

	<b><u>Agenda Item: 18</u></b>
<b>Report to:</b>	<b>Birmingham Health &amp; Wellbeing Board</b>
<b>Date:</b>	<b>21<sup>st</sup> September 2021</b>
<b>TITLE:</b>	<b>BIRMINGHAM AND LEWISHAM AFRICAN AND CARIBBEAN HEALTH INEQUALITIES REVIEW (BLACHIR)</b>
<b>Organisation</b>	<b>Birmingham City Council</b>
<b>Presenting Officer</b>	<b>Monika Rozanski, Service Lead - Inequalities</b>

<b>Report Type:</b>	<b>Information</b>
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<b>1. Purpose:</b>
1.1 To report on the progress of Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR).

2. Implications:		
BHWB Strategy Priorities	Childhood Obesity	N
	Health Inequalities	Y
Joint Strategic Needs Assessment		N
Creating a Healthy Food City		N
Creating a Mentally Healthy City		N
Creating an Active City		N
Creating a City without Inequality		Y
Health Protection		N

<b>3. Recommendation</b>
It is recommended that the Board:
3.1 Acknowledge the progress made by the BLACHIR project.

<b>4. Report Body</b>
<b>4.1 Background and purpose of BLACHIR</b>

The Birmingham and Lewisham African & Caribbean Health Inequalities Review (BLACHIR) is a partnership between Birmingham City Council and Lewisham Council to share knowledge and resources through a collaborative review process. It follows the work of both Councils as national Childhood Obesity Trailblazers.

BLACHIR focuses on the Black African and Black Caribbean communities. The partnership aims to jointly undertake a series of reviews to explore in-depth the health inequalities being experienced by Black African and Black Caribbean population.

An external advisory board, consisting of individuals with lived experience, and an academic advisory board were recruited to review, critique and discuss the findings. The boards support the review process through examining the evidence with the review team and shaping the recommendations. The main objective of the review is to produce a joint final report that brings together the findings from all of the themed reviews and a series of recommendations being referred to as opportunities for action. The final report will also include data analysis conducted by the review group throughout the 18-month period.

The Review includes 9 topics for discussion, these are:

1. Racism & discrimination role in health inequalities
2. Early years, Pregnancy & Parenthood
3. Children and Young People
4. Ageing well
5. Behavioural (lifestyle) factors
6. Mental health & wellbeing
7. Long Term Physical Health Conditions (*previously named 'Chronic disease'*)
8. Emergency Care and Preventable Mortality (*previously named 'Acute disease and death'*)
9. Wider determinants of health.

#### **4.2 BLACHIR Progress so far**

Four of the above nine themes of the review have now been completed (1-4 above). At present, preparation is underway for the next topic which is Mental Health & Wellbeing.

The rapid systematic review of evidence has been completed for this theme and it will provide a solid foundation for discussions and recommendations by the Review's Academic and Advisory (Community) Boards. The Academic Board meeting for this is scheduled for 9 September 2021, we aim to co-opt two additional academics who have an interest in this area. The Advisory Board meeting for this theme is scheduled for 15 September 2021.

Two public engagement activities have run to further review, refine and prioritise the opportunities for action identified from the first three themed reviews (Racism & Discrimination Role in Health Inequalities (1), Early years, Pregnancy & Parenthood (2) and Children and Young People (3)). It includes:

- a public survey launched on Be Heard, which will close on 30 September 2021
- public engagement workshop with the community on 20 July 2021
- public engagement workshop with children and young people on 9 August 2021
- public engagement workshop with African and Caribbean workers and churches scheduled for 13 September 2021 and will feature Black-workers and Black-led.

All workshops have been held via Microsoft Teams and allowed for an open discussion as well as written feedback with the use of 'Menti-Meter', outcomes from which will be summarised alongside findings from the Be Heard survey.

The procurement for the rapid systematic reviews for the remaining themes is in progress:

- Emergency Care and Preventable Mortality tender closes on 20 August 2021 and will be scored and moderated in accordance with Birmingham City Council's procurement process. The outcome of this will be shared with the Health and Wellbeing Board.
- Long Term Physical Health Conditions is open on until 3 September 2021.
- The award for the Wider Determinants of Health tender is currently being finalised.

#### **4.3 Next Steps**

- Outcomes from the completed Ageing Well theme are being synthesised.
- Further public engagement activity is being planned with the next event scheduled for 13 September 2021.
- Procurement of the systematic reviews for the remaining themes, as outlined above, is in progress.
- The next Academic and Advisory Boards for the Mental Health and Wellbeing theme have been planned.

### **5. Compliance Issues**

#### **5.1 HWBB Forum Responsibility and Board Update**

- 5.1.1 A brief update to be provided to the Health and Wellbeing Board on progress to ensure steady progress and address any issues or risks highlighted that may hinder required outputs and outcomes.

#### **5.2 Management Responsibility**

Dr Justin Varney, Director of Public Health, Birmingham City Council  
Dr Maria Rivas – Interim Assistant Director, Birmingham City Council  
Monika Rozanski – Service Lead - Inequalities

### **6. Risk Analysis**

<b>Identified Risk</b>	<b>Likelihood</b>	<b>Impact</b>	<b>Actions to Manage Risk</b>
Risk of delay in progress and outputs due to pressures on the review team in Lewisham and capacity issues and delays in engagement activity across both LA.	High	High	Robust monitoring and reporting mechanisms to ensure collaborative working to promote positive workable solutions. Commissioning of a larger proportion of the thematic systematic reviews and

			engagement activity by Birmingham Public Health.
Consolidation of the local data, including service data, has been identified as a gap, as was not progressed in line with the project plan due to unforeseen circumstances. This may cause a delay in concluding the project.	High	High	Options are being discussed with PH data leads, which include commissioning of additional resource.

<b>Appendices</b>
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The following people have been involved in the preparation of this board paper:

Atif Ali, Programme Officer – Inequalities, Birmingham City Council  
 Monika Rozanski, Service Lead – Inequalities, Birmingham City Council