

Women's mental health: The essential contribution of feminist services

A briefing paper

This briefing is intended to provide commissioners, funders and professionals with a brief introduction to feminist approaches to women's mental health: explaining why they are needed and the value they add. It draws on presentations and discussions at a Women and Girls Initiative *Msterclass on Feminist Approaches to the Mental Health Needs of Women and Girls* that took place in Leeds in January 2020. The briefing includes:

- A brief overview of the relationship between gender inequality and women's mental health.
- An outline of the key role trauma-informed feminist services play in meeting the needs of women.
- Examples of such services funded by The Community Fund Women and Girls Initiative.

Inequality and women's mental health

The impact of gender inequality on mental health is now widely acknowledged. This is largely the result of 50 years of feminist activism, research and practice which has challenged mainstream mental health provision and developed alternative services that better meet women's needs.

Inequality and gendered expectations mean that women are particularly exposed to some of the factors that increase the risk of poor mental health. These include:

- **Being poor and under-valued.** Women are over-represented in low income; low status insecure jobs and are more likely to live in poverty than men.
- **Gendered expectations.** Girls are still encouraged to be less assertive than their brothers; they are expected to be quieter, 'nicer' and more deferential to authority and to accommodate the wishes of others.
- **Having to meet the multiple and competing needs of others.** Women are still largely the main carers of children and other dependent relatives. Extensive caring limits women's freedom, activities and finances and thus impacts on their physical and mental health.

- **Domestic and sexual abuse.** Girls and women experience male violence and abuse within and outside the family at a far higher rate than boys and men. Repeated victimization is not uncommon, especially if no support or intervention has been received around past abuses. 84% of those who suffer the most extensive physical and sexual abuse are girls and women.¹

- **Multiple responsibilities.** Women are often expected to function as full-time mothers, partners and housekeepers on top of their paid jobs.

- **Limited opportunities.** Women in many communities are still largely confined by marriage, motherhood and domestic work, domestic and sexual abuse, concerns about propriety or personal safety. Isolation, limited possibilities, and entrapment may result.

The impacts of these factors on women's mental health are well documented and include:

- Fear and anxiety are frequently experienced and women are twice as likely to experience these compared to men.
- One in four women will seek help/ treatment for emotional difficulties that are often diagnosed as depression at some time in their lives, compared with one in 10 men.

- Women are more than three times more likely than men to experience embodied distress including self-harm and eating difficulties.
- Young women are three times more likely than young men to experience post-traumatic and ongoing traumatic distress.
- Black and minority ethnic women are more likely to experience mental health distress than white women and are much less likely to access mental health services.
- Sexual abuse is associated with a substantial risk of suicidal thoughts and behaviour in women.

In the last decade the mental health difficulties experienced by many girls and women have increased. Rates of self-harm among young women have tripled and women are now three times more likely than men to experience common mental health problems whereas in 1993, they were twice as likely. Austerity has hit women, especially BAME women and sole women parents, hard; the lockdown measures resulting from Covid-19 have increased levels of domestic abuse exponentially. The gendered gymnastics many women are expected to perform as homemakers, child carers, caterers and breadwinners – while being pleasing, compliant, and caring for others – continue. These inequalities are also major risk factors for women’s mental health distress – making it harder for women to look after their own well-being or to respond to violence, exploitation and life stresses in ways that are protective of their health and survival. It would be surprising given these circumstances if there weren’t serious emotional and health costs for many women.

On the plus side women’s friendships and relationships with other women help protect their mental health particularly in hard times or at times of loss or change. Women generally talk about their feelings more than men and more often develop strong social networks of friends and family. Good social support can play a part in preventing mental health distress and can help women recover from mental health problems. Women are also more likely to tell someone when they are troubled and to seek help from services.

“The links women make with each other are a huge factor in reclaiming and moving on with their lives.”

VIDA

Feminist services are what women want

Feminist movements across the world have worked to gain women the right to vote, equal access to education and careers, control over their own bodies and to end sexual violence, forced marriage and female genital mutilation. In the course of this work feminism has developed an intersectional understanding of inequality incorporating race, sexuality, class, and age; the ways in which oppression impacts differently on different groups of women and the strategies they use to survive those impacts:

“Often women have experienced extreme violations of body, mind, thought, feeling, spirit, culture, or some combination of all of these. [They] have protected themselves by developing strategies of passivity; dissociation from body, affect, or memory; or self-inflicted violence.”

Feminists have used this understanding to challenge individualistic and medical responses to mental health and to develop feminist- informed services that can improve women’s lives - including their mental health.

“We could see that women weren’t listened to, they weren’t believed, they were judged, they were mad, bad, and they were not respected. Their experiences weren’t validated at all.”

Mental health services that work for women are those that are safe, respectful, take women’s lives and experiences seriously and recognise the structural gendered and racial inequalities that impact on their lives and mental health.⁸ In recent research with women survivors of sexual and domestic violence using mental health and support services, good services were defined as ‘holistic’, ‘integrated’ and ‘seamless’, gave women users some genuine control, were not time-limited and managed relationships and endings well. They emphasised that the particular therapeutic approaches offered mattered much less than that the dynamics and impacts of sexual and physical abuse were understood by staff.

Coming together with others in self-help or therapeutic groups was most frequently cited as transformative: here women were empowered to understand the commonality of their experiences, inspired by what other women had achieved, and enabled to support each other and 'give something back'.⁹

Feminist services provide opportunities for women to:

- Be heard and have safe conversations with other women.
- Make sense of, and normalize, their responses to trauma and oppression.
- Re-frame their responses to unreasonable events occurring in oppressive, dangerous and damaging social contexts, as rightful and reasonable.
- Acknowledge and celebrate their survival and resilience.
- Reject previous ways they have been labelled, blamed or punished.

And women experiencing such services report what they gain:

“ I feel I was heard and I was comforted and the feeling of being accepted despite all the abuse is so powerful.”

“ The fact that I could speak honestly without feeling I was being judged, and regardless of what was said, I was shown compassion and not disgust.”

“ The freedom and space to talk about and listen to others in safety about the truths that others don't want to know about.”

“ Finally I now realise it was not me who is to blame but my ABUSER.”

“ Being amongst women who knew exactly how I felt, who recognised where my tears my anger and most of all where I was coming from.”¹⁰

Feminist services are trauma informed

“ A trauma-informed response is the golden thread running through everything we do – it's woven into the fabric of the service.”

Nelson Trust

All trauma-informed practice is grounded in creating safety and trust, promoting control, building resilience and empowerment, and prioritising self and mutual care and recovery.¹¹ Long before anyone used the term “trauma-informed,” professionals and volunteers in a range of feminist services were acting in a trauma-informed manner. Much of this was influenced by the emergence of the Women's Liberation Movement and the increasingly influential voice of survivors of interpersonal trauma, as seen in the rape crisis centres and domestic violence services of the 1970s.¹² These services were powerful incubators for trauma-informed practice - supported by a rapidly growing body of research into interpersonal trauma and its impacts.

The following ten elements underpin all feminist services. They are now also widely considered to be the identifying features of *any* fully trauma informed service :¹³

1. Safety: the physical setting is safe and interpersonal interactions promote a sense of safety.
2. Trustworthiness: communication is open and honest and decisions are transparent.
3. Collaboration and mutuality: there is true levelling of power differences between staff and clients; there is recognition that healing happens in relationships of equality and in the meaningful sharing of power and decision-making.
4. Empowerment: women's individual and collective strengths are recognized, built on, and validated and new skills nurtured.
5. Voice and choice: the service listens to staff and client's views and experiences and maximises opportunities for women to exercise choice and control.
6. Peer support and mutual self-help: are understood as a key vehicle for empowerment – both collective and individual.
7. Resilience and strengths based: a belief in the possibility of women to heal and the need for societies to change.

8. Inclusiveness and shared purpose: the service recognizes that everyone has a role to play in a trauma-informed approach to recovery and healing; that each woman can contribute to the process of empowerment and change; not only therapists are therapeutic.

9. Cultural, racial, historical, and gender inequalities are actively addressed as issues of social equality and change.

10. Change process: is ongoing and developmental: services respond to new knowledge and developments, learn from women's experience, narratives, writings and wisdom.

“ *Empowerment is a key concept. Our role is to guide and facilitate, offering a range of interventions on the healing journey to enable each woman to take control of her own recovery.... Every moment of every healing journey takes tremendous individual courage. It also represents a victory in exposing, resisting and ultimately stopping sexual terrorism and the war on women.*”

Women and Girls Network

Twenty years ago the Women's Mental Health Policy,¹⁴ and the Gender Equality Duty¹⁵ were part of a strategic effort to transform mainstream mental health services. Although attention and funding drifted there has continued to be Department of Health support for addressing abuse and violence as underlying the mental health difficulties of many women.¹⁶ And most recently there has been a Department of Health and Social Care taskforce on Women's Mental Health, which is very clear about the ways that inequalities are a root cause of women's distress and about the implications for service provision and commissioning.¹⁷

So, at a policy level there has been recognition that: trauma is a major determinant of women's psychological distress; and, that trauma informed services need to be complementary to gender informed services for women, not a substitute for them. Unfortunately this has not been matched by changes in practice, and it remains rare that women experiencing mental health difficulties receive gender or trauma informed help from statutory mental health services. Basic building blocks such as inquiring about women's experiences of abuse and trauma still need to be established as routine, and used to inform their care and treatment.¹⁸

Until this revolution takes place feminist services will continue to be essential as both models of good practice and as providers of the mental health support and intervention that women want and need. Commissioners have an essential role to play in sustaining these services and supporting their development.

Examples from WGI

Services that exemplify feminist mental health provision have been funded by The National Lottery Community Fund as part of its Women and Girls Initiative. They include:

Aspire Learning Support and Wellbeing

Aspire Learning Support and Wellbeing is a women's centre in County Durham. Aspire delivers holistic support alongside learning and personal development opportunities to enable 'at risk' women to stay well, feel supported and get more from life. The project includes a range of peer-led one-to-one and group support services, as well as health and wellbeing provision. Working from a strengths-based, co-produced model throughout design and delivery, Aspire empowers women to develop confidence, skills, resilience and raise aspirations. www.aspire-northeast.co.uk

Haven

Haven was established over 40-years ago as an independent charity delivering specialist services for children and young people affected by domestic abuse. They are the only charity in Sheffield fulfilling this role. Inclusive practice and a trauma informed approach is at the heart of everything we do and we are passionate about supporting all children, young people and families that have experienced domestic abuse. We develop bespoke programmes that recognise the impact of abuse and provide safe spaces to engage with others, building confidence and resilience. www.havenorg.uk

A Way Out

A Way Out is an outreach and prevention charity based in Stockton-on-Tees which aims to engage, empower and equip vulnerable and excluded women, families and young people to live lives free from harm, abuse and exploitation and to reduce life limiting choices and behaviours. It delivers a trauma-informed asset based approach providing support to young and adult women with complex needs addressing issues around abuse, sexual exploitation, adverse childhood experiences, poverty and addiction. www.awayout.co.uk

WomenCentre

WomenCentre, based in Calderdale and Kirklees (West Yorkshire), supports over 3,000 women (aged 13-80+) each year. It aims to provide high quality trauma-informed services, advice and information anchored in a core ethos which is consistently woman-centred, holistic, co-produced, and open to learning and improvement. Its main areas of service delivery are domestic abuse and women's health and wellbeing. www.womencentre.org.uk

Nelson Trust Women's Centres

Nelson Trust Women's Centres in Gloucester, Swindon and Somerset provide a women-only space where a wide range of support needs can be addressed in a safe and supportive environment. Services are trauma-informed and gender-responsive, providing holistic support to women and their families. www.nelsontrust.com

Women and Girls Network

Women and Girls Network is a London-based charity whose aim is to promote, preserve, and restore the mental health and wellbeing of women and girls to empower them to make a sustainable recovery from experiences of gendered violence. Services include therapeutic services, groups, helplines, young women's services, advice, advocacy, training services and the Indigo Project, an innovative service that supports women with 'complex needs' who have experienced problems accessing mainstream support. All of WGN's services work from a trauma-informed, intersectional and empowerment focused approach. www.wgn.org.uk

Vida

Vida have developed a trauma focused therapy service for women and girls affected by any form of abuse. They have gradually introduced more group work programmes into the pathway through the service, tailored to the differing needs of service users, and based on a feminist model of mental health. Their 1:1 therapy can involve trauma-focused CBT, integrative counselling or EMDR. Alongside the structured therapy service they offer an informal, craft based peer support group. The links women make with each other are a huge factor in their recovery and empowerment. www.vidasheffield.org.uk

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Find out more here.



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