

# celebrate **Black** History **Month**

October 2017

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## STATE OF HEALTH - BLACK AND OTHER MINORITY ETHNIC GROUPS

**2017 marks 30 years since the introduction of Black History Month (BHM) to the UK and BHA will be hosting a conference on 24 October at the Mechanics Conference Centre to look at the state of health of Black and other minority ethnic groups across Greater Manchester.**

BHM is also an opportunity to reflect on past contributions to the field of health and medicine. Medicine and law were the principal subjects that students from the former Empire came to Britain to study. Many stayed on to set up their own practices. As doctors they were keenly aware of the social changes needed to improve health, and some became actively involved in local politics.



**Dr Harold Moody**, came to London from Jamaica in 1904 to study medicine at King's College. He started his own practice in Peckham in 1913 after being rejected for the post of medical officer to the Camberwell Board of Guardians. It was felt that poor people would not have a Black man to attend them.

He was also the founder of the League of Coloured People. In 1921, Moody was elected to the chair of the Colonial Missionary Society's board of directors, and 10 years later, became president of the London Christian Endeavour Federation. The contacts he acquired while involved in these organisations helped him to help black people who came to him in distress.

SIGNIFICANT CONTRIBUTORS TO HEALTH



**Chuni Lal Katial**, who set up the Finsbury Health Centre- an enterprising example of integrated medicine in the days before the NHS. He also became the first Asian mayor in Great Britain in 1938.

Katial's vision was a new concept in medicine at the time and the Health Centre became universally famous. For his public services, he was honoured with the Freedom of the Borough of Finsbury in 1948.



**Charles Odamtten Easmon or C. O. Easmon**, popularly known as Charlie Easmon (22 September 1913 – 19 May 1994) was a Ghanaian doctor. Easmon was the first Ghanaian to qualify as a surgeon

specialist and the first African dean of the University of Ghana Medical School. Easmon performed the first successful open-heart surgery in Ghana in 1964, and modern scholars credit him as the "Father of Cardiac Surgery in West Africa".

*Legacy and accomplishments:* Professor Easmon achieved a number of firsts in his lifetime; he was the first Ghanaian to obtain a Fellowship of the Royal College of Surgeons Edinburgh and the first Ghanaian to be appointed Chief Medical Officer in the Ministry of Health.

'CHECKING OUT ME HISTORY' - EXTRACT OF A POEM BY JOHN AGARD

"Dem tell me bout Florence Nightingale and she lamp  
and how Robin Hood used to camp  
Dem tell me bout ole King Cole was a merry ole soul  
but dem never tell me bout Mary Seacole"



**Dr John Alcindor**, born in Trinidad, wanted to help with the war effort – but was rejected by the Royal Army Medical Corps in 1914 because of his 'colonial origin'. He therefore

volunteered to help wounded soldiers at London Railway stations as they returned from the battle fields and was awarded a Red Cross Medal for his life-saving work. He had a practice in Paddington and played an important part in the second Pan-African Congress.

*(Extracts from Roots of the Future, Ethnic Diversity in the Making of Britain)*



**Dr James Beale Africanus Horton**, was the second person of Nigerian descent to qualify as a medical doctor. He served with distinction in the British Army Medical Services. Horton, would further distinguish

himself through his writings on medical subjects and advocacy for the establishment of medical schools and universities in West Africa.



**Mary Seacole**, born in Kingston, Jamaica learned about medicine from her mother, soon gaining her own reputation as a 'skilful nurse and doctress'. Mary travelled to Britain, and in 1851 opened a hotel. Soon she

had saved her first cholera patient, and gained extensive knowledge of the pathology of the disease. She was widely praised for her work in treating cholera.

DO YOU KNOW  
ENOUGH ABOUT  
**PrEP?**

Pre-Exposure Prophylaxis (PrEP) is a prevention and treatment method involving an HIV negative person taking antiretroviral drugs (ARVs) prior to possible exposure to prevent HIV infection.

- **A 3 year joint HIV prevention initiative between NHS England and Public Health England (PHE) to run a large scale trial of at least 10,000 participants**
- **The trial aims to gather further evidence before using PrEP in a sustained way and on a substantial scale in England**

For updates on PrEP and the trial visit NHS England: [www.www.england.nhs.uk/prep](http://www.www.england.nhs.uk/prep)

### STATE OF HEALTH - BLACK AND OTHER MINORITY ETHNIC GROUPS

**The Government recently published the findings of its Race Disparity Audit to reveal racial disparities across public services including the health sector. Examples of health disparities include:**

- Asian patients (Pakistani, Bangladeshi, Indian and Chinese) being the least likely to report a positive experience with their GP
- Black people were the most likely to have been detained under the Mental Health Act in 2016/17, and people in the White ethnic group were the least likely
- Black Caribbean people had the highest rate of detention of all ethnic groups

Such examples are worrying but not surprising as this information has been available to government departments for many years and has been supported by numerous pieces of academic research. A challenge remains for government and bodies such as the Greater Manchester Health & Social Care Partnership and the Greater Manchester Mayor to not only give a priority to equality in health but to take positive measures to eradicate racial disparities in health.

BHA's State of Health Conference will be held on 24 October at the Mechanics Conference Centre in Manchester's city centre and is planned at an opportune time in view of these government findings. The conference is an opportunity for Black and other Minority Ethnic Groups, their service users and representatives from statutory sector organisations to review these long standing health disparities and look at what needs to change. The devolution of health and social care at a local level should be an opportunity for a greater emphasis on equality across the board. However, if there is clear evidence to show that disparities in health exist for particular communities, where is the plan of action to tackle these continuing trends of inequality? Or do we require another major loss such as that of an ambitious young Black man called Stephen Lawrence to be a catalyst for change?

### PATIENT EXPERIENCE SURVEY

BHA's own survey of patients concurs with the governments findings within its Race Disparity Audit. Of 570 people surveyed across Manchester, 80% viewed their overall experience of care to be positive. 15% felt the quality of care was neither good or bad and the remaining 5% felt their care was poor with examples of poor quality treatment being given and examples of discriminatory practice. These negative experiences can obscure the positive example of good quality care in the NHS.

Here are a few examples of what people said:

'When you go to A&E, once you mention your HIV diagnosis, everybody starts looking at you different, which is not fair. Most of them [NHS staff] make racist remarks ...'

'I was concerned about how my future case might be affected which deterred me from complaining'

'My husband's first language isn't English but when he speaks to the doctor they don't really pay attention to him. But when I go, because I speak proper English they will answer all my questions in detail'

### CATHOLICS FOR AIDS (CAPS)

**Catholics for AIDS Prevention and Support (CAPS) is developing an online resource, the first of its kind, that addresses the issues at the centre of HIV and Christianity.**

With funding from Public Health England, we have been working with film maker, Kip Loades to produce two sets of short videos. The videos feature Christians living with HIV and church leaders / theologians being interviewed in relation to specific topics.

One series encourages churches, their congregations and communities to care about HIV and be proactive in welcoming people with HIV in the UK. Another series aims to provide pastoral support for those diagnosed with HIV - they feature a range of people, offering understanding, encouragement and a Christian perspective.

The resources on HIV and Christianity will be available by the end of October 2017 on the website at [www.positivefaith.net](http://www.positivefaith.net)

See our Facebook page for further details or email Victoria Morris [vicks@neovista.net](mailto:vicks@neovista.net) for more information.

### THE PASH PARTNERSHIP



The PaSH partnership are excited to be working on the development of a new website for Greater Manchester residents with appropriate, accurate and impartial information and advice about sexual and reproductive health issues. The website will include information and advice about HIV, Sexually Transmitted Infections, Contraception Condoms and other relevant topics, for more information visit:

<https://ght.org.uk/pash-website-consultation>

We are also delighted to announce the launch of the PaSH twitter and Facebook accounts. Please follow us for updates: <https://twitter.com/gmpash>  
<https://www.facebook.com/gmpash>

### HAVE YOU GOT NEWS TO SHARE?

**Do you have any community news about health and wellbeing, campaigns and policy work that your organisation delivers?** Send us your news to feature in our next Winter publication of THE BHA. Send your contributions with a subject line - (THE BHA News) **using any of our contact details below.**

**Please send in your contribution by 1 December 2017** (subject to spacing, not all articles may be published)

### GET IN TOUCH, GIVE US YOUR FEEDBACK AND FIND OUT MORE

 [info@thebha.org.uk](mailto:info@thebha.org.uk)  0845 450 4247  @the\_BHA  [www.thebha.org.uk](http://www.thebha.org.uk)

### VOLUNTEERING AT BHA



#### Want to volunteer at BHA?

You can volunteer your time to fundraise, work on or develop a project or share your skills in Leeds or Manchester.

**To volunteer at BHA please get in touch with:**  
In Leeds contact ([josef@thebha.org.uk](mailto:josef@thebha.org.uk))  
In Manchester contact ([alexandra@thebha.org.uk](mailto:alexandra@thebha.org.uk))

We are recruiting for Board members and we are keen, for those who have a Legal or Social Enterprise background, to join us.

**If you would like to join our Board, please visit:**  
[www.thebha.org.uk/aboutus](http://www.thebha.org.uk/aboutus) or email [info@thebha.org.uk](mailto:info@thebha.org.uk) for an application pack