

Shaping Places for Healthier Lives Programme

EXPRESSION OF INTEREST

Project name:	Tackling Black, Asian and Minority Ethnic (BAME) Health Inequalities in Lewisham – the role of community-centred approaches
Lead council:	Lewisham Council
Partners:	Lewisham BME Network
Expression of interest contact:	Catherine Mbema
Job Title:	Interim Director of Public Health
Email Address:	Catherine.mbema@lewisham.gov.uk

- Your application will be evaluated on four questions with a word limit of 2000 words for the whole application. Weightings for each question are given.
- No attachment or links will be assessed and scored.

1. What is the problem you want to address and outcome you want to focus on for the project? What is the evidence of a high level of local need either in the area as a whole or in a target population within the borough? (Weighting 30%)

Ethnicity is an important determinant of health

There is good evidence to show that ethnicity or ethnic identity impacts upon health outcomes irrespective of other socioeconomic factors (1). Though not typically classified as a 'wider' determinant of health, ethnicity or ethnic identity is an increasingly important determinant of health given the increasing diversity of local authority areas in England like Lewisham, where an estimated 48% of residents are from a Black, Asian or Minority Ethnic (BAME) background. Ethnicity both drives inequality in health outcomes and the distribution of the more typical wider determinants of health (e.g. education, housing, and employment) in populations. More specifically, being from a BAME background is associated with several poorer health outcomes and inequalities in wider determinants of health both nationally and in the London Borough of Lewisham. We would therefore like to focus a project on the impact of being a member of a BAME community in Lewisham on specific health outcomes. The project will focus on BAME ethnicity as a determinant of health and the communities within which BAME residents live and socialise in as a wider determinant.

(186 words)

Black, Asian and Minority Ethnic (BAME) health inequalities in Lewisham

In Lewisham, there are significant inequalities for BAME residents in health indicators related to cancer, childhood obesity and mental health, which can be summarised as follows:

1. Cancer

Lewisham Black African residents are underrepresented in urgent 2 week wait referrals for cancer in comparison to their White counterparts. Eligible Black African residents also have lower bowel cancer screening uptake rates in comparison to their White counterparts.

2. Childhood Obesity

Looking at data on all excess weight (overweight and obesity) from the National Child Measurement Programme (NCMP), Black and Minority Ethnic (BME) children in both reception and Year 6 in Lewisham are more likely to carry excess weight.

3. Mental Health

Those from Black ethnic groups are overrepresented in acute adult mental health services in Lewisham and are underrepresented in Child and Adolescent mental health services (CAMHS).

(146 words)

Action to address BAME health inequalities to date

There is strong political and partnership support for taking action to address BAME health inequalities in Lewisham. Our Health and Wellbeing Board, chaired by our directly elected Mayor Damien Egan, has made tackling BAME health inequalities one of its main priorities and has called on system leaders from partner organisations that sit on the Health and Wellbeing Board to commit to actions to address health inequalities around cancer, obesity and mental health. These three areas of focus were selected following analysis of available data to identify what the most significant inequalities are for BAME communities in Lewisham. A partnership action plan to articulate these commitments is being developed by a BAME health inequalities working group, which will include working with the Lewisham BME network. The BME network is a community development project, managed by the Stephen Charitable Lawrence Trust and funded by the London Borough of Lewisham. The Network is comprised of over 120 BAME stakeholder groups, all working to support Lewisham's BAME community organisations and the communities they serve.

(178 words)

Communities and action to address BAME health inequalities

The importance of local level action to address ethnic inequalities in both health outcomes and the wider determinants of health has been highlighted in recent guidance around taking action to address ethnic health inequalities (PHE, 2018). 'The meaningful engagement and involvement of minority ethnic communities, patients, clinical staff and people' has also be highlighted as being paramount to both understand need and ensure that the most effective interventions are employed to address inequalities (PHE 2018). This project will therefore aim to build on existing evidence around community participation, co-production and health by focusing on the role of communities as a wider determinant of health on improving BAME health inequalities in indicators for cancer, childhood obesity and mental health in Lewisham. Our proposal is to develop and evaluate an effective range of community-centred approaches, particularly around participatory planning and co-production, for BAME communities in Lewisham to be involved in partnership action to address the BAME health inequalities outlined above in Lewisham.

(168 words)

(Total: 678 words)

2. How does your proposal meet the overall programme design features, namely: (Weighting 40%)

a. Complex system perspective

BAME inequalities in health around cancer, mental health, and childhood obesity in Lewisham are the result of a complex interplay of factors including the impact of racism, discrimination and exclusion on individuals and communities; health seeking behaviours in respective BAME communities; health related practices and beliefs; differential access to preventative, community and specialist care/interventions; and differential access to important wider determinants of health. There are also nuances within different ethnic groups that fall within the BAME definition that adds to the complexity of involving communities in planning and taking effective action to address these inequalities. In order to develop an effective range of community-centred approaches with BAME communities to address these health inequalities, it will be critical to take a complex system perspective. This perspective will enable recognition of both the complexity and broad range of intersecting factors that result in ethnic health inequalities, some of which fall outside of local influence.

(147 words)

b. A systems approach

At the outset of this project, a systems mapping exercise will be required to provide a local understanding of the interaction of system factors that result in health inequalities for our BAME communities around cancer, childhood obesity and mental health, including using available data to identify which specific BAME groups are affected by particular inequalities e.g. Black African communities and bowel cancer screening uptake. This mapping will provide a valuable overview of system factors and where community-centred approaches, particularly participation and co-production, will be most effectively employed to impact upon addressing these BAME health inequalities. The mapping will also take into account where these approaches are already being used in the borough in order to complement and enhance rather than duplicate existing activity.

(123 words)

c. Partnership working

Since our proposed project will require interaction with many factors across systems, partnership working will be integral to project. This will build on existing the partnership in place to address BAME health inequalities via the Lewisham Health and Wellbeing Board including health, social care and voluntary sector partners: Lewisham and Greenwich Healthcare Trust, Lewisham Clinical Commissioning Group, South London and the Maudsley NHS Foundation Trust, Healthwatch Lewisham, Lead member for Public Health, and Lewisham Council. Partnership with the Lewisham BME network and other voluntary and community sector organisations who represent and have links to the BAME communities that this project is focusing on will be important. As far as possible the project will seek to build on existing partnerships and networks in the borough, and recognise existing groups, partnerships and initiatives that have effective connections with the communities that fall within the BAME definition.

(143 words)

d. Potential for learning

This project has significant potential to provide learning for other local areas that are diverse and see similar health inequalities in their BAME communities to Lewisham, particularly other urban or metropolitan areas of the country. Lewisham Public Health have already made contact with Birmingham and Bristol to think about how we can share existing learning to improve some health outcomes for our respective BAME populations. We have also conducted learning workshops with those working on the Black Thrive initiative, which aims to improve health and wellbeing for Black residents in Lambeth.

In the recently published Public Health England (PHE) guidance around addressing ethnic inequalities in health (PHE, 2018), it is noted 'that there remain significant gaps in data and a lack of robust evidence on effective interventions' to address ethnic health inequalities (PHE, 2018). This project will therefore make some contribution towards addressing this gap in evidence, specifically for addressing BAME health inequalities.

(153 words)

3. What is the hypothesised link between the action(s) you intend to take on wider determinants of health and improved health outcomes? (Weighting 15%)

Communities and action to address BAME health inequalities

This project will work on the hypothesis that effectively engaging BAME communities in addressing health inequalities associated with BAME ethnicity will contribute to a reduction in these inequalities. The mechanism of effective engagement can comprise of a number of community-centred approaches, ranging from community strengthening to establishing effective partnerships and collaborations for planning and co-production of projects. The mechanisms to be used in this project will be determined following a systems mapping exercise with a range of stakeholders and partners; further analysis of existing data for the health inequalities around cancer, childhood obesity and mental health; and review of the most effective interventions that may best be applied to the Lewisham context.

Evidence for community engagement and participation to improve health outcomes and reduce health inequalities

There is good evidence available to show that several community-related factors are important in driving health inequalities that include 'how much control people have over resources and decision-making and how much access people have to social resources, including social networks, and communal capabilities and resilience' (UCL Institute of Equity, 2013). Evidence for community-centred approaches to address these factors is therefore growing, with some data now available showing return on investment for employing these approaches in local areas. This project will aim to contribute to this evidence base with a focus on using these approaches to specifically address ethnic health inequalities for those who are from a BAME background in a local authority setting.

(247 words)

4. Outline your initial plans for monitoring the impact of your action(s) on the wider determinants of health. (Weighting 15%)

The existing Lewisham Health and Wellbeing Board work to address BAME health inequalities will be overseen and monitored via a partnership action plan and corresponding indicator framework to track changes in indicators demonstrating BAME health inequalities for cancer, childhood obesity and mental health. This action plan and indicator framework will be overseen by both the Lewisham Health and Wellbeing Board and Lewisham Council Corporate Equalities Board.

In order to assess the impact of additional community-centred approaches to support this work, we will seek an external evaluation partner to capture the specific contributions of these approaches to addressing ethnic health inequalities. The rationale for this will be to contribute to the evidence base for the use of community-centred approaches to impact on health inequalities and the evidence base around approaches that can be employed to address ethnic health inequalities. The evaluation work will as much as possible also follow a community-centred ethos by involving communities in the design and commissioning of the evaluation work.

(163 words)

Shaping Places for Healthier Lives Learning Network

The Shaping Places for Healthier Lives programme aims to share learning and best practice to encourage and support wider local action. The learning network is an opportunity for all local authorities to benefit from the programme even if they are not selected to progress to the second phase or three-year programme.

There will be regular events and engagement opportunities throughout the three-year programme open to all interested local authorities. These may include:

- Regular learning and showcasing events
- Programme materials such as blogs, webinars and case studies
- Workshops (participation may operate on a first come first serve basis)

If you would like to receive updates on the Shaping Places for Healthier Lives programme and upcoming events and opportunities, please join the programme mailing list and provide contact details below:

I would like to join the Shaping Places for Healthier Lives programme mailing list:

Contact email address: Catherine.mbema@lewisham.gov.uk