# Birmingham and Lewisham African Caribbean Health Inequalities Review



A leaflet for stakeholders







# **Dr Catherine Mbema**, Director of Public Health

The Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR) has been such an important piece of work for Lewisham in our ongoing journey to tackle ethnic health inequalities and achieve health equity.

I'm proud that we as a borough have prioritised implementation of the opportunities for action from the review since the launch of the report two years ago. This is evident in commitments within our Lewisham Council Corporate Strategy and strategies of partner organisations. Though we have some way to go to close the health inequality gap in Lewisham, I am pleased to see we have made real progress on many of the recommendations in the review.

The way in which organisations and individuals from different sectors and backgrounds have come together to progress our Lewisham Health Inequalities and Health Equity programme demonstrates true partnership working and passion around a joint ambition to achieve health equity.

# **Cllr Paul Bell**, Cabinet Member for Health and Adult Social Care

Lewisham is home to large and diverse Black African and Black Caribbean populations, but for too long these communities have suffered from health inequalities.

When it was first published in 2022, the BLACHIR report sought to give a voice to the people who have been let down or left behind by the system. It also allowed us to combine data and lived experience to produce achievable recommendations for the NHS and our other healthcare partners.

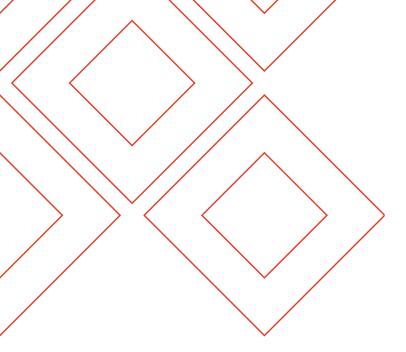
As your Cabinet Member for Health and Adult Social Care, I'm proud of the progress we've made in the past two years. For instance, we've commissioned several Black-led community organisations to work with our residents on health equity initiatives; carried out a wide range of drop-in clinics and health screenings; and delivered over 620 activity sessions, focusing on physical, mental and social wellbeing.

There's much more work to do, but this document shows how much progress we've made in a relatively short period of time and how serious we are about minimising health inequality throughout the borough. My thanks to all those whose hard work has made this possible.

# **Cllr Ese Erheriene**, Cabinet Advisor on BLACHIR

The BLACHIR report was a landmark step in highlighting the health inequalities that exist within Lewisham's African and Caribbean population. And in providing a benchmark guide towards addressing these gravely important concerns. Since its publication, Lewisham Council has taken every opportunity to deliver change and raise awareness. We will continue to do so until our borough is the best place for people of Afro-Caribbean heritage to grow up and grow old. As Cabinet Advisor on BLACHIR, I am proud to present this update.

BLACHIR: 2 years on



#### What is BLACHIR?

The Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR) was first published in March 2022 as a joint research project between Lewisham and Birmingham City Councils.

The report was commissioned to bring together data, expert knowledge and lived experiences to produce realistic recommendations that will lead to improved health outcomes for Black African and Black Caribbean communities. It now informs the work of the Health and Wellbeing Board and influences councils, the NHS and other partners.

In Lewisham, we endorsed the findings of the report straight away and we are using them to drive change across the health and care system. Since April 2023, the Social Inclusion Recovery Group (SIRG) – a local Black-led organisation – has been working with our public health team to engage with African and Caribbean communities in Lewisham.

We have also recruited a dedicated Senior Project Manager to lead on implementing the recommendations of the review. They work closely with community partners and wider stakeholders to help embed BLACHIR into all our ways of working.

## **Progress so far**

The BLACHIR report highlighted 39 Opportunities for Action (OFA) to improve health inequalities, and these have been the focus of the Lewisham Health Inequalities and Health Equity Programme for the past two years. This programme covers eight work streams, including primary care network health equity teams and a borough-wide workforce toolbox to equip those working in Lewisham with the skills to address health inequalities locally. The programme acts as the delivery vehicle to implement opportunities for action from the BLACHIR report.

As of October 2024, 6 OFAs have been completed, 24 are in progress and just 9 have not yet been actioned. Turn to pages 7–10 to see the status of each OFA.

BLACHIR also identified 7 key areas that will help reduce health inequality.

The following section highlights pieces of work that have either happened or are happening to make sure all these areas are addressed.

# Fairness, inclusion and respect

OFA 35: We're delivering a series of funded events for the Lewisham Black Voluntary and Community Sector (VCS) to showcase stakeholders.

Up!Up! is a 12-week healthy weight programme for members of the Black African and Black Caribbean community that runs in the borough.

Between April and September 2024:

- 99% of service users said they are 'very likely' or 'likely' to recommend the programme to a family member or friend.
- 69% reported an improvement in their quality of life after completing the programme.
- Up! Up! outperforms the national average in the available indicators (completion and weight lost).

### **Trust and transparency**

The Social Inclusion Recovery Group (SIRG) delivered a monthly community forum, exploring a different theme from the BLACHIR report. The forum was a chance to update on the progress of the recommendations and hear local views on its impact.

The BLACHIR community forums have been a powerful platform, not only for giving the Black community a voice but for deepening our understanding of the report's themes, key findings and the opportunities for action.

Participant feedback from the BLACHIR Community Forum

### **Better data**

OFA 33: Lewisham and Greenwich NHS Trust ran a project to improve special category data. 5,872 patient records have been amended to update ethnicity records and this will be the foundation of all future work.

# **Early interventions**

OFA 11: Should I Really Be Here? (SIRBH) is an initiative that aims to increase mental health and wellbeing literacy within Back Caribbean and Black African communities. The scheme improves ways of engaging and supporting young males aged 16-25, using communitybased approaches.

The GP-led Youth Clinic is an integrated primary care and mental wellbeing service for young people aged 13-25 that has been running in north Lewisham since August 2022.

# Health checks and campaigns

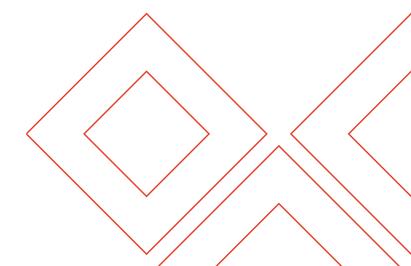
OFA 34: Between October 2023 and October 2024, 678 people attended 9 community health check events, which were run by Red Ribbon Living Well and North Lewisham Primary Care Network Health Equity Team. They performed 400 health checks including HIV tests, cancer screenings and liver fibro scans. 98% of attendees would recommend the community health hubs to their friends and family. This data-driven initiative has helped raise awareness and improve early detection, as well as increased levels of community trust. Of those who attended health checks, 48.8% were Black patients.

"Giving hope to those who needed my assistance and gaining skills to deliver aspects of this project was a major achievement."

Feedback from the Red Ribbon and North Lewisham PCN Health Equity Team Community Champions

OFA 27: The Lewisham Cancer Awareness Network (LCAN) has collated a wide range of resources that can be shared with residents and community groups, including translated and culturally appropriate materials.

LCAN continues to promote the importance of health screenings – especially among Black African and Black Caribbean populations.



#### Healthier behaviours

OFA 35: We've commissioned several Black-led organisations\* to co-create health inequality initiatives in partnership with the NHS and Lewisham Council.

In the past two years, they have held countless primary care interventions. These range from community outreach health fairs and awareness raising events to a new complementary health clinic and a drop in café at Goldsmiths Community Centre.

\*Red Ribbon, Action for Community Development, Therapy 4 Healing, 360 Lifestyle Support Network, Mabadilko CIC, Downham Dividend Society Community Land Trust /Social Life and Holistic Well Women.

"The way I now look at diabetes is absolutely different. It seems so much easier to cope with it after this last 6 months. I really do not know how to say thank you for all your help, kindness, encouragement, and the way you did not make me feel bad or ashamed. I would love to do this again. Thank you!"

Participant from Diabetes Group Consultations 360 Lifestyle Support Network CIC/Mabadilko CIC/The Lewisham Care Partnership Health

"Think it's a brilliant idea and will help patients heal and progress both physically and mentally."

Testimonials from attendees at Therapy 4 Healing/Modality PCN Health Equity Team's Complimentary Health Clinic

# **Health literacy**

OFA 27: Our Community Based Preventative Health Outreach Programme allows us and our partners to make better use of our CommUNITY Space in Lewisham Shopping Centre, increasing the frequency of health wellbeing interventions and drop-in sessions for our residents.

The space registered 515 new service users between October 2023 and June 2024 and almost half of residents that have accessed the CommUNITY Space to date have been from Black African or Black Caribbean communities (45.8%).

#### At a glance

- 2,400 meals were distributed by the Felix Project
- 621 activity sessions were delivered, focusing on physical, mental and social wellbeing
- Enable has 14 active local volunteers
- Hosted 17 pop-up community events

#### BLACHIR: 2 years on

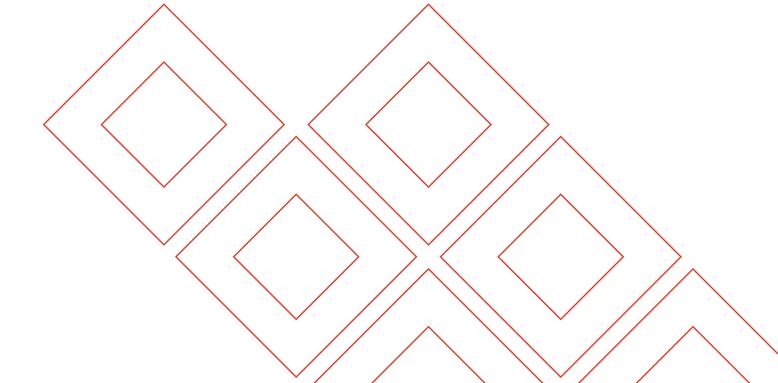
## **Opportunities for Action**

This table lists all 39 opportunities for action (OFA) and categorises them using a traffic light system depending on their status. Green shows the OFAs that have been progressed fully, orange is OFAs that have been started but are still in progress, and brown OFAs have yet to be progressed.

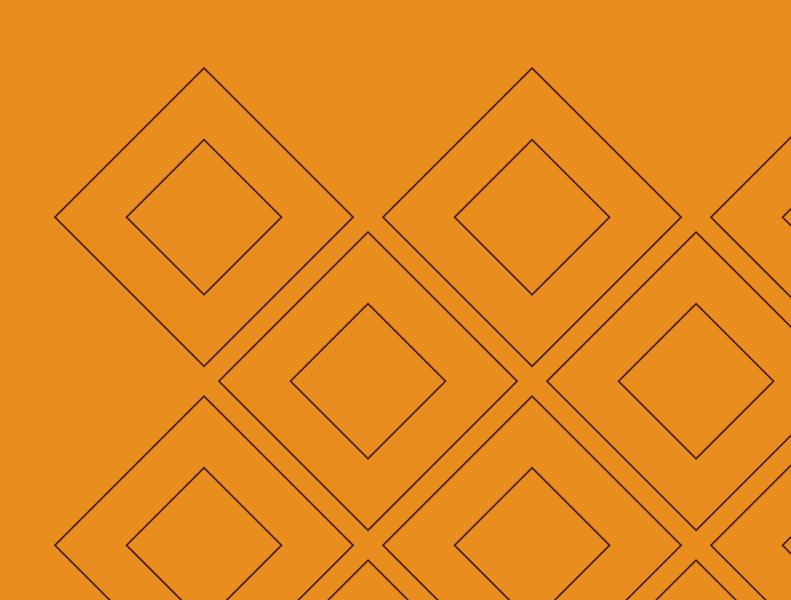
- **4.** Work with education partners for all ages and local communities to explore how ethnic diversity can be further integrated into education to reflect the diverse cultures and various perspectives of history and experience.
- 5. Address any gaps in existing Maternity and Paediatric Health Professionals' training including topics on cultural awareness, learning from lived experience, awareness of inclusion practices and policies, and awareness of trauma caused by racism and discrimination and how to deliver sensitive care.
- **6.** Co-design online tool with communities to collect information on beliefs, cultural practices and traditions from ethnic groups. This resource could then be used for training to inform practice and communication with patients and service users.
- **7.** Improve data collection by specific ethnicity in maternity and early years services considering the differences in ethnic background and nationality. Work with professionals who represent the ethnic minority groups to ensure a sensitive approach when collecting data.
- **8.** Support all women who are migrants, refugees, and asylum seekers, particularly those with no access to public funds, to access appropriate care during and post pregnancy, through appropriate support and protecting them from relocation or eviction.
- **9.** Develop culturally specific and appropriate weaning support initiatives for Black African and Black Caribbean parents.
- **3.** Review staff equality and diversity training to ensure that this is a core part of the delivery of training, co-delivered by diverse individuals with lived experience.
- **10.** Provide guidance and support for Black African and Black Caribbean parents and young people on applications and transition to secondary school and further education, including online information, support liaison officers, summer schools on core subjects and finance advice.
- 11. Commission and develop culturally appropriate and accessible services, including schools-based support, for Black African and Black Caribbean young men and women to increase capability, capacity and trust to engage with services. This should be specifically actioned for mental health services and for sexual and reproductive health services and take into account issues around gender exploitation and gender based violence.
- **12.** Review educational approach and opportunity for targeted intervention to increase academic achievement for Black African and Black Caribbean children and young people.

- 14. Work with trusted community centres and spaces to provide violence-free, accessible and attractive youth provision for access to wider opportunities, including through existing contracts and partnerships with Black-owned businesses and leaders.
- 15. Collaborate with African and Caribbean communities and their leadership on addressing air quality issues and continue with the in-depth work already in place with explicit consideration of these communities.
- **16.** Put in place interventions for Black African and Black Caribbean children and young people that address specific inequalities (e.g. sickle cell disease services), ensuring proportionate targeting and equality assessments of whole population interventions for issues they are disproportionately impacted by (e.g. low traffic neighbourhoods and school streets).
- 17. Provide targeted and culturally appropriate screening services for Black African and Black Caribbean older adults.
- **20.** Support initiatives to improve uptake of vaccinations in older Black African and Black Caribbean people, focusing on areas of higher deprivation.
- 21. Use life course approach and consider relevant findings from this Review to develop interventions that help to mitigate health inequalities experienced by Black African and Black Caribbean older people.
- **22.** Coproduce awareness campaigns for Black communities to promote a better understanding of different mental illnesses, facilitate early interventions and self referral in collaboration with carers, families, health services, community and faith centres.
- 23. Ensure practitioners use culturally competent (cultural understanding) trauma informed patient-centred engagement styles and interventions.
- 24. Ensure mental health workers acknowledge service users' personal histories of racism and recognise them as trauma to enable more effective intervention.
- 25. Promote cultural competency training within healthcare services, the criminal justice system, and the police force.
- **26.** Apply the use of culturally competent language, including using language that considers stigma within communities, such as 'wellbeing' rather than 'mental health'.
- 27. Work with Black African and Black Caribbean communities and organisations to cocreate and deliver culturally appropriate and accessible support on positive health behaviours, including health literacy training, social prescribing initiatives and group interventions.

- **29.** Provide long-term investment for trusted Black African and Black Caribbean grass roots organisations such as faith groups, schools, voluntary and community sector organisations to deliver community-led interventions.
- **30.** Work with faith settings to understand and utilise the positive role faith plays in healthier behaviour decision making.
- **33.** Ensure culturally appropriate data collection and analysis for service planning, monitoring and evaluation that distinguishes by ethnicity and gender for Black African and Black Caribbean populations.
- **34.** Ensure that the engagement of Black African and Black Caribbean communities is meaningful and valued. This should include direct engagement and collaboration with representative organisations that is done in a way which is respectful, transparent and accessible, and considers and values participants' time and commitments.
- **35.** Ensure prevention services are fair, appropriate and consider the needs of Black African and Black Caribbean populations, and there is proactive work to address issues with health literacy.
- **36**. Consider cultural and religious influences when developing interventions to address the wider determinants of health inequalities for Black African, Black Caribbean and Black-Mixed ethnic minority groups.
- **37.** Collaborate with government agencies and institutions to remove issues ethnic minorities face when in contact with the justice system and ensure these agencies work to address health inequalities.
- **38.** Conduct more research to understand the impacts of the food environment and food poverty on health and wellbeing of Black African and Black Caribbean communities, and devise strategies to address the structural issues at a community level.



- Pilot the removal of the colour language from ethnic coding and evaluate the impact on participation and experience of data collection.
- 2. Pilot the integration of discrimination and racism into the approaches to adverse childhood experiences and recognise this both in the assessment of children's needs and in the design of interventions to mitigate these adverse impacts.
- 13. Address low pay and associated poverty for frontline workers who are of Black African and Black Caribbean ethnicity.
- 18. Campaign to raise awareness and increase uptake of community-based NHS health checks in Black African and Black Caribbean older adults.
- 19. Assess the availability of culturally aware services for mental health and evaluate current services to determine how they meet the needs of older Black African and Black Caribbean adults.
- 28. Explicitly recognise racism and discrimination as a driver of ill health and put in place training and systems to enable trauma-informed practice and services.
- 31. Address the evidence deficit in interventions for Black African and Black Caribbean communities through targeted investment in research, including capacity and skills development for community providers in 'action research' to concurrently deliver and evaluate interventions.
- **32.** Undertake insight research with members of smaller Black African and Black Caribbean populations (e.g. Somali, Ethiopian and Eritrean) to understand health literacy needs.
- 39. Take action to address employment inequalities and issues around racism and discrimination in the public sector. Offer more protection for key workers from Black African, Black Caribbean and Black-Mixed ethnic backgrounds in health or other high risk occupations.



# **GET Involved**

There are so many ways for residents, businesses and other organisations to help improve health inequalities in the borough. To find out more and to get involved, please scan the QR code or visit: lewisham.gov.uk/BLACHIR

