



Addressing Health Inequalities experienced by Black
African & Black Caribbean Women in Birmingham
A Collaborative Approach

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Conflict of Interest

In relation to this presentation, I declare that I have no conflict of interest

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Overview

- Highlight the health inequalities experienced by Black African and Black Caribbean women
- Provide an understanding of the complex factors contributing to these disparities
- Discuss the actions being taken to address these inequalities

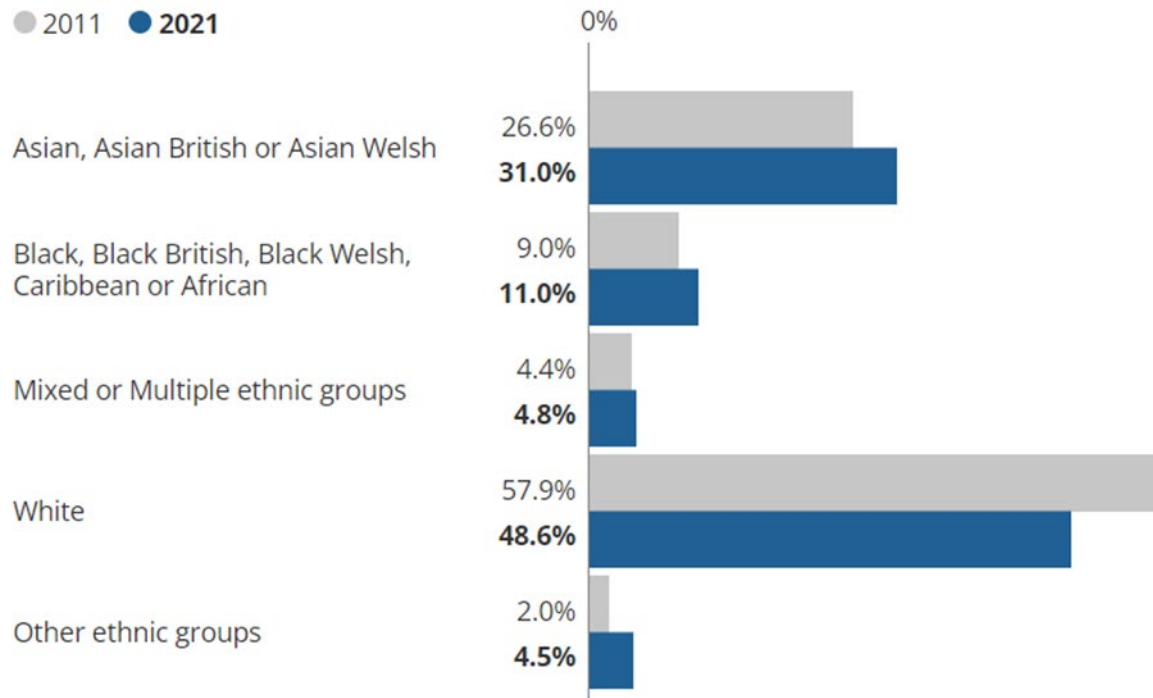
What are health inequalities?

- Health inequalities are avoidable, unfair and systematic differences in health between different groups of people, but it refer to differences in care and opportunities.
- It can involve differences in:
 - health status
 - quality and experience of care
 - behavioural risk
 - Wider determinants of health

Birmingham's Population

Percentage of usual residents by ethnic group, **Birmingham** ▾

● 2011 ● 2021



Source: Office for National Statistics – 2011 Census and Census 2021

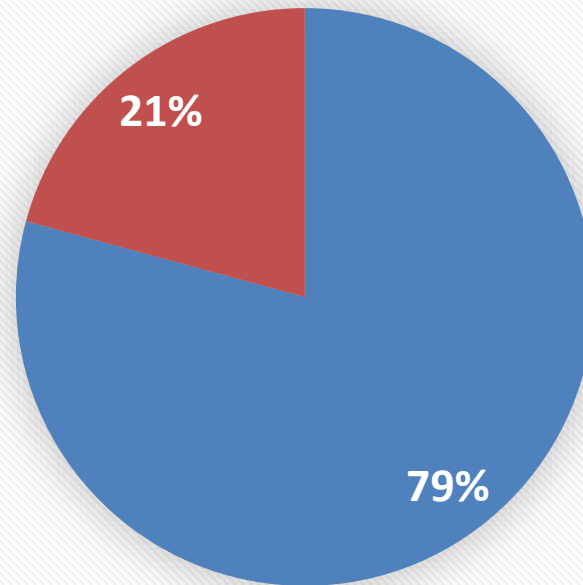
- Birmingham is home to 8% of the Black African and Black Caribbean populations in England

Understanding the Issue

- Black African & Black Caribbean women face significant health disparities compared to the general population
 - higher rates of late HIV diagnosis
 - high risk of maternal mortality
 - mental health issues
- These disparities have complex causes which require multiple strategies to address them

Inequalities- HIV rates in Birmingham and Solihull

Proportion of Black African and Caribbean women living with HIV accessing care in Birmingham & Solihull



■ Number of patients living with HIV

■ Number of Black African and Black Caribbean women

Maternity

Key findings

Highest infant mortality rates in Birmingham by place of mother's birth



Risk of still birth in the UK



Risk of maternal mortality



Good level of development of children in Reception in England



Key findings

Mental health in the UK

Black Women



29%
experienced a common
mental disorder
in the past week

Detentions under the Mental Health Act (UK)

Black people



4x
more likely to be
detained than
White people

Compared to White men, Black Caribbean young men are **3x** more likely to have been in contact with mental health services in the year before suicide

Black Caribbean



3x
more likely to have had contact with
mental health services
in the year before suicide

Emotional and mental health treatment rates in the UK



• Mental Health

Reasons for not seeking Healthcare

- Lack of trust in healthcare providers
- Fear of discrimination or racism within the healthcare system
- Financial constraints
- Historic and systemic inequalities

Underlying Factors

- Intergenerational trauma
 - increased anxiety to access healthcare
 - hyper-awareness
 - aversion towards healthcare professionals

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- Intergenerational trauma
 - increased anxiety to access healthcare
 - hyper-awareness
 - aversion towards healthcare professionals
- **Social & Economically factors**
 - income and employment (limited access to healthcare)
 - housing and neighbourhood (poor housing)

The BLACHIR Report

7 Key areas for action:

- Fairness, Inclusion and Respect
- Trust and Transparency
- Better Data
- Early Interventions
- Health Checks and Campaigns
- Healthier Behaviours
- Health Literacy



Birmingham Health and Wellbeing Board: Taking Action



- The Birmingham Health and Wellbeing Board recognizes these inequalities and is committed to tackling them
- Established the Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR) to identify specific challenges and solutions
- BLACHIR identified key action areas:
 - improving access to culturally competent healthcare
 - addressing structural inequalities,
 - and empowering communities

Birmingham Health and Wellbeing Board: Action Plan

- improving access to culturally competent healthcare
 - Investing in time to train healthcare professionals on cultural competency and implicit bias
- addressing structural inequalities,
 - Providing language services and interpreters to ensure effective communication for the diaspora
- and empowering communities
 - Developing a community led culturally tailored health promotion campaigns and outreach programs

So Far;

- Partnering with community organizations to address social determinants of health and empower communities
- Advocating for policies that address systemic inequalities in housing, education, and employment
- Collecting and analysing data to understand and track progress on addressing racial disparities

Celebrating Community Initiatives

- Highlighting community-led initiatives that address health needs and promote well-being among Black African & Caribbean women
 - peer support groups
 - culturally-specific health education programs

In summary

- Addressing health inequalities for Black African & Caribbean women requires collective action from individuals, communities, and institutions

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- Addressing health inequalities for Black African women requires collective action from individuals, communities, and institutions
- We must continue to raise awareness, advocate for change, and support community-led solutions
- By working together, we can create a world where all women, regardless of their background, have the opportunity to thrive and achieve optimal health

Moving Forward Together

- Share this information with your networks
- Engage with community organizations and initiatives
- Advocate for policies that promote health equity
- Together, we can create a healthier future for all



*There is no one size that fits all.
There is no one size that fits all. We
must work country by country,
region by region, community by
community, to ensure the diversity
of needs are addressed to support
each reality.*

*– Amina J. Mohammed, Deputy
Secretary-General, UN*