



# 1. Statutory Reports

## Joint Strategic Needs Assessment

A regularly refreshed snapshot of the health and wellbeing of the citizens of Birmingham and the factors underpinning this.

Highlights the inequalities at a high level across the city.

Draws together data from across the Council and public sector.

## Annual Director of Public Health Report

Annual independent report of the Director of Public Health on a specific topic/focus area to shine a light on an issue.



## 2. Elective Evidence Reports

### Deep Dive Needs Assessments

Structured needs assessments into a specific area/topic/community

Birmingham has an ambition for a **bolder healthier city**, becoming a city in which, every citizen can live a healthy enjoyable life.

The Community Health Profiles help us understand the gaps (health inequalities) in achieving this ambition in different communities.

The Profiles describe the health inequalities of a specific community of identity or interest or experience.





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A comprehensive review of

- Academic literature, including PubMed, Census 2011, Hospital Episodes Statistics (HES)
- Grey literature, including national, voluntary and community reports, PHE and NHS, google/google scholar and specific organisations

Health & Wellbeing data review and research synthesis according to specified health and well-being indicators

Comparator groups included the Indian, Bangladeshi, White British and Other White populations of the UK.



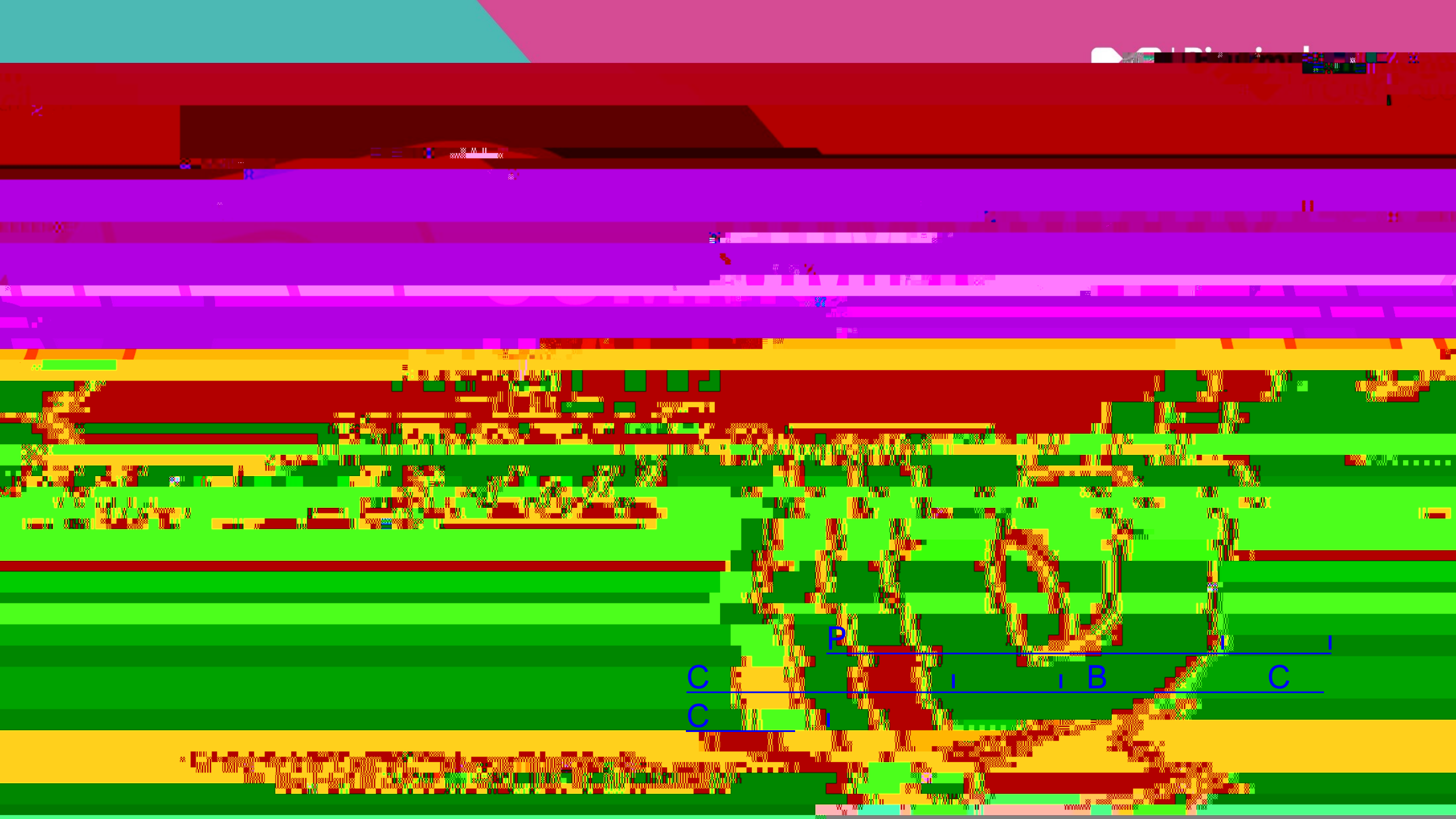
Written report & PowerPoint slide set

Published on the [BCC Communities Pages](#)

YouTube highlights video

Webinars for Pakistani community and wider partners





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The official languages of Pakistan is Urdu and Punjabi. Other languages spoken include Sindhi, Pashto, Siraiki, Balochi, Pahari-Potwari and Brahui.<sup>[1]</sup>

The majority of the arrivals of the Pakistani community to the West Midlands were before 1981.<sup>[2]</sup>

Over **96%** of Pakistanis are Muslims with majority belonging to the Sunni sect of Islam.<sup>[1]</sup>

Birmingham wards with largest Pakistani community: Alum Rock (**58.6%**), Sparkhill (**56.9%**) and Small Heath (**53%**).<sup>[3]</sup>

The UK has around **1,124,511** Pakistanis living in England and Wales.<sup>[4]</sup>



**89,981 (62%)** of Pakistanis were born in UK as 2<sup>nd</sup> and 3<sup>rd</sup> generations.<sup>[3]</sup>



Higher rates of  
childhood poverty

Childhood obesity

Lower rates of  
physical activity  
(particularly in  
women)

Greater  
prevalence of  
diabetes and  
cardiovascular  
disease

Barriers to  
accessing health  
services

Overcrowded  
homes

Low consumption  
of fruit and  
vegetables







People from the Pakistani community had a rate of 121.1 detentions per 100,000 people under the Mental Health Act.<sup>[9]</sup>

Pakistanis had a rate of **4,459 per 100,000** adults using mental health, learning disability and autism services, lower than the Bangladeshi groups but higher than the Indian community.<sup>[9]</sup>



## Barriers to Access<sup>[10]</sup>

- Language barriers
- Religious and cultural practices particularly to female treatment
- Stigma towards mental health problems and mental health services



## Obesity

- Pakistani women had a lower obesity prevalence (**28%**) than Black Caribbean (32%) but higher than Indian (20%) and Bangladeshi (17%) women.<sup>[11]</sup>





Pakistani women are the least active of all ethnicities (**40.8%**) and men are the one of the least active (**55.6%**) for at least 150 minutes per week.<sup>[13]</sup>

Rates of physical activity are slightly higher among Pakistani children (**45%**).<sup>[14]</sup>



Lack of time due to work



Feelings of vulnerability  
(especially among women)



Lack of culturally sensitive  
facilities



Poor climatic conditions



## Housing



- **13%** of Pakistani households are rented social housing.<sup>[16]</sup>
- **51%** of Pakistani families were most likely to receive state support, which was more than Bangladeshi (49%) and Indian (39%) households.<sup>[16]</sup>
- The highest rates of overcrowding were in the Bangladeshi (24%) and Pakistani (**18%**) households.<sup>[16]</sup>

## Employment and Education

- **74%** of Pakistani males and **34%** of Pakistani females are economically active.<sup>[17]</sup>
- Within the working age population in the West Midlands, of those born in Pakistan **16%** were in full-time employment and **12%** were in part-time jobs.<sup>[18]</sup>
- **46.8%** of Pakistani boys achieved a grade 5 or above in English and maths GCSE, compared to **54%** of Pakistani girls.<sup>[19]</sup>

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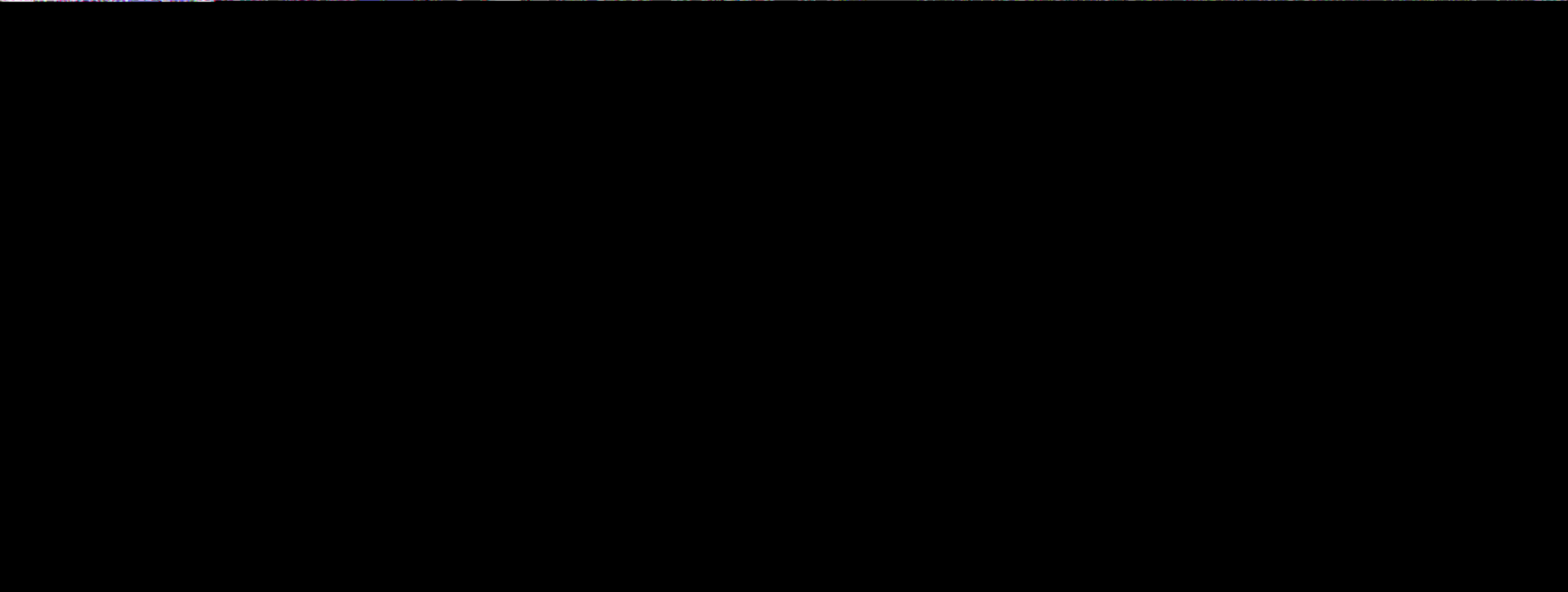












[1] Britannica. Pakistan Ethnic Composition

[2] Census 2011 Table CT0562

[3] NOMIS. DC2205EW - Country of birth by ethnic group by sex .2011

[4] GOV.UK. Population of England and Wales

[5] Office for National Statistics. Births by parents' country of birth, England and Wales 2019. 2019

[6] As displayed in The Kings Fund report: The health of people from ethnic minority groups in England based on ONS data. 2021

[7] Kelly Y, Panico L, Bartley M, Marmot M, Nazroo J, Sacker A. Why does birthweight vary among ethnic groups in the UK? Findings from the Millennium Cohort Study. J Public Health (Oxf). 2009 Mar;31(1):131-7. Pp. 133



[26] Office for National Statistics. Ethnic differences in life expectancy and mortality from selected causes in England and Wales: 2011 to 2014. 2021

[27] Platt L and Warwick R, Are some ethnic groups more vulnerable to COVID-

