

	Agenda Item: 9	
Report to:	Birmingham Health & Wellbeing Board	
Date:	9 May 2024	
TITLE:	CREATING A CITY WITHOUT INEQUALITIES FORUM ANNUAL REPORT 2023-24	
Organisation	Birmingham City Council	
Presenting Officer	Monika Rozanski	

Report Type:	Information	
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1. Purpose:

This report takes stock of the Forum's activity since September 2022 when the existing forward plan started to be delivered through to the end of February 2024 and aims to:

- 1.1. Promote a wider understanding of the forum's activity and achievements.
- 1.2. Set out plans for the forum's refresh and strengthening its focus on inclusion health.

2. Implications (tick all that apply):					
	Closing the Gap (Inequalities)				
	Theme 1: Healthy and Affordable Food				
	Theme 2: Mental Wellness and Balance				
	Theme 3: Active at Every Age and Ability				
Creating a Bolder, Healthier, City (2022-2030) – Strategic Priorities	Theme 4: Contributing to a Green and Sustainable Future				
	Theme 5: Protect and Detect				
	Getting the Best Start in Life				
	Living, Working and Learning Well				
	Ageing and Dying Well				
Joint Strategic Needs Assessment					



3. Recommendation

3.1. The Health and Wellbeing Board notes the work of the Creating a City without Inequalities Forum, supports its future direction and considers what other related agendas and representatives would strengthen its work on inclusion health¹.

4. Report Body

- 4.1. The Creating a City without Inequalities Annual Report 2023-24 represents a pivotal moment in the CCWIF's journey, highlighting its renewed dedication to tackling health inequalities. It provides an overview of the Forum's activities from September 2022 through to February 2024, outlining the progress made in the delivery of the current forward plan, which is focussed on the five health inequality priority areas within the joint health and wellbeing strategy 'Creating a Bolder Healthier City 2022-30" linked to deprivation, disability, inclusion health, ethnicity and locality.
- 4.2. The forum continues to be managed by the Public Health Division (with its running costs covered through the ring-fenced public health grant funding) and serve as a wider system platform for fostering collaboration among strategic partners across various sectors and organisations, working towards a shared objective of reducing health inequalities in these areas.
- 4.3. The forum recognises the financial challenges faced by the Birmingham City Council, therefore it has made considerable efforts to focus its work on the most disadvantaged populations, and it continues to strengthen collaboration between forum member organisations and services to avoid duplication and enable effective and efficient action that supports the delivery of the Council's Improvement and Recovery Plan as well as the Early Intervention and Prevention agenda.
- 4.4. Over the 15-month period between September 2022 and February 2024, the forum explored and discussed the first four of the above five priorities with the last one being explored at the Integrated Care System locality basis through the Primary Care Networks' inequality initiatives, with which the forum is strengthening its links.
- 4.5. When discussing the inequality priority areas linked to deprivation, disability, inclusion health and ethnicity, the forum examined intersectionality of experiences and needs across all of those communities, leading to a deeper exploration of inclusion health needs and the marginalisation within those communities, with a focus on the homeless, people experiencing multiple disadvantages and migrants amongst other vulnerable groups where the health inequalities are the greatest.
- 4.6. The progress updates within the report are structured against the existing three core functions of the forum which includes the direct delivery of projects and

¹ Inclusion health is an umbrella term used to describe people who are socially excluded, who typically experience multiple interacting risk factors for poor health, such as stigma, discrimination, poverty, violence, and complex trauma. People in inclusion health groups include people who experience homelessness, people with drug and alcohol dependence, vulnerable migrants and refugees, Gypsy, Roma, and Traveller communities, people in contact with the justice system, victims of modern slavery, sex workers and other marginalised groups (NHSE 2023). https://www.england.nhs.uk/long-read/a-national-framework-for-nhs-action-on-inclusion-health/





programmes that through the forum report to the HWB. The other function of shining the light on key issues enables the forum to take a deeper look at specific health inequalities or specific communities experiencing the deepest disparities in their health outcomes. Finally, through the enabling function, the forum explores the ways in which it can, collectively or through individual members, facilitate better engagement with communities of experience and identity, development of joint protocols and actions, building capacity and capability within the system to improve our response to tackling health inequalities in the city.

- 4.7. it is worth highlighting some key achievements and progress updates such as the BLACHIR project, the gender health inequalities work, Birmingham Poverty Truth Commission, the forum's work on inclusion health, community health profiles and efforts to improve data capture to better understand and respond to the health and wellbeing needs of our most vulnerable citizens.
- 4.8. The Birmingham Poverty Truth Commission is a form of immersive learning experience where people with current lived experience of poverty are brought together with people of influence from the civic world, build trusting relationships over time, share their experiences and perspectives on topics related to poverty, explore opportunities to make a difference and, as individuals as well as a group, advocate and influence decision making that affects communities affected by poverty. This project has now been concluded with the legacy from the commission living on, and the impacts varying from personal successes of the community participants to impact on engagement, co-production, and policy development at a local and national levels. The evaluation of this project is scheduled to be completed in June 2024.
- 4.9. Highlights from the public health led gender health inequalities project include a completion of the women's health needs report with recommendations to be published in April 2024 with the work on men's health already under way; the completion of the sex worker needs analysis to be launched this spring, work on the period literacy toolkit for the homelessness sector which is in its final stages of development and the forum's contribution to the development of the domestic abuse prevention strategy.
- 4.10. It is worth highlighting the commitment that the forum has made to the inclusion health agenda in alignment with the wider ICS priorities that has been strengthened further by the publication of the National Framework for NHS Action on Inclusion Health (NHSE 2023). Some notable achievements include integration of the homelessness and health legacy from the third sector led HealthNow Alliance initiative, continuous roll out of the Safe Surgeries and veteran friendly surgeries initiatives through the city's PCNs. The significance of these achievements lies in the fundamental access it guarantees for patients, particularly migrants, asylum seekers, ex-service people and other vulnerable populations, to healthcare, and this work has also been recognised nationally. Development of the inclusion health co-production coalition with the continually evolving Making Every Adult Matter (MEAM) programme led by the Birmingham Voluntary Service Council (BVSC) is another highlight that demonstrates the partnerships' commitment to the inclusion health agenda.
- 4.11. This report also provides a roadmap for the future of the forum, highlighting the strategic direction planned for 2024 and beyond. The forum recognises the pressing need to prioritise the health and wellbeing of inclusion health groups



and is planning to redirect its efforts towards addressing their needs in strong alignment with the BSol ICS' priorities and in the context of the financial recovery of the Council, which it supports through strengthening collaboration between partners and a better, including a shared use of available resources. The forum is currently working through the new terms of reference and forward plan as part of the wider review of the Health and Wellbeing Board's sub-groups and further reports will be submitted in due course.

5. Compliance Issues

5.1. HWBB Forum Responsibility and Board Update

The annual report has been approved by the CCWIF Chair, Cllr Nicky Brennan and disseminated to forum and board members.

5.2. Management Responsibility

Helen Harrison – Assistant Director for Healthy Behaviours and Communities, Deputy Chair, Creating a City without Inequalities Forum

Monika Rozanski - Service Lead - Inclusion Health

5.3. Finance Implications

Management and administration of the forum is covered by the Public Health ringfenced grant.

5.4. Legal Implications

n/a

5.5. Equalities Implications (Public Sector Equality Duty)

The forum, through its activity, aims to reduce health inequalities in the city.

6. Risk Analysis					
Identified Risk	Likelihood	Impact	Actions to Manage Risk		
Capacity of forum members to continue their commitment and progress action on inclusion health	Medium	High	 Forum workshops and discussions to prioritise future activity; a refresh of the forum's terms of reference The forum's refresh as part of the wider HWB subforum review 		

Appendices



Appendix 1 – CREATING A CITY WITHOUT INEQUALITIES FORUM ANNUAL REPORT 2023 - 2024: Recognising Achievements, Charting a New Way Forward

Appendix A - CCWIF Opportunities for Action Matrix 2023-24 (within Appendix 1)

Background Papers

Creating a City without Inequalities Annual Report 2022-23