



Your identity, your therapy, your space.

Mixed-Race Suicide: Recognise → Investigate → Prevent

Jamila Andersson & Lydia Puricelli

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Recognise the data

Mixed race suicide inequality is visible in National data. It must now be recognised, investigated and prevented

- Samaritans UK Call to Action: Suicide prevention charity Samaritans has expressed profound concern over the disproportionately high rates of suicide and poor mental health outcomes among individuals of mixed ethnicity.
- Samaritans' data shows us that the suicide rate for the mixed-race group sits at 14.7 deaths per 100,000 population, which is statistically almost identical to the highest-risk group (White ethnicity at 14.9 deaths per 100,000) and significantly elevated compared to other minority ethnic communities.

(www.samaritans.org/about-samaritans/research-policy/ethnicity-and-suicide)



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- 79% higher: Mixed White and Caribbean women had a suicide rate 79% higher than White British women in a national England and Wales study of 31,644 suicide deaths across 18 ethnic groups. Lancet Psychiatry national linked cohort study (2024).
- According to the Office for National Statistics, in the analysis of 8 million 10- 17-year-olds in England, young people from mixed or Multiple ethnic backgrounds had a suicide rate of around 1.5 times higher than the White population. This elevated risk remained after accounting for socioeconomic, household, and demographic factors. Office for National Statistics, Risk factors for suicide in children and young people in England (2025).
- Suicidal Thoughts: 30.8% of adults from mixed/multiple and other ethnic backgrounds reported experiencing suicidal thoughts (the highest across the surveyed groups).
- (www.nhs.uk/policy/structural-racism-persists-in-national-mental-health-data/)

**A profound
inequality
we can no longer
overlook.**





Mixed-Race Suicide: Recognise → Investigate → Prevent

The problem is not OUR mixedness.

Speaking at an NHS racial trauma conference in 2022, psychotherapist and author Namalee Bolle highlighted the lack of recognition, language and spaces for specifically mixed and multiracial experiences:

“I expressed my concern about how highly misunderstood specific multiracial challenges are - I explained that I struggled to even know how to voice this as a clinician myself because mixed and multiracial people have never had any spaces to talk about their specifically mixed experiences.”

Namalee Bolle

Psychotherapist and author of *The Mixed + Multiracial Guide to Wellbeing: Navigating Family, Identity + Healing* (Jessica Kingsley Publishers, 2026)

Being Mixed race is not the problem. It's the systems built around monoracial categories that create preventable harm.



Mixed-Race Suicide: Recognise → Investigate → Prevent

Investigate the evidence gap

“People from Mixed race background had a higher risk of suicide than the White British majority”
(Knipe et al. (2024), *The Lancet Psychiatry* Ethnicity and suicide in England and Wales: a national linked cohort study)

National mortality data can tell us that someone died. It cannot tell us about their intersectional experiences that preceded their death.

National mortality data can show us where an inequality exists; however, they cannot, by themselves, explain the intersectional, relational and lived experiences that may have preceded a death. Knipe et al., 2024, *The Lancet Psychiatry*, 11(8), 611–619.

Mixed race people are visible in the data, but are largely invisible in research and policy.





Mixed-Race Suicide: Recognise → Investigate → Prevent

Investigate the evidence gap

*“It’s [Multiracial people’s] very existence that’s being questioned, which is a very dangerous thing if it happens over and over again. Because mixed people are **CONSTANTLY** forced to question their existence - whether they ‘should be here’, where they belong etc. That might make you think about **NOT** being here.”*

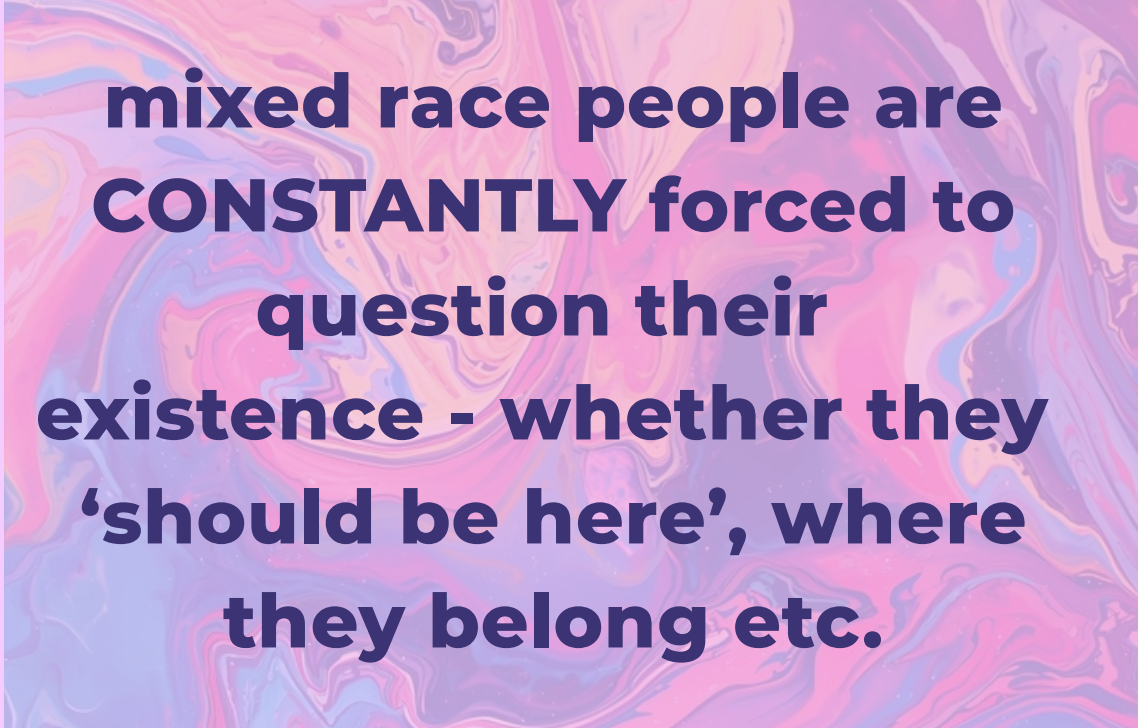
Dr Mish Seabrook

Psychotherapist and Resilience Coach

Contributor to *The Mixed + Multiracial Guide to Wellbeing: Navigating Family, Identity + Healing* (Jessica Kingsley Publishers, 2026)

Research **MUST** investigate:

- Identity invalidation and racial misrecognition
- Lack of belonging: Isolation and exclusion from multiple communities
- Monoracism: pressure to fit or choose one racial category
- Racial abuse, silence or misunderstanding within interracial families
- Colourism and racial ambiguity
- Cultural disconnection
- Therapeutic misattunement and barriers to help-seeking



**mixed race people are
CONSTANTLY forced to
question their
existence - whether they
‘should be here’, where
they belong etc.**





Mixed-Race Suicide: Recognise → Investigate → Prevent

Better research and data must lead to better prevention

Ethnicity is not recorded on UK death certificates.
(Lancet Psychiatry national linked cohort study (2024))

The Question: What needs to change in research, policy, families, communities and mental health services so that fewer mixed race people become part of these statistics?

**What is not counted
can be missed.
What is missed
cannot be
prevented.**

Recognise	Investigate	Prevent
Formally include mixed and multi-heritage people in UK suicide-prevention and mental-health inequalities policy.	Improve ethnic data disaggregation and fund research into multiracial-specific stressors and protective factors.	Provide earlier support, multiracially competent healthcare, and investment in programmes for belonging, cultural connection, identity affirmation and community.





MENTAL HEALTH

Your identity, your therapy, your space.



Mixed Mental Health.com is a new platform created to help mixed-heritage and multi-cultural clients connect with therapists and wellbeing practitioners who truly understand the rich dimensions and complexity of their identities and lived experiences.

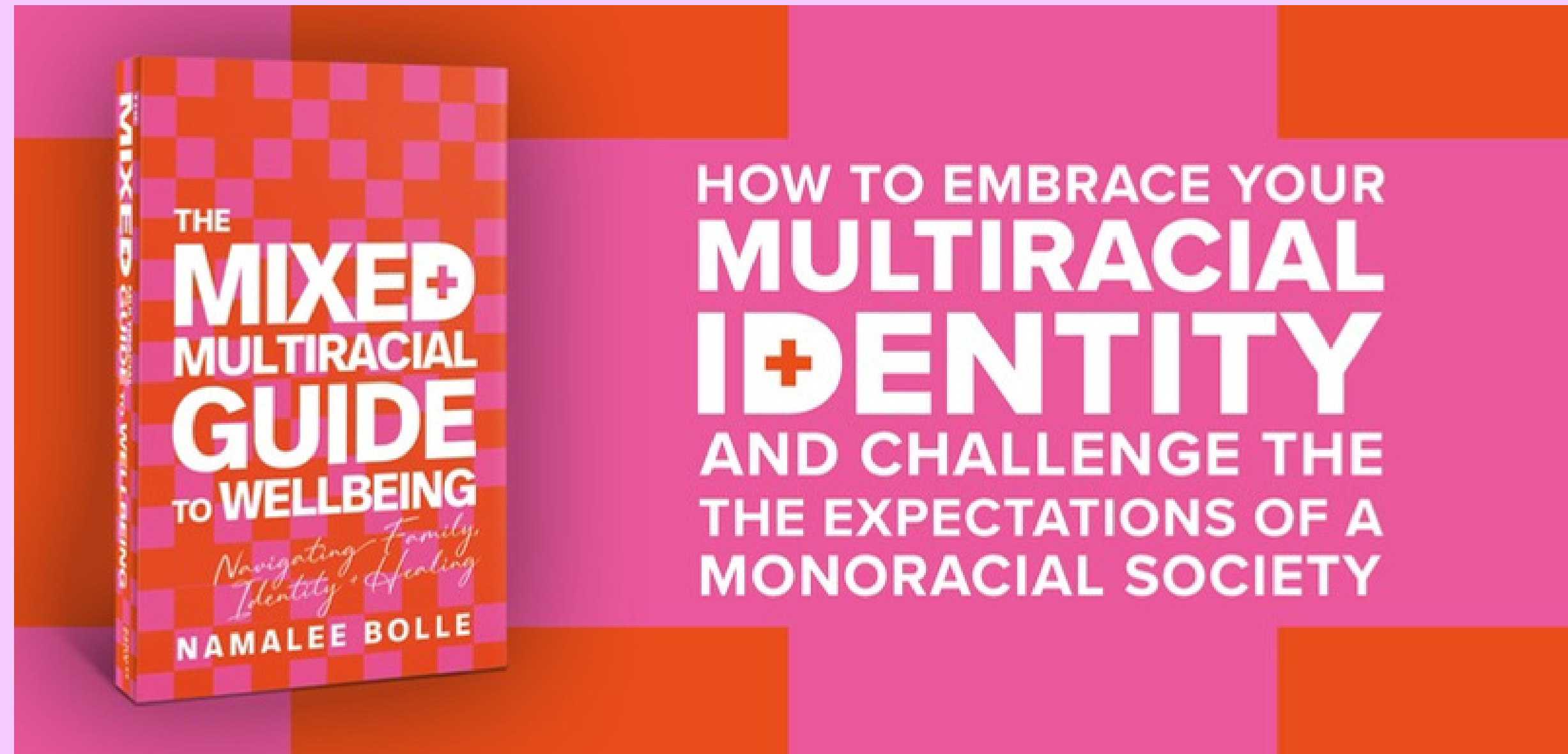
If you're a therapist or wellbeing practitioner with experience supporting mixed, multi-heritage or multi-cultural clients, we invite you to join our growing community.

Add your profile today and help create a space where every mixed story is seen, understood and supported.

Complete the registration form to join the directory - visit
Mixedmentalhealth.com



Buy the book: The Mixed + Multiracial Guide to Wellbeing



<https://uk.jkp.com/products/the-mixed-multiracial-guide-to-wellbeing>





Kaleidoscope: Mixed and Multi-Racial Heritage in Therapy

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2025 ONLINE CONFERENCE - WATCH THE PLAYBACK

2026 ONLINE CONFERENCE - REGISTER NOW!





Lydia Puricelli

Transcultural Transpersonal Therapist | Coach | Facilitator

Lydia Puricelli is mixed-race multi-heritage Transcultural, Trauma-Informed, and Transpersonal Psychotherapist, Executive Coach, Speaker, and Founder of Conscious Culture Coach.

Her work sits at the intersection of mental health, leadership, and social justice, supporting individuals and organisations to address the psychological impacts of marginalisation and systemic inequality.

Lydia trained under Dr Isha McKenzie-Mavinga and delivers anti-racist training for therapists through BAATN. She is the Co-Founder of MixedMentalHealth.com, a platform supporting mixed and multi-heritage communities to access culturally attuned therapy and wellbeing resources.

Her work centres community building and creating spaces where complex racial identities can be explored and held.

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Jamila Andersson

Transcultural Transpersonal Therapist | Speaker | Facilitator

Jamila Andersson is a mixed-race Nigerian–Filipino UKCP-registered Integrative, Transpersonal, Trauma-Informed and Transcultural Psychotherapist, Facilitator, and Founder of Remember Who We Are Therapy. Her Remember Who We Are philosophy understands healing not as becoming someone new, but as remembering and reclaiming the self beneath trauma, shame, inherited stories, cultural expectations and ways of surviving and adapting, with particular attention to belonging, racialisation and the pressures of monoracial frameworks.

Her work centres identity, belonging, intergenerational trauma, chronic illness and pain, and the psychological impact of racialisation and systemic oppression. Her approach is relational, culturally attuned and grounded in the mind–body connection.

Jamila trained under Dr Isha McKenzie-Mavinga and is a Master Facilitator of The Challenges of Racism in Therapy, delivering anti-racist training within therapeutic and professional settings. She is also Co-Founder of MixedMentalHealth.com.



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Thank You

