

Report for: Health and Wellbeing Board

Title: **Working in Partnership to address Racial Discrimination and Injustice**

Report

Authorised by: Charlotte Pomery, AD Commissioning, London Borough of Haringey

Lead Officer: Florence Guppy, Strategic Lead Community Enablement, florence.guppy@haringey.gov.uk, 020 8489 1258.

1. Describe the issue under consideration

- 1.1 This paper highlights the presentation of work which has been brought together as part of the borough response to addressing racism and racial discrimination, reflected through existing inequalities and highlighted both by the Black Lives Matter movement, and brought into sharp focus through the killing of George Floyd in the USA, and by the differential effects of the Covid-19 pandemic on black, Asian and minority ethnic communities.
- 1.2 This topic will be a standing item on each Health and Wellbeing Board agenda, updating the Board on timelines and progress against a range of indicators pertaining to health and wellbeing and recognising the wider work carried out under the auspices of the Joint Meeting of the Health and Wellbeing Board and Community Safety Partnership.

2. Recommendations

- 2.1 The Health and Wellbeing Board is asked to note and comment on the proposals set out in this paper.

3. Background Information

- 3.1 As Members of the Health and Wellbeing Board (the HWB) will understand, issues of inequality are not new for Haringey, although they have been exacerbated and highlighted through the Covid-19 pandemic and subsequent lockdown. There is growing understanding that inequalities do not just happen – they are often structural and embedded in the very ways that society operates, at all layers.
- 3.2 As continues to be seen through the Covid-19 pandemic, experiences of racism and racial discrimination may be lived through poorer relative outcomes across health and wellbeing as well as across the wider determinants of health: housing, employment, community safety, income and educational attainment for example.

- 3.3 In Haringey, work to address inequalities has been underway for some time through a number of initiatives, including the delivery of the Borough Plan; the Fairness Commission; Black, Asian and Minority Ethnic Attainment; Alternative Provision Review implementation; the Health and Wellbeing Strategy; the Young People at Risk Strategy; Housing and Homelessness Approaches and a range of others.
- 3.4 The Health and Wellbeing Board has previously agreed to adopt and oversee the implementation of the set of recommendations made following a Roundtable Meeting of Black, Asian and Minority Ethnic Organisations in the borough. This Roundtable was convened by Bridge Renewal Trust with the support of Haringey Council and NHS bodies to address key concerns about the disproportionate impacts – health, social and economic – of the Covid-19 pandemic on local communities.
- 3.5 Members of the Board will also know through its joint meeting with the Community Safety Partnership that a partnership co-ordinating group now meets regularly, co-chaired by the Bridge Renewal Trust and by the Council, bringing together community and voluntary sector and statutory partner representatives. The Co-ordinating Group has a broad span approach, working across eight priority strands, which have been drawn into a single Programme Plan, which remains at a high level and in draft form at this stage:
- Policy and Strategy
 - Health and Wellbeing
 - Community Safety, Social Justice and Policing
 - Education and Attainment
 - Faith and Identity
 - Place, Culture and Heritage
 - Economy and Employment
 - Workforce

This Co-ordinating Group feeds into the joint meeting of the HWB and CSP to ensure community and political leadership and governance of the work and to support prioritisation and allocation of resources.

- 3.8 Whilst the Board has agreed to oversee the dedicated recommendations from the Roundtable mentioned above, it is worth noting that these are for practical purposes being responded to alongside the wider work affecting health and wellbeing indicated above given the overlap and synergy and all actions are being drawn into a single Programme Plan. In summary, the 9 key recommendations are being taken forward as set out below:

3.8.1 Data and evidence

- Recommendation: More research to collate local ethnicity data building on the research by North Mid Hospital and proposed Haringey Council's Community Impact Assessment and GLA audit. Research should not generalise BAME communities but look into different groups – eg Turkish, Somali etc

Actions taken so far:

- Healthwatch report on impact of COVID on Kurdish and Turkish communities shared and used as a basis for planning
- All North Central London boroughs have agreed for their registry offices to capture ethnicity on death registrations – this will support better monitoring of impacts of health conditions (including COVID) across ethnic groups
- Community Impact Assessment has been widely shared to support better planning
- Work on data collection to ensure more granular understanding of Haringey's diverse communities

3.8.2 Funding to build resilience

- Recommendation: Core and project funding for grassroots BAME organisations and wider voluntary and community sector including faith groups.

Actions taken so far:

- Haringey Council has funded a £600k package of support to VCS organisations affected by Covid-19, a number of whom are Black, Asian and Minority Ethnic led and targeted and covered a wide span of community organisations
- Support from the Joint VCS to enable bid writing

3.8.3 Bereavement and mental health

- Recommendation: Need accessible and targeted bereavement support. Bereavement Framework currently under development by Public Health to be co-produced with BAME groups.
- Actions taken so far:
 - CCG has commissioned Nafsiyat to provide language appropriate bereavement services
 - Work underway with Haringey IAPT to assess referrals, treatment completions and recovery for BAME communities and meetings scheduled to consider our available data on utilisation and outcomes for different BAME groups for MH services and approach to improving access and outcomes
 - Public health to carry out a survey on mental health in our varied ethnic communities in Haringey
 - Development of Community facing Bereavement Framework
 - CRUSE training widely available to community organisations

3.8.4 Domestic violence

- Recommendation: More support to tackle Violence Against Women and Girls and intergenerational conflicts (parents and children).
- Actions taken so far:
 - BAMER forum on VAWG held in June – action plan has been developed

- Focus on early stage awareness and access to emergency phone support

3.8.5 Communication and awareness raising

- Recommendation: More tailored communications that are culturally and linguistically appropriate.
- Actions so far
 - Communications and engagement work-stream set up to get messages e.g. about COVID testing out to our diverse communities
 - Funding directly to VCS partnership for onward funding of grass roots organisations to become champions for COVID health and public health messaging
 - Focus on ensuring key messages are tailored to specific communities and translated into different languages

3.8.6 Prevention and resilience building

- Recommendation: More support to various cohorts of BAME families and communities to build resilience for the long-term
- Actions so far
 - This is an area prioritised for co-production with local communities
 - Support for targeted work

3.8.7 Shielding of BAME staff and communities

- Recommendation: More to be done to identify and shield at risk BAME staff across different front-line services and BAME individuals within the community
- Actions so far
 - All NHS organisations including all GP practices and the Council have carried out risk-assessments for staff in terms of working environment
 - Shielding Programme has been paused nationally, but there remains a focus on working in an integrated way with residents who are Clinically Extremely Vulnerable to Covid-19

3.8.8 Equitable access to services

- Recommendation: Tackling the structural inequalities and underlying racism and racial bias ingrained in some services; make more infrastructure changes to improve access to services - health care, education and early help, jobs, housing, welfare, etc - for all sections of the BAME communities; co-production and change in conversation about tackling deep inequalities; need to do more to develop trust between BAME communities and statutory services; statutory services to reflect more the community they serve – in terms of ethnic mix
- Actions so far

- Developing an equity access tool for use across the partnership
- Using improved data as set out above to understand equity of access and treatment

3.8.9 Digital exclusion

- Recommendation: More work needs to be done to tackle digital exclusion experienced by BAME organisations and residents – including funding and training
- Actions so far
 - Successful bid through HealthWatch to support digital exclusion and primary care
 - Partnership Steering Group to address wider issues of digital exclusion now established across improved WiFi access, support with devices and practical advice on use

3.9 There will be opportunities at the Board meeting for discussion on the content of the eight strands and also for agreement as to how partners will ensure this oversight and leadership can be delivered.

4. Contribution to strategic outcomes

4.1 As noted above, this work directly supports a number of strategic outcomes, notably action to reduce inequalities in the borough, specifically here focused on those caused by racial discrimination and injustice.

5. Statutory Officer Comments (Legal and Finance)

5.1 There are no legal implications arising from the recommendations of the report.

6. Use of Appendices

None

7. Background Papers

None