



dhip

Derby Health Inequalities Partnership

Impact Report





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Introduction

Welcome from Amjad and Siobhan

As co-Chairs of Derby Health Inequalities Partnership we are delighted to share our first Impact Report. The report highlights and celebrates DHIP achievements and the work of community organisations and Community Connectors to improve health and wellbeing and tackle inequalities. We would like to take this opportunity to thank everyone for their support and the work they have done.

It has been a challenging yet satisfying journey. DHIP was created out of a desire to do things differently when it comes to health in our communities, building on joint work undertaken during the COVID-19 pandemic. We know that health and other services do not have all the answers and believe there is great power in working together on issues which affect our communities. We also know that this is not the easy approach and needs honest conversations on all sides, with a core focus on building trust. We are proud of the work outlined in this report, and that so many of Derby's community organisations are with us on this journey. Highlights have included securing a membership place for DHIP on city health boards to ensure community voices are heard in strategic planning; and securing project funding from NHS England, Derby and Derbyshire ICB (Integrated Care Board) and the Department for Levelling Up, Housing and Communities (DLUHC) to invest in small grants and Connector projects, the details of which you can read in the report.

We are still at the beginning of our journey. We are learning what works, what doesn't and how to have the most impact. Importantly, we need to ensure the sustainability of what we do and will be seeking investment to help us do this. We aspire to build on what we present here to further empower community leadership in health at all levels: grassroots, commissioning, service planning and board level. Join us!

Siobhan Horsley and Amjad Ashraf, Co-chairs of DHIP







DHIP Team

L-R: Marie Cowie (Derby City Council – Public Health), Amjad Ashraf (Co-chair/Community Action Derby), Ejaz Sarwar (Community Action Derby), Celia Edwards-Grant (Derby City Council – Public Health), Natasha Cover (Community Action Derby).

DHIP Aims

What are we trying to do?

The Derby Health Inequalities Partnership (DHIP) leads and organises activity across communities and partners (such as the NHS) to reduce health inequalities in Derby. Health inequalities are the unfair and avoidable differences in health across the population, and between different groups within society. These include how long people are likely to live, the health conditions they may have and the care that is available to them.

The partnership was established in 2021 by Derby City Council and Community Action Derby as a joint project in response to the COVID-19 Pandemic, which highlighted the already significant inequalities in health and wellbeing for Black, Asian and minority ethnic communities, people living in areas of deprivation and disabled people.

The partnership provides a shared space for discussion, decision making and supports community-led planning and action to improve health outcomes and reduce inequalities.

Initial meetings with members identified three themes for development work:

Community consultation and engagement to understand what health issues are most important within our communities.

Health promotion/education: supporting the development of knowledge, skills and confidence in health issues.

An advisory function for health services and providers, to improve their offer for our communities and to hold them to account for actions following that advice.

Membership of DHIP is open to groups or community organisations who want to help to improve health and wellbeing and tackle health inequalities in Derby's underserved communities.

We aim to work with people living in areas of deprivation, ethnic minority communities, people with disabilities and groups who are socially excluded.

We know that no one term is preferred to describe ethnicity by everyone in Derby, but we use these terms with the most respect to individuals and communities. As part of DHIP's learning journey, we will listen and change our language in the future.

So what does DHIP do? DHIP works with local community groups, leaders and representatives to identify and find ways to improve health.

Why are we doing this?

Health is affected by many things, not just hospitals and health services

So we have to tackle many things to improve health - like housing, food, jobs, money...

Some people living in the most deprived areas of Derby are dying 11 years earlier than those living in more affluent areas. Health is affected by a wide range of factors or building blocks. If people don't have all the building blocks needed for good health, this leads to poorer physical and mental health.

The building blocks show us that health is about much more than the NHS or the choices we make about our diet or whether we exercise, smoke or drink alcohol. It is about jobs that local people can get, decent homes and preventing people becoming isolated. It is about tackling discrimination and making sure people have enough money and resources. If all these important building blocks are not in place, then communities cannot thrive, and people are more likely to become ill.

For example, someone who can't access secure work because of discrimination may feel chronic stress and hardship, leading to increased stress, anxiety and depression. This leads to poorer mental health and physical health. The solution is to tackle discrimination and support employment.

We can create meaningful change and action if we work in partnership with communities and focus on gaps in the building blocks of good health.

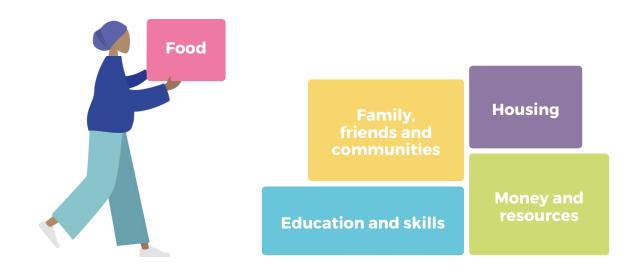


Figure 1: Building Blocks of Health

DHIP Values and PrinciplesWhat is important to us



DHIP is focused on health inequalities (the unfair, systematic, avoidable differences in health outcomes) and the gaps in the building blocks (housing, employment, education, living environment, etc.) that are needed for good health.



Communities, both place-based and where people share a common identity, have a vital contribution to make in improving health and wellbeing. DHIP works with existing community assets, such as those representing black and ethnic minority communities. We acknowledge our limitations and accept we cannot work with all groups at once.



DHIP's work is underpinned by strong public health evidence which shows that health is improved by strengthening communities through community development.



Community development recognises that some people, some groups and some communities are excluded and oppressed by the way society and structures are organised. It is based on the values of human rights, social justice, equality and respect for diversity.



DHIP recognises that its success is based on developing and maintaining trust and strong relationships with communities. It takes time to achieve real and meaningful change, there are no quick fixes.



We need to work with partners across the health system to embed community-centred approaches and lived experience – so that services, plans and strategies make a difference to people's lives.



DHIP's steering group is drawn from a variety of organisations, backgrounds and professions. Our practice is driven by the need to act in the best interests of communities. Our actions and decisions aim to be impartial, open and transparent, and respectful of others.

Figure 2: DHIP Values, Principles & Activities

DHIP Activities

DHIP:

Organises regular meetings for members – a safe space to discuss health inequalities and share information.

Consults and engages with community groups on experiences of health.

Coordinates and supports community events to promote health.

Provides small grants to support and develop capacity for community projects.

Recruits, supports and develops volunteer Community Connectors who work within their own community networks to promote health and wellbeing.

Supports Community Connectors through training, mentoring and providing networking opportunities.

Supports and develops a network of Strategic Connectors (local credible representatives who have influential roles within the health system) who are well-placed to champion DHIP objectives.

Supports involvement in shaping strategies, plans and service pathways by being represented at system partnership meetings (Health and Wellbeing Board, Place Partnership Board).

Supports quality community engagement across a variety of health-related projects, such as the Integrated Care Board (ICB) hypertension awareness project.

Links with other programmes and projects which support DHIP's values and objectives (such as Active Through Football, Derby Wellbeing Collaborative).







Membership

The core membership of DHIP comprises of local community organisations that have a key role and responsibility to improve health and wellbeing and reduce health inequalities in Derby.

DHIP meets regularly (minimum quarterly), alternating between local community venues.

DHIP is co-chaired by Community Action Derby (CA) and Derby City Council (Public Health). Admin support is shared between both organisations.

Work programmes and activity is planned and coordinated by a Strategic Steering Group, which is made up of representatives from Community Action Derby, Derby City Council (Public Health, Locality Working) and Derby Homes. Additional system partners (Integrated Care Board/NHS) are invited, in an advisory capacity, where appropriate.

Operational task groups meet regularly to plan and coordinate activities and events. DHIP is resourced by existing staff roles within Public Health and CA, as well as funding from short-term grants (NHS Core20Plus Community Connectors, Department for Levelling Up, Housing and Communities), while we work to secure sustainable funding from within the system.

Governance and Relationships

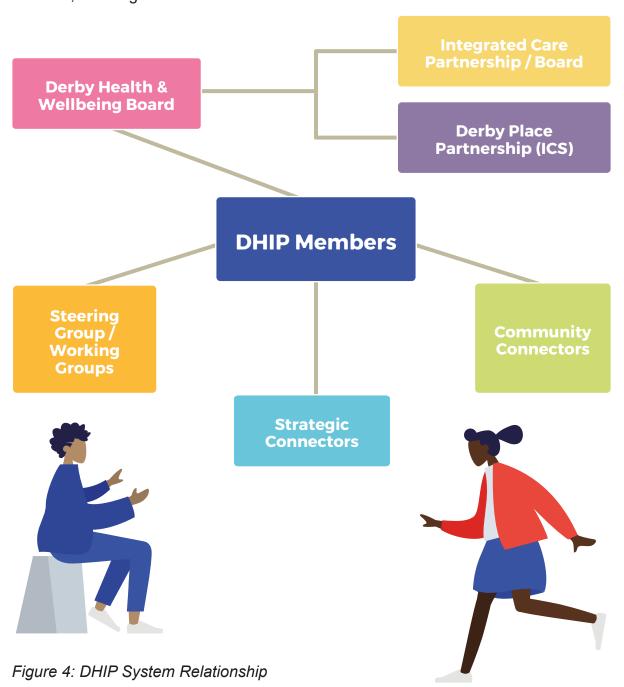
DHIP is responsible to organisational boards/cabinets regarding its use of funds and delivery of outcomes.

Task groups are accountable to DHIP.

DHIP is represented on the Derby Health and Wellbeing Board (a statutory board of the City Council) and the Derby Place Partnership Board (local NHS, social care and voluntary sector partners).

External grant funding is provided to Community Action Derby as the delivery partner that manages funding according to agreed contracts and delivery plans.

DHIP uses a decision-making framework and prioritisation tool, based on its values, to guide its strategic and operational decisions. This ensures equity in any projects we invest in, for the greatest benefit to our communities.



DHIP Progress and Achievements

DHIP has made significant progress over the last two years:

- Building strong and trusted relationships between parts of the statutory and voluntary sector as well as community groups.
- Providing a stable infrastructure for community voice to be heard and acted upon.
- Enabling community representatives/leaders to have a voice at key partnership groups, such as the Health and Wellbeing Board and Place Partnership.
- Securing grant funding from the NHS Core20Plus programme and using this to establish DHIP Community Connector infrastructure and activity.

There are also many challenges, including:

- It takes time to build trust and relationships with community members and build strong networks.
- DHIP doesn't have it's own staff or budget and relies on short-term funding which can be unsustainable.
- DHIP cannot tackle all health inequalities at once so it prioritises based on strengths and connections.

DHIP Consultation

- DHIP completed a community consultation with local community researchers (the full report is available on the DHIP website)¹. The findings were validated by those involved in collecting the data and reflect the powerful emotions which were being expressed during the data collection.
- A short audio film was produced to further express the consultation findings in a more accessible and impactful way. Both the film and the report are available on the DHIP website.
- The report and film were shared with DHIP members at the November 2022 meeting.
- The consultation findings (report and film) were presented at the Health and Wellbeing Board (HWB) in November 2022 and the Place Partnership in January 2023. This established the role and function of DHIP within the Derby health system, strengthening DHIP's place and ability to influence health and wellbeing priorities.
- We continue to implement the recommendations through our DHIP work plan, as capacity and resources allow, and we review this work regularly.

DHIP Consultation Recommendations and Actions Agreed

Consultation Recommendations DHIP Actions Being Progressed Bridge the knowledge gap between Identify current position and policy healthcare professionals and - does the Integrated Care System communities, ensuring that information have a framework/policy or minimum is widely accessible and that individuals standards to support interpretation and can make informed decisions about translation across the system? their health. Part of this should involve Is there a digital literacy policy? the provision of translated resources and improved interpretation services. Acknowledgement of variation in digital literacy among populations and where it is not possible to avoid digital use, support to be provided. Religious and cultural considerations to Continue to scope good quality, underpin all care, health promotion and effective cultural competence training provision (discussions started with information provided to individuals and communities. Joined Up Care Derbyshire Quality Conversations Programme) – scope and develop core training to offer and deliver throughout system (content, costs, possible provider(s), what exists already, etc.)

Community-based and co-produced health promotion and information events are required to address social norms and engage communities in culturally sensitive discussions regarding health behaviours. Consider hosting events in faith centres/places of worship.

Continue to support NHS Core20Plus Connector activities, continue with DLUHC roll-out, continue to support other organisations delivering health events (but focus on providing advice and scrutiny to improve quality).

Aim to develop Community of Practice and coordination role in relation to health events – to include comms, cultural competence and promotion of good practice.

Support Black, Asian and minority ethnic families to talk openly about health issues including addiction, sexual and mental health.

Continue to support localised activity through Connectors but prioritise additional work – mapping and action planning, including scrutiny of data, locally commissioned services and identifying gaps and issues. Aim for normalisation as a long-term objective.

Increase number of community events which aim to tackle loneliness and mental health.

Continue to address through other actions, including cultural competence training (target local organisations like MIND). Connect and use informal opportunities/events taking place to promote DHIP and engage with additional groups, e.g. Black Community Event at Sinfin Park.

Create publicity materials (banner, flyer, impact report) with DHIP branding to support proactive activity.

Healthcare professionals are to be trained to be culturally sensitive. Improvements should be made to the provision of culturally specific services, including those focused on drugs, alcohol, sexual health and preventive behaviours such as diet and physical activity.

Continue to scope good quality, effective cultural competence training provision (discussions started with Quality Conversations) – scope and develop core training to offer and deliver throughout system (content, costs, possible provider(s), what exists already, etc.)

Healthcare professionals to be given further training on the use of medical tools on darker skin including phlebotomy and the use of pulse oximeters.

Continue to scope good quality, effective cultural competence training provision.

Continued engagement with communities to improve understanding of the gaps in services currently provided.

Prioritise mapping of local services and start to create a simple directory/infographic for signposting to local services – to link with Health Without Borders group to support, as work has already started.

Health services commissioned locally by the government and NHS – such as Livewell, Phoenix Futures and sexual health services should measure and report on how effective they are at meeting the needs of Black, Asian and minority ethnic communities.

Consider ways to engage with locally commissioned public health services to identify how they are meeting the needs of Black and Asian minority, and other excluded groups in Derby.





Transition away from top-down Continue to support ICB Hypertension initiatives, which do not consider project, HWB Strategy refresh and the opinions and experiences of the NHS Core20Plus Connector activities, communities being engaged with, as all are examples of good practice in instead NHS and Local Authority relation to community participation. to build in the role of community participation. Continue to raise profile of DHIP and its role in advising and promoting good practice with other organisations, events and activities. Explore work with Derby Youth Alliance The NHS should pro-actively and continuously work to build relationships and others to co-produce actions and with communities, particularly among next steps. Make funding available if the younger generations, providing required. support and gain their trust. Continue to work with the NHS through partnership Boards and specific projects. A 'health in all policies' approach To be explored as part of HWB Strategy should be prioritised across Derby City development. Council for the purpose of building and sustaining an environment which promotes healthy behaviours. Further piece of work to be conducted Continue to support HWB Strategy work and explore further actions. into questions 5 and 6 'What would you like there to be more of to support you or your family's health?' and 'What can we do to stop the unfair differences in health?' as it was apparent that communities were not yet equipped to answer these questions. Specific actions should be agreed Formal request for response to and prioritised as soon as possible to consultation recommendations from all support the dissemination of this report local Providers, plus dissemination of across the system. Impact Report.

Vaccination in Derby's Black Communities

Derby City Council Public Health department, in collaboration with Community Action Derby and the Derby and Derbyshire Integrated Care Board, conducted nine community discussions with Black African and Black African Caribbean communities in Derby to understand why fewer individuals from these communities were getting vaccinated against COVID-19. The discussions included input from both those who had taken the vaccine and those who had not, aiming to gather insights and recommendations.

Key findings from the discussions included:

- Distrust due to a history of racism in medical research, such as the Tuskegee Experiment.
- Concerns about poor advice and culturally insensitive care from healthcare professionals.
- Stigmatisation of these communities in the media without considering the reasons for vaccine hesitancy.
- Lack of sufficient information about vaccine ingredients and side effects.
- Concerns about inconsistent messaging in media channels not reaching ethnic minority groups.
- Questions about the safety and effectiveness of vaccines, particularly for those with underlying medical conditions.
- A belief in the importance of personal choice regarding vaccination.
- Frustration with changing policies and unequal attention to other health conditions.
- Cultural and religious factors influencing vaccine decisions.
- Preference for community venues for vaccination.

Some people chose to get vaccinated to protect themselves, their families, and their communities, while others did so due to endorsements from trusted community leaders and healthcare professionals. Information and education were also identified as important factors, as well as promoting respect and fairness in vaccination decisions.

Recommendations for increasing COVID-19 vaccine uptake included:

- Effective, non-stigmatizing communication by NHS and other organizations.
- More information and education on vaccination, including ingredients and side effects.
- Culturally appropriate vaccination venues in community and faith centres.
- Improved healthcare services with cultural sensitivity.
- Addressing unfairness and racism in health services
- The engagement process with community groups should provide assurance of benefits, facilitate ongoing dialogue, and clarify who will address community concerns and take action.

As a result of the report's findings, a Black community health engagement event was held in February 2023. This was to feedback the information to communities, inform them of the progress made, and provide an opportunity for two-way engagement and conversation between healthcare professionals and communities, to aid in building trust and relationships. Overall feedback from this event was positive, with some recommendations to offer more than one event and provide more time for networking and conversations.

A task and finish group was set up to take this work further and, since then, has:

- Provided funding for tablets for communities to aid individuals in booking vaccination appointments.
- Created an FAQ sheet to answer questions raised by the Black community.
- Organised further community events in October 2023, to discuss and share information regarding COVID and flu with Black communities.
- Continued to build trust through co-production and engagement, by inviting and involving 'community consultants' in the planning and execution of this work.



Website and Social Media

Published the DHIP website (progressed from an initial landing page to a full multi-page website), which contains a section on Community Connectors and will be updated with details of the work that is being carried out as part of the Connector programme: www.dhip.org.uk

System Influence

Established DHIP as part of the Health and Wellbeing Board and Integrated Care System (ICS) Place Partnership Board.

Supporting Derby's Health and Wellbeing Strategy

DHIP are working with the Derby Health and Wellbeing Board and Derby Place Partnership to shape Derby's new Health and Wellbeing Strategy. This strategy sets out how Derby City Council, NHS providers, Healthwatch, and voluntary sector organisations in Derby will work together to improve the health of Derby citizens. It is a high-level plan which identifies the priorities that everyone will work on together so that we can reduce health inequalities.

DHIP held a discovery workshop in July 2023. Nine community representatives attended.

Key learning from the workshop discussions were:

- The high-level priorities are still the same, but DHIP can help to support work to address the causes of these.
- The strategy is based on local data about health, so we need to make sure the
 data tells the whole story. It should reflect lived experience and identify where
 there are gaps in the data.
- Communities are not all the same so one size does not fit all communities.
 The strategy should reflect the diverse and different needs of Derby's communities.
- Outcomes are more likely to be achieved when resources are shared with community groups to enable them to have some control and take action.
- Being clear about how and why decisions are taken is important, there needs to be regular and clear communication between the Health and Wellbeing Board and local communities.

It was recommended that a joint workshop be held in partnership with the Health and Wellbeing Board and Place Partnership, to explore next steps.

ICB Hypertension Project

This project aims to support the Integrated Care Board with identifying current levels of knowledge, understanding, beliefs and attitudes about hypertension in community groups.

Community Connectors have also been trained to carry out blood pressure testing and signpost people to local pharmacies for additional support where needed.

Joyce's Story

"I didn't realise I had high blood pressure until I went to a session and someone offered to give me a check.

My blood pressure came back as very high. We checked it a couple more times and I had to ring my GP because it was still showing as very high.

I didn't realise it was so high because I didn't have any symptoms at all.



I rang my GP and they sent me straight to A&E where they monitored me and did more checks.

When I went back to my GP, I saw the nurse and I had to monitor my blood pressure at home for a period of time. Now I have to get it monitored regularly.

It is so important for us to get our blood pressure checked so we can get it treated. I don't think people always take it seriously but we might be walking around with this silent killer and not knowing.

High blood pressure can cause strokes, heart attacks and all sorts of issues, the best thing for us to do as a community is to take care of ourselves and one of the ways to do that is to have our blood pressure checked."

DHIP's Future Priorities

The DHIP work plan is regularly reviewed but will include the following actions and ambitions (subject to funding being available):





Community Connectors

DHIP successfully used NHS Core20Plus Connector funding to support 16 new Community Connector roles and has built relationships and networks through these.

Core20Plus is a national NHS England approach to support the reduction of health inequalities at both national and system level:

- Core20 The most deprived 20% of the national population as identified by the national Index of Multiple Deprivation (IMD).
- Plus population groups are ethnic minority communities; inclusion health groups²; people with a learning disability and autistic people; people with multi-morbidities; and protected characteristic groups; amongst others.

Community Connectors provided a huge variety of activities to support health, over 145 events were held with over 3,000 people in total. Further details of Community Connector activities are provided in the next section of this report.

Inclusion health groups include: people experiencing homelessness, drug and alcohol dependence, vulnerable migrants, Gypsy, Roma and Traveller communities, sex workers, people in contact with the justice system, victims of modern slavery and other socially excluded groups.

Anansi Theatre

Anansi Theatre Company is ready to change the world through providing workshops and creating performances that work to de-stigmatise mental health conditions.

Website: www.anansitheatre.com

Facebook & Instagram:
@anansitheatrecompany
Takithar @AnansiTheatre



Who they supported through the programme

Women of global majority, refugees, women

Key Areas

Severe mental health

Number of events: 10

Number of attendees: 72

What they did

Anansi Theatre held a number of events including yoga, creative writing, dance and community engagement including handing out leaflets and instigating conversations about the company. These sessions all had the goal of creating a safe space for the discussion of mental health conditions with people from a similar background.

Issues Raised

The need for more of these sessions and increased representation.

Rizwana's Story

My Yoga Journey

When I first met Lauren from Anansi Theatre, I hadn't done any exercise in 3 years and it really got me down. After being diagnosed with cancer in 2020, I thankfully recovered. I have Fibromyalgia, mental health issues, and suffer pain daily, so it gave me some motivation. The first few sessions were so hard, alongside my physical and mental health condition. But after a few more different sessions with Anansi Theatre, and encouragement from Lauren, I got my family involved, and my children too in the theatre classes.

I exercise daily now, changed my eating habits, and I lost half a stone. This is a new beginning to my future.

I recommend Anansi Theatre as a service, as not only will you be encouraged and pushed to do better, you will also have a loving friendship, and Lauren will understand you on many levels.

Thank you, Lauren, for being part of my journey.

Audrey's Charity

Audrey's Charity was set up to assist individuals and families experiencing financial hardship.
They help people living in the Derby area to access food, furniture, clothing, electrical goods and white goods.

Website: www.audreyscharity.co.uk

Facebook: @ERL83



Who they supported through the programme

Black adults and youths from Derby

Key Areas

Health promotion and mental health

Number of events: 10

Number of attendees: 50

What they did

Audrey's Charity held a number of sessions to prepare for an event they ran on 11 June 2023. At the event, they asked community members ten carefully planned questions to support discussions about mental health. They got permission from participants to film these discussions and are creating a video to share with the wider community to raise awareness and lessen the stigma behind mental illness within the Black community.

Issues Raised

The need for more of these events to keep the conversation going.

Genevieve's Story

Genevieve's son sadly passed away due to mental health and she was very interested in expressing her feelings. Her advice was "to try your best to speak to your family and friends and don't keep your emotions to yourself. You are important to the world and it's healthy and brave to admit that you're not ok, but don't let it win".

Genevieve expressed that the Black community has cultural stigma and shame attached to this subject, which makes it harder to deal with.

It's time the community comes together to support one another and realise that mental health really does exist.

There is no Black representation in mental health roles, which leads to the person not feeling comfortable and not meeting their cultural needs.

If we had more Black representation it would be likely that we have more people coming forward and asking for help.

Brothers with Voices

Brothers with Voices is a collective of men from the African and Caribbean community.

They are a self-help group who raise awareness of health challenges for men from their communities in Derby City.



Who they supported through the programme

Men from the African and Caribbean community

Key Areas

Severe mental health, chronic respiratory disease, early cancer diagnosis, hypertension

Number of events: 5

Number of attendees: 40

What they did

From March to June 2023, a series of group meetings focused on raising awareness and addressing health issues. The initial sessions introduced participants to the early signs and symptoms of cancer. As the discussions progressed, the group recognised the need for more information and support for prostate cancer among males in the community. They proposed the idea of Community Champions to provide a safe space for men to discuss their diagnoses and feelings.

In May, the group shifted its focus to mental health, introducing the topic to participants. Subsequent meetings delved into the causes of mental health issues and provided a platform for participants to share their personal experiences. The final session in June continued the conversation on mental health, offering guidance on accessing support services for mental health concerns.

Issues Raised

The need for more services to support discussions around cancer symptoms in a safe, culturally sensitive way.

Deaf-initely Women

Deaf-initely Women aims to empower deaf and hard of hearing women who have experienced discrimination or isolation because of their hearing loss.

Website: www.deafinitelywomen.org.uk
Facebook & Instagram: @deafinitelywomen

Twitter: @DeafinitelyW



Who they supported through the programme

The deaf community in Derby

Key Areas

Severe mental health

Number of attendees: 43 individuals who

have facilitated 22 further connections

What they did

Deaf-initely Women recruited five Community Connectors. This diverse team comprises two deaf women and three deaf men, one of whom is Muslim, reflecting a commitment to inclusivity and representation. The training programme has included a comprehensive two-day course, equipping the Connectors with the necessary skills and knowledge.

In addition, promotional efforts have been actively pursued, including the creation of a PowerPoint presentation and poster to attract more Connectors.

This recruitment and training drive has already yielded promising results, with 43 individuals attending organised events and activities since the beginning of April. Notably, these Connectors have facilitated connections between 22 deaf men and women, encouraging their participation in various activities.

Furthermore, a proactive approach to community engagement is evident through social media activity, local media engagement, and the establishment of a Facebook group, fostering an environment of collaboration and connection within the community.

Derby Asian Strategic Partnership

Derby Asian Strategic Partnership (DASP) aims to be a critical friend to service providers including statutory agencies to ensure their decisions include culturally appropriate provisions for the South Asian community in Derby and surrounding areas. They aim to influence the strategic planning and provision of culturally specific support services, tackle inequality in service provision and improving and researching the wellbeing needs of the community.

Facebook: @DerbyAsianSP

Who they supported through the programme

Elder Asian males and females (mostly over 60's)

Key Areas

Severe mental health, early cancer diagnosis and hypertension

Number of events: 8

Number of attendees: 37

What they did

Over a series of group meetings spanning from March to May 2023, Community Connector engagement has focused on various aspects of the wellbeing of the over 60's population, as well as middle-aged individuals and carers within the community.

These meetings, hosted at diverse locations such as libraries, community centres, and temples, have delved into critical topics ranging from access to GP appointments, mental health concerns, accessibility and transport issues for medical appointments, and the management of hypertension.

Additionally, the meetings addressed social isolation, depression, and the importance of understanding how to manage mental health needs, reflecting a holistic approach to supporting the health and wellbeing of these community members.

Derby Asian Women's Network

Derby Asian Women's Network (DAWN) aims to improve the quality of women's lives by reducing isolation, encouraging active participation and providing information and support.

In partnership with others, we aim to target social need and build the capacity of local women and young people through providing themed events/activities.



Who they supported through the programme

Females aged between 20-55 from the Pakistani Community

Key Areas

Hypertension, severe mental illness, early cancer diagnosis, chronic respiratory disease and maternity

Number of events: 6

Number of attendees: 567

What they did

A series of engaging community sessions unfolded at the Pakistan Community Centre's Warm Welcome Hub. These sessions addressed a diverse range of crucial health and wellbeing topics. They commenced with a group workshop and consultation focusing on DHIP questions, followed by an exploration of health inequalities and DHIP's role. Discussions revealed the profound impact of limited GP services accessibility, compounded by language barriers. Subsequent sessions introduced the NHS Core20Plus programme, delved into hypertension with remarkable new case findings through blood pressure checks, and educated the community on early signs and symptoms of cancer, emphasising the importance of early detection. The series culminated in a comprehensive mental health workshop, featuring guest speakers who addressed the stigma surrounding mental health, its impact, and the unique challenges faced by the community during the COVID-19 pandemic.

Issues Raised

Language barriers at GP surgeries, lack of GP appointments, community specific taboo and stigma around mental health.

Evergreen Collective

Evergreen Collective is a female-led charity with the aim of providing access to a comprehensive and inclusive programme of activities that meet the needs of the female Muslim community in Derby and Burton upon Trent. They aim to increase health and wellbeing with a holistic approach and inspire and empower other under-represented communities through education, mentorship, empowerment, extracurricular activities and health initiatives.



Website: www.evergreencollective.org.uk Facebook & Twitter: @evergcollective Instagram: @_evergreencollective

Who they supported through the programme

Mostly women and girls ranging from 7 to 65 years of age from a range of ethnicities including Pakistani, Indian, Bengali and Arab communities

Key Areas

Severe mental illness and general health and wellbeing

Number of events: 32

Number of attendees: 698

What they did

From March to May 2023, a diverse range of community engagement activities took place, involving a broad demographic of participants. These initiatives aimed to address various health-related topics and concerns within the community. Activities included Evergreen Hikes focusing on Ramadan-specific health issues, Girls Active consultations to encourage young girls to be more active and health-conscious, and National Parks consultations aimed at increasing outdoor activity among under-represented communities.

Furthermore, meetings and discussions delved into topics such as mental health

struggles during Ramadan, aspirations of young girls, and the need for more Muslim-inclusive workplaces during the Gift of Ramadan Challenge. Additionally, initiatives like the Evergreen Hikers Dinner and various sports meetings emphasized the benefits of physical activity and outdoor experiences for mental and physical health.

The community actively engaged in discussions about healthcare, fitness, and overall wellbeing, with each event catering to specific age groups and ethnicities. These endeavours reflect a concerted effort to address health disparities and promote healthier, more active lifestyles within their community.

Issues Raised

Culturaly specific barriers to exercise, inequalities in accessing health advice and activities, Islamophobia.

Misbah's Story

My name is Misba Khan and I am the founder of Evergreen Collective, a charity that supports and encourages more Muslim females to be active and health conscious, with a special interest in the impact this may have on their mental and spiritual health.

My role involves working with other individuals from the community and organisations to organise and offer services that may be of interest and benefit to the Muslim female community.

Activities and programmes have previously been dismissed and not attended by the Muslim female community in Derby and nationally because the community has felt that the cultural and religious needs of the community have not been considered and accommodated for. Evergreen provides an alternative.

I encourage females from the community to take the lead in their areas of passion and interest, with a hope and desire to increase female (and more specifically Muslim female) representation.

Islah-ul-Muslimeen

Islah-ul-Muslimeen is a group that exists to fulfil the physical, mental and spiritual needs of the community through education and social, welfare, environmental and humanitarian health and wellbeing initiatives.



Who they supported through the programme

People of all ages and genders from South Asian communities including Indian, Pakistani, and Bangladeshi communities

Key Areas

Severe mental health, maternity, chronic respiratory illness, early signs and symptoms of cancer, hypertension

Number of events: 4

Number of attendees: 185

What they did

Across several sessions held at the Village Street Mosque from January to April 2023, a dedicated team of six male Connectors, led by Ustaad Burhaan, actively engaged with a diverse community.

The series commenced with an introduction to the NHS Core20Plus project, focusing on raising awareness about health and education inequalities that these communities face.

Subsequent sessions delved into critical health topics, including discussions on the early signs and symptoms of cancer with the distribution of information leaflets in community languages, conversations about the taboo surrounding severe mental illness, and the pressing need for mental health awareness across different age groups.

The commitment to community wellbeing extended beyond discussions, as hypertension checks were conducted throughout April, reinforcing the

practical impact of these sessions. Additionally, these engagements led to the recruitment of eight new Connectors who expressed interest in further training, including first aid and defibrillator training, highlighting the programme's reach and positive impact on the community.

Issues Raised

The taboo experienced by this community around mental health.

Khurum's Story

Khurum, a pharmacist in Derby, recognised significant health inequalities in the city. With a deep-rooted commitment to addressing these disparities, Khurum joined DHIP as a Connector and collaborated with Community One, a local volunteer charity.

Khurum's initiative, the 'Community Hypertension Outreach Programme', targeted the Pakistani community in the deprived Arboretum area. He tailored healthcare advice to the South Asian community, provided culturally-specific materials in English and Urdu, and leveraged social media and local notice boards for outreach.

Over a four-week period, the programme offered blood pressure checks, consultations, exercise sessions, and healthier meals. More than 300 blood pressure readings were conducted, revealing that nearly 100 patients had never had their blood pressure checked, and over 30 patients required referrals for further monitoring.

A notable success story highlighted the impact of this initiative, where an initially reluctant individual finally agreed to a reading, revealing high blood pressure. This individual expressed gratitude for the convenient access to healthcare services.

With the programme's success, the NHS Derby and Derbyshire Integrated Care Board is considering its expansion, with the prospect of establishing pop-up hypertension centres across the city.

Kashmir Badminton Club

Kashmir Badminton Club is a sporting and recreational group that provides health and wellbeing opportunities for members of the local community. The key focus is on regular exercise with a focus on badminton as a sport for men, women, and children.



Facebook: @kashmirbadmintonclub

Who they supported through the programme

Men, women and children from the Pakistani community

Key Areas

Hypertension, severe mental health, chronic respiratory disease, early cancer diagnosis and community health improvement

Number of events: 15

Number of attendees: 164

What they did

From March to June, a series of Badminton sessions held at Springwood Leisure Centre and RR Club engaged women, children, and men primarily in their 30s to 50s, with a specific focus on different aspects of health and wellbeing.

These sessions addressed crucial topics such as diet management, exercise, wellbeing, blood pressure, and the impact of diet on overall health.

For the women and children's sessions, the focus was on promoting a healthy diet, while the men's sessions covered a wide range of health-related topics, including blood pressure, diabetes, and diet.

Additionally, there was a consistent emphasis on exercise as a means to improve overall wellbeing.

These sessions served as valuable platforms for health education and awareness, fostering a proactive approach to personal health among participants and encouraging them to seek medical assistance when necessary.

Maternity Talks

Maternity Talks is working to address the poor outcomes for Black women giving birth, which highlight a troubling disparity in maternal healthcare, underscoring the urgent need for addressing racial disparities in maternal mortality and healthcare access.



Who they supported through the programme

Black, mixed Caribbean, females

Key Areas

Maternity

Number of events: 11

Number of attendees: 26

What they did

Throughout March to June, Tia, an active Connector in Derby, has been diligently involved in various support and planning activities aimed at addressing diversity issues in the maternity sector.

Her work encompasses different facets, such as mind mapping ideas, exploring the lack of diversity within the maternity sector, and the need for more inclusive education.

Tia has also been actively networking and collaborating with other Connectors and organisations, emphasising the importance of diversity across various sectors nationwide. She has been working on branding and information leaflets, focusing on raising awareness about the challenges faced by under-represented communities.

Tia's commitment extends to hosting small group discussions with local birth workers, doulas, mothers, and expectant mothers, where issues such as higher death rates, wrong treatments, and discrimination against women of colour have been candidly discussed.

The work Tia and her fellow Connectors are doing is pivotal in defining the importance of inclusivity for black women and future generations, with initiatives ranging from exploring doula courses to addressing technical challenges like sound tech for effective communication. This ongoing effort is shaping a more diverse and equitable maternity sector in Derby.

Issues Raised

Lack of diversity within the maternity sector, not enough being done for Black women, higher death rates, wrong treatment for women of colour, discrimination, local doula courses are mostly online.

Tia's Story

As educating on maternity is a strong passion of mine, it often comes up in conversation. Especially when seated with other Black women. There are clear issues within the maternity sector as a whole but what is apparent is the lack of care Black women are receiving to this day.

One mother shared her tragic story of how she lost her baby whilst in the care of the NHS due to lack of care and tolerance. She wasn't listened to, informed, or cared for in the correct manor. In fact she was left feeling like she didn't even matter.

Due to the misconduct of midwives present during her stay, she sadly lost her baby shortly after birth. Midwives did not follow her birth plan and did not listen to, or care for, her wishes. They failed to notice her baby was unwell and a few days after birth, her baby sadly passed due to complications. As you can imagine the trauma from this incident stays with the mother until this day.

This is just one of many heart-breaking stories from mothers who have also felt this pain and suffered, due to lack of care at the hands of NHS staff. This is what drives us to do the work we are doing for all women of colour.

Normanton Dads and Lads

Dads and Lads is a community group consisting of fathers and sons from the local Pakistani community who have been brought together to support each other to improve health and wellbeing.



Who they supported through the programme

Mostly male young adults, adults and the golden generation from the Pakistani community.

Key Areas

Early cancer diagnosis, hypertension and severe mental health

Number of events: 4

Number of attendees: 512

What they did

In February 2023, nine Community Connectors organized a transformative 'Dads and Lads' residential trip, attracting a total of 22 participants, comprising 13 young people and 9 fathers. This diverse group encompassed young adults, adults, and members of the golden generation, all of whom were male.

The trip combined recreational activities with workshops focused on mental health and cancer awareness. It aimed to create a bridge between young adults and their fathers to promote healthier lifestyles.

Additionally, participants engaged in designing campaigns addressing mental health and lifestyle issues. The discussions revealed that mental health and cancer were perceived as sensitive and private topics, making open dialogue challenging. There was a realisation of the significant denial of these issues within the community, often attributed to misconceptions related to faith and masculinity.

Feedback emphasised the need for more focus on cancer signs and symptoms,

with specialised professionals required for severe mental health concerns.

Subsequent sessions focusing on early cancer signs and symptoms that were held in March and April expanded the outreach, involving larger audiences and community engagement, with a growing interest in individuals wanting to become Connectors themselves.

These efforts collectively aimed to promote better health awareness and communication within the community.

Issues Raised

Further professional support is needed to address severe mental health issues due to the taboo and misconceptions within their community.



Normanton Women's Engagement Project

Normanton Women's Engagement Project was established to actively engage disadvantaged women in the Normanton area in activities and events to overcome isolation and to promote social cohesion.

Email: nwep@hotmail.co.uk



Who they supported through the programme

South Asian women with mental health issues ranging from low level to mid-level conditions and high levels of stress

Key Areas

Health promotion

Number of events: 12

Number of attendees: 213

What they did

A programme was initiated to train five Connectors to address mental health issues affecting women. These issues ranged from depression and anxiety due to family problems, domestic violence and strained relationships to chaotic lifestyles, poverty-related stress, and poor housing conditions. Carers' needs were also unmet, with limited access to GP's exacerbating stress.

The initiative aimed to encourage women to seek support, engage with the trained Connectors, professionals, and peers, and utilise creative outlets such as crafting and art to express their feelings and build mental resilience. Of the five Connectors, four were Mirpuri speakers who were effective listeners and empathetic supporters. Women reported various issues, including anxiety, depression, low moods, negative thoughts, and restlessness, often attributing their struggles to a lack of personal time.

Advisers encouraged women to engage in low-stress activities, like walks

and social interactions and offered practical assistance, such as referrals for housing improvements and access to resources like energy and food vouchers. The initiative transformed the Pakistan Community Centre into a walking track, allowing women to exercise while socialising. Attendees were encouraged to spread the word about the service, emphasising its cultural sensitivity and the need for such services in the South Asian community.

Connectors and professionals expressed satisfaction with the programme, highlighting the importance of addressing mental health needs early to prevent issues like depression. The professionals recommended investing in talking therapies, befriending, mindfulness, and wellbeing sessions to support these women further.

Issues Raised

It was felt there was the need for many more sessions, lack of knowledge about available support, the desire for a range of activities to be made available to improve health and wellbeing such as crafts and exercise, the lack of safe green spaces in Normanton, the opportunity to go on trips to places such as Matlock and the beach, as many members had not experienced these and they would support wellbeing, more talking therapy sessions, creation of a befriending service, the need for culturally appropriate services in the city.

N's Story

N had been feeling extremely traumatised after her son's marriage failed and her daughter-in-law had left the home to live in council housing. N said she was from a respectable background and the shame from this marriage break-up was causing her great embarrassment in the community, with people judging her and talking about her. She was feeling anxious, paranoid and depressed and not able to focus on anything else in her life. The Connector referred her to the mental health nurse and she went away happier with some coping strategies and glad to have been able to share her problems.

S's Story

S was an exhausted mum of four and a carer for her mother in law. She was finding that although her family was a happy one, her husband spent long days at work and she was snowed under with school-runs, after-school clubs, housework, plus looking after her mother in law who was bedridden. She was told about respite care available to her, plus the carers personal budget and was pleased to have been given this information, which she said she would definitely pursue to make her life easier.

Reflection Path

Reflection Path mainly works with the youth, focusing on the Asian community.

Facebook, Instagram &
Twitter: @ReflectionPath

Fmail: info@reflectionpath or



Who they supported through the programme

Wide age range (16-65), diverse ethnicities (minorities), all genders

Key Areas

Severe mental health, early cancer diagnosis, hypertension

Number of events: 4

Number of attendees: 96

What they did

In a series of Community Engagement Meetings spanning from March to May 2023, 16 dedicated Community Connectors actively engaged with diverse groups of community members.

These meetings addressed pressing healthcare concerns and disparities within the community, including healthcare inequalities in ethnic minority communities, lack of accessibility for people with learning disabilities and autistic individuals, social isolation among the elderly, access to geriatric healthcare services, preventive healthcare for senior citizens, mental health support for immigrants, and the importance of culturally sensitive healthcare approaches.

The Community Connectors' efforts also highlighted the need for promoting an active lifestyle for seniors and making support services easily accessible to the community, emphasising the significance of community-centred healthcare initiatives.

These meetings reflect a concerted effort to address healthcare disparities and improve the overall wellbeing of the community members they serve.

Issues Raised

Lack of accessibility for people with learning disabilities and autistic individuals, social isolation among the elderly, language barriers.

Sara's Story

Sara, a dedicated Connector, shared her personal experience during a Community Engagement Meeting for QQQ Night (March). She recounted her struggles accessing culturally sensitive healthcare services as a member of an ethnic minority community. Through her story, Sara aimed to raise awareness about healthcare inequalities faced by individuals from diverse ethnic backgrounds and advocate for improved access to healthcare resources for all community members.

Kamran's Story

Kamran, a passionate Connector, addressed a gathering during a Community Engagement Meeting for QQQ Night (April). He shared the story of his elderly relative who faced social isolation and challenges accessing geriatric healthcare services. By sharing this story, Kamran intended to create awareness about the healthcare needs of senior citizens and advocate for initiatives that promote their mental and physical wellbeing.

John's Story

John, an enthusiastic Connector, delivered a personal testimony during the Community Engagement Meeting for the Baraka Blue Event. He shared his experiences of advocating for inclusive healthcare initiatives for ethnic minority communities and individuals with learning disabilities and autism. By sharing his story, John hoped to emphasise the importance of community-centred healthcare and accessible support services for vulnerable populations.

Sikh Recovery

Sikh Recovery is a charity working to end the serious harm caused by drug & alcohol addiction in all communities.

Website: sikhrecoverynetwork.org

Facebook & Instagram: @sikhrecoverynetwork

Twitter: @RecoveryDerby



Who they supported through the programme

Each session supported 6 South Asian and 1 Caucasian males

Key Areas

Severe mental health, hypertension

Number of events: 3

Number of attendees: 21

What they did

The sessions focussed on discussing various topics related to alcohol and drug addiction.

Participants shared their personal experiences and hopes for the future, with those in recovery providing strategies and support to others. They also talked about mental health issues, cultural taboos, and resources for seeking help, emphasising the value of culturally sensitive professionals.

In April, the focus shifted to Vaisakhi celebration concerns, with some participants facing challenges related to alcohol at the event. The group provided advice on handling such situations and developing coping techniques.

May's sessions continued with the seven participants, addressing general challenges, the difficulties and shame associated with relapses, and their impact on mental health.

The group engaged in a culturally appropriate 12-step programme and encouraged attendees to become sponsors or mentors for those struggling with alcohol addiction.

Issues Raised

The cultural taboos faced when facing drug and alcohol addiction, needing to have services that are culturally specific and run by relatable professionals, taboo of mental health conditions.



St. James Centre

The St. James Centre in Derby is a community-based organisation that provides support and services to individuals and families in the local area. These services can include educational programmes, youth activities, social services, health and wellness initiatives, senior citizen programmes, and support for vulnerable populations.



Website: www.stjamescentrederby.co.uk

Who they supported through the programme

Roma and Eastern European community (6 Slovak, 4 Romanian, 3 Roma, 17 Pakistani, 4 Arabic, 6 Kurdish, 4 Asian, 1 Iraqi, 3 African, disabled community, learning disability community

Key Areas

Hypertension, supporting parents/carers of young people aged over 14 years and adults with learning disabilities to make them aware of and take up the annual health check

Number of events: 17

Number of attendees: 52 at the sessions for the Eastern European community and 40 at the sessions for adults who have disabilities

What they did

In a series of 12 sessions held at the St. James Centre from 16 February 2023, staff from St. James and Lister House collaborated to assist the Roma and Eastern European community. They engaged with 52 individuals, predominantly females, representing various ethnic backgrounds, including Slovak, Romanian, Roma, Pakistani, Arabic, Kurdish, Asian, Iraqi, and African. Only 27% of attendees were of Eastern European descent. Some had disabilities or chronic conditions. Notable findings include 10% with high blood pressure, 20% facing difficulties contacting their GP or obtaining prescriptions, and some seeking smoking cessation and weight management advice.

Most participants, (70%), received health advice, with 55% seeking help for energy and shopping vouchers.

A healthy living day was organized for 40 disabled adults at St. James Centre, focusing on topics like nutrition, exercise, and the Annual Health Check (AHC). An informative video created by disabled individuals was used to explain the AHC. Efforts to extend these health sessions to other disability providers were initiated. A letter was sent to parents explaining the AHC, but it was noted that few disabled adults were on the Learning Disability Register, and some parents declined assistance.

Only one person was successfully registered for the AHC, revealing challenges with the GP practice. Information on the AHC was shared at four community sessions. A deeper analysis indicated that less than 20% of individuals who should be on the Learning Disability Register were registered, raising concerns about the process. Further steps include analysing data from GP surgeries across Derby, comparing different areas, exploring registration processes, and ensuring information sharing between primary and secondary care.

These efforts underscore the need for greater public awareness about the AHC and the Learning Disability Register. Additionally, a comprehensive review and improvement plan for the Learning Disability Register are necessary to ensure it accurately reflects those who should be registered.

Issues Raised

Difficulties in engaging Eastern European communities thought to be due to a lack of cultural understanding of prevention, language barriers, access to GP's, digital literacy, lack of awareness about annual health checks and disability register, lack of representation on learning disability register at GP's.

Ana's Story

Ana assisted a Romanian family from the Roma community who spoke no English. She made appointments for the mother, who has diabetes, including a blood test, a nurse consultation, and an ultrasound scan.

Ana ordered medication for the family's autistic son by contacting the GP surgery, as the child heavily relied on it for sleep. She also helped their son register for the Annual Health Check for people with Learning Disabilities.

Throughout this process, Ana acted as an interpreter (over the phone) during their visits to Florence Nightingale Community Hospitals, Royal Derby Hospital, GP practice, and pharmacies.

Furthermore, Ana assisted the mother in registering on the Swiftqueue.co.uk website to book the prescribed blood tests requested by GP.

The family were also supported by the Advice Team for benefits, including universal credit, council tax discount/support, the process to receive PIP (Personal Independence Payment), including the PIP assessment/interview and carer allowance.

The Hadhari Project

The Hadhari Project promotes the welfare, education, social and recreational needs of inhabitants within the city of Derby who are elderly or in poor mental health. The activities provide culturally sensitive services at the day centre on Burton Road and the main client group are members from the African and Caribbean communities.

Email: hadhariderby@googlemail.com



Who they supported through the programme

Elders (over 60's) from the African Caribbean community

Key Areas

Hypertension, early cancer diagnosis

Number of events: 4

Number of attendees: 360

What they did

The Hadhari Project, supported by NHS Core20Plus funding, has conducted a series of impactful health awareness workshops on early cancer detection and hypertension.

The initial cancer awareness workshop was well-received and sparked important conversations about cancer.

Subsequently, a hypertension workshop led by a doctor from Birmingham Hospital and a representative from Derby County Football Trust included blood pressure measurements and provided comprehensive insights into heart health. This full-day event featured chair-based exercises, a cultural meal, and received positive feedback.

Another workshop focused on breast cancer awareness and included practical self-examination demonstrations, attracting participants from various age groups.

The last session, hosted by Bladder Cancer UK, was informative

and well-attended, primarily by the elderly group.

These workshops highlight the project's proactive approach to community health, with future talks planned on skin cancer, prostate cancer, and hypertension. NHS Core20Plus funding has enabled The Hadhari Project to make a positive impact on community health.

X's Story

I took the opportunity of having my blood pressure checked and after three high readings, I was advised by a member of the Derby County Football Trust to contact my GP immediately.

I did contact my GP who told me to go down to A&E straight away. I was waiting for 10 hours and after all the checks I was sent home and advised to make an appointment with my GP in the morning. I could not actually make an appointment with my doctor, and I was given an appointment instead with the nurse.

The blood pressure appeared to come down and I was therefore safe to travel to America which was imminent. On my return, I was given a blood pressure monitor and I am awaiting the results.

It is directly because of the session held at The Hadhari Project that I have been made aware of my high blood pressure and I can now take action to prevent further increases in my blood pressure.

Consequently, we are hoping to buy blood pressure monitors so that our service users can check their blood pressure on a regular basis and become more proactive about their health, as we found out that there are significant number of people who simply do not realise that they have hypertension and are therefore at risk of heart attacks and strokes and other serious conditions.





Accountability

When a person or organisation is responsible for ensuring that things happen, and is expected to explain what happened and why.

Asset

Assets can be described as the collective resources which individuals and communities have at their disposal, which protect against negative health outcomes and promote health status. Although health assets are a part of every person, they are not necessarily used purposefully or mindfully.

Best practice

A way of doing something that has been shown to be the most effective way of doing it.

Capacity

The ability of a person or organisation to do something.

Chronic

Something that is long lasting, that will usually last for life.

Co-design

When you are involved in designing and planning services, based on your experiences and ideas. You may be invited to work with professionals to design how a new service could work, or to share your experiences in order to help a service improve.

Collaborate

The action of two or more people or groups of people working together to produce something.

Commissioned services

The process used by health services and local authorities to: identify the need for local services; assess this need against the services and resources available from public, private and voluntary organisations; decide priorities; and set up contracts and service agreements to buy services. As part of the commissioning process, services are regularly evaluated.

Communication

An interchange that the subject is capable of understanding and acting upon. This may be in a variety of formats including verbal, written or both.

Community

A specific group of people, often living in a defined geographical area, who share a common culture, values and norms, are arranged in a social structure according to relationships that the community has developed over a period of time. Members of a community gain their personal and social identity by sharing common beliefs, values and norms which have been developed by the community in the past and may be modified in the future. They exhibit some awareness of their identity as a group, and share common needs and a commitment to meeting them.

Community capacity

What people in local communities are able to do to help and support each other. It involves making use of resources that already exist - such as neighbourhood groups and befriending schemes - and developing new ones. It helps people find ways of

meeting their own needs, and the needs of others, in the place where they live.

Consultation

The process of talking with groups of people about certain topics to find their views and experiences which can be used to inform and direct decisions.

Demography

Characteristics of a population such as size, distribution and vital statistics.

Deprivation

A situation in which you do not have things or conditions that are usually considered necessary for a pleasant life.

Discrimination

Discrimination is when someone is treated differently or unfairly for being who they are, or for a particular quality or feature they might have.

Empowerment

Authority, permission or power given to someone to do something, or the enabling process of becoming stronger and more confident, especially in controlling one's life and claiming one's rights.

Enable

To make something possible, practical or easy.

Ethnicity

The social group a person belongs to, and either identifies with or is identified with by others, as a result of a mix of cultural and other factors including language, diet, religion, ancestry, and physical features traditionally associated with race. Increasingly, the concept is being used synonymously with race but the trend is pragmatic rather than scientific.

Evidence

Information and knowledge derived from sound research and other reliable sources e.g. evaluation and audit that informs decision making.

Health and Wellbeing Board

Every council area in England has a Health and Wellbeing Board to bring together local GP's, councillors and managers from the NHS and the council. Their job is to plan how to improve people's health and make health and social care services better in their area. Members of the public have the chance to be involved in the work of their local Health and Wellbeing Board through their local Healthwatch.

Health behaviour

Any activity undertaken by an individual, regardless of actual or perceived health status, for the purpose of promoting, protecting or maintaining health, whether or not such behaviour is objectively effective towards that end.

Health determinants

Factors that have most influence on health are called health determinants. Health is an outcome of many determinants such as biological factors, personal/family circumstances and lifestyle, social environment, physical environment, public services, and public policy. The determinants model of health suggests that these determinants affect life expectancy, quality of life, and morbidity and mortality of communities.

Health inequalities

Health inequalities are ultimately about differences in the status of people's health, but the term is also used to refer to differences in the care that people receive and the

opportunities that they have to lead healthy lives – both of which can contribute to their health status. Health inequalities can therefore involve differences in:

- Health status e.g. life expectancy
- Access to care e.g. availability of given services
- Quality and experience of care e.g. levels of patient satisfaction
- Behavioural risks to health e.g. smoking rates
- Wider determinants of health e.g. quality of housing.

Health outcome

A change in the health status of an individual, group or population which is attributable to a planned intervention or series of interventions, regardless of whether such an intervention was intended to change health status.

Health promotion

Giving people the information or resources they need to improve their health. As well as improving people's skills and capabilities, it can also involve changing the social and environmental conditions and systems that affect health.

Healthy life expectancy

The age you can reach free of illness, disease and disability.

Hypertension

High blood pressure or hypertension is a major risk factor for cardiovascular disease. It is one of the most important and preventable causes of premature morbidity and mortality in developed and developing countries. Hypertension rarely has obvious symptoms. Studies show it is often under diagnosed. The chances of having hypertension increase with age.

Integrated Care Systems (ICS)

In 2016, NHS organisations and local councils came together to form 44 Sustainability and Transformation Partnerships (STPs) covering the whole of England, and set out their proposals to improve health and care for patients. In some areas, a partnership will evolve to form an integrated care system, a new type of even closer collaboration. In an integrated care system, NHS organisations, in partnership with local councils and others, take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.

Life expectancy

The average number of years an individual of a given age is expected to live if current age-specific mortality rates continue to apply.

Lived experience

The knowledge and understanding you gain when you have lived through something, or experienced it for yourself.

Steering group

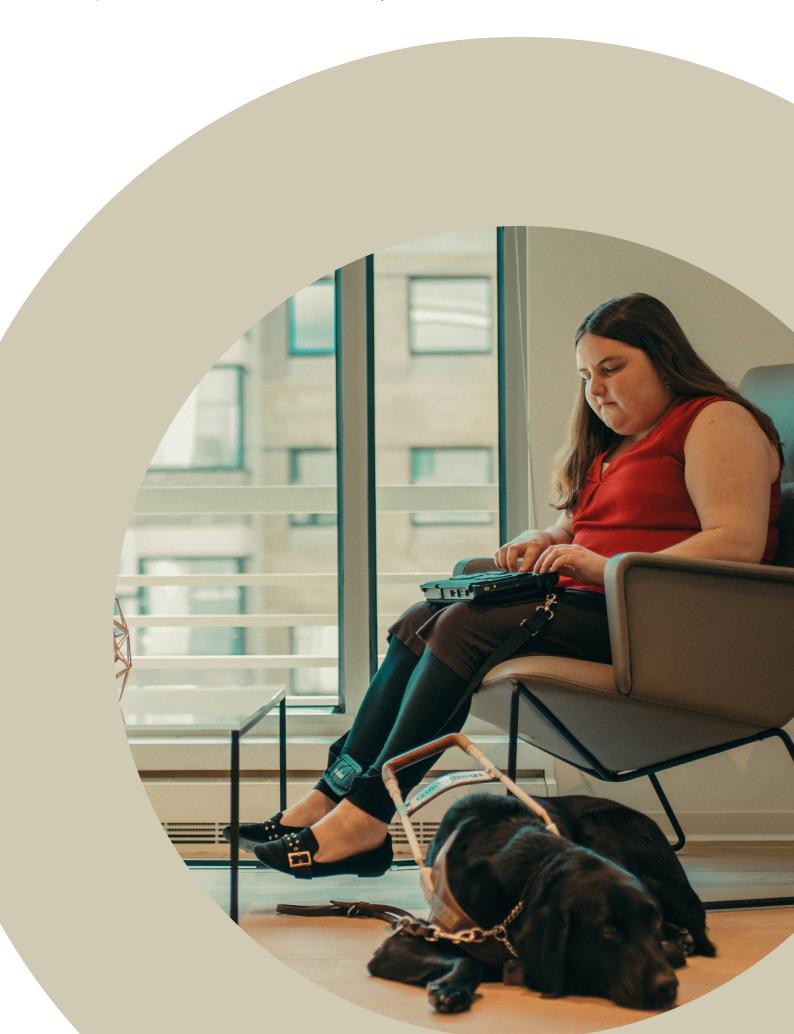
A group of people brought together to oversee a piece of work. Typically, a steering group might be made up of representatives of relevant professional groups, key statutory agencies and the local community and its terms of reference might include:

- Overseeing development and progress of the work
- Agreeing the methodological framework and time-scales
- Providing an input of local knowledge and information
- Acting as a bridge between partners
- Facilitating the implementation of the assessment's recommendations
- Helping to assimilate and disseminate the emerging lessons.

Wellbeing

Wellbeing can be understood as how people feel and how they function, both on a

personal and a social level, and how they evaluate their lives as a whole.







DHIP is a co-led, joint initiative between Derby City Council (Public Health) and Community Action Derby, working with community organisations and leaders.

> www.dhip.org.uk dhip@communityactionderby.org.uk 01332 227722

