ETHNICITY & GENDER REPRESENTATION IN REFERRALS TO A TERTIARY PSYCHOTHERAPY SERVICE IN SOUTH LONDON

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Background

Equitable access to psychological therapies is an important component of person-centred and culturally responsive care. However, research has shown that implicit biases may influence referral decisions particularly in relational therapies[1]. Research in IAPT services in South London indicate that compared to the White British group, Black African, Asian and Mixed ethnic groups were less likely to self-refer to IAPT services. Ethnic minority service users were also less likely to receive assessment and treatment in IAPT[2].

Aim

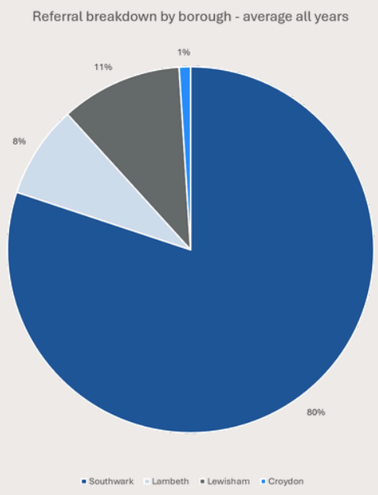
This service evaluation examined whether referral patterns to the Maudsley Medical Psychotherapy Service (MMPS) reflect the ethnic and gender composition of Southwark's population when compared to community mental health (PCMHT) referrals and local census data.

This is an important first step towards identifying potential barriers to equitable access.

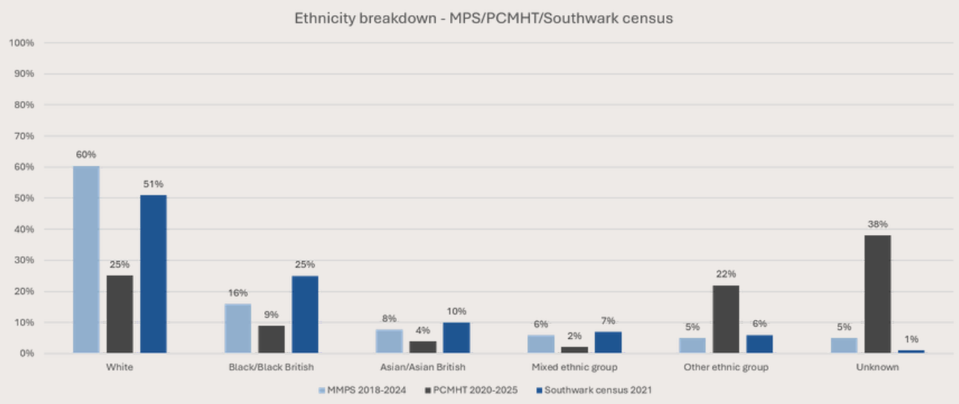
Results

- **96% of MMPS referrals had ethnicity documented**
- 62% of PCMHT referrals had ethnicity documented

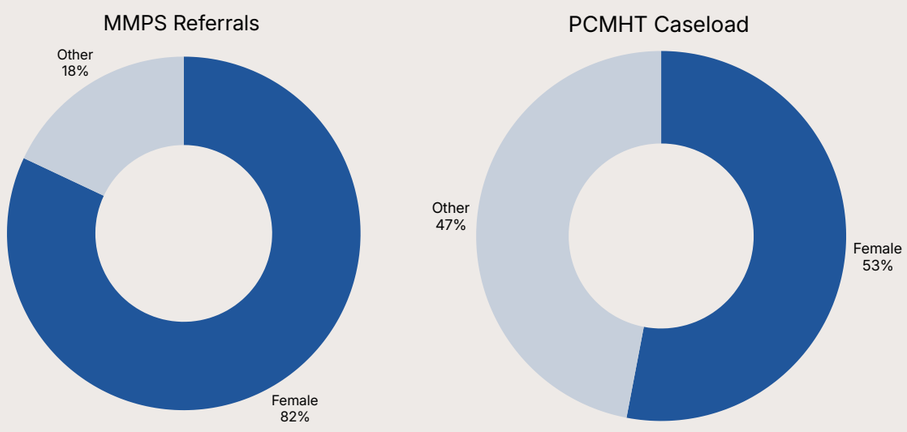
Referrals in 2018-2024 largely come from Southwark. Analysis was restricted to Southwark-origin referrals (80% of total).



Ethnic representation in MMPS referrals was broadly comparable with the Southwark population. White patients represented the largest group (60% vs. 51%), followed by Black or Black British patients (16% vs. 25%) and Asian or Asian British patients (8% vs. 10%).



Female patients accounted for 82% of MMPS referrals, compared with 53% of PCMHT caseload.



Methods

Population All patients referred to MMPS between 2018-2024

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Data Extraction Ethnicity & gender manually extracted from individual electronic patient records

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Coding

Ethnicity coded using 2021 Census categories:
Asian/Asian British, Black/Black British, Mixed/Multiple ethnic groups, White British/White other, Other ethnic group

Gender recorded as:
Female, Male, Non-gendered, Unknown where not documented

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Comparison MMPS referral data compared with Southwark 2021 Census estimates and Southwark PCMHT average caseload data (2020-2025)

Conclusion

MMPS referrals broadly reflected the ethnic demographics of the local Southwark population, although females were susbtantially over-represented. Further pathway-level analysis, particularly at PCMHT level, is required to understand whether differences reflect variation in referral practices, service awareness, help-seeking or access to psychological therapies. Improved demographic data collection and ongoing monitoring may support more equitable and culturally responsive medical psychotherapy services.

Discussion

Ethnicity The ethnic composition of MMPS referrals was broadly comparable with local Southwark population, although this does not necessarily demonstrate equitable access. Differences may arise at different stages, including identification of need, referral, acceptance and engagement with treatment. High proportion of undocumented ethnicity within PCMHT data limits reliability of direct comparison between MMPS and PCMHT populations.

Gender The marked female predominance in MMPS referrals raises questions regarding potential differences in recognition of psychological need, clinican referral practices, service awareness, help-seeking or accessibility.

Implications

Better data Consistent recording of ethnicity and gender across services
Understand the pathway Examine who is identified, referred, accepted at both PCMT and MMPS level
Explore barriers Investigate potential clinican, patient and system level factors influencing referral patterns
Raise awareness Improve awareness of psychological services within local ethnic minority communities
Ongoing monitoring Repeat demographic evaluation to identify persistent disparities

Next Steps

Results from this service evaluation to be presented to PCMHT teams to update them on results and gather their views and further data required at different points in the pathway to better understand gender disparities

Referral → Assessment → Acceptance → Engagement

References

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Declarations

- No conflicts of interest to declare
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