

# A meta-ethnography of mental health and substance use treatment experiences from the perspectives of racially and ethnically minoritised women who have experienced sexual violence

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## Introduction

Sexual violence (SV) can have devastating effects on the mental wellbeing of women (Pico-Alfonso et al., 2006). Few studies have explored how racially and ethnically minoritised women who have experienced SV find mental health and substance use care (e.g. Thiara & Roy, 2020) and whether these services recognise the additional forms of victimisation these women may experience (e.g., racism; uncertain immigration status; intergenerational trauma (Gradus & Galea, 2022)).

Exploring the care needs of this group of women is critical to generating evidence on the appropriate care of minoritised women. *Aims:* A systematic review to understand the needs, experiences and expectations of racially and ethnically minoritised women who use mental health and substance use services and who have been subjected to SV.

## Methods

- ❖ Journal databases and grey literature sources were searched for relevant literature.
- ❖ Studies reporting on qualitative data from racially and ethnically minoritised women or girls who experienced SV and received treatment from mental health and/or substance use services were included. Studies were synthesised using meta-ethnography.

## Results

A total of 111 women across 11 studies were included, conducted in various countries, including USA; UK; Canada; Bolivia and the Netherlands.

## References

- 1). Cénat, J. M. (2020). How to provide anti-racist mental health care. *The Lancet Psychiatry*, 7(11), 929–931. [https://doi.org/10.1016/S2215-0366\(20\)30309-6](https://doi.org/10.1016/S2215-0366(20)30309-6) 2). Gradus, J. L., & Galea, S. (2022). Comment Reconsidering the definition of trauma. [https://doi.org/10.1016/S2215-0366\(22\)00196-1](https://doi.org/10.1016/S2215-0366(22)00196-1) 3). Pico-Alfonso, M. A., García-Linares, M. I., Celda-Navarro, N., Blasco-Ros, C., Echeburúa, E., & Martínez, M. (2006). The Impact of Physical, Psychological, and Sexual Intimate Male Partner Violence on Women's Mental Health: Depressive Symptoms, Posttraumatic Stress Disorder, State Anxiety, and Suicide. *Journal of Women's Health*, 15(5), 599–611. 4). Pihama, L., Smith, L. T., Cameron, N., Te Nana, R., Kohu Morgan, H. R., Skipper, H., Mataki, T., & Te Kotahi Research Institute. (2017). He oranga ngākau = Māori approaches to trauma informed care 5). Thiara, R., & Roy, S. (2020). Reclaiming Voice: Minoritised women and sexual violence. *Europe*, 5(March), 1–11.

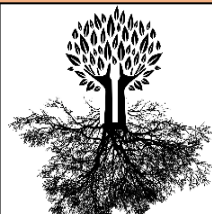
## Results: Themes

### Theme 1. Understanding women holistically



- ❖ Women wanted to discuss their experiences of racism with healthcare professionals (HCPs).
- ❖ Some women received racist treatment from HCPs.
- ❖ Women desire personalised and culturally appropriate treatment, which considers their whole well-being and their intersectional

### Theme 2. Processing the trauma and beginning the healing



- ❖ Many women had been silenced from disclosing their experiences of SV which sometimes continues in treatment.
- ❖ Empathetic and non-judgemental approaches from HCPs facilitate disclosures.

### Theme 3. Need for social connectedness and empowering relationships in treatment



- ❖ Women desire opportunities to be around other minoritised women who have experienced SV as this helps them share experiences and support each other to heal.

## Discussion

- ❖ Women require a holistic approach to treatment which considers their intersecting identities.
- ❖ HCPs need to provide a safe space to explore women's experiences of racial trauma, including any experiences of racism encountered in using healthcare services, and its relationship with sexual violence.
- ❖ Offering opportunities for women to connect with other minoritised women who have experienced SV is important, in helping women share experiences and offer support.

*Strengths:* First synthesis of existing evidence on how minoritised women who have been subjected to SV describe their experiences of mental health and substance use services.

*Limitations:* only including studies published in English or Italian, due to lack of funds for translation. Future research may benefit from including studies conducted in other languages to explore wider perspectives.

## Clinical Recommendations

- ❖ Mental health and substance use services should deliver anti-racist care to ensure that the holistic needs of service users are addressed. This includes engaging with a racially conscious approach so that HCPs are aware of how their racial identity and biases influence treatment dynamics and exploring women's experiences of racism and its intersect with other experiences of victimisation (Cénat, 2020).
- ❖ Trauma-informed care is recommended and should explicitly recognise racism as a trauma and include both personal and societal recovery from the long-lasting effects of colonialism (Pihama et al., 2017).