


Development and Implementation of Resources on COVID-19 to Support Ethnic Minority Communities



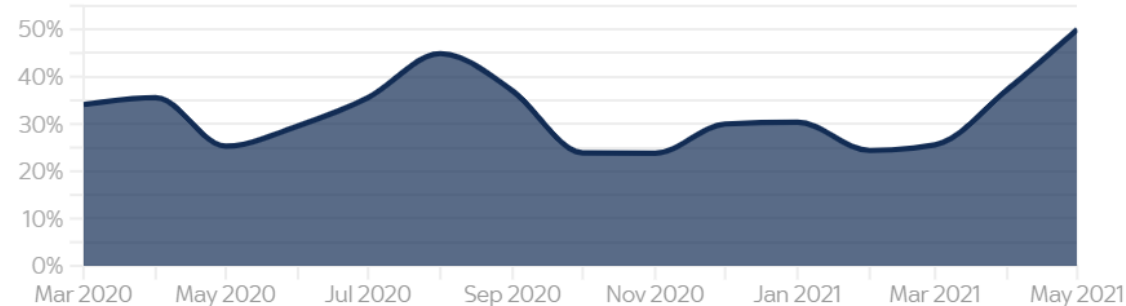
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Ethnicity and COVID-19

- ❑ Ethnic minorities in the UK experience disproportionate levels of morbidity/mortality, disparity magnified during the current COVID-19 crisis

% of critical care patients in England, Wales and Northern Ireland

From ethnically diverse backgrounds



- ❑ Ethnic minorities 'overexposed, under protected, stigmatised and overlooked'

<https://www.lawrencereview.co.uk/>

<https://news.sky.com/story/covid-19-ethnically-diverse-people-now-make-up-highest-proportion-of-icu-patients-since-pandemic-began-12327964>

BAME groups hit hard again as Covid second wave grips UK nations

As cases surge, figures show the demographics of those most seriously affected by coronavirus remain the same

- [Coronavirus - latest updates](#)
- [See all our coronavirus coverage](#)



Effective communication on COVID-19

- ❑ Effective communication of relevant health information key to change behaviour and improve health outcomes
- ❑ Currently available public health guidance around COVID-19 mostly in dominant languages, lacking cultural nuance



Protecting and improving the nation's health

Beyond the data: Understanding the impact of COVID-19 on BAME groups

“Ensure that all communication and marketing include culturally specific imagery and content, using voices of communities with lived experiences to shape future public messaging”



Project Aims and Methodology

□ Aims

- To engage with older adults from ethnic minority backgrounds, and their family members to explore the key information needs around COVID-19
- To develop and implement culturally appropriate resources on COVID-19 to support these communities

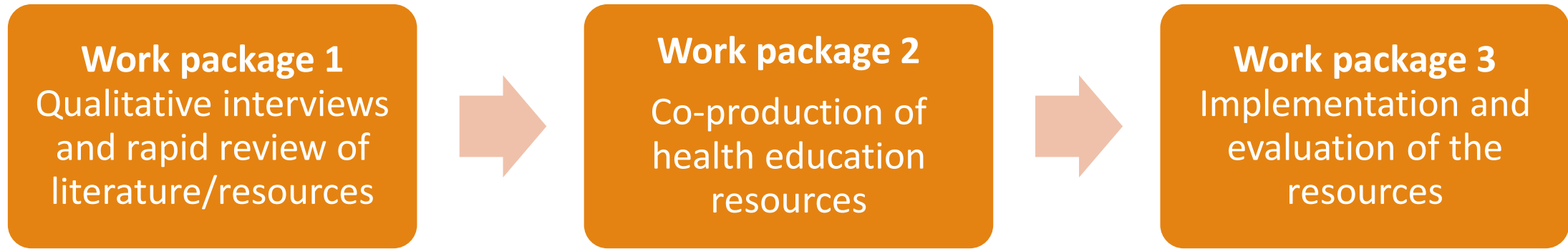
□ Setting

- Kent Surrey Sussex

□ Participants

- Elderly (65 and over) Indian and Nepalese community members and their families (18 and over)
- Healthcare professionals working with these communities

Methodology: three work packages



Methodology: Interviews and Workshops



□ Qualitative Interviews

- Completed in-depth qualitative interviews with community members (n=20 from Indian and Nepalese communities)
- Healthcare professionals (challenges in recruitment, n=4)

□ Co-production Workshops

- Conducted three co-production workshops with the communities

Overview of Themes

❑ Lack of knowledge and awareness

- *Information about coronavirus? I don't know anything. They say so many people have died from Corona. I don't understand. Don't know* (Female, Older Adult)
- *"She's (Mother) very careful. She wears a mask, she washes her hands, she's following all the correct guidelines whenever she does go out"* (Male, Family Member)

❑ Experience of using healthcare services

I don't think they [doctors] have ever discriminated... the doctors have been doing good...they treat us well. (Male; Older Adult)

- *A white patient gets much better treatment because they're able to share precisely what's wrong with them or what issues they're suffering from. Our people tend to not do that as well or even if [they] do, it is not perceived or understood very well* (Male, Older Adult)

❑ Provision of culturally appropriate information/services

- *It's been quite hard here due to the language barrier...my father and mother-in-law do not understand the information (about coronavirus) on local TV channels.* (Male, Family Member)
- *When it comes to women issues, she (his wife) does not like talking about it with a male doctor. That kind of cultural sensitivity is important.* (Male, Family Member)

Co-production Process

- ❑ Protocol Development- outlining clear methodology
- ❑ Three co-production workshops (Older Adults, family members, community leads and study researchers)
- ❑ Sufficient build up time - build up confidence and encourage equal participation, conversations aimed at reducing psychosocial barriers developing mutual trust/understanding
- ❑ Reflected on the findings from the qualitative interviews/literature review, and discussed the nature, content, and delivery mode of the health education



Suggestions from the workshop



☐ Leaflets/ booklets

- Folding booklet with culturally relevant images
- Printed and posted for residents to have easy access to
- Should include key facts regarding symptoms; prevention; key telephone numbers; testing

☐ Video resources

- Using healthcare professionals of similar ethnic background

☐ Use of radio and television for message delivery



Reflection on the co-production process

- ☐ Ethnic minority communities very willing to engage with the process
- ☐ Important to ensure that the voice of each community member is heard, and they do not remain passive recipients of the resources
- ☐ Resources produced must be guided by the personal experiences and needs of minority communities
- ☐ **Barriers:** Recruiting community members with language barriers, technological barriers, availability of the group-members

Co-produced leaflets in Hindi and Nepalese



Dissemination

- ❑ Community organisations and partners, Public Health Agencies, Local Authorities
- ❑ Adaptation of the resources by various CCGs (producing videos and leaflets)
- ❑ Information on the leaflet translated in ethnic language and broadcasted in 20 FM radio stations in Nepal



NHS South London CCG

<https://www.youtube.com/watch?v=Ugnc72AO8kE&t=10s>

FEEDBACK ON LEAFLETS

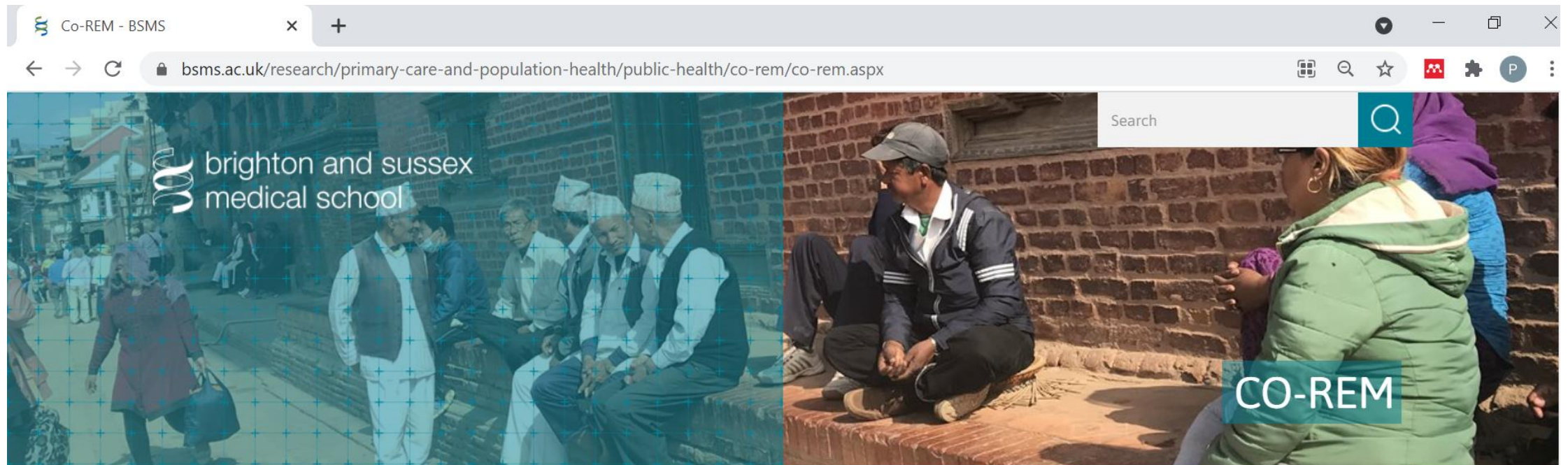
"It has all the information required, very clear and with good pictures" (Community member, Indian, Sussex)

"We've been struggling to find official NHS or government translations in Nepalese so this is really helpful as we have a significant Nepali population locally" (Staff, NHS North East Hampshire & Farnham)

"Leaflet is clear and comprehensive, cannot wait to share among our communities and circles" (Community Lead, Nepalese, Kent)

"Thank you so much for sharing, these leaflets are fabulous, we have shared them with our ethnic minority staff network" (Staff, NHS Trust Surrey)

"This is excellent work which deserves lots of appreciation" (Staff, NHS Trust Surrey).



BSMS > Research > Primary care and public health > Public health > Co-REM

CO-REM

About Co-REM

Feedback on leaflets

Why are we specifically

Brighton and Sussex Medical School is collaborating with the University of Sussex, University of Surrey, Applied Research Collaboration Kent, Surrey, Sussex (ARC KSS), and community organisations in KSS to develop and implement culturally appropriate resources on COVID-19 to increase health awareness and understanding among older adults from ethnic minority

www.bsms.ac.uk/co-rem

Project Partners

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THANK YOU

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