

Written evidence from Wish (COV0215)

Introduction

1. Wish supports women with mental health needs in prison, hospital and the community. We work with women with complex needs for example PTSD, OCD, trauma, or a history of abuse and domestic or sexual violence. Many of those we work with have multiple disadvantages: self harm, drug and alcohol dependency, low income, low self esteem and confidence.
2. Mental health needs must be taken into consideration when addressing the COVID-19 pandemic. As the Royal College of General Practitioners found in June 2020, GPs are already reporting a rise in the number of patients with anxiety, depression and trauma symptoms: we also have anecdotal evidence of this through our counselling service, with women frequently asking when sessions will start again.

There has been no face-to-face support and no access to counselling until recently, when lockdown measures relaxed. This has meant increased strain on those with pre-existing mental health needs.

3. There is also likely to be an increased number of people experiencing anxiety, loneliness, stress and trauma due to the effects of the pandemic.

COVID-19 and mental health

4. Firstly, we are concerned about the right to fair trial (Article 6 of the Human Rights Act). Mental health tribunals have been conducted remotely, which could impact on the hearing if it makes the patient more nervous.

We are also concerned about potential delays or cancellations to tribunals or managers meetings affecting right to liberty (Article 5).

5. Not all hospitals have been proactive in supporting remote contact with families or ensuring patients have fresh air access, which has in turn worsened or impacted their mental health (Article 8).
6. There has been a severe shortage of PPE, leading some of the women we work with feeling unable to attend hospital when they needed to.
7. There has also been confusion around contradictory advice, guidance and laws that have affected women with mental health needs. Since the start of the COVID-19 crisis, vulnerable women have often been unable to access, understand or apply rapidly changing social distancing, public health and hygiene controls.

Some of the women we work with are also vulnerable to misinformation about the virus, and are finding it difficult to navigate pressure on essential services/resources. Any further measures must consider this.

8. We are particularly concerned about any measures that will disproportionately impact vulnerable women, particularly those with pre-existing mental health needs.

In April, organisations including Refuge stated huge increases in demand for domestic violence services; women have had increased caring responsibilities; and there have been issues for women who earn money through sex work not being able to provide for their children.

22/07/2020