

Health, Social Care and Sport Committee

20th Meeting, 2022 (Session 6), Tuesday, 31 May 2022

Inquiry on health inequalities

Introduction

1. At its meeting today, the Health, Social Care and Sport Committee will continue its inquiry into health inequalities with two sessions to examine the impact of the pandemic on health inequalities and actions to tackle them, and how health inequalities can be prioritised during Covid Recovery work.
2. During the first session, the Committee will hear evidence from a panel of witnesses, with representatives from:
 - Child poverty Action Group
 - Poverty & Inequality Commission, and the Social Renewal Advisory Board
 - Public Health Scotland
 - Scottish Migrant Ethnic Health Research Strategy (SMEHRS) Group
3. During the second session, the Committee will hear and discuss a range of examples of initiatives to tackle health inequalities that were set up either prior to or during the pandemic. This session will include representatives from:
 - BEMIS – Vaccine Information Fund
 - Clackmannanshire Council – Community Wealth Building
 - Food Standards Scotland – a range of food related initiatives
 - South Lanarkshire Council – Adult No One Left Behind
4. Presentations received in advance of the session are included at Annexe A.

Background

5. At its work programme discussion on 5 October 2021, the Health, Social Care and Sport Committee agreed to hold an inquiry into health inequalities.
6. The Committee agreed that the aim of the inquiry would be to explore progress towards tackling health inequalities in Scotland since the Committee's predecessor report in 2015. It will explore any cross-sectoral work undertaken over that time to address social inequalities and what impact this has had on health inequalities.

7. The inquiry will also:

- explore what impacts the pandemic has had on health inequalities and action to address them,
- explore opportunities to reduce health inequalities and increase preventative work to tackle social inequalities before they impact on individuals' health,
- make recommendations for the Scottish Government and other key decision-makers, and
- seek to ensure that the Scottish Parliament sustains a focus on health inequalities across all portfolios.

Structure of the inquiry

8. The Committee issued a call for evidence on 11 February 2022 which closed on 31 March 2022. The Committee received 113 responses which can be read here: [Inquiry into health inequalities - Scottish Parliament - Citizen Space](#)

9. The Committee's inquiry consists of 11 sessions in May and June 2022:

20 May 2022	Two informal engagement sessions on: • Social justice and social security • Local government, housing, and planning
23 May 2022	Two informal engagement sessions on: • Economy and employment • Equalities and human rights
24 May 2022	• One formal private session with Scottish Government and Public Health Scotland • One formal public session focusing on recent work to tackle, and progress in addressing, health inequalities since 2015.
31 May 2022	• One formal public session to examine the impact of the pandemic on health inequalities and actions to tackle health inequalities. • One formal public session examining good practice examples to tackle health inequalities from during, and before, the pandemic.
14 June 2022	One formal public session informed by the informal engagement events on 20 and 23 May 2022.

21 June 2022	One formal public session to explore potential policy options to generate a range of solutions that can sustain focus and action on tackling health inequalities across portfolios.
28 June 2022	One formal public Ministerial session.

Clerks to the Committee**26 May 2022**

Annexe A

Presentations received in advance of the session

Contents

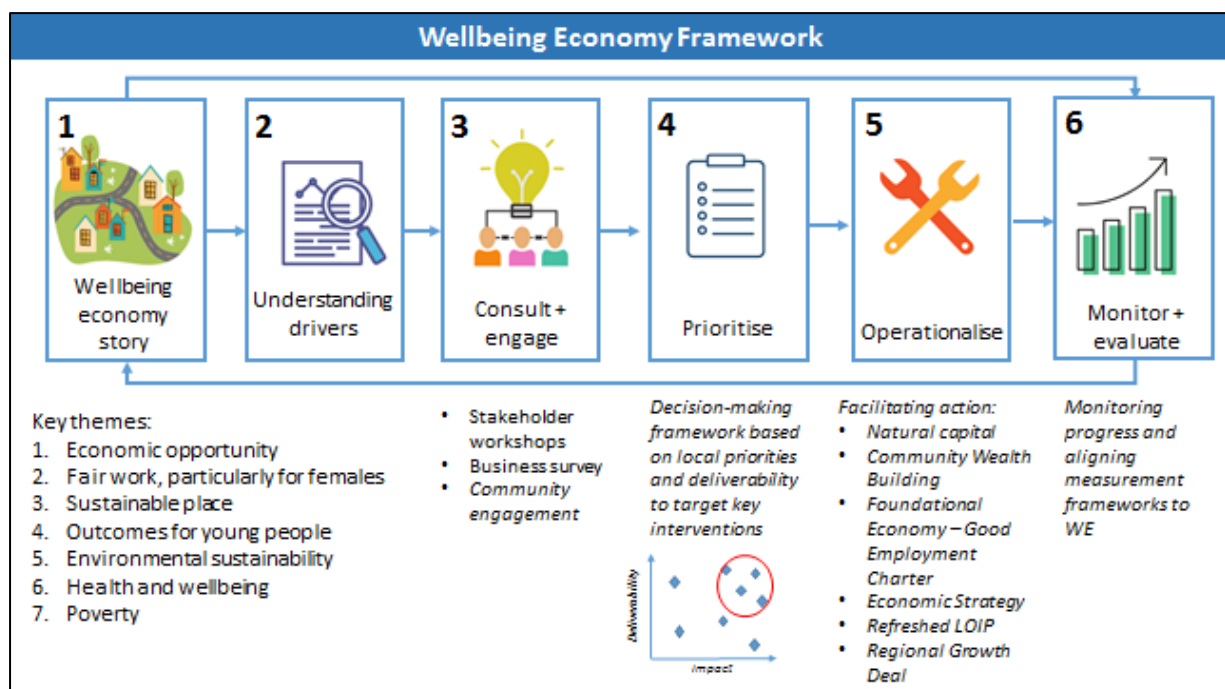
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Clackmannanshire Council – Community Wealth Building

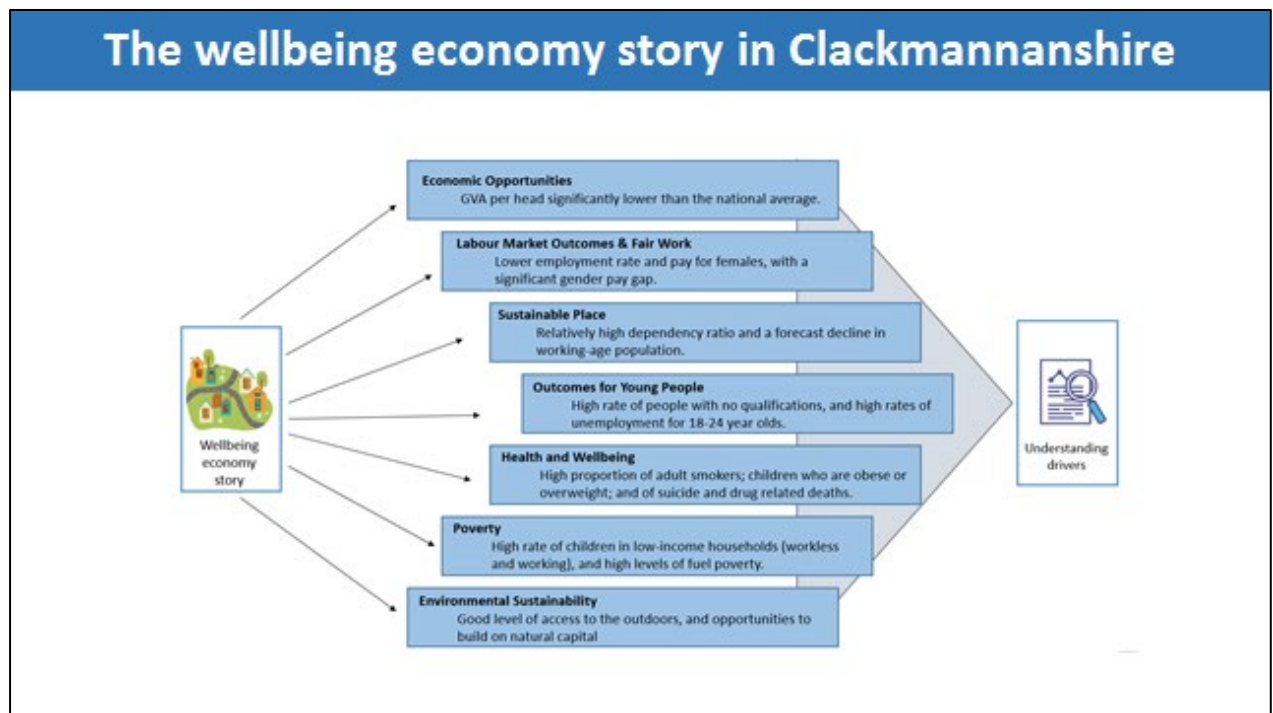
Slide 1

Wellbeing Economy in Clackmannanshire

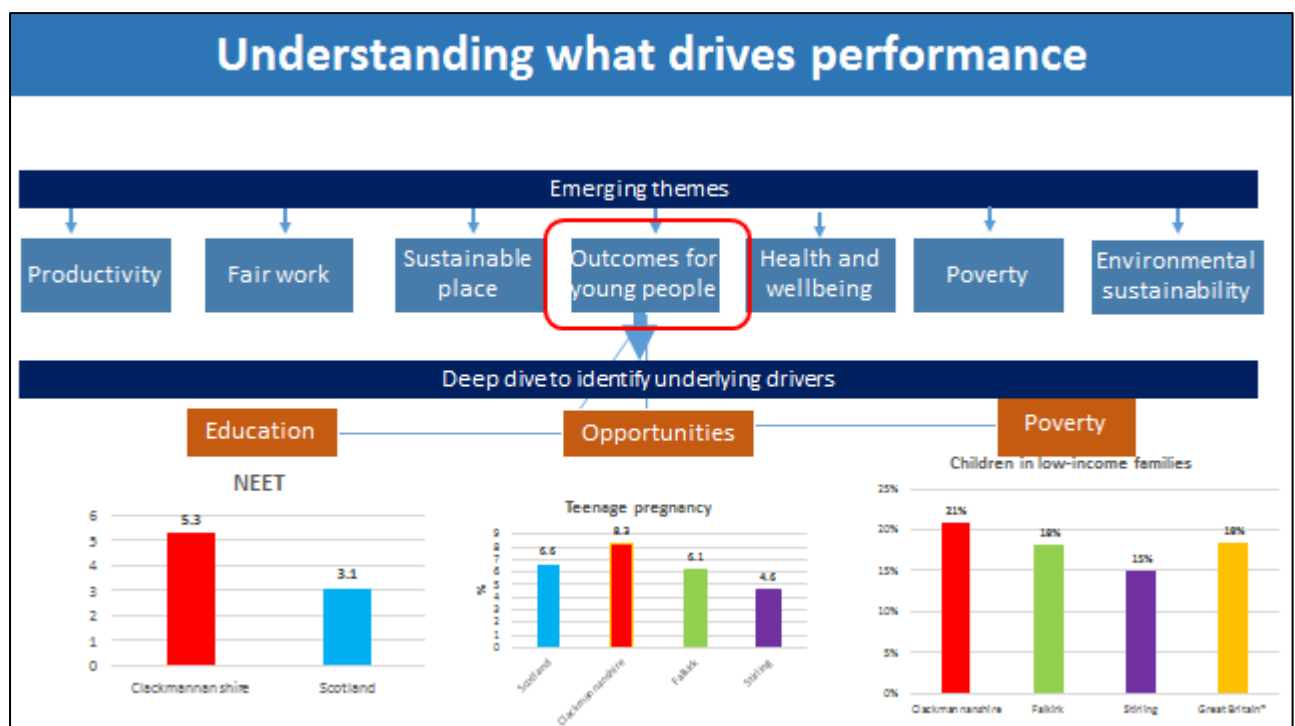
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Slide 3



Slide 4



Slide 5

SIPHER Systems Mapping



Aim:

To build on scoping work using the Wellbeing Economy Diagnostic tool to develop a participatory systems map of the relationships between key components of the local wellbeing economy in Clackmannanshire.

Process:

- 3 interactive online workshops
- 54 participants in total from Clackmannanshire Council, Scottish Government and 20 CC, 13 SG and 21 other key public and third sector organisations)
- Progressively identified a systems map of 326 components (consisting of outcomes and the factors that drive outcomes) with 1225 links between them.

3

Slide 6

Quality jobs is directly influenced by 11 other components, and indirectly influenced by a further 25 within the Clackmannanshire wellbeing economy system



6

Slide 7

On the systems map, **Quality jobs** directly influences 12 other components, with indirect influence over a further 81 within the Clackmannanshire wellbeing economy system



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Slide 8

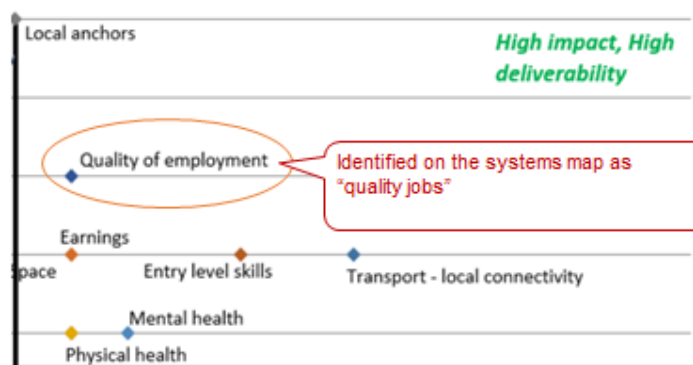
Priority areas for intervention

Two dimensions:

- Impact (wellbeing economy + evidence base)
- Deliverability (stakeholders, time + funding)

Results:

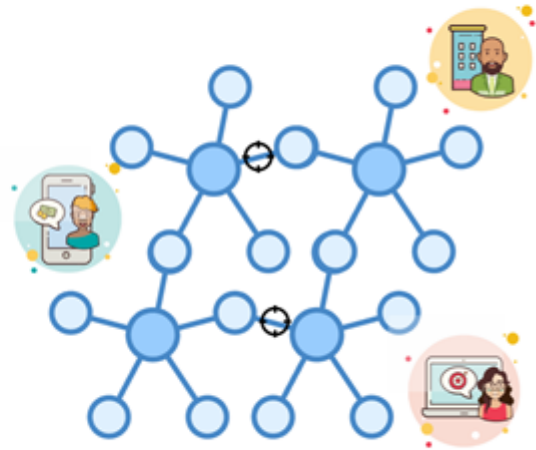
- Quality of Employment
- Transport – Local Connectivity
- Entry Level Skills
- Earnings
- Mental Health
- Physical Health
- Local Anchors



Slide 9

Implementation

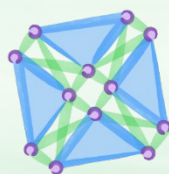
Community Wealth Building
Wellbeing Economy Anchor Partnership
Good Employment Charter
Progressive procurement
Wellbeing Economy Local Outcome
Improvement Plan
Transformation Zones
Shaping Places for Wellbeing programme
Family Wellbeing Partnership



BEMIS - Vaccine Information Fund

Briefing for Health, Social Care and Sport Committee

May 2022



ETHNIC MINORITY
NATIONAL RESILIENCE NETWORK

Vaccine Information Fund

Timeline:

- 8th December 2020 – First Vaccine Administered in UK
- 9th December 2020 – EMNRN meet with SG Vaccine Officials (Note contained See Annex A)
- 14th December 2020 – Kent variant reported by BBC
- 5th January 2021 – Scotland enters full lockdown
- 4th February 2021 – 27th February 2021 BEMIS Scotland survey analysis on vaccine hesitation in minority ethnic groups
- 25th February 2021 BEMIS Launch Vaccine Information Fund
- 16th March 2021 – BEMIS submit briefing to SG Inclusive Vaccinations Group (Briefing contained See Annex B)
- March 2021 – October 2021 VIF Deployed
- 10th August 2021 – African, Caribbean and Black Inclusive Vaccinations Group Meets (<https://bemis.org.uk/emnrn/subgroups/>)
- December 2021 – OMICRON (VIF expands to include mental health support and tackling destitution)
- January 2022 – Research commissioned into African, Caribbean and Black Vaccine Hesitancy
- March 2022 – Fund ends
- August 2022 – Launch of African, Caribbean and Black Research with Cabinet Secretary for Health Humza Yousaf MSP

Vaccine Information fund outcomes and learning

- ✓ Scottish Government civil servants in the Race Equality Unit moved swiftly to respond to the concerns and findings of the February 2021 survey on vaccine hesitation
- ✓ Minority ethnic communities mobilised at an unprecedented rate to engage their membership and broader communities in the vaccine information fund to increase informed consent

- ✓ 51 self-identified minority ethnic communities participated in and benefitted from the VIF. The level of diversity is an indication of the increasing demographic changes in Scotland and need for health care to evolve to respond to a changing population.
- ✓ Between March – September 2021 during first vaccination campaign to receive 1st and 2nd doses uptake increased across all minority ethnic groups

Table 20: % uptake of first dose of COVID-19 vaccination on the 1st of May 2021 and the 24th August 2021, by age group and ethnic group

Age Group	White		Mixed/ Multiple		Asian		African		Caribbean or Black		Other	
	01-May	24-Aug	01-May	24-Aug	01-May	24-Aug	01-May	24-Aug	01-May	24-Aug	01-May	24-Aug
80+	95.9	96.0	88.0	88.5	84.6	85.4	75.0	76.3	93.0	93.0	86.2	87.0
75-79	97.4	97.6	92.6	92.6	87.1	88.2	71.4	76.2	81.5	81.5	85.5	87.6
70-74	96.8	97.2	85.6	86.4	88.2	90.1	72.3	75.3	92.9	92.9	83.4	86.1
65-69	96.0	96.6	85.6	88.5	88.3	91.3	77.5	83.3	83.2	85.8	80.0	82.7
60-64	94.9	95.8	81.7	84.4	87.5	90.7	71.9	77.0	81.2	85.6	78.2	81.8
55-59	93.5	94.9	82.9	86.8	84.5	89.6	73.7	80.0	77.1	81.6	75.6	80.5
50-54	89.7	93.2	77.2	82.3	83.0	89.4	70.9	79.4	73.3	80.6	71.5	78.8
40-49	45.3	87.8	33.7	76.8	39.5	84.5	37.2	73.4	34.8	69.1	28.0	71.1
30-39	29.9	78.8	21.9	69.1	20.5	74.2	21.7	59.9	20.0	58.4	14.6	61.6
18-29	22.7	75.2	17.5	65.7	16.1	60.1	14.7	55.2	13.7	53.1	12.1	51.5
18+	64.2	88.2	33.1	72.1	39.8	76.5	34.0	66.4	37.8	66.5	31.5	65.9

Figure 19 below shows vaccination uptake for 2nd dose over time by ethnic group and age group between the 8th of December 2020 and the 24th August 2021. The trends over time reflect the JCVI priorities for vaccination. For those aged 18 to 29 not all will be eligible for their second dose yet (i.e. 8 weeks since first dose), therefore the trend for this group is still increasing. For all other age groups there is a point at which uptake naturally plateaus as most people who want to get the vaccine when invited within their priority group have done so. As for dose 1, from that point onwards, there has been a continual decrease in the gap between the ethnic groups, particularly for African ethnic groups, which is indicative of some individuals in this group coming forward later (see Figure 19 and Table 21).

¹ Public Health Scotland COVID-19 Statistical Report As at 30 August 2021 Publication date: 01 September 2021

Pg. 52 – accessed here https://publichealthscotland.scot/media/8946/21-09-01-covid19-publication_report.pdf

- ✓ Vaccination uptake between March – September 2021 increased most significantly in the African, Caribbean and Black groups from 34% to 66%²

Challenges

- ✓ Ethnicity data was not collected at point of vaccination until October 2021. This has made it challenging to track real-time uptake of 1st, 2nd, 3rd doses of vaccination and respond accordingly.
- ✓ Where data is available Public Health Scotland aggregate ethnicity data into racial classifications such as White, Black, Asian etc... This method of aggregation obscures the reality of uptake in real life. For example, while 90% of 'White' people are reported as haven received the vaccine once that data is disaggregate it indicates significant lack of uptake in the Polish ethnic group <50%.
- ✓ Fake news about all aspects of vaccination, content, process, side effects, long term consequences continues to disrupt uptake. Malicious content is routinely shared on social media and private messaging platforms beyond the vision of those sharing credible information. It is only at the point of attempting to increase informed consent that members and colleagues have become aware of the nature of some of the anti-vaccination content being shared.
- ✓ There are indications of vaccination fatigue. Uptake is highest on 1st dose then decreases at 2nd and 3rd doses.

Moving Forward

- ✓ Health and ethnicity data must be gathered and disaggregated as a core responsibility and function to inform policy and decision making

² <https://publichealthscotland.scot/publications/covid-19-statistical-report/covid-19-statistical-report-1-september-2021/>

- ✓ **In August 2022 BEMIS and the African, Caribbean and Black Inclusive Vaccinations subgroup of the Ethnic Minority National Resilience Network will co-launch bespoke research into minority ethnic vaccination experience with the Scottish Government and Cabinet Secretary for Health Humza Yousaf**
- ✓ **Learning on multiple methods of information access and sharing should be integrated into future vaccination and health campaigns**
- ✓ **As Scotland's ethnic diversity increases our health services will need to evolve to respond to changing access needs. The Vaccination programme has indicated that not all people approach health services in the same way. Access to mental health support has been particularly challenging for those for whom English is not their first language.**

What did the February 2021 Survey Research indicate?

BEMIS were informed that while the vaccination programme was well known concerns remained about its development, implementation, and outcomes.

These included:

- **Vaccines have not been tested on a diverse enough population**
- **They have tested different vaccines on Black and White people**
- **They are giving different vaccines to Black and White people**
- **If I go for the vaccine I might be deported**
- **The Vaccine has serious side affects**
- **What are the ingredients of the vaccine?**
- **Pressure of lockdown / pandemic is increasing mental health challenges and expansion of destitution this has an impact on people engaging with other services. Vaccination de-prioritised.**

To respond to these issues our members and networks recommended to increase informed consent we must deploy,

- **Trusted local partners should be used to help share information.**
- **Some events, like online Q&As with health professionals or meetings about vaccination must have capacity to be held in mother tongue languages.**

- Not everyone accesses written information. For some people videos and visuals are better. These assets should also be available in different languages.
- Some of the translations of vaccine information use overly complicated language.
- Some questions affect all minority ethnic communities. What is in the vaccine? Is it safe? What are the side effects? However, there are also specific issues for Asylum seekers, multi-generational minority ethnic groups, newer migrant individuals and communities, and African and Black communities. Socio-economic status
- Provide multilingual mental health support
- Provide financial support to those in extreme poverty

Thus, in February 2021 the Scottish Government Race Equality Unit supported BEMIS with an initial grant support of £50,000 to facilitate the Vaccine Information Fund.

Summary

- ✓ £41,589 was provided to 45 organisations to conduct VIF events
- ✓ Reach of 55,000 individuals
- ✓ 51 specific ethnic groups supported
- ✓ £15,200 was provided to 7 organisations to respond to destitution due to OMICRON impacts
- ✓ 200+ families supported due to OMICRON impact
- ✓ £3,000 was provided to the African, Caribbean, and Black (ACB) Subgroup of the Ethnic Minority National Resilience Network to commission research into ACB vaccine experience and journey
- ✓ Research to be launched with Cab Sec for Health August 2022 to inform future vaccination programmes
- ✓ £10,010 was provided too two women's organisations to provide bespoke multilingual mental health support
- ✓ Over 120 women receiving ongoing culturally sensitive and bi-lingual mental health support

Vaccine Information Fund

Funded Organisations

ORGANISATION	LOCATION	AMOUNT AWARDED
Ahl Al Bait Society	Glasgow	£450.00

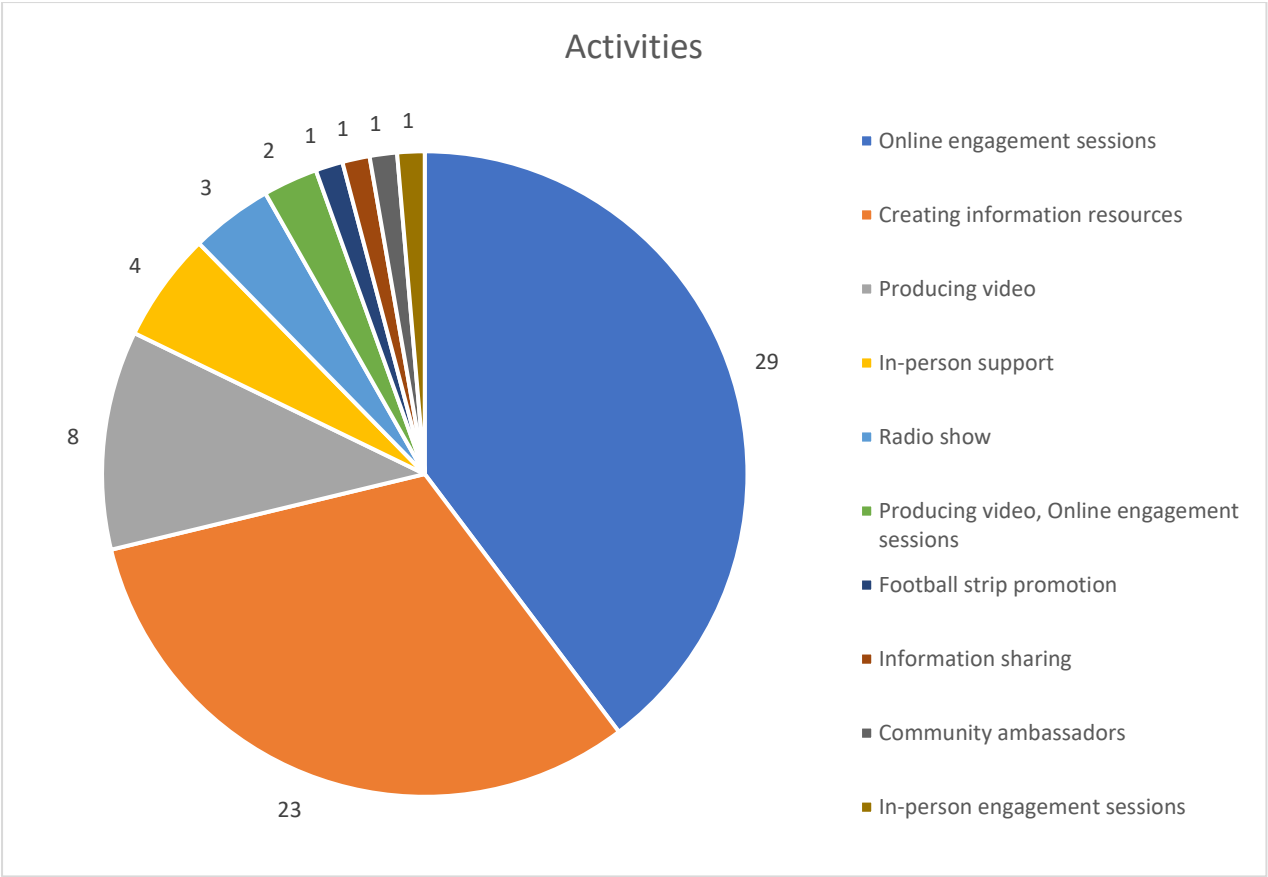
B.J.O. Amara Association	Glasgow	£650.00
Cambria AFC	Glasgow	£1,435.00
Chabad of Edinburgh	Edinburgh	£1,000.00
Dumfries and Galloway Multicultural Association	Dumfries and Galloway	£1,000.00
East and Southeast Asian Scotland	Edinburgh and Glasgow	£1,000.00
Edinburgh Interfaith Association	Edinburgh	£480.00
Edinburgh Tamil Sangam	Edinburgh	£800.00
FENIKS	Edinburgh	£1,000.00
Fife Migrants Forum	Fife	£960.00
Freedom from Torture	Glasgow	£1,000.00
Friends of Romano Lav	Glasgow	£1,000.00
Fun Little Poland	West Lothian	£750.00
Glasgow Disability Alliance	Glasgow	£1,500.00
Govan Community Project	Glasgow	£1,000.00
HSTAR Scotland SCIO	Stirling	£1,400.00
Hwupenyu Health and Wellbeing Project	Glasgow	£450.00
Information and Learning for All Project (ILFA Project)	Glasgow	£900.00
International Women's Group	Glasgow	£1,000.00
Isaro Community Initiative	Glasgow	£970.00

Jambo! Radio	Glasgow	£1,875.00
LGBT Unity Glasgow/Scotland	Glasgow	£1,600.00
Milan Senior Welfare Organisation	Edinburgh	£1,000.00
Mossvale Community Church	Paisley	£1,000.00
Nepalese Himalayan Association Scotland	Aberdeen	£700.00
Networking Key Services Ltd.	Edinburgh	£1,000.00
Nigerian Muslim Community Scotland	Glasgow	£690.00
Organisation for Nepalese Culture and Welfare	Aberdeen	£1,000.00
Pollokshields Development Agency	Glasgow	£880.00
Povestry Democratic Citizenship Association	Glasgow	£1,050.00
Raith Rovers Community Foundation	Fife	£500.00
Renfrewshire Effort to Empower Minorities (REEM)	Paisley	£1,000.00
SCOREscotland	Edinburgh	£998.00
Scottish Ethnic Minority Deaf Club	Glasgow	£700.00
Sharpen Her: the African Women's Network	Glasgow	£1,000.00
Sikh Sanjog	Edinburgh	£1,000.00
Sikhs in Scotland	Glasgow	£900.00

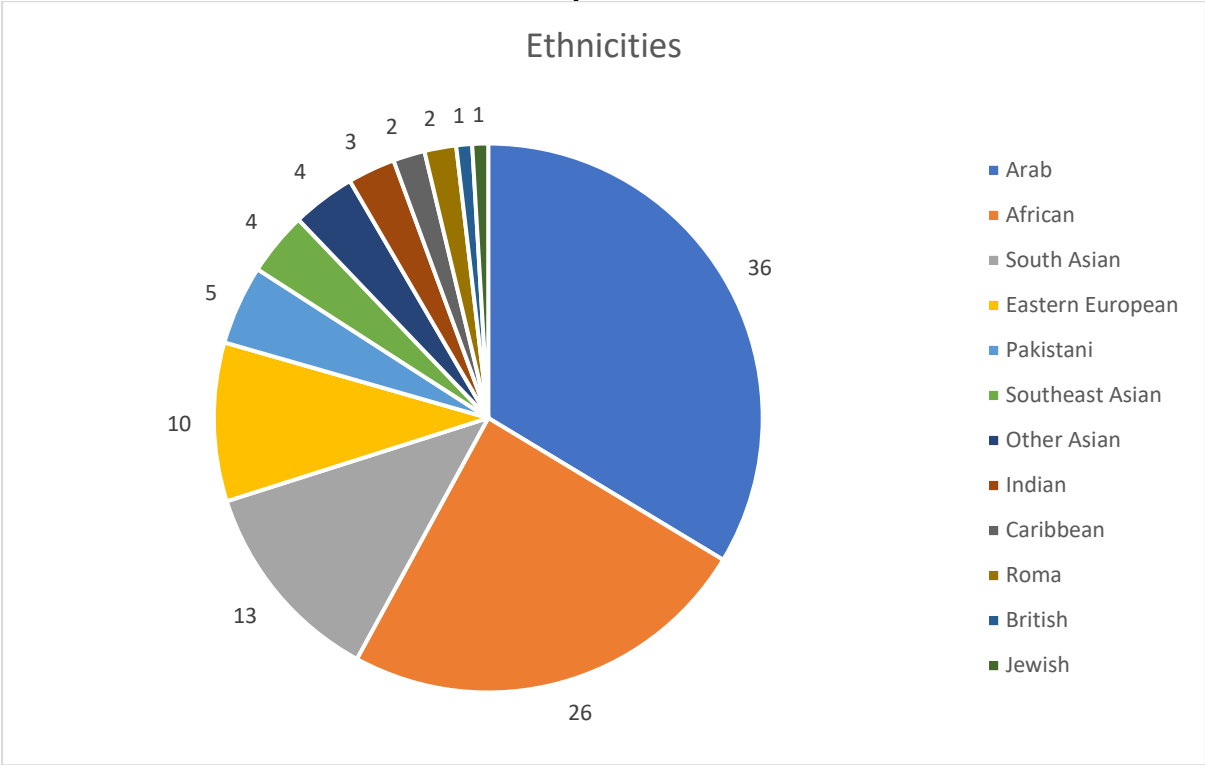
Somali Association in Glasgow	Glasgow	£800.00
Waverley Care	Glasgow	£1,200.00
West of Scotland Regional Equality Council	Glasgow	£990.20
Women In Action	Glasgow	£1,000.00
Youth Community Support Agency	Glasgow	£961.00
	TOTAL	£ 41,589.20

Location

Location base	Funded Applications
Glasgow	27
Edinburgh	8
Paisley	2
Aberdeen	2
Fife	2
West Lothian	1
Stirling	1
Edinburgh and Glasgow	1
Dumfries and Galloway	1
Grand Total	45



Ethnicities - 51 different ethnicities reported



Row Labels	Count of Application
Arab	

Iranian	4
Syrian	4
Iraqi	3
Arab	3
Kuwaiti	3
Yemeni	2
Saudi Arabian	2
Algerian	2
Middle Eastern	2
Libyan	2
Lebanese	1
Egyptian	1
Kurdish	1
Moroccan	1
Sudanese	1
Omani	1
Jordanian	1
Palestinian	1
Qatari	1
African	
African	15
Nigerian	3
Black	2
Namibian	1
Sierra-Leonian	1
Gambian	1
Somali	1
Kenyan	1
Mauritian	1
South Asian	
South Asian	4
Bangladeshi	3
Sri Lankan	2
Afghan	2
Nepalese	2
Eastern European	
Polish	4
Romanian	2
Eastern European	2
Albanian	1
Bulgarian	1
Pakistani	
Pakistani	5
Southeast Asian	
Vietnamese	2
Philippines	1
Southeast Asian	1
Other Asian	
Singaporean	1
Malaysian	1

Asian	1
East Asian	1
Indian	
Indian	3
Caribbean	
Caribbean	2
Roma	
Roma	2
British	
Scottish	1
Jewish	
Jewish	1

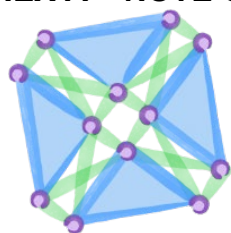
Mitigating OMICRON Impacts December 21 – March 22

Sustenance Fund December 2021 – March 2022

Organisation Name	Amount Awarded	People Supported
Crookston Community Group	£2,000.00	36 families – est. 100 people
CSREC Central Equality	£2,000.00	53 families – 192 people
Dumfries and Galloway Multicultural Association	£2,000.00	50 families – est. 150 people
Highland Migrant and Refugee Advocacy (HiMRA)	£2,000.00	16 families – est. 50 people
HSTAR Scotland	£2,500.00	16 families – 58 people
International Women's Group	£2,500.00	13 families – 61 people
Women In Action	£2,200.00	20 families – 61 people

Mental Health Support - December 2021 – March 2022

Organisation Name	Amount Awarded	Referrals
International Women's Group	£7,000.00	120 women ongoing
Women in Action	£3,010.00	25 women ongoing

ANNEX A – NOTE OF MEETING OF THE EMNRN 9TH DECEMBER 2020

ETHNIC MINORITY

NATIONAL RESILIENCE NETWORK

EMNRN Meeting 9th December 2020

10am – 12:15pm

AGENDA**Chairperson: Danny Boyle (BEMIS /EMNRN)**

Scottish Government / Meeting Participants	
Julie Hoey	Covid Vaccine Policy Team Leader - Vaccines Division
Nuala Healy	Organisational Lead for Screening and Immunisation – Public Health Scotland
Ben Macpherson	Minister for Public Finance and Migration
Martin Hayward	Equalities and Human Rights Commission

Item	Time
Zoom meeting open. Participants sign in with music theme as we await attendees and opening	9:45 – 10:00
Welcome Tanveer Parneez / Danny Boyle – Thanks and Agenda	10:00 – 10:05
Message to the EMNRN from Christina McKelvie MSP – Minister for Older People and Equalities	10:05 - 10:10
Updates from Thematic subgroup meetings – Group Chairpersons	10:10 – 10:30 1) Mental Health – Fiona Crombie 2) Data, Health and Social Outcomes – Jenni Keenan 3) BME frontline workers and Economic Recovery – Charmaine Blaize 4) Education and YP – Vicky Wan 5) Collaboration – Nina Munday 6) Inclusive Health Messaging – Suzanne Munday
	10:30 – 11:30

Julie Hoey and Nuala Healy – Scotland's Vaccination Plan	
Ben Macpherson Minister for Public Finance and Migration	11:30 – 12:00
Martin Hayward: Commission Inquiry into the experience of low paid ethnic minority workers in Health and Adult Social Care and opportunities for people and organisations to contribute to this over the next months.	12:00 – 12:05
Summary and Next Steps	12:05 – 12:15

Attendees

NAME	ORGANISATION
Danny Boyle	BEMIS Scotland
Tanveer Parnez	BEMIS Scotland
Martin Fotheringham	CSREC
Harriette Campbell	African Caribbean Women's Association
Alan Gray	Forth Valley Migrant Support Network
Martin Hayward	Equality and Human Rights Commission
CHRISTINE MEMBI	The Hope Project
Maryam Wasim	Scottish Pakistani Community Recovery Network
Kimi Jolly	East and South East Asian Scotland
Margaret Lance	Women in Action
Trishna Singh	Sikh Sanjog
Jenni Keenan	PKAVS Minorities Community Hub
Michelle Ritchie	Police Scotland
Shubhanna Hussain-Ahmed	Coalition of Carers in Scotland
Charmaine Blaize	UNISON Black Workers Committee
Clare Daly	Highland Birchwood Centre HIMRA
Sarah Kwan	East and South East Asians Scotland
Melanie Weldon	Scottish Government (Health Improvement)
Micheline Brannan	Convenor BEMIS
Rukhsana	MILAN senior welfare
Unyimeobong Matthews	Inspiring Families
Ahashan Habib	Aberdeen Multicultural Centre
Billy Lynch	Fife Migrants Forum
Soumi Dey	Education academic
Ephraim Borowski	SCoJEC
Fiona Crombie	Freedom from Torture

Nuala Healy	Public Health Scotland
Susan Barnes	BEMIS Scotland
Dr. Raj Bhopal	SHELS / Expert Reference Group
Fariha Thomas YCSA	YCSA
Davie Donaldson	Progress in Dialogue
Nina Munday	Fife Centre for Equalities
Julie Hoey	Scottish Government Vaccination Team Leader
Aqeel Ahmed	Scottish Government Race Equality Policy Manager
Hilary Third	Scottish Government Race Equality Team Leader
Victoria Lopez	Scottish Government marketing
Asma Abdallah	Empower Women for Change
Yen Nalci	Dumfries and Galloway Multicultural Centre
Olivia	Poverty Alliance
Shasta Ali	Corra Foundation
Charlie Goodwin-Smith	Scottish Government
Elizabeth Oldcorn	Public Health Scotland
Yaa Nipaa	Hwupenyu Project
Catherine McGee	Refugee Survival Trust
Ian Sirrell	Scottish Government Culture, Tourism and Major Events
Ben Macpherson MSP	Minister for Public Finance and Migration
Richard Walsh	Scottish Government Culture, Tourism and Major Events

Meeting Note:

- Tanveer Parnez (BEMIS) welcomed all attendees to the final meeting of the network in 2020. Thanked everyone for their hard work and commitment in difficult circumstances. That the vaccine offers hope for 2021 and that BEMIS remain committed to working with and supporting communities as we move forward.
- Welcome from the Minister for Older People and Equalities, Christina McKelvie MSP

Video Link: <https://www.youtube.com/watch?v=w24qm5IBOWE>

-
- Updates from Subgroups

1) Mental Health

- Group meeting with Scottish Government officials to discuss opportunities for mental health provision of minority ethnic communities in Governments plans

- **Group will continue in 2021 to engage with relevant stakeholders to ensure that minority ethnic mental health welfare is informed and responsive to diverse needs.**

2) Data, Health and Social Outcomes

- **Group pleased to learn that Minister McKelvie has written to the group to outline the Scottish Governments commitment to recognising all of the ethnic diversity of Scotland**
- **The group will work with the National Records of Scotland in 2021 to ensure that the Census 2022 has the ability to reflect accurately the minority ethnic population of Scotland**

3) BME Frontline Workers

- **Group FOI'd 14 health boards to ascertain the ethnic diversity of staff. The number of staff who have received individual CV19 risk assessments. 10 Received thus far and working through responses. Early data suggests NHS staff diversity is higher than the population diversity as a whole based upon 2011 census. This is to be celebrated.**
- **UNISON Black Workers Cttee have done significant employee canvassing and research to identify concerns of racialisation and racism in the workplace. In addition there is a lack of BME senior staff. Both of these issues will be priorities for 2021 and the REAP 21-25.**

4) Education, Children and Young People

Priorities for 2021, as requested by REU.

- **Supporting voices of EM CYP in policy development and service design (continue to be a strong key theme)**
- **Curriculum reform, given the process will continue for some time**
- **Rights to accessing services including language support (aligning with UNCRC)**

5) Collaboration

- **Group focussed on policy issues continuing throughout CV19 such as hate crime and funding.**
- **Followed up engagement with SG officials and Police on hate crime.**
- **Groups learned more about each other's work across the year.**
- **Group will be amalgamated into other groups moving forward.**

6) Inclusive Health Messaging

- **New group set up in late 2020 to respond to challenges in getting clear, accurate and concise health messaging to diverse communities**

- Group will have a strategic focus on vaccination and other health communication in 2021
- MECOPP leading who have significant experience in inclusive health messaging and translation during the pandemic.

Julie Hoey and Nuala Healy – Scotland's Vaccination Plan

- prioritisation of groups to get the vaccine first (JCVI [Priority groups for coronavirus \(COVID-19\) vaccination: advice from the JCVI, 2 December 2020 - GOV.UK \(www.gov.uk\)](#), including the specific issue of why minority ethnic communities have not been singled out for prioritisation at this stage
- the vaccines: Pfizer, Oxford AstraZeneca, others in the pipeline; ongoing trials in UK and calls for volunteers, specifically from minority ethnic communities; vaccine ingredients
- plans for roll out – started vaccination in Scotland on 8/12; how long will it take?
- Informed consent – allowing people to ask questions about vaccines and vaccination – what we're doing to provide that information and what you can do to share it
- Maximising take up – significant uptake of an effective vaccine can lead to collective immunity; what are we doing to maximise uptake and what else should we consider? How can you help? What are the likely barriers and how will we work together to overcome them?
- Resources: <https://www.publichealthscotland.scot/downloads/healthcare-worker-covid-19-resources>
- <https://www.publichealthscotland.scot/downloads/healthcare-worker-covid-19-resources>

Responses:

Scottish Pakistani Support Network (SPSN):

- How long does the vaccine take to work?
- What are the side effects if any?
- What are the implications of those who choose not to take the vaccination?
- How did the reference group engage all BAME communities?
- Were community and faith leaders engaged?
- When we book the Covid19 test at the Gov.uk website, we are allowed to select our ethnic background, for example Pakistani, why is data collected and analysed as general BAME groupings?
- Why in Scotland do we not adhere to the 14 ethnic categories under the Equality Act 2010?

- Is there any will to commit to positive action for specific BAME communities like the Pakistani communities who have been disproportionately impacted by Covid19?

SPCN Communication:³

- Need more audio/visual messages in different community languages as opposed to just translated literature which is not helpful if people are not able to read those language or able to use digital learning.
- Need more information on myth busting and misconceptions in different languages, again audio /visual preferable.
- The average Pakistani person in Scotland speaks more Punjabi than Urdu if there is a choice given between the two.
- The Urdu used is far too high level , jargon based and aimed at those who are educated in the Pakistani community. Not understood by many people. It needs to be toned down a bit to more simple language.
- Translate into easy read/plain English then translate to Urdu, Punjabi is normally spoken and not read in Pakistani community. Any document produced in Urdu also needs to be a maximum of two sides of A4 paper.

Dr. Raj Bhopal (SHELS and Expert Reference Group:

- Vaccine welcome news but CV19 will remain a long-term issue with economic, social recovery.
- Information about why we get vaccinated, content of vaccine and consent are critical to a successful and credible strategic administration.
- Should Scottish SIMD index play a role in prioritising vaccinations?

Davie Donaldson – Progress in Dialogue:

- We are hearing many conspiracies around the vaccine, notably worries that it includes foetal cells etc.
- This is causing much grassroots distress and is adding a religious element to not getting the vaccine (among Roma and Traveller communities).
- Is there are any official resources disputing claims such as these that we can share. Majority of the communities we support are refusing to accept the vaccine when it comes.

Jenni Keenan – Perth and Kinross Minorities Communities Hub:

- Older people from minority communities, and EE communities, where literacies can be low in English and native languages and access to uk media channels and info sharing is very low. There is crossover with the most sceptical individuals here, which adds a layer of complexity.

Trishna Singh (Sikh Sanjog)

³ *Please note communication feedback has been given by community members, network members, third sector BAME Health workers, and media and comms agencies and professionals*

- We need to remain aware of the differing dialects of spoken Punjabi for Sikhs and for Pakistani community there are similarities, but they are differences that can affect the whole message.
- It remains a source of significant concern and frustration that the needs of diverse communities are still not appropriately integrated into the response of Government and others. Our communities have been here for decades and still we are being asked after the problem has happened to help fix it. At such a critical time this is unacceptable. This makes us feel like we are not part of the Scottish community. Until the power structures are changed and our needs are fully integrated into Scottish policy as a norm then our rights will continue not to be equally responded to.

Danny Boyle (BEMIS)

- In relation to vaccine prioritisation the network has been aware since March of what we have termed the informal frontline. Not healthcare workers but school teachers, taxi drivers, shop owners, retail workers, construction workers and other employment sectors that remain open and expose those workers to higher risks not reflected in vaccine prioritisation. Some of these sectors employ disproportionate numbers of ethnic minorities who also happen to live in overcrowding or high-risk SIMD areas. A hypothetical example is the Pakistani taxi driver, living in overcrowding. Is there a case to be explored that there should be an equalities targeting strategy for vaccine roll-out given the higher number of Pakistani male deaths? Should JCVI priority groups include
 - ✓ Employment
 - ✓ Ethnic disparity
 - ✓ Socio-economic status
 - ✓ Housing

Members thanks Julie and Nuala for their participation and wished them every success in their work. Agreement to use network to continue dialogue and follow up via national and subgroup data and health and inclusive health messaging.

Minister for Public Finance and Migration Ben Macpherson MSP

- Thanked members for their hard work diligence and commitment to responding to CV19 across Scotland.
- Outlined that Scotland remains committed to being an open and welcoming nation that cherishes the economic, social, and cultural impact of European and International migrants
- Minister encouraged communities to embrace and participate within the Scottish Winter Festivals period

- Highlighted that on the 25th of January Burns night will take place and offer communities the opportunity to start the new year positively to celebrate in different multicultural ways.

Open floor for members to respond to Minister and General ask – what do we want for 2021?

- Members expressed their thanks to the Minister for his attendance and participation over the year.
- Members also outlined that to have a truly representative Scotland we must have more diversity in the Parliament. Especially from significantly underrepresented communities. There remains a lack of people of colour, women, and other ethnic and national groups.
- General comments followed on the difficulties posed by 2020 and the requirement for the EMNRN to have been instigated. Members found the network invaluable and a safe place in a very difficult year. There is an appetite to maintain its structure in 2021.

Martin Hayward Equalities and Human Rights Commission

- The Commission has launched Inquiry into racial inequality in health and social care workplaces.
- We want to understand the experiences of ethnic minority people working on the frontline in lower-paid roles, particularly during the COVID-19 pandemic.
- Based on the evidence we find, we will make recommendations aimed at employers, governments and other agencies to improve conditions for ethnic minority workers.

Link to submit evidence and further information can be found here:

https://www.equalityhumanrights.com/en/inquiries-and-investigations/inquiry-racial-inequality-health-and-social-care-workplaces?utm_source=e-shot&utm_medium=email&utm_campaign=RaceInquiryCallForEvidence

- Martin thanked Charmaine Blaize of the Unison Black Workers Committee for her support and expertise already in helping to inform the inquiry.

Convenor of BEMIS Micheline Brannan

- On behalf of BEMIS, Micheline thanked all members and attendees for their commitment over the year. That our work together had been inspirational and that when we see communities work so closely together, we are stronger.
- Thanked BEMIS board members for their continued participation and support of staff and the network.
- That we should continue to deploy the beneficial aspects of technology we learned in 2020 through the use of platforms like zoom we can have

50-60 people together who otherwise may not be able to travel to a location.

- **Acknowledged the diligence and commitment of various civil servants from different departments who have attended and responded to the network over 2020**
- **Micheline acknowledged the support of the Scottish Government Cabinet Secretary Aileen Campbell and Ministers Ms Christina McKelvie and Ben Macpherson for their continued support of the network.**
- **Finally thanked Rami, Tanveer, Sue, Neil and Danny for their hard-work over 2020 in challenging circumstances.**

Meeting Ends: 12:17

ANNEX B – Briefing to the Scot Gov Inclusive Vaccinations Group March 2021
Ensuring Equal Access to vaccination information for Scotland's minority ethnic communities - BEMIS Scotland interim report to - COVID-19 Vaccine: Inclusive Programme Steering Group. 16/03/2021

Vaccination and the Equality Act 2010

- The provision of vaccination information, access and administration fall within the scope of the provisions of the Equality Act 2010 and the delivery of a public function.
- Thus, in respect of the vaccination plan duty bearers are obliged to ensure that citizens acknowledged by the protected Racial provisions of Colour, Nationality, ethnic or national origin have access too vaccination information and administration in a way that is compliant with their human rights.
- In Scotland this may mean taking a tailored approach to specific ethnic groups.
- Minority ethnic communities in Scotland are no different insofar as they have the same human concerns as any other community however some challenges are unique to them and we must respond to these.
- In addition, at the time of a public health crisis in the provision of public health information or administration of vaccines citizens restricted by punitive immigration designations such as undocumented migrants, Asylum seekers or those affected by EU Exit fall within the scope of the Equality Act as opposed to their immigration or lack of status.
- By virtue of this legal entanglement and experience with other official departments that have been hostile to their existence in the UK / Scotland some of these communities and individuals are harder to reach. In this respect, trusted, local partners and community contacts are critical to ensuring they have the same access to information as the rest of the population.
- The Vaccine Information Fund aims in part to help bridge this gap and inform key stakeholders of issues and methods of delivery that can be derived from this direct community intelligence.

What our 12 months of pandemic response told us about the vaccine programme?

As Scotland moves through its vaccination programme, it is crucial that all the people of Scotland have informed and equal access to information about the vaccine.

Through the evidence developed as BEMIS Scotland & the Ethnic Minority National Resilience Network (March 2020 – Present) and our Health and Vaccination Survey, we know that not all individuals and communities have or are able to access information in the same way.

In relation to Scotland's minority ethnic communities and increasing access to relevant and responsive information regarding the vaccination, we are informed that:

- Trusted local partners should be used to help share information.
- Some events, like online Q&As with health professionals or meetings about vaccination must have capacity to be held in mother tongue languages.
- Not everyone accesses written information. For some people videos and visuals are better. These assets should also be available in different languages.
- Some of the translations of vaccine information use overly complicated language.
- Some questions affect all minority ethnic communities. What is in the vaccine? Is it safe? What are the side effects? However, there are also specific issues for Asylum seekers, multi-generational minority ethnic groups, newer migrant individuals and communities, and African and Black communities. Socio-economic status

As such, as part of the Scottish Government efforts to ensure equal access to information regarding the Vaccines, BEMIS Scotland are commencing a Vaccine Information Fund programme to empower communities to have engagement sessions about the vaccine programme and develop information assets that can be used to increase informed consent.

Sample community events ongoing as of 16/03

Account Name	Location	Target
Jambo! Radio	Glasgow	African communities
Govan Community Project	Glasgow	Various, including asylum and refugee groups

Freedom from Torture	Glasgow	Multiple ethnic groups including asylum and refugee groups
Isaro Community Initiative	Clydebank, Glasgow	Multiple ethnic groups
Networking Key Services Ltd.	Edinburgh	Bangladeshi / Pakistani multi generational
Fife Migrants Forum	Fife	Multiple predominantly easter European
Ahl Al Bait Society	Glasgow	Arab speaking communities including asylum seeking individuals
Pollokshields Development Agency	Glasgow	Multi-generational Pakistani / Muslim groups
Dumfries and Galloway Multicultural Association	Dumfries and Galloway	Multiple ethnic groups including refugee community
Organisation for Nepalese Culture and Welfare	Aberdeen	Nepalese community and others in Aberdeen