

Thursday 18th April – Expectations and Challenge

Greetings Madam Chair, distinguished panel and attendees. My name is Karen Carberry. I am a Consultant Family and Systemic Psychotherapist working in the United Kingdom, and an Advisory Board Member of the Humanity Summit. I have worked across the entire family life cycle from the cradle to the grave with families from all races and cultures nationally and internationally, including in Haiti and understand the impact of climate change on the wellbeing of nations.

As previously discussed:

- Our older people: those in their middle years, our young people in school and university, face grim prognoses due to the distress arising out of inequalities in employment, and employment experiences, expulsions from school and teaching that do not positively represent us.
- Our elders who came to rebuild Britain after the war, affected by the Windrush scandal and Covid are dying without recourse, and their offspring are equally affected.
- Our babies are inexplicably dying 4 times more than white babies at birth, and our African-descended mothers are equally losing their lives at childbirth at a rate of 3 times more than white women.

We have heard that extraction of core materials from our African descended nations, often utilising young children, and vulnerable people contribute to the impact of global climate change, both ecological, emotional, financial and physical. To seek a better life experience, migration has afforded opportunities, however people of African descent continue to be over-represented in the mental health system, but do not receive the culturally appropriate interventions for complete healing. Despite our striving, surviving, and thriving there are extreme concerns for our generation's wellbeing. Our work in Systemic community interventions with Haitian families in Haiti and the Dominican Republic across generations helps black lives, and we would advocate for this model in addition to individual interventions to be replicated globally.

Recommendations:

- To advocate for UK and global education system to both incorporate and retain several African descended clinicians with culturally attuned expertise within each training programmes to promote culturally appropriate teaching and research methods throughout students clinical training for counsellors, psychologists, psychotherapists, doctors and psychiatrists to alleviate the stress on trainees and professionals experience micro-aggressions and racism in their training and workplace experiences.
- To widen the participation of African descended students and professionals onto these programmes and retain them with sufficient culturally appropriate support to complete their courses to release them into the clinical arena to

support African descended clients and families who are over-represented in the mental health system and suffering from workplace racism and discrimination.

- The inequity in treating black people suffering from psychosis with the CAFI [Culturally-adapted Family Intervention \(CaFI\) | The University of Manchester](#) developed by Professor Dawn Edge of Manchester University to be sufficiently funded to complete the national trial in order to attain sufficient outcomes in order to be recommended by the NICE guidelines.
- To educate and reduce stigma of eating disorders in the black community and adopt culturally appropriate assessments and interventions in the treatment of for African descended clients and herald a more empathic approach across the UK and beyond highlighted by Dr Charlynn Small and Mazella Fuller in their groundbreaking tome *Treating Black Women with Eating Disorders. A Clinicians Guide*.