

	<h2>Health and Wellbeing Board</h2> <h3>Thursday 19<sup>th</sup> January 2023</h3>
<b>Title</b>	<b>Migrant Health Needs Assessment</b>
<b>Report of</b>	Director of Public Health and Prevention
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	No
<b>Enclosures</b>	Appendix A – Barnet Migrant Health Needs Assessment September 2022
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## Summary

During the COVID-19 pandemic, Barnet saw an increasing number of asylum seekers enter the borough. Barnet continues to be a welcoming borough to migrants and recognises that new migrants bring with them a variety of skills, expertise, and experience. Understanding the needs of this group alongside refugees and undocumented migrants has become a priority for the Council, including Public Health Team, thus the Barnet Migrant Health needs assessment was commissioned.

The Health Needs Assessment (HNA) defines “migrant” as any individual who comes to reside in another country outside of their country of birth. It recognises differences in both the wider determinants and poorer health outcomes of forced migrants (which includes refugees and asylum seekers) and undocumented migrants as compared to those born in the UK. These poorer health outcomes are exacerbated by barriers to accessing health care services including knowledge, service provision and workforce training.

The HNA synthesises all ways to tackle the inequalities and unmet needs of the migrant population, including 4 key recommendations based on the issues identified through literature review, national & local data, and stakeholder interviews.

## Officers Recommendations

1. The HWBB to note the needs, health issues and barriers faced by refugees and undocumented migrants as identified in the Barnet Migrant Health Needs Assessment 2022.
2. The HWBB to note the key recommendations in the Barnet Migrant Health Needs Assessment 2022 and endorse initial developments of work in this area.

### 1. Why this report is needed

- 1.1 The Migrant HNA has identified key issues and unmet needs that are resulting in poorer health outcomes for asylum seekers, refugees, and undocumented migrants in Barnet.
- 1.2 The data collected in the HNA showed that the decline in health for migrants is a result of a variety of interlinking issues, most notably poor work and living conditions, poverty, social isolation, poor access and knowledge of health care systems and discrimination.
- 1.3 The evidence showed that forced and undocumented migrants are consistently found to have worse health in the following areas: Maternal Health, Mental Health, Dental Care, UASC Health, Sexual and Reproductive Health, Vaccinations and Communicable Disease.
- 1.4 Four key recommendations to address the issues are outlined in the HNA:
  - a) Improve the knowledge of the UK Health care system, such as through creation of bespoke information translated into commonly spoken languages and providing accessible ESOL (English for Speakers of Other Languages) classes.
  - b) Improve access of the UK Health care system i.e., through increased local research, networking, commissioning of key specialist workers and digital literacy classes.
  - c) Improve the health and wellbeing of forced and undocumented migrants, by focusing on priority issues e.g. maternity services, immunization, children's health, mental health services, UASC support, trauma, and food provision.
  - d) Workforce Development; consideration and support to frontline workers.
- 1.5 We intend to take the recommendations forward as action to improve the health and wellbeing of the migrant population. This will include formation of a new, cross-Council and wider system steering group to build on collaboration in this area. This steering group will also aid in identifying areas in need of further collaboration and will support the development of a strategic plan.
- 1.6 Public Health have begun taking some recommendations forward and have commissioned a migrant health key specialist worker to support implementation of some of the actions. The HNA did not cover Ukrainian refugees, as they were recent migrants; however, needs of this population group will be addressed as part of the steering group. Forward action will also include reviewing of quantitative data included in the HNA, to incorporate newly released census data.

## **2. Reasons for recommendations**

- 2.1 The HNA demonstrates that forced and undocumented migrants have worse health outcomes upon arrival in the UK which worsen the longer they remain here. Public health, in collaboration with the whole Council and wider system, intends to support these groups by actioning the HNA recommendations, to improve the knowledge, access, health, and wellbeing of forced and undocumented migrants in Barnet, alongside improvements to workforces.

## **3. Alternative options considered and not recommended**

- 3.1 Not applicable for this report.

## **4. Post decision implementation**

- 4.1 New Migrant Health Action plan for Barnet will be developed, cementing and enhancing existing work. The action plan will be developed, using recommendations from the report, with a steering group to oversee its implementation. It is acknowledged that some of the recommendations have been addressed/are being addressed and Migrant Health Action plan will make reference to those.

## **5. Implications of decision**

### **5.1 Corporate Priorities and Performance**

- 5.1.1 The prioritisation of Migrant health supports Key Area 2 of the Joint Health and Wellbeing Strategy 2021 to 2025, by improving children's life chances through UASC support, promotion of mental health and wellbeing in numerous areas as well as supporting a healthier workforce.
- 5.1.2 The recommendations also aim to tackle multiple needs identified in the Joint Strategic Needs Assessment, such as Mental Health and wider determinants of health such as domestic abuse, unemployment, and social isolation.

### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

- 5.2.1 Not Applicable for this report.

### **5.3 Legal and Constitutional References**

- 5.3.1 Barnet Council Constitution, Article 7 – Committees, Forums, Working Groups and Partnerships, Health and Wellbeing Board responsibilities:

(1) To work together to ensure the best fit between available resources to meet the health and social care needs of the whole population of Barnet, by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental and social wellbeing.

(2) Specific responsibilities for; overseeing public health and promoting prevention

agenda across the partnership.

## **5.4 Insight**

- 5.4.1 To undertake the HNA, a search was conducted for existing migrant health needs assessments across the UK. Those available and published within the last 10 years were included and reviewed in the NA.
- 5.4.2 National and local data regarding the demographics in the UK, and Barnet were derived from the Census 2011, the Office for National Statistics (ONS) and the Annual Population Survey (APS) were also used to inform the NA.
- 5.4.3 Thirdly, stakeholder interviews and surveys were conducted in July and August 2022. The Public Health team contacted migrants, health professionals, migrant organisations, and the community and voluntary sector for participation in these interviews and surveys.
- 5.4.4 There were challenges in collecting some of the data and developing relationships with key stakeholders would be a theme of the work taken forward to enhance the quality of the information available in future.

## **5.5 Social Value**

- 5.5.1 Not Applicable for this report.

## **5.6 Risk Management**

- 5.6.1 Not Applicable for this report.

## **5.7 Equalities and Diversity**

The HNA has been developed considering equality and diversity. In Section 9, p48 the HNA breaks down the data presented and identifies inequalities, ensuring the needs of specific groups are recognised.

## **5.8 Corporate Parenting**

- 5.8.1 The HNA outlines the health needs of Barnet's Unaccompanied Asylum-Seeking Children (UASC). Recommendations specific to UASC health and education are put forward, in Section 12.3 p17. This is including supporting UASC into supportive living situations and to support trauma-focused interventions and cognitive behavioural therapy.

## **5.9 Consultation and Engagement**

- 5.10 Engagement and consultation with the migrant community and those who represent them would be central to the work in future.

## **5.11 Environmental Impact**

- 5.11.1 There are no direct environmental implications from noting the recommendations.

## **6. Background papers**

### 6.1 No Background Papers