stakeholders. The National Police Chief's Council (NPCC) states the plan was initiated as the need for change is evident due to disparities around stop and search, use of force, arrests, homicide rates, confidence in police and experience in the police workforce.

Context

The Criminal Justice System (CJS) is a collection of agencies including, but not limited to, the police, the courts, the Ministry of Justice and the Home Office which are involved in the detection and prevention of crime, the prosecution of people accused of committing crimes, the conviction and sentencing of those found guilty, and the imprisonment and rehabilitation of ex-offenders.¹⁸ This chapter focuses specifically on policing but it is worth nothing that women, particularly Black women are subject to harm across the broader criminal justice system.

The core duty of the police service is to protect the public by detecting and preventing crime, police powers must be compatible with human rights and equalities legislation, they have powers to investigate crime, prevent crime and 'dispose' of criminal cases.¹⁹ The Police Act of 1916, made it possible for women to be appointed as police constables

¹⁶ Casey. Baroness Casey Review Final Report: An independent review into the standards of behaviour and internal culture of the Metropolitan Police Service. Metropolitan Police. 2023. https://www.met.police.uk/police-forces/metropolitan-police/areas/about-us/about-the-met/bcr/baroness-casey-review/

¹⁷ National Police Chiefs' Council & College of Policing. Police Race Action Plan: Improving policing for Black people. 2022. https://www.college.police.uk/support-forces/diversity-and-inclusion/action-plan

¹⁸ Criminal Justice Dictionary. Criminal Justice Alliance. Accessed 2024. https://www.criminaljusticealliance.org/ resources/criminal-justice-dictionary/#:~:text=Criminal%20justice%20system%20(CJS)%20%E2%80%93,and%20 sentencing%20of%20those%20found

¹⁹ House of Commons Library. Police powers: An introduction. 2021. https://commonslibrary.parliament.uk/researchbriefings/cbp-8637/

and in 1919, women were officially accepted into the Metropolitan Police.²⁰ In 1968, the first Black policewoman "Sislin Fay Allen" joined the Metropolitan Police. The Casey Review which examines the Metropolitan Police Service found that in December 2022, female officers compromised 31% of Met officers compared with 51.5% of the population. The Metropolitan Police workforce falls short of female representation, underrepresentation can contribute to mistrust from the public (more than one in three people who will struggle to foster a positive relationship with police as they don't see people like themselves in their constabulary²¹) and also means diverse experiences that hold value may be omitted, Black Equity Organisation found that 85% of Black people agree Black role models are needed across all levels of society.²²

Aside from the lack of diversity in the workforce, a distressing issue is around women's experiences when reporting crimes to the police and the lack of trust between the police and minority ethnic communities. While men and boys do suffer from violence, forms of abuse such as harassment, stalking, rape, sexual assault, murder, honour based abuse and coercive control disproportionately affect women.²³ The police's duty is to protect citizens but much of the data tells us that women do not feel protected or listened to, that their trauma is minimised when reporting cases, and that low conviction rates (5% for rape cases in 2021)²⁴ – deter women from reporting cases of violence and harm against them.

The outcomes and harm can be exacerbated when violence and crimes committed against women are perpetrated by the police as not only are they not fulfilling their duty, they are counteracting their very purpose. Two cases referenced in the Casey Review are: Sarah Everard who was abducted, raped and murdered by a serving police officer in 2021 and Bibaa Henry and Nicole Smallman who were murdered in 2020 followed by two serving police officers photographing and circulating pictures of the sisters. The mother of Bibaa Henry and Nicole Smallman has expressed her belief that racism played a role in the 'murders not being taken seriously' from the delayed search, mistakes around logging them as missing persons and the subsequent scandal²⁵. This chapter seeks to highlight experiences of public harm against Black women and girls. However, we cannot separate their intersecting identities of being both Black and female from their experiences.

Intersectionality

Both the Casey Review and Police Race Action Plan fail to adequately acknowledge and discuss the 'double disadvantage that BAME women experience created by intersectional discrimination'. Black women experience discriminations, criminalisation and victimisation that do not affect White women in the same proportions, Black women also experience discriminations and victimisations that Black men may not encounter, therefore experiencing double discrimination due to gender and race. A report from the House of Commons library notes that:

²⁰ Key milestones for women in policing. Skills for Justice. 2024. https://skillsforjustice.org.uk/news-insights/keymilestones-for-women-in-policing

²¹ Diversity in policing 2023: Do constabularies truly represent the communities they serve? The University of Law. 2023. https://www.law.ac.uk/resources/blog/diversity-in-policing/#:~:text=Nationally%2C%20one%20in%20five%20 (20.6,like%20themselves%20in%20their%20constabulary.

²² Swords B & Sheni R. Systemic Change Required: Black lived reality: why we need systemic change. Black Equity Organisation. 2022. https://blackequityorg.com/wp-content/uploads/2022/09/Systemic-change-required-V10.pdf

²³ Violence Against Women and Girls. National Police Chief's Council. Accessed 2024. https://www.npcc.police.uk/ our-work/violence-against-women-and-girls/

²⁴ Baird V. Victims' Commissioner. 2021/22 Annual Report. 2022. https://cloud-platforme218f50a4812967ba1215eaecede923f.s3.amazonaws.com/uploads/sites/6/2022/06/MOJ7216_Victimscommisioner-Annual-report_AW-WEB.pdf p. 17

²⁵ Murders of Bibaa Henry and Nicole Smallman. London Assembly. 2020. https://www.london.gov.uk/who-we-are/ what-london-assembly-does/questions-mayor/find-an-answer/murders-bibaa-henry-and-nicole-smallman-2#:~:text=She%20states%20that%20the%20police,remains%20in%20the%20police%20force.

"Criminalisation particularly affects Black, Asian, minoritised and migrant women in a number of ways, including the "double disadvantage" created by intersectional discrimination".²⁶

Additional social categories such as disability, sexual orientation and wider-life experiences may come into play which means some individuals face "triple or multiple discriminations".

The Casey Review dedicates chapters to examine different forms of discrimination, including homophobia, sexism and misogyny and racism, each chapter explores discrimination within these themes in relation to the Met workforce and against the public. The racism chapter explores racism within the Met workforce, for example, limited support for BAME officers to progress **and** racism from the Met toward the public, for example, the disproportionate use of stop and search against Black people. The sexism and misogyny chapter explores sexism within the Met workforce, for example, sexual harassment and lack of progression **and** subsequently, sexism directed at the public from the Met for example, police perpetrated domestic abuse. Although these chapters are comprehensive in providing evidence against the Met, there is a missed opportunity to analyse how the behaviour and internal culture of the Met disproportionality impacts Black women. A case study, however, is included by a Black, female officer who experienced racism and misogyny across a number of units in the Met. The officer shares that the "team had a rigid culture - which did not factor in cultural differences" and that she "felt unable to complain due to her race and gender and a fear she would be labelled as a troublemaker and ostracised", and she concludes:

"You have to try and be invisible as a Black woman... "It's a 'learn your place' culture. Except your place is never there... At first I thought it was about being a Special [constable]. Then I realised it was just the Met. And as time went on it became more obvious that it was also about being Black and a woman."²⁷

Both the racism and sexism chapters in the Casey Review, highlight the lack of representation of Black women in the force:

"Women remain underrepresented in the Met, particularly ethnic minority women, with deficits in supervisory ranks and the majority at lower ranks."²⁸

"Women, especially women of colour, need to work harder than their male counterparts at senior level".²⁹

There is an underrepresentation of Black and minoritized women in the force, it is important to analyse the impacts of this, for potential Black female recruits and Black women reporting crimes to the police as they do not see representations of themselves from the institution they aspire to work within or entrust to be served by. The toxic workplace culture of the Met exposed by the Casey Review needs to be addressed and although recruitment of Black women alone will not resolve the Met's institutional and systemic racism and misogyny, diversifying the workforce is a step in the right direction to improve representation.

- 27 P. 181.
- 28 P. 267
- 29 P. 265

²⁶ House of Commons Library. Criminalisation of victims of violence against women from ethnic minority and migrant communities. 2023. https://researchbriefings.files.parliament.uk/documents/CDP-2023-0149/CDP-2023-0149.pdf PAGE 3

Valerie's Law is a campaign spearheaded by Sistah Space and named after Valerie Forde, whose former partner murdered her and her twenty-three-year-old daughter, despite previously reporting him to the police. According to Sistah Space:

"The campaign advocates for mandatory cultural competency training that accounts for the cultural nuances and barriers, colloquialisms, languages and customs that make up the diverse black community. Valerie's law will enable police officers, relevant government agencies and domestic violence safehouse staff to acknowledge and protect black women in abusive situations through an understanding."³⁰

Sistah Space are campaigning for risk assessment questions to reflect the cultural environment of black women to better understand their dangers, training, so common stereotyping and unconscious bias of Black people are understood so it is not reflected in service providers' ability to help DV victims and an acknowledgment that Black skin complexions vary across a wide spectrum, meaning not all Black people's skin bruise the same as their white counterparts, as such, bruises cannot be a benchmark of the scale of how violent a situation is. Valerie's Law is an example of how cultural competency with an intersectional lens can be implemented to improve the responses for Black women affected by domestic violence

The Police Race Action Plan begins with an overview which outlines the case for change, the intended vision, and a list of core commitments. The report then details the actions they will take, which is categorised into four areas of work – representation, involvement, not over-policed, not under-protected. Each four areas, described as workstreams have various activities which they hope will achieve an anti-racist police service, some of the activities include: addressing racial disparities through recording of pay gaps (representation), stronger approaches to engaging with Black communities (involvement), community scrutiny of police data (not overpoliced) and developing a more effective response to hate crime committed against Black people (not under-protected).

Although the report is focused on Black people, there is only one mention of Black women found in the section discussing the aims of a police service that "protects Black people from crime and seeks justice for Black people" – the "not underprotected" workstream. The report notes that "Black women – are disproportionality victims of sexual assault". This statistic is not contextualised, and the report misses an opportunity to explore the experiences of Black women, lacking an intersectional approach.

Naming institutional racism

The reports differ in how institutions are discussed and whether the term of "institutional racism" is ascribed to the institutions in question. The Casey Review explicitly concludes that they have found institutional racism in the Metropolitan Police and finds the Met to be institutionally sexist and misogynistic. The report also states that "there is no shortage of evidence or research regarding racism and institutional racism in the Met" and mentions multiple times that the issues raised in this review are not new, "Sir William Macpherson made the first of those findings in his inquiry into the racist murder of Stephen Lawrence". Stephen Lawrence was murdered in 1993 in a racist attack by a gang of white men. The Macpherson report concluded that Stephen's case was dealt with in an institutionally racist way by the police because the investigation had not been handled with the same care and diligence that a case

³⁰ Valerie's Law. Sistah Space. Accessed 2024. https://www.sistahspace.org/new-page-2#:~:text=%E2%80%8B%20 Valerie's%20Law%20advocates%20for,up%20the%20diverse%20black%20community.

involving a white person would have been. Stephen's case was mismanaged and failed because of racism within the police force. Based on our research including our call for evidence, Casey's findings of the Met being institutionally racist and sexist and misogynistic are accurate, however, the Met being simultaneously discriminative and the impact this has on specifically Black women and girls should have been explored further. These findings which are concluded in separate chapters should be analysed synchronously to highlight the unique experiences and challenges of Black women.

The Police Race Action Plan states:

"Many people believe police to still be institutionally racist and have grounds for this view. We accept that policing still contains racism, discrimination and bias... We hope that in the future, we will be seen as institutionally antiracist".³¹

There is no admission or labelling that the police is institutionally racist, rather the acknowledgement that people think they are. Whereas the Casey Review is explicit in exposing the failures of the institution they have examined, the Police Race Action Plan fails at holding their institution to the same accountability. The report claims that progress has been made but acknowledges change is needed, *"although much has been done over the years to tackle racism, discrimination and bias in policing, change has not been fast enough nor significant enough".* An admission of the Police being institutionally racist could be seen as an admission that the whole police system is flawed and in need of radical reform and transformation, not just a 'few changes' which can be viewed as tokenistic or not far-reaching enough, this may be why this report does not categorically admit that policing is institutionally racist.

Use of quantitative and qualitative data

Aside from the cases discussed in the Casey Review, the report has numerous examples where testimonies from the affected people are centred. Within the sexism and misogyny chapter, there are quotes from Met employees speaking of experiences such as, sexual harassment, patronising comments, inappropriate sexual comments, denial of progression and promotions and disparities in the workforce but also police perpetrated sexual misconduct and domestic abuse. Similarly in the racism chapter, there are quotes from officers about racial discrimination, being overlooked for promotions and the stigmatisation of officers who take advantage of support initiatives. The qualitative data gathered through the testimonies empower the report, we read first-hand experiences of those facing discrimination and even the voices of those who "benefit" from this discrimination – white men. The qualitative data presented in the Casey review is supported with strong quantitative data.

Some of the charts illustrate:

- Volume and proportion of female officers in the Met
- Percentage of female officers in every different rank below Commander in Met
- Volume and percentage of misconduct allegations related to domestic abuse
- Volume and proportion of Black, Asian, Mixed ethnicity and Other ethnicity officers in the Met
- Percentage of Black, Asian, and ethnic minority officers in every rank below Commander in the Met
- Grievance allegations and cases raised in the Met by ethnic group of the person raising the complaint
- Survey results which ask the respondents (disaggregated by ethnicity) if they

³¹ P. 3.

think the Met are doing a "good job" locally, if they trust the institution and if they think the Met treat people fairly.

• There are also statistics relating to use of stop and search, taser use, baton and handcuffs

The data gathered shows how the Met deals with crime reports made by women, disproportionate use of force against ethnic minorities, disparities in the workforce regarding gender and ethnicity and public attitudes towards the Met, further supporting Casey's conclusion that the Met is institutionally misogynistic, sexist, and racist.

In contrast, the Police Race Action Plan does not centre voices of those concerned, qualitative data is not integrated in this report in the same way as the Casey review. There is some quantitative data of statistics around the disproportionate use of force against Black people – for example taser use, stop and search, and arrests, attitudes towards policing – confidence and trust levels, and the police workforce – including the make-up of the force and percentages of people who consider a career in policing. As aforementioned, one of their findings is that Black women, are disproportionate victims of sexual assault, this is the only reference made to Black women in the entirety of the report. The lack of voices from women, particularly Black women in the report itself is an example of how their voices are erased and overlooked by the institution in question.

What do the reports recommend?

The Casey Review lists various recommendations, encouraging every officer and member of the Met to commit to change.

"We found an organisation that needs not just a series of changes that have been called for numerous times in the past, or even a root and branch set of reforms to meet its responsibilities to Londoners, but a complete overhaul and a new approach to restore public trust and confidence and earn back consent from women, Black communities and the rest of London."

 One of the recommendations advocates for an overhaul of the misconduct process:

"The misconduct process is not fit for purpose. A new, independent, multidisciplinary team of officers and staff should be brought in by the Met to reform how it deals with misconduct cases, with a particular focus on how it handles sexual misconduct, domestic abuse and discrimination."

This recommendation would need to consider intersectionality and not deal with issues around sexual misconduct and/or domestic abuse separately to discrimination and racism in order have any positive effect on Black women and girls.

- There is also a call for a dedicated women's protection service:

"Including the establishment of new Specialist 'Soteria' teams to deal with rape and serious sexual offences. The Met should also aim to specialise its domestic abuse service to create more victim-centred approaches."

A victim-centred approach prioritises the voice of the victims, this should come with a realisation and acknowledgement that 'not one size fits all' and that women from different ethnicities and cultures will have unique experiences and therefore require different approaches and solutions. - A key sub-section under the recommendation for a children's strategy includes:

"Training for all officers who work with children to prevent adultification, where police officers and others regard children, especially Black and ethnic minority children, as threats rather than children who need protection from harm."

Black girls are more likely to experience adultification, and we explore this further in the Education chapter and its effect on Black girls in the school settings.

In both the sexism and racism chapters, when discussing recruitment, the review concludes that it *"is clear that the Met itself has not made a proper assessment of what is achievable, or what additional steps might be needed to address the deficit in its workforce's reflection of Londoners"*, with this in mind, it is clear why the report recommends that one of the key measurements to test whether reforms are being delivered is *"a narrowing in the gap between the diversity of the Met's workforce, including its officers and senior officers, and the make-up of the city it polices."*

The Police Race Action Plan itself is an outline of commitments and a plan of action, there are various recommendations throughout the report. The five commitments are:

- 1. Zero tolerance of racism in policing (at personal, interpersonal, force and national levels)
- 2. Policing will adopt an 'explain or reform' approach to address the negative impact and outcomes experienced by Black people
- 3. Policing will ensure that officers and staff understand the history of policing Black people and the ongoing impact and trauma of disproportionality
- 4. The development of a representative workforce
- 5. Policing will increase the involvement of Black communities in its work and improve support to Black victims of crime

The aim is to deliver the commitments through actions are set out within four categories, Black people being "properly represented, not-overpoliced, routinely involved and not under-protected". Some of the actions include working with the National Black Police Association to co-design a product for inclusion in the national curriculum and establishing a Black Heritage Advisory Group to achieve representation. The not overpoliced stream recommends, managing the deployment of taser officers and effective de-escalation training. Working with black communities and developing a template for reconciliation are some recommendations to achieve the 'routinely involvement' commitment. To achieve the commitment of Black people feeling protected includes training on how to deliver the most appropriate service to Black people who are victims of hate crimes. These are just a fraction of recommended actions and there are several more within the full report. The NPCC and College of Policing appear ambitious and optimistic about their plans and potential to achieve their actions. Although there are some notable recommendations, without an admission that the institution is systemically racist, we question whether they will go far enough in rooting out the wider causes, normalisations and behaviours which allow for an environment to breed and sustain racism.

Both reports highlight the importance of community involvement in shaping how the recommendations can be achieved, the recommendations rely on community engagement to varying degrees. In the Casey report, one of the recommendations cites *"The Met should introduce a new process with Londoners to apologise for past failings and rebuild consent, particularly with communities where this is most at risk"*, the Police Race Action Plan recommend engaging with Black communities and understanding Black history and the relationship between policing and Black communities.

2. Education

This chapter will explore the experiences of Black women and girls in relation to the educational system. We will review the *Local Child Safeguarding Practice Review: Child Q (2022)*³² and a report produced by the Agenda Alliance, *Girls at risk of exclusion (2021).*³³

The Local Safeguarding Practice Review was published in March 2022, initiated by City & Hackney Safeguarding Children Partnership, and authored by Jim Gamble QPM (Independent Safeguarding Children Commissioner) and Rory McCallum (Senior Professional Advisor). This paper was written to investigate what happened to a Black schoolgirl, anonymised as 'Child Q', was who was strip-searched by police officers. The search involved the exposure of Child Q's intimate body parts, took place on school premises in Hackney, and was conducted without an appropriate adult present. The review concluded that the strip-search should not have occurred and found racism and adultification to be likely influencing factors in what happened.

Agenda is an alliance of over 100 organisations who work in collaboration to influence public policy and practice to respond appropriately to women and girls with unmet needs. They launched "Girls Speak", a campaign focused on girls and young women experiences of statutory and public services. "Girls at risk of exclusion" published in 2021, is a briefing paper produced as part of the Girls Speak campaign, which shines a light on the experiences of exclusion of some of the most marginalised girls and young women aged 14-24 in England and Wales. The briefing is informed by desk based research including a Freedom of Information request, interviews with fourteen girls with lived experience and a roundtable discussion with ten experts in the field. Although boys face higher rates of exclusion, the rate of exclusion amongst girls is rising, the paper draws attention to why intervention is needed: "girls being excluded in a minority should not make them less of a priority".

Context

Across the UK, there are five stages of education: early years, primary, secondary, Further Education (FE) and Higher Education (HE). Education is compulsory for all children between the ages of 5 and 16,³⁴ it is a requirement to remain in education or training between the ages of 16-18. The fifth stage; Higher Education, for most students takes place in universities and other higher educational institutions and colleges. The five educational stages bring different challenges for women and girls, particularly Black women and girls; disproportionate exclusions and police presence in schools and adultification are particularly visible in primary and secondary stage and in HE, "a disproportionate number of Black students experience alienation, discrimination and sense of 'otherness' because of the racial and/or ethnic identity to which they belong".³⁵ There are also challenges due to discrimination that span across all educational stages, for example "Black children are more frequently identified as having Special Educational Needs and Disabilities (SEND) without provision of adequate SEND support"³⁶, without support or timely diagnosis at

³² Gamble J & McCallum R. Local Child Safeguarding Practice Review: Child Q. 2022. https://chscp.org.uk/wpcontent/uploads/2022/03/Child-Q-PUBLISHED-14-March-22.pdf

³³ Agenda. Girls at risk of exclusion. 2021. https://www.agendaalliance.org/documents/5/Girls_at_Risk_of_ Exclusion_Briefing.pdf

³⁴ UK Government. Education System in the UK. 2012. https://assets.publishing.service.gov.uk/government/uploads/ system/uploads/attachment_data/file/219167/v01-2012ukes.pdf p. 1

³⁵ Francis, S D. Our voices matter: Young black women's experiences of identity formation within higher education. Fields: journal of Huddersfield student research. 2021; 7(1). DOI: <u>https://doi.org/10.5920/fields.819</u> page 1

³⁶ Global Black Maternal Health. Black Child SEND. Accessing special educational needs and disabilities (SEND) provision for Black and mixed Black heritage children: Lived experiences from parents and professionals living in South London. 2024 https://www.blackchildsend.com/_files/ugd/6e0914_096b4feb22b84593bf7db08f3c23ef26.pdf p. 8

primary care, systemic barriers may persist as a result throughout and into higher education level.

Aside from the challenges Black girls and women face as students, they are also underrepresented in the teaching workforce in state-funded schools at all levels including: classroom teachers, assistant headteachers, deputy headteachers and headteachers.³⁷ In 2021/22, 85.1% of all teachers in state-funded schools in England were white British compared with 1.2% Black African or Mixed White and Black African and 1.5% Black Caribbean or Mixed White and Black Caribbean. 0.8% of female teachers were Black African and 1.3% Black Caribbean. In 2021/22, there were around 20,800 headteachers, of the 14,025 female headteachers, White British females made up 95.7%, Black female Africans 0.2% and Black female Caribbeans 0.9%.³⁸

According to de Araujo, "denying black women the chance of leadership can lower the confidence of black girls, as they might also see themselves as incapable of leading".³⁹ Aside from the underrepresentation in figures compared with the general Black population and working age population, another issue is the prevalence of these figures. UCL reports that "46% of schools in England have no BAME teachers; and even in ethnically diverse schools, BAME teachers are underrepresented in senior leadership teams".⁴⁰ In Higher Education, research by Nicola Rollock reported that "fewer than 1% of professors in the UK are black, Black women represent the smallest group when both race and gender and considered together. They are three times less likely to be professors than their white female counterparts and half as likely as black men".⁴¹

The National Foundation for Education Research in their report 'Ethnic diversity in the teaching workforce: evidence review' examine some of the barriers to advancing diversity in teaching and school leadership and potential interventions. They conclude that the benefits of an ethnically diverse teaching workforce include: enrichment of society, recognition for members of minority group, helps to counter negative racial stereotypes and importantly, pupils of colour taught by same-race teachers have more positive outcomes.⁴²

The advisory group set up for the purpose of this project expressed that they felt some of the pressing issues around education affecting Black girls include: exclusion, particularly what precedes exclusions, support post-exclusions and the erasure of Black girls' experience simply because they are excluded at a lower rate than Black boys. They were also concerned about progression between education for Black girls between the educational stages i.e. primary, secondary, and further studies as experiences at different stages bring unique encounters. There was an emphasis that evidence and stories shouldn't be solely captured from university entrants as a lot of challenging experiences occur in primary and secondary school. A consensus was reached that police officers in schools as part of the safer school programmes aren't

³⁷ School teacher workforce. UK Government. 2023. https://www.ethnicity-facts-figures.service.gov.uk/workforceand-business/workforce-diversity/school-teacher-workforce/latest/

³⁸ Ibid. School teacher workforce. UK Government. 2023.

³⁹ De Araujo, D. Allyship and the professional impact on black women's career progression in education. Research Hub. Accessed 2024. https://my.chartered.college/research-hub/allyship-and-the-professional-impact-on-blackwomenaos-career-progression-in-education/

^{40 46%} of all schools in England have no BAME teachers. UCL. 2020. https://www.ucl.ac.uk/ioe/news/2020/dec/46all-schools-england-have-no-bame-teachers

⁴¹ Phenomenal Women: Portraits of UK Black Female Professors by Nicola Rollock, University and College Union. 2020. https://www.ucu.org.uk/article/10681/Phenomenal-Women-Portraits-of-UK-Black-Female-Professors

⁴² Sharp C & Aston K. Ethnic diversity in the teaching workforce: evidence review. 2024. National Foundation for Educational Research. 2024. https://www.nfer.ac.uk/media/py4nu3eq/ethnic_diversity_in_the_teaching_workforce_embargoed.pdf

effective in their approach at discussing issues in school, this may be due to mistrust in the police force which both the Casey Review and Race Action Plan discussed in the above section both recognised and suggested recommendations to improve.

Adultification & Child Q

Jahnine Davis and David Marsh, leading specialists in the safeguarding of Black children, define adultification as:

"When notions of innocence and vulnerability are not afforded to certain children. This is determined by people and institutions who hold power over them. When adultification occurs outside of the home it is always founded within discrimination and bias."⁴³

Davis has since extended this definition of adultification:

"A persistent and ongoing act of dehumanisation, which explicitly impacts Black children, and influences how they are safeguarded and protected. This form of bias spans pre-birth and remains on a continuum to adulthood. Where at this juncture it becomes absorbed within the normative negative racialised experiences many Black adults encounter throughout their life course. Adultification may differ dependent on an individual's intersecting identity, such as their gender, sexuality, and dis/abilities. However, race and racism remain the central tenant in which this bias operates."⁴⁴

The Safeguarding Review found that:

"One feature believed to have a significance to the experience of Child Q is that of adultification bias – in reflecting on how adultification bias might have been evident in practice with Child Q, this can be seen in that she received a largely criminal justice and disciplinary response from the adults around her, 'rather than a child protection response".

This finding is significant and should not be dismissed. The review continues:

"There seems to be a high level of probability that practitioners were influenced in this regard. The disproportionate decision to strip search Child Q is unlikely to have been disconnected from her ethnicity and her background as a child growing up on an estate in Hackney".

The review included firsthand accounts from Child Q's mother and aunt, their view is that "Child Q was treated differently because she is Black". Using Davis' definition of adultification which is also cited in the review, we cannot separate Child Q's treatment from her race, it is unsettling and disturbing that this harmful experience may not have occurred had she not been Black.

The Girls at risk of Exclusion report also explores adultification for Black girls:

"...whereby they are viewed as older than their age and more adult-like, with professionals assuming that they have greater levels of maturity and less innocence than their white peers – as well as informing more punitive

⁴³ Davis J. Adultification bias within child protection and safeguarding. Her Majesty's Inspectorate of Probation. 2022. https://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2022/06/Academic-Insights-Adultification-bias-within-child-protection-and-safeguarding.pdf p. 5

⁴⁴ Ibid. Davis J. Adultification bias within child protection and safeguarding. Her Majesty's Inspectorate of Probation. 2022. P. 5

responses, this may also result in Black girls receiving less support in relation to their emotional wellbeing as they are treated as posing a risk to others first and foremost, rather than as vulnerable children in their own right."

Adultification which is rooted in racism and discrimination erases the vulnerabilities of Black and minoritised girls, their vulnerabilities are ignored and unidentified, this leads to them not receiving the services they need, instead they are subjected to further harm.

The adultification bias lens used by institutions in the educational system is harmful to Black girls and the impacts are detrimental. Agenda examines how exclusion becomes part of a 'spiral' which has been "linked to long-term psychological distress", also highlighting the gender specific risks, girls experience in pupil referral units such as "sexual harassment and abuse". The report notes that "The mental health impacts of exclusion are particularly significant for girls – described as on a deteriorating trajectory following exclusion". Agenda also notes:

"Girls who are excluded are also at increased risk of coming into contact with the criminal justice system – a growing body of research describes the schoolto-prison or PRU-to-prison pipeline". "Around 90% of children in custody had been excluded from school at any one time before entering custody, 74% of girls have been permanently excluded, compared to 63% of boys".⁴⁵

The harms imposed against girls in school mirrors the harms imposed against women and girls within policing, they reinforce one another and can occur simultaneously, as in child Q's case or consecutively.

Davis argues that, although

"Black children are most likely to experience adultification bias, it is important to understand the differing contexts in which it can feature, which places all children at risk of this discrimination – this should not mean a shifting of focus from Black children but instead a curiosity to understand how race/ethnicity and other aspects of a child's identity compounds these different contexts".⁴⁶

She explains, children living at homes where domestic violence is present, social economic deprivation, homelessness, young carers, unaccompanied minors, and transphobia as contexts where adultification bias can occur. It is important to take intersectionality – discussed earlier – into consideration as pupils may be at more risk to harm due to the intersections of race/ethnicity, gender, and wider lived experiences. If we consider a Black girl living in a home where domestic violence is present (Davis argues children living in homes where domestic violence is present are more likely to be adultified), there is a potential that this girls behaviour will not be understood and she may be subject to two layers of adultification because of her race and exposure to domestic violence in the home setting.

Use of quantitative and qualitative data

The Safeguarding Practice Review engages with Child Q and includes a written account of her experiences. Child Q's mother and maternal aunt were also engaged by the review. The inclusion of their views in this report are significant as it magnifies their voices as opposed to erasing their voices. It is vital to hear first-hand testimonies

⁴⁵ Houses of Parliament. Education in Youth Custody. 2016. https://researchbriefings.files.parliament.uk/documents/ POST-PN-0524/POST-PN-0524.pdf p. 3

⁴⁶ Ibid. Davis J. Adultification bias within child protection and safeguarding. Her Majesty's Inspectorate of Probation. 2022.p. 6

of the impact this experience had on the very people it happened to. Oftentimes, the experiences of Black women are compounded, assumptions are made or non-Black women and/or men speak on their behalf, it is imperative that such reports and any subsequent recommendations are centred on the voices of Black women for any meaningful change to occur.

The report shares data about the searches that have taken place in the borough in which the incident occurred:

"During 2020/2021, there were 299 further searches' conducted in Hackney by local police officers from the Central East BCU of the MPS. The review was advised that 'further searches' is the terminology used to cover strip search activity, although this does not differentiate between the specific types of searches that can be undertaken. Over the same period, 25 children under the age of 18 were subject of 'further searches'. 19 were male... 22 (88%) of the searches were negative with an outcome of no further action recorded in 20 (80%) of the cases. In terms of ethnicity, (as per the codes used by the police), 15 (60%) of the children searched were Black, 2 were White, 6 Asian and 2 Arab or North African."

In 2021, 21% of Hackney's population identified as Black or Black British⁴⁷ yet 60% of children under the age of 18 who were subject to further searches were Black,⁴⁸ meaning they are overrepresented in further searches. In 2021, there were 40.7 stop and searches for every 1,000 Black people compared with 6.8 for every 1,000 white British people across England and Wales.⁴⁹

The data about further searches included in the report contextualises the environment which existed at the time of Child Q's experience. In the words of Child Q in the report, "someone walked into the school, where I was supposed to feel safe, took me away from the people who were supposed to protect me and stripped me naked, while on my period". She was let down by the educational institution which she felt should have been a place of safety. The statistics of stop and search within the UK and more specifically in London, sanctioned by the same police force which the Casey Review concluded is institutionally racist creates the backdrop for the same unjust and discriminatory mistreatment to happen within schools, schools are as unsafe as wider society.

The Girls at Risk of Exclusion report contains various quotes and detailed stories from girls and young women with lived experience of the issue, but also from alternative education provision staff. These voices are weaved throughout the report, these first-hand accounts provide a clearer insight into the issues surrounding exclusions. The quantitative data shared in the report tells us that girls are in fact excluded from the data, the Department for Education does not routinely publish data relating to school exclusions broken down by sex and ethnicity, the findings in the report were made available through a Freedom of Information (FOI) request.

The report found that:

"In 2018/2019, 1,885 girls were permanently excluded from school, compared to

⁴⁷ Office for National Statistics. How life has changed in Hackney: Census 2021. https://www.ons.gov.uk/ visualisations/censusareachanges/E09000012/

⁴⁸ Ibid. Gamble J & McCallum R. Local Child Safeguarding Practice Review: Child Q. 2022. p. 11

⁴⁹ UK Government. Stop and search. 2024. https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/policing/stop-and-search/latest/

6,009 boys. Whilst boys face higher rates of exclusion overall, the rate at which girls are excluded is increasing. The rates of permanent exclusion of girls rose by 66% in the five year prior to the pandemic, compared to a rise of 27% for boys."

Through their FOI request, the report shares that "in the academic year 2019/20, Black Caribbean girls were permanently excluded from school at a rate double that of White British girls, with this tripling for Mixed White and Black Caribbean girls". Black Caribbean girls and Mixed White and Black Caribbean girls are overrepresented when compared with their peers amongst children excluded from school.

Although, persistent disruptive behaviour is the most commonly recorded reason for formal exclusion of all pupils, Agenda's research indicates that this masks the complex reasons behind girls' behaviours, and girls who are excluded often face considerable disadvantages including violence, abuse, exploitation, poverty and poor mental health. People from Black, Asian and Minority Ethnic communities have a higher chance of developing a mental health problem but are less likely to receive support for their mental health,⁵⁰ people from BAME backgrounds are also more likely to be living in poverty than their white counterparts.⁵¹ Although men and boys suffer abuse and violence, it disproportionately affects women and girls, "10% of all reported violence against women and girls is rape and serious sexual offences, 36% of sexual offences are rape. 24.1% of sexual offences are committed against children aged 10-14, whilst 25% are committed against children aged 15-19"52. Agenda explains how the different challenges which girls encounter- particularly Black girls – overlap and reinforce each other. It is vital to examine the wider factors that are contributing to the exclusions of girls and disproportionate exclusions of Black girls. The double disadvantages in the Policing section above are evident within the education system, and intersectionality in this case means Child Q and some of the girls providing testimonies in Agenda's report are facing unique experiences, linked to their intersecting identities of being Black girls.

What do the reports recommend?

The Safeguarding Practice Review made fourteen recommendations, including:

- the Department for Education should review and revise its guidance on Searching, screening, and confiscation (2018) to include more explicit reference to safeguarding and to amend its use of inappropriate language
- Relevant police guidance (both local and national) governing the policy on strip searching children should clearly define a need to focus on the safeguarding needs of children and follow up actions that need to be considered by way of helping and protecting children at potential risk.
- Where any suspicion of harm arises by way of concerns for potential or actual substance misuse, a safeguarding response is paramount. Practitioners should always contact Children's Social Care to make a referral or seek further advice in such circumstances.
- The CHSCP should continue with its rolling programme of multi-agency adultification training. Participation should be actively focused on practitioners from the police and schools, with the Training, Learning & Development Subgroup

⁵⁰ Facts and figures from other studies. Mind. Accessed 2024. https://www.mind.org.uk/about-us/ourstrategy/becoming-a-truly-anti-racist-organisation/facts-and-figures-about-racism-and-mentalhealth/#:~:text=Evidence%20suggests%20that%20people%20from,support%20for%20their%20mental%20health.

⁵¹ Falling Faster Amidst a Cost-of-Living Crisis: Poverty, Inequality and Ethnicity in the UK. 2022. https://www. runnymedetrust.org/publications/falling-faster-amidst-a-cost-of-living-crisis-poverty-inequality-and-ethnicity-inthe-uk#:~:text=Falling%20Faster%20shows%20that%20Black,)%2C%20than%20their%20white%20counterparts.

⁵² College of Policing & National Police Chief's Council. Policing Violence Against Women and Girls: The National Framework for Delivery 2024 – 2027. 2024 https://www.npcc.police.uk/SysSiteAssets/media/downloads/our-work/ vawg/vawg-framework-for-delivery.pdf page 6

developing a process to specifically evaluate impact across these sectors.

- The CHSCP should expedite its work on developing an anti-racist charter and practical guides that support the eradicating of racism, discrimination, and injustice across its local safeguarding arrangements.

The recommendations are targeted at a range of bodies including City & Hackney Safeguarding Children Partnership (CHSCP), Independent Office for Police Conduct, Metropolitan Police Service, Department for Education, Central East Basic Command Unit, The Home Office, National Police Council, and practitioners. Some of the recommendations focus on revised guidance whereas others recommend engagement with stakeholders such as ACCOUNT, College of Policing, Safer Schools Police Officers, and other community organisations. ACCOUNT is a youth-led social action project based in Hackney, they monitor and scrutinise police activity including data on Stop and Search, use of force and complaints. Their purpose is to empower young people, campaign for justice and hold those in power to account ⁵³. Similarly to the recommendations in the reports examined in the policing chapter, engagement with community organisations is advised. The recommendation for the CHSCP to continue with its rolling programme of multi-agency adultification training echoes the Casey Review recommendation for the provision of training for all officers who work with children to prevent adultification.

The recommendations being targeted at a range of bodies and not just CHSCP indicate a recognition of the importance of multi-agency collaboration. Although Child Q's experience took place within school, the police officers played a role in imposing harm, this overlap of services in a single experience supports our stance that different institutions are complicit and at times simultaneously complicit, in imposing harms on women and girls, particularly Black women and girls.

The Girls at Risk of Exclusion report by Agenda Alliance concludes with seven recommendations, five recommendations are targeted at the Department for Education, one for local authorities and one for practitioners and professionals. Some of the recommendations include:

- The Department for Education to fully fund and implement the Timpson Review recommendation to invest in building multi-disciplinary teams around schools. For girls at risk, these teams must include specialist services for girls and young women and services led by and for Black and minoritised women.
- Local Authorities to lead on developing local partnerships between schools, alternative provision, youth services and the women and girls' voluntary sector. This should support the development of a whole-system response to girls at risk of exclusion, where all services in contact with girls work collaboratively, sharing knowledge and skills to provide age-gender-and trauma-informed support.
- The Department for Education to collect and publish data on the numbers, types, and drivers of school exclusions for girls and the characteristics of girls experiencing formal and informal exclusions this data must be disaggregated across all protected characteristics, in particular sex and ethnicity.

Similar to the Safeguarding Practice Review, there is an emphasis on service providers working collaboratively to support a "whole-system" response. Women and girls are often let down by multiple services, necessitating reforms from multiple services to combat institutional harms.

Three of the seven recommendations specifically refer to Black and minoritised

⁵³ What we do. Account. Accessed 2024. <u>https://www.accounthackney.org/our-vision</u>

communities including the need for data on ethnicity and exclusions to be disaggregated and published. This comes as no surprise as the report dedicates a chapter on the experiences of exclusion on Black and minoritised girls, acknowledging that Black and minoritised girls in particular "receive more punitive than welfare-based responses, including the disproportionate use of restraint, when they are perceived to be 'acting-out'". The report also cites how "racist stereotyping can limit agencies' understanding, and thus accurate identification of other forms of vulnerability when this is face by Black and minoritised young women". Stereotypes and discrimination affect institutions' understanding of the drivers and wider context of multiple disadvantages often experienced by those facing exclusions.

Any recommendations to combat public harms against women and girls must take into consideration the different experiences of different ethnicities and even within these ethnicities, experiences are still unique and varied, the recommendations in the Safeguarding Practice Review echo a "one size fits all" approach, solutions are not tailored to those with intersecting identities. The recommendations in both reports could be empowered with key indicators to measure the success of them if implemented and suggested time frames as the work needed to be undertaken is critical. Although the Safeguarding Practice Review was triggered in response to the case of Child Q and there are various lessons to be learnt, it is not an isolated incident, the wider context of systemic racism which allowed this incident to take place is not explored thoroughly. Necessary recommendations to combat these systemic issues are not included, instead a recommendation for the CHSCP to develop an anti-racist charter for its local safeguarding arrangements is suggested which is not far-reaching enough. Both reports could have included recommendations around diversifying the teacher workforce, as one route to combat discrimination and improve pupils' school experiences, as we explored above, there are several advantages to this.

The recommendation from Agenda which includes partnership working with women and girls' voluntary sector, again, calls on the community to be involved in reforms. Recommendations which offload responsibility onto communities and those with lived-experiences must be accompanied with actual power to enact changes as opposed to tokenistic gestures which we have witnessed in other approaches to institutional reforms.

Discussion of power

In both reviews, power appears to be top-down, and held by the school, their safer school police officer and Metropolitan police service (MPS) in Child Q's case and schools, local authorities, teachers, and the Department for Education (DfE) regarding the Girls at Risk of Exclusion report. Power residing with such institutions maintains misogyny and racism in education, this power is sustained due to lack of diversity in the workforce, insufficient training for example in adultification bias and disciplinary policies which disproportionately affect Black pupils and girls who have been perceived to have "transgressed gender norms".

The call for engagement with community organisations in both reports indicate that power is also held by communities and not simply by the state over subjects. For power to meaningfully reside with communities and be more fluid – community groups, grassroot movements, educational activists and progressive policymakers must resist and challenge hierarchical power. This may translate to inclusive policies, diverse hiring practices, advocacy and activism and curriculum reform.

The review has several mentions of power as it resides with institutions – in Child Q's case "the strip search, related to the overall stop and search powers available to the police", power here is with the MPS, the Casey review which we examined in the Policing chapter highlighted several instances of misuse and abuse of power by the

MPS. The review cites that Home Office guidance "explains that the use of powers relating to stop and search 'must be used fairly, responsibly, with respect for people being searched and without unlawful discrimination". Power must be accompanied with responsibility, duty and particularly the need to safeguard persons under the age of 18. Power was misused in this case, as Child Q in her own words did not feel safe, power was also used to sustain racism as the review itself concluded that the decision to strip search Q is unlikely to have been disconnected from her ethnicity, contradicting Home Office guidance.

No appropriate adult was in attendance during Child Q's strip search, teachers remained outside the room and Child Q's mother was not contacted in advance. One of the findings from the review states: "The absence of any specific requirement to seek parental consent when strip searching children undermines the principles of parental responsibility and partnership working with parents to safeguard children". The absence of any notification to Child Q's mother strips power that parents and guardians may have otherwise to advocate, engage, and challenge harms perpetrated by the school. We can argue that the review acknowledges how students can be empowered: "The review considers that benefits could also be accrued by educating and empowering young people to better understand their rights in respect of stop and search activity by the police", educating pupils can be a tool used to redress the top-down view of power being wielded by institutions.

The recommendations predominantly targeted at the DfE in the Girls at risk of exclusion report, suggests that some power to enact change resides with them as an institution, but also for the Local Authority and the schools' workforce. The report does not lend much to the idea of pupil or parental power. The report highlights evidence which suggests "girls are more vulnerable to types of exclusion which are absent from official statistics, and which lack the accountability mechanisms built into the formal exclusion process. This can include girls who 'self-exclude' through non-attendance at school, as well as unlawful exclusions which are not formally recorded (e.g. sending a pupil home to 'cool-off' or the illegal practice of off-rolling" Where there is no accountability or records kept, resisting hierarchical power can prove difficult, these cases of girls are lost in the narrative.

The report does advise in one recommendation for school professionals to work in partnership with the women and girls' voluntary sector. The ability of Agenda to gather data about exclusions broken down by sex and ethnicity obtained through an FOI is an example community power in action, the information they obtained reveals there is institutional harm being perpetrated to girls, particularly Black and minoritised girls and the evidence found is the basis for reform and campaigns.

3. Mental Health Services

The following section explores three key reports: the *Independent Review of Greater Manchester Mental Health NHS Foundation Trust* final report (2024, referred to throughout this section as the *Independent Review*), *Modernising the Mental Health Act* (2018), and *The Women's Mental Health Taskforce* final report (2018).

The Independent Review was commissioned by the NHS in November 2022 in response to abuses at the Edenfield Centre – a secure mental health unit in Prestwich, Salford – which were highlighted by a BBC panorama programme broadcast in September 2022. The review was led by Professor Oliver Shanley, a mental health nurse who was formerly Regional Chief Nurse for London, and explores the views and experiences of patients, families, carers, staff, and governors at the Trust alongside recommendations for improvement. Modernising the Mental Health Act is the final report of the independent review of the Mental Health Act 1983, the legislation under which people may be detained (usually in hospital or a police station) due to a mental health condition. The report was commissioned by Theresa May's government in 2017 in response to concern about disproportionate detention rates under the Act, with Black people 4 times more likely to be detained than white people.⁵⁴ Conducted by psychiatrist Simon Wessely, the review covers disproportionate detention rates as well as other key issues, including community treatment orders (CTOs) and the disproportionate use of restraint of women and Black people on mental health wards.

We also analyse the final report of the Women's Mental Health Taskforce, which was "set up in response to deteriorating mental health amongst women and poor outcomes experienced by some women in mental health services" by the government in 2017. The Taskforce comprised experts in women's mental health and was chaired by Katharine Sacks-Jones of Agenda, a charity which campaigns for women and girls at risk, and Jackie Doyle-Price, the Parliamentary Under-Secretary for Mental Health at the time. The report covers key outputs of the taskforce including focus groups with women in mental health services and a set of gender and trauma-informed principles for mental health care.

Context & mental health provision

Understandings of mental health and distress have shifted throughout history, shaped by cultural beliefs, science, and societal perceptions. In the UK, the asylums of the 19th century often functioned to separate the most marginalised from mainstream society, including people with learning disabilities⁵⁵ or those experiencing homelessness or poverty.⁵⁶ Separating, othering and pathologising people deemed socially unacceptable has been a common practice historically. For example, homosexuality was categorised as a mental disorder until 1973⁵⁷, racist ideas have been embedded into 19th and 20th century Western psychiatry, (e.g. in tropes of 'primitivity', 'mental inferiority', and predisposition toward aggression⁵⁸), and women's 'hysteria' was an accepted diagnosis until 1980 (an idea which suggested women are more predisposed to psychological problems than men due to 'biological inferiority').⁵⁹ Moreover, these ideas have often served to justify a history of abuse taking place in psychiatric institutions and broader health services, for example, conversion therapy, non-consensual medical experimentation, and sexual abuse.

Whilst progress has been made, today, people from marginalised groups – particularly Black women – continue to be at the sharpest end of harms caused by services, with less access to early support, Black women 3 times as likely to be detained as white women, and recent sharp increases overall in the numbers of women being detained.⁶⁰,

⁵⁴ Prime Minister announces review to tackle detention of those with mental ill health. UK Government. 2017. https:// www.gov.uk/government/news/prime-minister-announces-review-to-tackle-detention-of-those-with-mental-illhealth

⁵⁵ Jarrett S, Tilley E. The history of the history of learning disability. British Journal of Learning Disabilities. 2022 Jun;50(2):132-42.

⁵⁶ Handerer F, Kinderman P, Timmermann C, Tai SJ. How did mental health become so biomedical? The progressive erosion of social determinants in historical psychiatric admission registers. History of Psychiatry. 2021 Mar;32(1):37-51.

⁵⁷ McHenry SE. "Gay is Good": History of Homosexuality in the DSM and Modern Psychiatry. American Journal of Psychiatry Residents' Journal. 2022. https://doi.org/10.1176/appi.ajp-rj.2022.180103

⁵⁸ Fearnley AM. Primitive madness: re-writing the history of mental illness and race. Journal of the history of medicine and allied sciences. 2008 Apr 1;63(2):245-57.

⁵⁹ The controversy of 'female hysteria'. Medical News Today. 2020. https://www.medicalnewstoday.com/articles/thecontroversy-of-female-hysteria

⁶⁰ Mental Health Act statistics. NHS England. Accessed 2024. https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/mental-health-data-hub/dashboards/mental-health-act-statistics

^{61, 62} Reasons for this include biases present in the system as well as broader structural social conditions associated with racism and misogyny, leading to greater levels of mental distress and illness.

This context – both a person's individual life circumstances and gender and racial biases in the NHS – have been notably underacknowledged in mental health practice and research in recent decades. In a speech to the British Psychological Society, Professor Mary Boyle argues that, whilst context is acknowledged by psychologists, it "never seems as important or more important than the activities of people's minds or brains in explaining or relieving their problems" to them.⁶³ She argues that this avoidance of context by the psychology profession serves to maintain existing power structures of racism, sexism, and economic inequality, by framing mental health issues as primarily individual, internal, and biological problems. In turn, this can provide policymakers more room to avoid addressing wider social or institutional issues, and places responsibility for change – and often blame – with the individual.

Notably, the Independent Review report, Modernising the Mental Health Act and The Women's Mental Health Taskforce report do acknowledge social context, to varying degrees. The Independent Review sets out the impact of the covid-19 pandemic in increasing the levels of mental distress in the general population, and links the challenges seen in Manchester to broader inequalities, including the disproportionate numbers of Black people and people from deprived areas being detained under the Mental Health Act. Modernising the Mental Health Act acknowledges how *"racism experienced in everyday life compounds already poor experiences of, and outcomes from, health services."*⁶⁴ and highlights the need for gender and trauma informed care in mental health treatment.

However, the Women's Mental Health Taskforce report goes further than the other reports, by exploring the role of context in mental distress throughout. Specifically, the report discusses the types of trauma that women, and particularly Black women, are more likely to experience, such as domestic abuse and sexual violence, and the need for greater sensitivity to this in mental health care. The report also acknowledges the direct link between poverty and mental health problems, with women more likely than men to be single parents, who are in turn more likely to live in poverty.

Discussion of power

In response to the under-acknowledgement of social context in mental health, Boyle and colleagues developed the *Power Threat Meaning Framework* as a practical guide for practitioners to understand a person's wider circumstances, particularly the operation of power in their lives. The framework asks a person:

- 'What has happened to you?' (*How is power operating in your life?*)
- 'How did it affect you?' (What kinds of threats does this pose?)
- 'What sense did you make of it?' (What is the meaning of these situations and experiences to you?)
- 'What did you have to do to survive?' (What kinds of threat response are you using?)

⁶¹ Black Women are 'Disproportionately' Detained Under The Mental Health Act. Each Other. 2023. https://eachother. org.uk/black-women-are-disproportionalty-detained-under-the-mental-health-act/

⁶² Detentions under the Mental Health Act. UK Government. 2023. https://www.ethnicity-facts-figures.service.gov.uk/ health/mental-health/detentions-under-the-mental-health-act/latest/

The British Psychological Society. Is clinical psychology fearful of social context? Professor Mary Boyle, 2014.

https://www.youtube.com/watch?v=Kt4JcTDPUoc

⁶⁴ P. 163

These questions are intended to help practitioners to explore how a person's life circumstances have influenced their mental distress but may also be useful way of thinking about how institutional power can affect people on mental health wards. Modernising the Mental Health Act acknowledges the unique level of power held by professionals under the Mental Health Act, distinguishing it from other healthcare provision. Specifically, the act grants the authority to detain and deprive people of their freedom for their safety or that of others when they are most vulnerable. The report describes a key tension between "personal freedom" and "freedom from pain", when professionals are deciding whether to detain someone experiencing severe mental distress or who may be at risk to themselves.

"On the one hand, the Mental Health Act takes away your liberty and imposes treatment that you don't want. It can be traumatic, frightening, and confusing. But on the other it can help restore health, and even be life-saving. It is an imposition on personal freedom, but it can also help people to become freer from the pain and distress that accompanies the most severe of mental illnesses." ⁶⁵

Modernising the Mental Health Act characterises disproportionate detention rates as resulting from a power imbalance, and advocates to "shift the balance of power between patients and professionals". This type of institutional power provided by the Mental Health Act is intertwined with existing societal power structures – such as racism and misogyny – which leaves it susceptible to misuse. The report highlights how people of Black African and Caribbean heritage are disproportionately detained and given community treatment orders⁶⁶ under the Act compared to white people across the UK, and how the routine use of restraint on wards affects women and girls. *The Independent Review* reveals that ethnic minority patients within the Greater Manchester NHS Trust were more likely to be restrained or secluded, and in punitive rather than therapeutic ways. The report also shows that women were secluded at unexpectedly high rates, with poor conditions in seclusion rooms – including raw sewage leaks and mould growing.

Modernising the Mental Health Act acknowledges the role of racism in the overuse of restraint, detention, and community treatment orders (CTOs) – both in creating the societal conditions making mental distress more likely for Black and minoritised people, and in the overuse of coercion when applying these powers. A quote from an Approved Mental Health Professional (AMPH) in the report highlights an example whereby a Black woman was being put forward for additional restrictions, without need.

"What they were saying is this was a violent, dangerous, woman (...) who needed to be in medium secure (...) I read her case from back to front (...) She was compliant with medication. No problems. No issues. No concerns. And they wanted to transfer her to medium secure. (AMHP, London)."⁶⁷

The Women's Mental Health Taskforce report describes how, in their research "Black, Asian and minority ethnic women (BAME) spoke powerfully about a perceived imbalance of power and authority between service users and providers".⁶⁸ In particular, the report notes that Post-Traumatic Stress Disorder (PTSD) is more

⁶⁵ P. 4

⁶⁶ A community treatment order (CTO) involves compulsory, supervised treatment in the community, rather than at hospital, in which a person can be recalled to hospital if they don't follow the conditions of the CTO.

⁶⁷ P. 293

⁶⁸ P. 20

common in Black women, related to the higher rates of sexual assaults that they experience, but that mental health services "do not appear to always understand the dynamics of abuse and its impacts on mental health".⁶⁹ That is, being physically restrained by professionals on a mental health ward is frightening for anyone, but can be especially re-traumatising for women, especially Black women, who are more likely to have previously experienced domestic abuse or excessive force at the hands of public services such as the police. The report also presents evidence of high rates of sexual assault or harassment in mental health services, noting 457 incidents between April and June 2017 as reported by the Care Quality Commission, which it describes as an alarming figure.

"The Taskforce heard alarming cases of women who had experienced trauma (often through childhood, domestic or sexual abuse) who then experienced further trauma in mental health services through restraint, assault and/or disturbing experiences of one-to-one observations."⁷⁰

The Independent Review highlights how staff training in trauma-informed care at the Greater Manchester Trust, particularly in the women's services, had stopped during the pandemic, and did not return due to lack of capacity – with the team moving instead toward a "behavioural" focus. Workforce challenges had meant that delivery of care became about "surviving the shift" for staff, and quality of care had diminished. Indeed, the adoption of trauma-informed or broader approaches which are gender and racially sensitive remains piecemeal in the NHS, rather than part of a centralised, funded approach.⁷¹ This makes the types of harm seen at Edenfield more likely and enables the power operating in women's broader lives to be recreated in similar ways in mental health settings. As the Women's Mental Health Taskforce report notes, these experiences often involve silencing women, but their voices (i.e. 'what has happened to you?') must be heard, understood, and acted upon if we are to resist and challenge the status quo.

The erasure and invisibility of women's voices

Hearing women's, and particularly Black women's voices is critically important to understanding the gendered experience of mental health care, providing the depth and context which statistics alone cannot capture. The Women's Mental Health Taskforce report highlights the historic erasure of women's voices in mental health services throughout and draws attention to lived experience in its section titled "*Hearing women's voices: what matters to women.*" The section summarises the results of focus groups with women to produce a series of statements for commissioners, providers, and practitioners to consider, and identifies key themes of voice and control, accessibility, safety, respect, and dignity, and understanding trauma. In particular, women highlighted the need for autonomy and having a say in their own care.

"I can take back control of my own life, be involved in my care and am able to discuss a range of options, which are personally suited to me, including alternatives to medication."

[Statement for commissioners, providers, and practitioners to consider, p.31]

⁶⁹ P. 24

⁷⁰ Pp. 13-14

⁷¹ Emsley E, Smith J, Martin D & Lewis N. Trauma-informed care in the UK: where are we? A qualitative study of health policies and professional perspectives. BMC Health Services Research. 2022; 22(1164),

The report also highlights women's need for practitioners to understand their social context as women – including the historical trauma they have experienced and the caring responsibilities they hold.

"I want therapeutic support with my current difficulties and past traumatic experiences including bereavement, sexual abuse and domestic violence."

"I am valued for and supported in my role as a mother and/or carer, with my concerns about the welfare of those dependants are listened to."

[Statements for commissioners, providers, and practitioners to consider, p.31]

However, the report does not explore race in detail alongside gender when highlighting this erasure of voices, which reflects insufficient research into Black women's experiences of mental health treatment in the UK as a whole. Other qualitative research that does explore Black women's experiences highlights that mental health services often do not account for experiences of racism and discrimination as a causal factor in distress, and point to a broad lack of knowledge among practitioners regarding cultural sensitivity, including a lack of signposting to local and inclusive services.^{72, 73} Furthermore, the 'Strong Black Woman' stereotype can serve to silence and minimise Black women's distress, pain, and victimhood – leading to poorer care and increased vulnerability to depression.⁷⁴ This trope, alongside stereotypes of aggression and dangerousness can mean Black women experiencing mental distress are more likely to be perceived as a threat to others compared with their white counterparts. This is reflected in greater use of restraint and higher rates of diagnoses of psychosis among Black women.⁷⁵ The *Independent Review* provides specific examples where this was the case in the Greater Manchester NHS Trust's mental health wards:

"Staff described how disruptive behaviours enacted by white patients were more likely to be attributed to their illness, whereas for patients from ethnic minorities, it was perceived as more likely to be dealt with in a punitive nontherapeutic manner. We were told that this was more likely to result in restraint, seclusion, and rapid tranquilisation.

One example included a black staff member being verbally abused by a white patient, and the ward manager diminished the incident, saying that it was because of the patient's illness. In another example, a white patient attacked a black patient and the response team arrived and wanted to remove the black patient who was the victim of the attack."

This stereotyping may also be exacerbated by a culture of excessive risk aversion in the NHS highlighted by Modernising the Mental Health Act, in which concern for professional reputation (e.g. if a practitioner were to fail to detain or restrain a person and this were to be the wrong decision) is provided disproportionate weight, sometimes at the cost of patient wellbeing and care. Furthermore, the Independent Review describes a specific culture in the Greater Manchester NHS Trust which did not

⁷² Kalathil J, Collier B, Bhakta R, Daniel O, Joseph D, Trivedi P. Recovery and Resilience: African, African-Caribbean and South Asian Women's Narratives of Recovering from Mental Distress. Mental Health Foundation; 2011.

⁷³ Sisley EJ, Hutton JM, Louise Goodbody C, Brown JSL. An interpretative phenomenological analysis of African Caribbean women's experiences and management of emotional distress. Heal Soc Care Community. 2011;19(4):392-402. doi:10.1111/j.1365-2524.2010.00986.x

⁷⁴ Donovan R & West L. Stress and Mental Health: Moderating Role of the Strong Black Woman Stereotype. Journal of Black Psychology. 2014; 41(4). https://doi.org/10.1177/0095798414543

⁷⁵ Nicholas J. Black and Asian Women's Conceptualisations of Psychosis and Compulsory Admission within an Early Intervention Service. 2020. https://repository.uel.ac.uk/ download/3c5a9185ed9f54385a6449fce50ae02b8ec19de214f1f45b16f7ec5f8f1ab9ed/7284744/2020_ClinPsychD_ Nicholas.pdf

provide the psychological safety for staff to take risks, question practices, or admit mistakes, which ultimately led to a "closed culture" of silence and ultimately greater risk to patient safety, compounded by a lack of training and increasing workforce pressures during the pandemic.

Modernising the Mental Health Act does not specifically bring out themes of silencing or erasure, although does spotlight qualitative research in addition to quantitative statistics to express the voices of service users, carers, and mental health professionals and their experiences of the Mental Health Act. For example, it explores racialised experiences of being detained under the act, and again, service users' experiencing a lack of say, or family say, in their own care, despite NICE guidelines to the contrary.

"I think I was on compulsory treatment order or whatever, community treatment order (...) nobody discussed it with me. You don't discuss your care plan. They [family members] need to be more involved in our own care, which is just what the NICE guidelines say anyway but it's not happening. There should be a way to make sure something like that happens." (Service user, Manchester)."⁷⁶

Naming institutional racism and misogyny

Modernising the Mental Health Act names and acknowledges the existence of institutional racism both in the foreword and once in the main body of the report. This is significant; acknowledging that racism does not just occur at the individual interpersonal level but is embedded into our mental health system is an essential foundation before change can happen. Interestingly, the report qualifies and softens the statement by describing mental health services' institutional racism as 'unconscious' and unintended, thus making it more less challenging. The author also describes the 'pain' and discomfort that is brought about in acknowledging institutional racism, seemingly pre-empting readers' personal defensiveness or fear/ sense of responsibility to tackle the challenge now that it has been named.

"So 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. I know that many people will be made to feel uncomfortable by these terms; and indeed I was one of them."⁷⁷

In contrast, the Women's Mental Health Taskforce report does not name institutional or systemic racism or misogyny, but as outlined above, describes a pattern of failings and abuses in the mental health care of women – which would amount to institutional misogyny. Furthermore, both reports are limited in their intersectionality. Whilst the Women's Mental Health Taskforce report provides some discussion of the interplay of gender and race – discussing the experiences of Black women 4 times throughout the report – Modernising the Mental Health Act does not discuss the experiences of Black women at all. This reflects a broader lack of intersectional data and erasure of the uniquely gendered and racialised experiences of Black women seen in research and policy.

Whilst the Independent Review does not explicitly name institutional racism or misogyny, the authors identify "issues treated in an isolated way" as an issue across the Trust, and refer to racism as an example of this, whose impact on patients had not been explored by the Trust.

⁷⁶ P. 294

⁷⁷ Pp. 10-11

"Across three of the four cases we looked at, we found examples of issues being identified without their being considered as potentially systemic. This risks them being treated locally, without management getting to the underlying cause of an issue... examples are reflected elsewhere in this report, including issues of racism and discrimination at Park House."

The report provides several examples of specific types of racism and discrimination identified by staff across the trust, including slower access to psychological therapies for Black and minoritised patients compared to white patients, and white patients having priority access to leave in times of low staffing. The report also describes staff's experiences of preferential promotions to those whose "face fit", and a lack of ethnic diversity in the Trust's leadership and white staff being 0.8 times more likely to be appointed from shortlisting and 1.66 times more likely to access training opportunities than Black and minoritised staff. However, the report does not provide discussion of misogyny, or the intersectional nature of the issues faced by the Trust.

What do the reports recommend?

Modernising the Mental Health Act puts forward a comprehensive list of recommendations for changes to the Mental Health Act 1983, which allows people to be detained without having committed a crime if they are suffering a mental health crisis. First, the report notes that a significant theme throughout is choice and autonomy, that is, "to ensure that the voice of the patient is heard louder and more distinctly, and that is carries more weight, than has been the case in the past." [p.69]. In doing so, the report recommends statutory advance choice documents (for people to agree and make choices about their inpatient care before they are detained), more formalised rights around the appeal of treatment decisions, and the choice of a nominated person, who can be consulted about, and have the power to challenge treatment on behalf of the person being detained. The government have since drafted a revised version of the Mental Health Act (published in 2022)⁷⁸ which includes the provision of a nominated person but does not include the right to appeal treatment decisions via tribunal, nor does it include statutory advance choice documents. These may go some way toward reducing the harms to women, and particularly Black women, whose say in their own care has been historically gone unheard.

Similarly, the Women's Mental Health Taskforce report sets out *"Women want to be in control of their lives"* as a key experience associated with an underpinning theme of *"empowerment through co-production"*. Whilst the report does not make specific recommendations for change, it describes how this principle could be demonstrated by services – through co-production of services with women and girls, promoting advocacy to ensure women's voices are heard, greater choice of treatment, and supporting women to access their own care plans. The Independent Review's recommendations for improvements to the Greater Manchester NHS Trust include ensuring patient, family, and carer voices are heard at every level of the organisation and implementing and evaluating a strategy to do so.

Modernising the Mental Health Act acknowledges rising detention rates as an issue and sets out recommendations to tackle this, under the principle of "least restriction". These include greater community-based services to prevent the escalation to crisis and strengthening the criteria for detention to require that *"there is substantial likelihood of significant harm to the health, safety, or welfare of the person, or the*

⁷⁸ UK Government. Draft Mental Health Bill. 2022. https://www.gov.uk/government/publications/draft-mental-healthbill-2022

safety of any other person without treatment."⁷⁹ The draft mental health bill does include an amendment to require that "serious harm" would be caused to the person or others without detention. However, in the time since Modernising the Mental Health Act was published, not only have detention rates sharply risen for women and Black and minoritised people, but the number of injuries to Black people being forcibly restrained by police in mental health wards has also risen. This is despite the introduction of the *Mental Health Units (Use of Force) Act*, also known as *Seni's Law* in 2018, which sets out the need for recording of the use of force and greater staff training in de-escalation. It is clear that legislation alone is not enough; there exists a deep-rooted culture of racism and misogyny in mental health services which must be tackled.

What's more, changes to legislation must be gender and race-sensitive. The Women's Mental Health Taskforce report highlights that "Women have distinct and specific needs which must be recognised if effective care is to be given." [p. 35], recommending that leaders should be accountable for ensuring these needs are understood and acted upon, through regular monitoring of workforce diversity, clear action plans, and gender sensitive policies. Similarly, the Independent Review recommends that the Greater Manchester NHS Trust "develops a representative, competent, and culturally sensitive workforce which is supported to provide services that meet the needs of its communities". Modernising the Mental Health Act also sets out recommendations under its principle "the person as an individual", including an "Organisational Competence Framework" to be developed by the NHS – a practical tool for services to meet their requirements under the Equality Act. The report also recommends culturally-appropriate advocacy for people of all ethnic backgrounds, better representation of people of Black African and Caribbean heritage in psychology occupations, and better data on ethnicity and the use of the Mental Health Act. However, critique of the draft Mental Health Act has noted that it does not go far enough in tackling racial inequalities in the way that Modernising the Mental Health Act sets out. In particular, it does not abolish the Community Treatment Orders which are disproportionately given to Black people, nor does it provide a statutory right to culturally appropriate advocacy.

⁷⁹ P. 113



Our call for evidence provides lived experience accounts of the public harms caused to women, whilst our review of significant inquiries links these individual experiences to the widespread institutional racism and misogyny present within policing, education, and mental health services. We recognise several common issues across these public services, including the excessive use of force, stereotyping, the disregard and invisibility of women's voices, and the lack of intersectional solutions amid a "one size fits all" approach.

Underpinning each of these themes is a central thread: the operation of power – including its abuse – in women's lives, within and without public services. This is not abstract but seen in the concrete lived experiences of women. By remaining insensitive to race and gender, and opting for a "one size fits all" approach, public services recreate and propagate the abuse of power occurring elsewhere in women's lives.

Importantly, these problems are not isolated incidents but are instead indicative of a systemic issue which arises in similar patterns across different public institutions. Thus, to make meaningful change, we must fundamentally re-evaluate these dynamics, listen to women's voices, and work to actively resist and dismantle the racism and misogyny embedded within public services.

We urgently need to recognise that public institutions are causing harm to women, and Black women specifically. This harms everyone in society, and needs to change, urgently. All those committed to public service delivery and reform need to prioritise improving the experience for Black women, recognising how the themes above impact on service experience.





