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Community Voices

Influencing the way
Council and NHS
services are delivered
in Brighton and Hove



Do you identify as Black, brown, Asian or from another language, ethnic or migrant community?


Do you want to improve how public services are delivered locally?


Do you want the chance to speak directly to representatives from the Council and NHS and get your voice heard?


Join our community voices group!


Members of the group talk to people in their community about what's important to them and bring this information to meetings. We discuss issues that matter to us and talk to representatives from the Council and NHS about how they can be solved.


What do members get?


 Free training

 Help getting online

 Chance to meet people from different communities

 Out of pocket expenses

 Build confidence and skills

 Be involved in a new way of working with the Council and NHS

How to join

Contact Terry Adams on 01273 234769
or Aleya Khatun on 01273 410853.

Email info@trustdevcom.org.uk or message 07782 279 191.

If you do not speak English and would like to be involved, email laura@sussexinterpreting.org.uk or call 01273 234016 and leave a message in your language.



Who we are.

We are a group of people who want to improve local services by working with Brighton and Hove City Council and the local NHS. We are all from ethnically diverse communities. Many people are migrants and speak other languages.

What we do.

We give people a platform to talk about what is important to them and their communities. We meet to decide what matters to us and then we discuss it with decision makers and service providers. Finally, we hear about and support changes that have been made by the City Council and the local NHS because of our discussions.

We value the dialogue between group members and those who are responsible for delivering services. We prefer this to completing a survey and not seeing changes.

When we meet.

We meet approximately once a month online or face to face.



What our members say.

'It's great that you can pop in and out – there is a lot of flexibility, you don't need to attend every meeting. It's a chance to speak to service providers regarding areas which we haven't been listened to about in the past.'

'I am very grateful for this, because (we) need to be able to tell and talk to the Council on things that matter to us.'

'I will tell others to join because this is very good for our communities'.

'I'm really glad that this has been set up, for a long time I've been looking to be able to speak to the Council on a number of things that are important to my groups that I work for. This is the great way I can do this so thank you.'

'Yes, this is a very important and good idea. But we have to make sure that something comes out of it and we don't just spend our time talking for nothing to happen.'

Community Voices is supported by

- Trust for Developing Communities
- Hangleton and Knoll Project
- Sussex Interpreting Services
- Racial Harassment Forum

Community Voices is funded by

- Brighton and Hove City council
- Sussex NHS Commissioners

Why Community Voices?

Community Voices was created following our research 'The NHS, COVID-19 and Lockdown: Black, Asian, Minoritised Ethnic & Refugee experience' in summer 2020. The research was led by Dr Anusree Biswas Sasidharan.

In this research we engaged 310 people across 56 ethnicities in 14 languages to share their experiences of healthcare, Covid-19 and Council services.

The partners involved in the research were:

- Trust for Developing Communities
- Hangleton and Knoll Project
- Sussex Interpreting Services
- Voices in Exile
- Network of International Women
- Fresh Youth Perspectives

We found...

Contracting Covid-19.

13% of respondents had had Covid-19.



Working conditions and Covid-19.

Many respondents were key workers. Many key workers who contracted Covid-19 were from ethnically diverse communities.

21% of key workers in this research felt they were expected to take more risk compared to white colleagues.

"I was constantly moved to cover higher risk areas. My white colleague would request the move and my line manager would approve. I am expected to be the one who travels and enters spaces with others who have may have been in situations where social distancing was not observed."

A survey respondent that identified as a British Black woman

Information and Communication.

5% of respondents uncertain about symptoms. The main sources of information were television, social media, friends and family, government briefings, local newspapers, and voluntary sector groups.

“Well maybe some simple language information that told you what to look out for, maybe there was already a lot of it about. But I don’t remember seeing much of it. I never saw any leaflets from the surgery or anything. Maybe that would have helped some. Then I would not have to rely on my children as much.”

**Interviewee 143,
woman of Nigerian heritage**

The lockdown experience.

Most respondents expressed anxiety, distrust, stress, conflict, confusion, fear, and panic. The lack of access to GPs had a negative impact on mental health. We know ethnically diverse communities are disproportionately affected by poverty, health inequality and poor housing conditions. Many people found useful self-help strategies.

“Have needed help with finances. Friends and family abroad have sent them money. No recourse to public funds.”

**Interviewee 127,
a woman of Arab heritage**

Recommendations

The Community Voices group supports four of the recommendations from the research:

1. Build closer, collaborative relationships with Black, Asian, refugee and minority ethnic communities
2. Provide clear, local information, in different languages
3. Fund and sustain approaches to tackling racial inequality
4. Promote health education in partnership with ethnically diverse communities

The other three recommendations were:

5. Support employers to implement Equality Assessment Frameworks
6. Conduct Equality Impact Assessments on access to healthcare
7. Conduct more analysis of survey data



Thank you to everyone who participated in the research – sharing your views is making a difference.

Supportive statements from BHCC and NHS

'There's real potential for this approach and am really pleased we're exploring it.'

Sarah Tighe-Ford,
BHCC Equalities

'It was a really good start to what will need to be an ongoing two-way dialogue. I feel like we barely scratched the surface and look forward to working with Community Voices to have a positive and lasting impact on the experiences and health outcomes of our local ethnically diverse communities.'

Antonia Bennett,
Sussex NHS Commissioners

