# **Cross-Party Group on Mental Health**

# Tuesday 16th November, 6pm

#### Present

#### **MSPs**

Emma Harper MSP (Chair) Oliver Mundell MSP Beatrice Wishart MSP

Craig Hoy MSP Audrey Nicoll MSP

### Non-MSP Group Members

Aidan Reid, Royal College of Psychiatrists

Andrew Love

Brian Magee, COSCA

Charlotte Mitchell

Chris Purnell, Scottish Ambulance Service

Dawn Fyfe, Wise Women

Dr Harriette Campbell

Dr Lauraine Macdonald, British Psychological Society; Division of Counselling

Psychology

Ele Davidson, CAPS Advocacy

Eleanor Sanders White, Equality Network

Emma Broadhurst. Beat

Fiona Partington, the Health Agency

Francine Bucumi

Gemma Richardson, Royal College of Paediatrics and Child Health

Gill Sutherland, Children's Health Scotland

Gillian McElroy, the ALLIANCE

Greg Thomas, See Me

Hannah Brisbane, SAMH (Secretariat)

Helen Forrest. Children's Health Scotland

**Hunter Watson** 

Ian McCall, Paths for All

Ian Skirving

Iona Crawford, Scottish Ambulance Service

**James Carter** 

Jane Morris, Royal College of Psychiatrists

Jim Dorman, St Andrew's First Aid

Keith Rae, Mental Health Foundation

Kimberley Somerside, Voluntary Health Scotland

Laura Wilson,

Lindsey Young, Scottish Association of Social Work

Lorraine Jarvie, MOOD Project

Mairi Campbell-Jack, SAMH (Secretariat)

Martyn Pickersgill, University of Edinburgh; Usher Institute

Michelle Gallacher, SAMH

Nelly Whaley, Salvsen Mindroom Centre

Nicola Reed, Cruse Scotland

Olivia Carson, CIPD Scotland

Oluwatoyin Opeloyeru

Patricia Rodger

Paula Fraser, VOX Scotland

Ross Cunningham

Ross McPhaden

Samantha McIntyre

Sarah Van Putten, Befriending Networks

Shalhavit-Simcha Cohen, University of Edinburgh; School of Health and Social

Science

Steve Mulligan, BACP

**Thomas Jennings** 

Tony McLaren, NHS 24

## **Apologies**

NUS Scotland

Barry Gale, Mental Health Rights Scotland

## 1. Approval of Minutes from Previous Meeting

Members approved the minutes from the previous meeting (14<sup>th</sup> of September 2021); the minutes were proposed by Emma Broadhurst and seconded by Dr Harriette Campbell.

### 2. CPG on Mental Health Group Agreement

Mairi Campbell-Jack presented a proposed Group Agreement which had been shared with attendees in advance. Mairi explained the purpose of the Agreement was to ensure the Cross Party Group on Mental Health remains a safe and respectful space for people from a variety of backgrounds to come and share ideas.

Members were asked for feedback. Martyn Pickersgill said the Agreement was really helpful and could perhaps be published with a Creative Commons License so that other groups and organisations could use it. Martyn will send details of this to SAMH so they can explore this further.

Patricia Rodger also thought it was a really useful document and asked for it to be shared with CPG Members and attendees before every meeting with the Minutes and Agenda. Mairi and Hannah advised that they would do this.

In the Zoom chat, Nicola Reed wrote the Agreement would be very useful and covers what is to be expected. Ian McCall noted that other CPGs could benefit from something similar. Emma Broadhurst and Sarah Van Putten agreed that other groups and meetings would find something like this beneficial.

# 3. Inquiry into the Impact of the COVID-19 Pandemic on Mental Health: Social and Economic Inequalities

Mairi Campbell-Jack played a video presentation from Professor Katherine Smith from the University of Strathclyde who was unable to attend the meeting. In the video, Professor Smith gave an outline of poor health, health inequalities and excess morality in Scotland.

Eleanor Sanders White from the Equality Network was then invited to present to the Group about the impact of the pandemic on LGBT people's mental health. The presentation explored the higher rates of mental health problems amongst the LGBT population prior to the pandemic, and how these have worsened during Covid-19. Eleanor also outlined the loss of safe and supportive services that LGBT people had experienced. The presentation went into detail about the particular impact on LGBT young people, trans people, LGBT disabled people, LGBT older people, LGBT people living rurally, LGBT people of colour, LGBT refugees and asylum seekers, and the effects of abuse including online, offline and domestic abuse.

After both presentations attendees were asked for questions or reflections. Emma Harper MSP noted that there is some over crossover between this evening's discussions and the CPG on Health Inequalities.

Ross McPhaden asked Eleanor to elaborate as to why the LGBTI community suffers more from isolation than the general population. Eleanor replied that this is a particular issue for LGBT people living in rural areas where it can be more difficult to find supportive groups and access services.

Hunter Watson voiced his concerns about forced treatment for people with mental health problems and noted his opposition to this treatment.

Audrey Nicoll MSP highlighted work being done by the Criminal Justice Committee which is looking at the impact of the pandemic on the prison population. Audrey asked if this is something the Equality Network has been looking at. Eleanor replied that she can get some information from her colleagues on their work on justice.

Audrey also shared a link to the <u>Scottish Government's Consultation on Bail and Release</u> in case any Members would like to respond. Audrey acknowledged that there have been difficulties concerning the mental wellbeing of people within the prison population but also of staff. Emma Harper MSP informed the Group that the Minister for Mental Wellbeing and Social Care, Kevin Stewart MSP, had been at the Health, Sport and Social Care Committee that morning and that this was an issue that had been discussed. Tony McLaren replied in the Zoom chat that prisoners throughout the SPS Estate now have access to mental health telephone support

through a locked down phone system, as well as within Police Scotland custody suites for people experiencing distress in those settings.

Jane Morris thanked the speakers for two superb presentations. Jane explained that they're seeing people who were already down who are getting kicked hardest by the pandemic. Jane also described seeing patients who were finding themselves even more economically disadvantaged than before as well, which is having a spiral effect on mental health. Jane asked how clinicians can make sure the most vulnerable minorities can be treated as empathically as possible. Jane highlighted that clinicians have also been disadvantaged by the pandemic as the workforce has decreased, people have been off ill, some people have had to take time off to home educate or care for family members. Eleanor explained that the LGBTI sector has been the same in terms of workforce numbers and people being sick, and that it has also been affected by less available funding. Eleanor believed that training and raising awareness were the two biggest things for improving LGBT people's experiences in clinical settings and noted that it's the small things that can make a huge difference to people. Eleanor explained that LGBT people have often experienced discrimination in mainstream services and that there was inconsistency amongst clinicians.

Shalhavit-Simcha Cohen talked about her work as a PhD researcher studying mental health and young people. Shalhavit described her experience setting up an event called PosiFest in Edinburgh and reflected on the fact that the people who are coming are the people who already know about mental health and what's available. Shalhavit wondered how we can reach people who are struggling but don't know where to look for help. Eleanor said that reaching out to community leaders who are already dealing with challenges is key and that there needs to be different approaches for different people, for example some people don't use digital technology so appreciate a paper letter telling them what's available.

Ross Cunningham asked how hard it is for people in deprived areas to access the outdoors as a way to improve their mental health and wellbeing. Ross explained he'd seen an idea from the Royal College of Physicians in Edinburgh to give 16-24 year olds a free gym membership which seeks to breakdown barriers for people trying to be more active but who may be in precarious positions.

Emma Harper MSP replied that she agrees that social prescribing is really important for both physical and mental wellbeing and getting people to access outdoor spaces. Emma acknowledged that there may be challenges for LGBT people to engage in physical activity. Eleanor noted the connection between this point and Shalhavit's point: if you're in the know then you can access these things. Eleanor highlighted that there's a queer hiking group in Edinburgh but recognised that not many people probably know about this. Eleanor explained that LGBT people often struggle to access mainstream services and also mainstream activities. Things like LEAP Sports, who campaign for better inclusion in sports, are really positive. Eleanor also noted that LGBT people are also more likely to have physical health issues which cause a further barrier.

In the Zoom chat, James Carter highlighted the difficulties for some people taking medication for mental health which can make them lethargic and sleep which also creates barriers to being active.

Greg Thomas asked about the increasing incidents of people coming out and experiencing stigma from family members during lockdown, which Eleanor had mentioned in her presentation. Greg wondered whether this was because more people were coming out or reactions were getting worse. Greg also asked about the increase in transphobic media coverage and the motivation behind this. On people coming out, Eleanor explained that there had been a combination of issues but that people had been more trapped at home in unsupportive environments which had caused problems. On the media coverage of trans people, Eleanor described a sustained attack on LGBTI people at the moment noting that hate crimes have risen exponentially in the last five years.

Ross McPhaden asked Eleanor how the Equality Network do outreach and how they integrate people into a cohesive and mutually supportive community. Eleanor explained that it's not always easy as what brings people together is often the abuse they've faced. Eleanor described a driving force behind the Equality Network's work as being: if there's discrimination for anyone then there is for everyone, and that it's important to be inclusive of the most marginalised groups to ensure everyone can be included. Allies also have an important role to play in supportive communities and getting involved in campaigns.

Jane Morris picked up on James' point about medication and responded that patients should have options over the medication they take. Jane also highlighted that people don't need to go to the gym everyday but that a simple walk is also beneficial. Furthermore, during lockdown a BMJ article found that gardening was one of the best activities for mental health.

Nelly Whaley asked Eleanor if people with hidden disabilities or neuro-divergent people were covered in her research on LGBT disabled people. Eleanor explained that this was external research but acknowledged that neuro-divergence is more common among LGBT people. Eleanor said that anecdotally she's heard that some LGBT people have found online working better, but for others it has made them more anxious.

Hunter Watson said that some psychiatrists lack empathy and that people have been subjected to forced treatment. Eleanor explained that from an LGBTI perspective, they often hear about a lack of empathy in mental health services along with judgmental attitudes.

Patricia Rodger returned to Ross Cunningham's point about poverty. Patricia reflected on her work with people who often can't afford to heat their homes and have to choose between eating and heating. Patricia explained that it's difficult for these people to justify buying new running shoes or pay for exercise activities.

Following the discussion, SAMH presented the findings from the Call for Evidence issued to Members on the theme of Social and Economic Inequalities.

#### 4. AOB

The following action items were agreed:

- SAMH will write thank you letters to the speakers
- SAMH will discuss with Voluntary Health Scotland the possibility of holding a joint meeting between the CPG on Mental Health and the CPG on Health Inequalities.

Emma Harper MSP thanked all the speakers for their contributions and SAMH for organising the meeting. Emma advised that SAMH will be in touch with Members with the minutes from the meeting and will let Members know about the next meeting after the festive break.