

Scoping Study to explore the feasibility of a Health and Social Care Research and Development Network covering Black and Minority Ethnic Groups (BME) in Wales

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Background

One significant development in Wales since devolution has been the amalgamation of health and social care and more recently, the development of an All-Wales health and social care research and development network infrastructure (CRC Cymru). The aim of the scoping study, conducted between March and April 2005, was to explore how best to enhance the quality and quantity of research that addresses the health and social care issues of BME groups in Wales.

The Black & Minority Ethnic Population in Wales

According to the UK 2001 Census, the number of people from BME backgrounds in the UK was 4.6 million (7.9 percent of the total population). In Wales, the number of people from BME backgrounds was 61,600, 2.1 percent of Wales' population of 2.9 million people. This is an increase from 1.5 percent (41,551) as recorded in the UK 1991 Census.

Study Aims

1. To **identify** the perceived research priorities, the barriers, and the opportunities for enhancing the quality and quantity of research, as understood by key stakeholder groups.

2. To **scope** current research activity taking place in Welsh universities, health and social care voluntary organisations, local health boards (LHBs), Equalities agencies and NHS Trusts.

3. To **survey** key research and development activities taking place in the UK.

Methodology

Canvassing of views via a short survey. The data were collected via email correspondence, telephone exchanges, and a series of meetings following a consensus approach.

Internet-based searches and telephone enquiries, together with extensive networking with, and by, the co-applicants.

Information review and synthesis, internet-based searches and a short survey.

Sample

The co-applicants (n=23) were asked to recruit respondents. Key BME voluntary organisations were also approached and asked to take part in this study, by sending questionnaires to their client groups and by holding small meetings and focus groups.

Total number of respondents: 141

Table 1 Respondents

Stakeholder Group	No. of Responses
Staff – Voluntary sector	28
Service Users – Voluntary sector	29
Staff – Wales NHS Trusts	19
Staff – Welsh Universities	37
Staff – Local Authorities	8
Staff – Local Health Boards	6
Staff – Equalities Organisations	5
Members of BME Community Groups	2
Other	5
Total	139*

* data missing from 3 questionnaires.

Results

1. Respondents considered the following to be key health and social care issues: the health of specific groups (asylum seekers, travellers, children, older people, refugees, migrant workers, women); illnesses that affect people from BME groups to a disproportionate extent; broader determinants of health and well-being; access to services; service delivery and quality of care.
2. The links between 'race', ethnicity, gender and social class were identified as key factors in the social exclusion of BME groups that can lead to a negative impact on health status and service utilisation.
3. The overwhelming consensus was that there was a need to involve communities and users in priority-setting at each stage of the research process and that there was a need to find ways to engage with BME people in a meaningful way in order to collect accurate data.
4. Sixty-five academics had noted in their university, on-line profiles that they had an active interest in BME health and/or social research (this included children's health, CHD, diabetes, mental health and social policy).
5. Research is becoming an increasingly important activity for voluntary sector organisations.
6. Local health boards and health divisions of the Welsh Assembly are providing research funding, as are UK funding bodies, primarily for short-term, fixed, 'stand alone' projects. Not one all-Wales study with a fully representative sample of BME participants was found.
7. Six centres were identified as the key academic centres in the UK specialising in the field of 'race' ethnicity and health: The Centre for Evidence in Ethnicity, Health and Diversity (DeMontfort University & University of Warwick); The Mary Seacole Centre for Nursing Practice (Thames Valley University); The Centre for Transcultural Studies (Middlesex University); The Centre for Ethnicity and Health (University of Central Lancashire); The Centre for Primary Care Research (Leeds University) and the National Resource Centre for Ethnic Minority Health (run jointly by the Public Institute of Scotland and the health Education Board for Scotland). There are no centres in Wales.

Conclusions

- High-level research is being conducted, but the dissemination of research, and its entry into the practice environment, are not yet evident.
- Isolationism and the duplication of the research taking place across Wales are severely hampering the development of a useful evidence base
- Much more work is needed in order to chart the research activity currently taking place in Wales' NHS Trusts, local health boards and social service departments.
- A research agenda based on the priorities highlighted by the work of the national Equalities agencies, and by national BME health and social care voluntary organisations in Wales would include: mental health; drugs and alcohol misuse; children and chronic illnesses; the health needs of women and BME health, community development and empowerment.
- It is evident that there is an awareness of the importance of addressing the multiple needs of BME groups, a general idea about the challenges, and a willingness on the part of key stakeholder groups to work together.
- There is a need in Wales for a focused, co-ordinated and cross-sector programme of research and development in the field of 'race', ethnicity, health and social care.

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Reference

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