

## **Covid Update**

Birmingham Health and Wellbeing Board 22<sup>nd</sup> March 2022



# **Current Position Overview**

- In the 7 day period up to the 16<sup>th</sup> March 2022
  - 3,492 cases
  - 345.6 cases per 100,000 population (increase of 59.9%)
  - Case rate is highest in 30-34yr age cohort (512 cases/100K)
  - 56,892 virus tests reported (81% LFD)
- In the 7 days up to the 13<sup>th</sup> March 2022
  - UHBT
    - admitted an average of 33 patients a day with Covid
    - Had an average of 184 in-patients with Covid and 2 patients in intensive care

### • At the 20<sup>th</sup> March 2022

- 749,812 eligible people over the age of 12yrs have had their 1<sup>st</sup> dose (68.7%), 62.5% have had two doses and 41.2% have had 3 doses
- Over 83% of over 70yrs have completed 3 doses



# **Policy Update**

- NHS Vaccination programme is now offering all over 75yr olds, and invited clinically extremely vulnerable individuals, a fourth vaccine dose to strengthen their protection. The offer to children aged 5-11yrs starts on 4<sup>th</sup> April.
- UKHSA Vaccine Effectiveness Report demonstrates that after 3 doses protection against hospitalisation is 75% after 10-14 weeks and 95% effective at preventing death from Covid, however protection against symptomatic disease falls to 25-40% from 15+ weeks after the booster (<u>UKHSA</u>)
- National legislation on restrictions has been removed however it remains important, like for other infectious diseases, for people who test positive for Covid to remain at home and isolate for 5 days to protect others and reduce transmission.
- National guidelines are expected on the next stage of testing and which groups are eligible for free test kits, however until the end of March citizens can continue to access kits through the national website.





## **Commonwealth Games Public Health Legacy Projects Update**

Birmingham Health and Wellbeing Board 22<sup>nd</sup> March 2022



### Birmingham 2022 Commonwealth Games Public Health Areas for Action

### **Games Preparation**

### Games environment

Smoke Free Low Alcohol Healthy Food Drinking Water Active travel Infectious disease risk reduction Ethical Sponsorship

#### Workforce & Volunteers

A BOLDER

Health Literacy Mental Health Awareness Psychological awareness training

### **Games Times**

Health Protection Response Public Health Environmental Health Enforcement

Campaigns & Amplification opportunities

### Legacy

Active Lifestyles 'Tola Time' campaign PA Culturally Competent Guidelines Community initiatives PA in clinical care pathways

#### **Healthy Eating**

Culturally competent Eatwell approaches Cook the Commonwealth SME Food business commonwealth event

#### Mental Health Thrive at Work

Psychological awareness training

#### Commonwealth Communities Community health profiles



## **Cook the Commonwealth**

This summer, Birmingham is hosting the Commonwealth Games. As part of the celebration of culture that is happening due to the games, Birmingham City Council is re running a "Cook the Commonwealth" project, where we are collecting recipes from the 60+ commonwealth countries. These will be widely shared on a recipe app <u>Whisk</u> alongside a campaign encouraging people to get cooking!

We need lots of people to contribute recipes which they feel celebrate a particular Commonwealth country – whether this is a traditional recipe or a fresh take! We are particularly interested in recipes that are delicious, nutritious, and low in salt, and sugar. Recipes should be able to be cooked in a home (i.e. not too cheffy!) and use ingredients which are relatively easy to source in the UK. This is a great opportunity to celebrate both good food and the diversity of our city beyond!).

If you can contribute a recipe which you feel celebrates a Commonwealth please either:

- Make the recipe <u>on Whisk</u> yourself and email us the link (and which the recipe represents) at <u>foodsystemPH@birmingham.gov.uk</u> (<u>This</u> <u>instruction video</u> may help). Please let us know in your email if you are happy for the recipe to be tweaked to improve the health score if required.
- 2. Fill in this <u>Microsoft form</u> to send the recipe to us directly.





#### Birmingham City Council

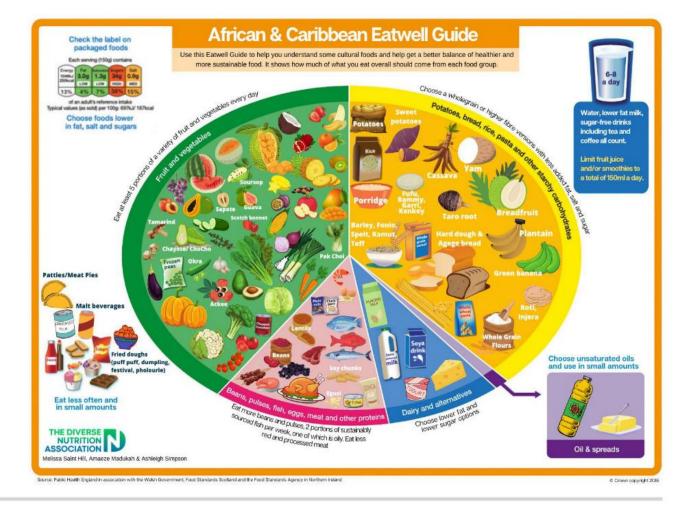
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# **Culturally Competent EatWell Guide Resources**

Working with the Diverse Nutrition Association, who developed the African & Caribbean Eatwell Guide, we are collaborating to develop a series of culturally competent versions of the EatWell Guide reflecting the diverse communities of commonwealth heritage.

These will be completed by the end of May and further providers are been commissioned to support embedding and engagement activity to support them being utilised.



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## **Ukraine Crisis Update**

Birmingham Health and Wellbeing Board 22<sup>nd</sup> March 2022



The Birmingham and Lewisham African & Caribbean Health Inequalities Review (BLACHIR)





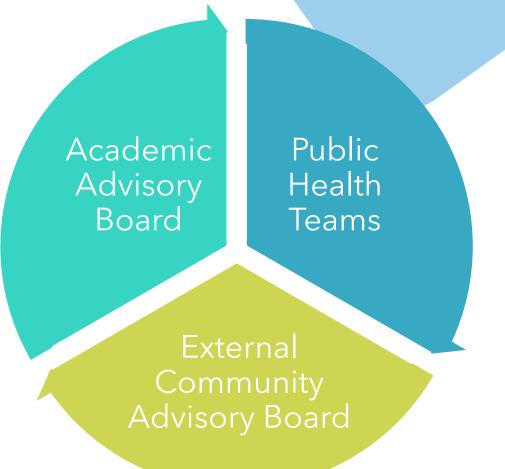




### Birmingham & Lewisham African & Caribbean Health Inequalities Review

Launched in 2020 as a partnership between Birmingham and Lewisham to explore and better understand the inequalities affecting African and Caribbean communities in our areas and co-produce with communities opportunities for action to break structural inequalities.

The Review was a new approach methodology working with an external community advisory board and an academic advisory board to develop recommended opportunities for action to achieve systemic change.







In Birmingham there are: 2.8% Black African 4.4% Black Caribbean 1.7% Other Black With over 96,000 citizens (2011 census)



### In Lewisham there are: 11.6% Black African 11.2% Black Caribbean 4.4% Other Black With just under 75,000 citizens (2011 Census)





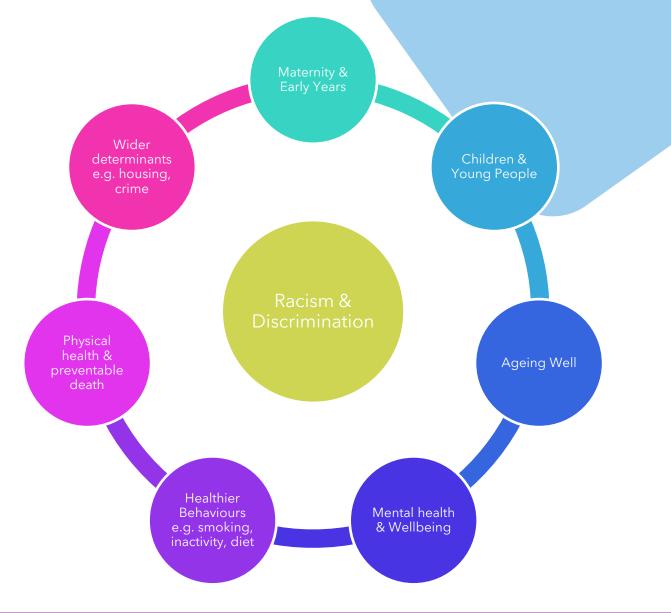
Making a positive difference every day to people's lives PAGE 11

# **Thematic Exploration**

A thematic approach was taken to considering the inequalities drawing on the life-course model and the recognised wider determinants of health.

For each theme there was a rapid evidence review undertaken by one of the Public Health teams, either directly or commissioned out. These were then discussed with the academic board to identify potential evidence based recommendations that were then discussed with the community advisory board to reflect on lived experience and practical application.

There was then public consultation to review the opportunities to action, including specific workshops with young people.







### 7 Key Areas for Action

### 1. Fairness, inclusion and respect

Across settings and life stages, people of Black African and Black Caribbean heritage are exposed to structural racism and discrimination which accumulates over time leading to chronic stress and trauma. There is a need to recognise, identify, address and mitigate structural racism and discrimination as a driver of health inequalities. The Review calls for the Health and Wellbeing Board and NHS Integrated Care Systems to explicitly recognise structural racism and discrimination as drivers of ill health, systematically identify and address discrimination within systems and practices, and engage with Black African and Black Caribbean individuals and organisations to ensure community voice and their leadership in driving this work.

### 2. Trust and transparency

Trust is lacking between the Black African and Black Caribbean communities and public sector organisations, and connections with communities need to be built. A long history of discrimination, biases, poor experience and poor outcomes has destroyed trust in statutory services. The Review calls for cultural competence training of health and social care professionals led by the NHS Integrated Care Systems and the Councils. This will require working with trusted community organisations and partners to coproduce training for professionals and volunteers that includes cultural awareness, is trauma informed and recognises the short and long-term impacts of discrimination and racism, values lived experiences and embeds and delivers inclusion in practices and policies.

### 3. Better data

Treating all ethnic minority or 'Black' communities as a single 'Other' group does not consider the cultural differences between Black African and Black Caribbean people. This has led to gaps in available data and limits our understanding of our communities and their needs. These communities are often grouped in research and data with other non-White British ethnic communities, denying their visibility and muting their needs to commissioners and service providers. The Review calls for the Health and Wellbeing Boards to act across their partnerships to strengthen granular culturally sensitive data collection and analysis. Collaboration with professionals who represent these ethnic backgrounds can create a more sensitive, informed and appropriate approach to data collection and commitment that when data is collected it is used to drive better services and outcomes.





### 7 Key Areas for Action

### 4. Early interventions

Investing early in people is essential. Too many children and young people from Black African and Black Caribbean communities are facing additional challenges that could be reduced through evidence-based interventions and this would benefit them through their whole life. Supporting children and young people's key periods of change, from birth and infancy to primary and secondary school, and then to young adulthood in culturally competent ways is essential. The Review calls for the Health and Wellbeing Board to work with the Children's Trusts and Children's Strategic Partnerships to develop a clear action plan to provide support at critical life stages to mitigate disadvantage and address the inequalities affecting Black African and Black Caribbean children and young people. Investing early in local opportunities and partnerships is key to helping households and improving the lives of local children and young people.

### 5. Health checks and campaigns

Early detection and diagnosis of disease and identification of risk factors is critical for improving outcomes and empowering people to control their own health and wellbeing. Black African and Black Caribbean populations are at greatest risk of many health conditions but have lower uptake of health checks and screening services. The Review calls for the Health and Wellbeing Board to act across their partnerships to promote health checks through public campaigns to increase the uptake of 8 community-based health checks in easy to access locations. This should also include specific work on mental health and wellbeing, working with community organisations and partners to increase peoples' understanding of the different types of mental illness and to encourage self-help, early intervention and self-referral to the NHS mental health services.





### 7 Key Areas for Action

#### 6. Healthier behaviours

The awareness about healthier life choices must be increased by using appropriate representation and amplified community voices to help identify and promote better health and reduce stigma. Unhealthy behaviours such as not taking enough exercise, eating an unhealthy diet and use of recreational drugs are a growing concern amongst Black African and Black Caribbean people. As with other ethnic minorities, these unhealthy behaviours can be driven by experiences of discrimination and racism. This is not helped by a lack of quality data, culturally competent resources and services to support healthier life choices. **The Review calls for the Public Health Teams and their partners to assess current service provision and health improvement campaigns through a cultural competency lens to improve support and access for these communities.** This should be built on coproducing interventions with supplementary training for professionals such as health education and racial trauma awareness to help understand the psychological reasons for unhealthy behaviours and the role of lived experiences of discrimination in causing unhealthy habits.

#### 7. Health literacy

Increasing people's skills, knowledge, understanding and confidence (health literacy) to find and use health and social care information and services to make decisions about their health is key to achieving healthier communities. Many in the Black African and Black Caribbean communities have not been supported to develop in this area in ways that work with their culture and community. The Review calls for the Health and Wellbeing Boards and NHS Integrated Care Systems to work with local community and voluntary sector partners to develop targeted programmes on health literacy for Black African and Black Caribbean communities. Improving health literacy has been shown to have a positive impact on reducing health inequalities and helping people to manage long-term conditions effectively and to reduce the burden on health and social care services.





## **39 Opportunities for Action**

There are 39 opportunities for action across the eight themes. In some areas these opportunities are suggested as pilots of approaches as the evidence base and live experience supports action but there is limited evidence on effectiveness.

This reflects the lack of detailed and focused research into ethnic communities' specific needs and how best to respond to them. There is also an annex of recommendations for research questions that could help close some of these gaps for the future.







### Creating a Bolder, Healthier City (2022-2030)

Birmingham Health and Wellbeing Board 22<sup>nd</sup> March 2022

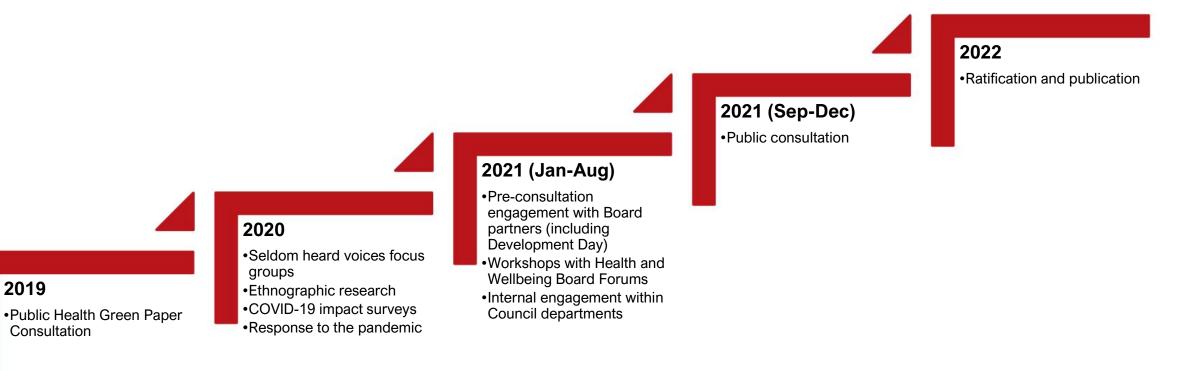


# DEVELOPING THE JOINT HEALTH AND WELLBEING STRATEGY





## **Developing the joint health and wellbeing strategy**



PROUD

HOST

BIRMINGHAM

Birmingham City Council

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2019

Consultation

## **Public Consultation - Methods**



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## **Public Consultation – Headline Responses**

142 responses to the public consultation (Be Heard) and an estimated further 100 views were collected from focus groups, presentations to ward forums, and webinars.

The headline responses from the public consultation were as follows:

- Strong agreement and support for the ambitions of the 5 core themes and the life course themes.
- Greatest levels of support for Healthy and Affordable Food, Getting the Best Start in Life, and Ageing and Dying Well.
- Specific concerns highlighted the delivery of the strategy and how achievable some of the ambitions were within the 8-year timeframe.
- Respondents highlighted that the Covid-19 Pandemic has exacerbated pre-existing health inequalities and therefore actions to mitigate it should be present across the whole of the strategy, rather than an exclusive section.
- Agreement that 'closing the gap' between health inequalities should be the central aim of the strategy. Some respondents also wanted more clarity on how this would be achieved in the short term.



"You will not be able to do any of the above without taking people out of pain and poverty."

Be Heard Survey

"Agree it's better to change daily habits than depend on medications."

Focus group, Healthcare Professionals

> "Most decisions are made for us not by us."

Focus group, Adults with Physical Impairments "In my experience it's very much needed but clinicians need to be more aware of what's on offer, publicity needs to be widespread and prolific to achieve targets at reaching the people who would benefit."

Focus group, Healthcare Professionals

"Physical activity is not always possible for those with mental health issues and those recovering from cancer .... Other forms of moves like Pilates tailored to those recovering from cancer treatment and those on strong medication for mental health issues should be considered."

Be Heard Survey

"All of it is underpinned by communicating in the language. There's already a natural barrier."

Focus Group, Black, Asian, and Minority Ethnic Group

"Affordability is the biggest thing... it doesn't cost a lot to be healthy... it's a lot cheaper than buying takeaways but it's getting people to do it."

Focus group, Adults with Physical Impairments

"Agree, especially with reducing inequalities but how do we achieve it?"

> Focus group, Healthcare Professionals



"A lot of patients that have mental health issues, you'll find have drug and alcohol issues because they have got mental health issues... you have to eliminate that [mental health issue] before you can eliminate that [way of coping/impact of the mental health e.g., substance abuse]."

> Focus group, Healthcare Professionals

"Review successful schemes

from other countries (rooftop

food allotments, fruit trees

planted in the community,

etc.)"

**Be Heard Survey** 

"....an additional action point could be to improve the quality, accessibility and availability of green and blue spaces as a measure to encourage usage in the population."

**Be Heard Survey** 

"Can we help people go to GP or dentist in a preventative way – doing checks rather than waiting for them to be ill?"

Focus group, Young People (aged 14-19)

"What I see is people thinking

*'exercise is for healthy people', not 'healthy people* 

exercise'."

Focus group, Leisure

**Providers** 

"Why should someone spend an hour cooking a meal when they can get a £3 burger down the road?"

> Focus group, Muslim Women's Group

"Detection of dementia will need to focus on communities that may not be receiving the current messages due to language barriers."

Be Heard Survey, Ageing and Dying Well

"[People] kind of have no option to other than to go on to, like, the corner shops and get, like, junk food and stuff that you know, really damages their health."

Focus group, Young People (aged 14-19)

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# **CREATING A BOLDER, HEALTHIER CITY STRATEGY (2022-2030)**



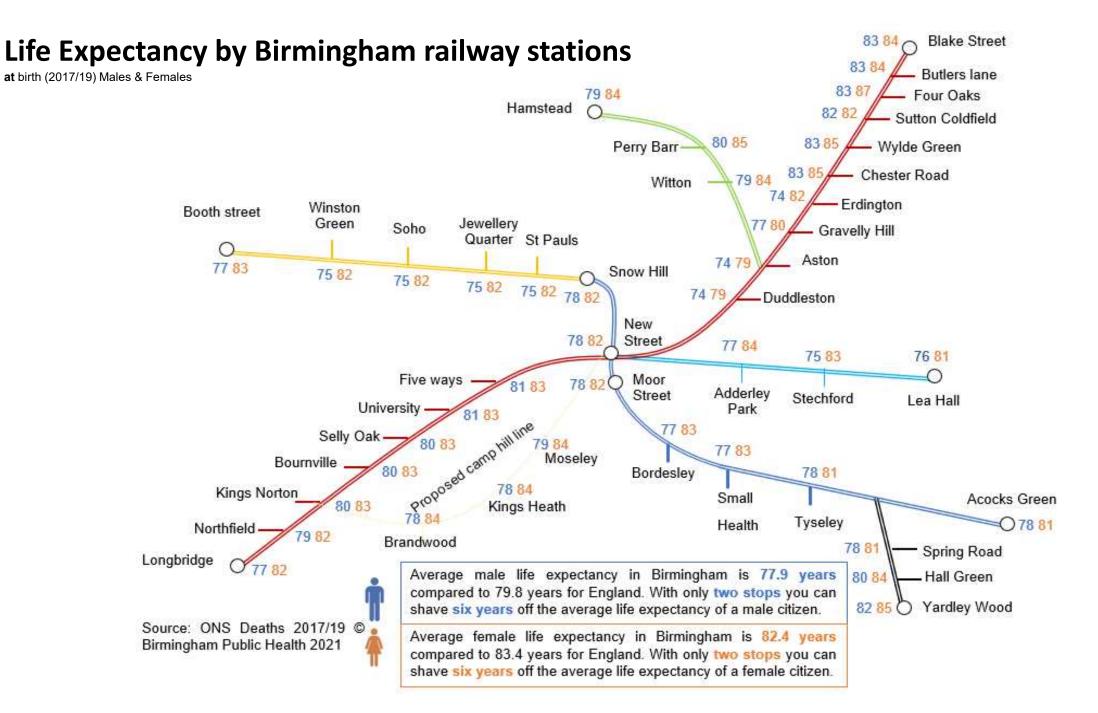


### **Our Vision**

To create a city where every citizen, whoever they are, wherever they live and at every stage of life, can make choices that empower them to be happy and healthy.







# Creating a Bolder, Healthier City (2022-2030)

There are five core themes within the strategy that set out our local priorities:

- 1. Healthy and Affordable Food
- 2. Mental Wellness and Balance
- 3. Active at Every Age and Ability
- 4. Contributing to a Green and Sustainable Future
- 5. Protect and Detect

There are three encompassing life course themes

- Getting the Best Start in Life
- Living, Working and Learning Well
- Ageing Well and Dying Well





#### Theme 1: Healthy and Affordable Food

Eating healthily underpins much of our physical and mental health. Too many citizens face challenges accessing affordable, healthy and sustainable food. Food economy should be vibrant; reflect the diversity of our communities; and be financially successful and sustainable.

System should contribute to a circular economy for food which:

- reduces waste
- increases valuable employment opportunities for local people
- minimises environmental harm
- maximises local assets

#### Leadership for Action

The Creating a Healthy Food City Forum and Public Health Division partners will lead this work, linking with other key partnerships such as the Birmingham Food System Strategy: Creating a Bolder, Healthier and More Sustainable Food City.

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#### Our ambitions are to work together to:

- Increase the uptake of Healthy Start vouchers in eligible families to at least 80% by 2027
- Reduce the prevalence of obesity (including severe obesity) in children in Reception and Year 6 by 10% by 2030
- Reduce the percentage (%) of 5yr olds with visually obvious dental decay to below 20% by 2030
- Increase the percentage (%) of adults regularly eating
  '5 a day' to more than 55% by 2030
- Ensure that the Healthy City Planning Toolkit is utilised in 90% of developments in the City by 2030





#### Theme 2: Mental Wellness and Balance

Mental wellbeing is as important as physical wellbeing. Mental wellness and balance is not the same as happiness. Need for accessible and culturally appropriate mental health services that support people living with addictions and conditions. This theme covers mental health, suicide prevention and addiction, including smoking and drugs and alcohol.



#### Leadership for Action

The Creating a Mentally Healthy City Forum will lead this theme with support from the Suicide Prevention Advisory Group and the NHS Mental Health Partnership.

#### Our ambitions are to work together to:

- Increase the uptake of Healthy Start vouchers in eligible families to at least 80% by 2027
- Reduce the prevalence of obesity (including severe obesity) in children in Reception and Year 6 by 10% by 2030
- Reduce the percentage (%) of 5yr olds with visually obvious dental decay to below 20% by 2030
- Increase the percentage (%) of adults regularly eating '5 a day' to more than 55% by 2030
- Ensure that the Healthy City Planning Toolkit is utilised in 90% of developments in the City by 2030



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#### Theme 3: Active at Every Age and Ability

Physical activity is key to maintaining a healthy lifestyle and preventing long-term conditions. Activity across our city could improve our health & happiness, social connectivity and environment. Covid-19 has reduced our activity levels but the CWG 2022 provides a visible global celebration of sport and activity. Significant and visible inequalities in activity means we need to focus areas of greatest inactivity.



#### Leadership for Action

#### Our ambitions are to work together to:

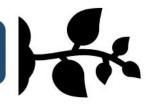
- Reduce the percentage (%) of adults who are physically inactive to less than 20% by 2030
- Increase the percentage (%) of adults walking or cycling for travel at least three days a week by at least 25% by 2030
- Increase the percentage (%) of physically active children and young people to the national average by 2030
- Reduce the inactivity gap between those living with disabilities and long-term health conditions and those without by 50% by 2030
- Reduce the inactivity gap between different ethnic communities by 50% by 2030

The work to address this theme will be led through the Creating a Physically Active City Forum, Sport Birmingham, and the Physical Activity Alliance.

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PROUD HOST 2022 comprowveelin games

# Theme 4: Contributing to a Green and Sustainable Future



Good evidence demonstrating that the natural environment around us can both harm and improve our health. Our role is to actively support the city in its approach to creating a green and sustainable future. The city has many natural assets but there are inequalities in those who access them and how they are used to benefit health. This theme is about seizing the opportunity to support the creation of health promoting places to live tackling air pollution, utilisation of green and blue space. Health promoting places to live increase social interaction; are inclusive; safe and accessible and support healthy lifestyles.

#### Leadership for Action

This theme will be taken forward through the work of the City of Nature Plan and Bolder Greener Birmingham.

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#### Our ambitions are to work together to:

- Reduce the percentage (%) of mortality attributable to particulate air pollution to less than 4.5% by 2030
- Increase the utilisation of outdoor space for exercise/health reasons to over 25% by 2028
- Increase the daily utilisation of green and blue spaces to 25% of the population by 2030
- Increase volunteering in green and blue spaces to at least 10% of the population by 2027
- Increase the proportion of our population connecting with nature to at least 35% of the population listening to birdsong by 2030





#### Theme 5: Protect and Detect

Protecting citizens from infectious diseases includes opportunities for action on environmental health and sexual and reproductive health, and having a robust cross-partnership response to local outbreaks and incidents of infectious disease.

Detecting disease and illness is important because it allows for earlier treatment and in general better outcomes for citizens.

#### Our ambitions are to work together to:

- Reduce the percentage (%) of mortality attributable to particulate air pollution to less than 4.5% by 2030
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- Increase the daily utilisation of green and blue spaces to 25% of the population by 2030
- Increase volunteering in green and blue spaces to at least 10% of the population by 2027
- Increase the proportion of our population connecting with nature to at least 35% of the population listening to birdsong by 2030



#### Leadership for Action

This theme will be led by the Health Protection Forum.

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#### Life Course: Getting the Best Start in Life

This is the first life course theme and covers 0-18 years.

Clear evidence that the foundations laid down for life from pre-conception through childhood and adolescence can have positive or negative impacts across an individuals entire life.

Child poverty is a significant challenge for the city. Many of the impacts across citizens' lives are also driven by the environment and support available to children, young people and families.

#### Ambitions across the life course

#### To support people in getting the best start in life, we will work together to:

- Reduce infant mortality in Birmingham by 25% by 2027 and by 50% by 2030
- Improve the percentage (%) of children achieving a good level of development by age 2 to 2.5 years to over 83% by 2030
- Increase the percentage (%) of children achieving a good level of development at the end of Reception (school readiness) by 75% by 2030
- Halve the rate of children killed and seriously injured on Birmingham's roads by 2030
- Reduce the under 18 teenage conception rate to close the gap between Birmingham and the national average by 2030
- Halve the hospital admissions due to asthma in young people under 18 years by 2027
- Reduce the rate of first-time entrants (10-17 years) to the youth justice system by 25% by 2030
- Reduce the rate per 1000 of homeless young people (16-24 years) to the English average by 2030



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#### Life Course: Working and Learning Well

Ill health and poor wellbeing can be a barrier to education and employment. A lack of education or employment can create barriers to health and wellbeing.

Reducing the impact of poverty and income inequity on health amongst disadvantaged groups across the life course through targeted approaches.

Use the leverage of our anchor organisations to encourage health at work, promote the Living Wage and tackle Modern Slavery.

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Ambitions across the life course

To support our citizens to live, work and learn well, we will work together to:

- Increase the percentage (%) of the estimated individuals accessing smoking cessation services and improve the 4-week quit rate by 20% by 2030
- Reduce coronary heart disease admissions rate (all ages) by 20% by 2030
- Reduce the percentage (%) of adults from ethnic communities with Type 2 diabetes to match the demographic profile of our city by 2030
- Increase the percentage (%) of eligible citizens who took up the offer of an NHS Health Check to over 70% by 2030
- Increase the number of targeted health checks (e.g. for carers and people with learning disabilities and/or severe mental health issues) by 25% by 2027
- Achieve 50% of all medium and large businesses in Birmingham becoming part of the Thrive at Work programme in 2030
- Reduce the number of households in fuel poverty to the national average by 2030



#### Life Course: Ageing and Dying Well

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The number of older adults is growing, and the expected number of older people living in poor health is set to rise.

Integration is key to this approach and as we age, health and social care services need to collaborate to provide integrated solutions.

This theme encourages prevention and approaches that enable to age well. It includes dementia, frailty, and creation of an Age-friendly City.

Ambitions across the life course

#### To support our citizens to live, work and learn well, we will work together to:

- Halve the gap in healthy life expectancy at 65 years between Birmingham and the national average for both men and women by 2030
- Reduce the percentage (%) of people reporting a long term Musculoskeletal (MSK) problem to 5% below the England average by 2030 by 2030
  Improve the detection of dementia by increasing the percentage (%) of people estimated to be living with dementia who are diagnosed and receiving support to over 75% by 2030
- Reduce the rate of emergency hospital admissions due to falls in people aged 65 years and over to below the national average by 2030
- Improve the carer-reported quality of life score for people caring for someone with dementia to equal or higher than the national average by 2030
- Improve the carer-reported quality of life score to equal to or above the national average by 2030
- Reduce excess winter deaths to close the gap between the actual and expected number of deaths in people aged >85years to the national average by 2030



#### **Closing the Gap**

'Closing the gap' provides an overarching goal by highlighting specific areas of focus that cut across the city.

It directs the system to focus on a principal target that brings together the priorities set out within this Strategy, making this the central focus of all we do locally.





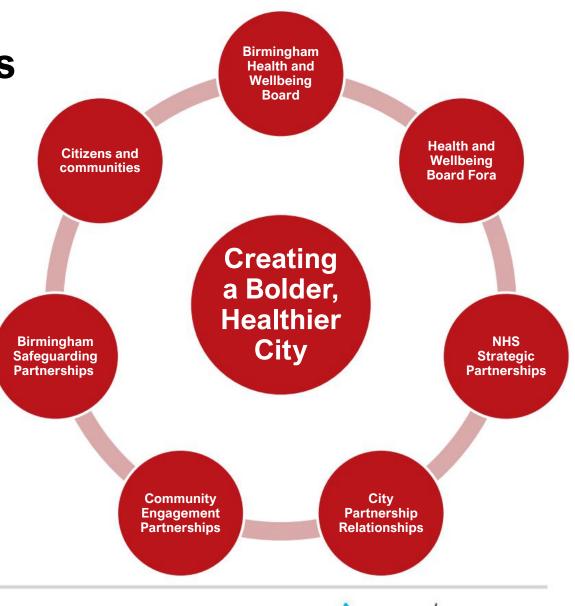
## **Governance and Relationships**

Birmingham Health and Wellbeing Board will lead on and oversee the strategy, working with partners, local community groups and networks.

We will receive updates (including an annual report) on its progress against the ambition outcomes.

We will outline and agree clear actions how to measure short term progress.

The forums will support the ambitions and outcomes, creating plans and strategies in partnership.







### **Director of Public Health Annual Report**

Birmingham Health and Wellbeing Board 22<sup>nd</sup> March 2022



## **The Annual Director of Public Health Report**

The Director of Public Health (DPH) has a duty to write an independent evidence-based annual report detailing the health and wellbeing of our local population.

The Annual Director of Public Health Report for 2020/21 reflects the journey of Birmingham City through the COVID-19 pandemic, providing insights and recommendations for the health of the population.





## Context

The report builds a narrative to show case the context of COVID-19 on the lives of the people in Birmingham City impinging upon their health, relationships and society utilising data from

- Hospital admissions and deaths
- The COVD-19 Health and Wellbeing Impact Survey
- Ethnographic research with 12 Birmingham residents
- Highlight reports from the Public Health Data Cell and Birmingham Test and Trace





## The Year I Stopped Dancing...

Alongside the data and analysis of the pandemic are the voices of 12 local citizens who shared with researchers their journey through the first year of the pandemic.

Their experiences are fundamental to the report and their experiences from the 17yr old living in an intergenerational household starting Year 13 during the pandemic to the African Sexual health nurse redeployed to a Covid ward, their stories reflect the experiences of our city during this first year and have informed the learning in the report.

"When I first heard about Coronavirus, I thought it wouldn't affect us so much, like Ebola or Swine Flu. I thought it might just be a couple of months and then disappear. But this has gone wild! When we went into national lockdown it was a big shock. We had never done anything like this before, never gone into isolation. I was very afraid."



### **Recommended Areas for Action**

- 1. Mitigating the impact of Covid on Mental Wellbeing
- 2. Addressing the long-term impacts of Covid on health
- 3. Reducing the drivers of inequality in Covid case rates and mortality







### **Perinatal and Infant Mortality Taskforce Update**

Birmingham Health and Wellbeing Board 22<sup>nd</sup> March 2022





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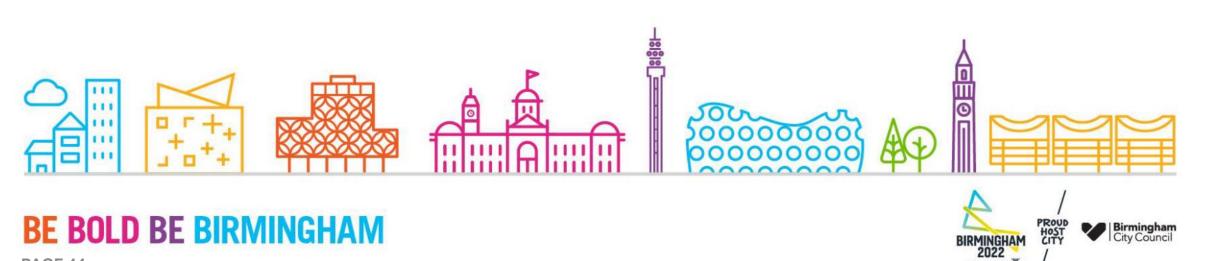
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