

JOINT CONSULTATIVE COMMITTEE WITH ETHNIC MINORITY
ORGANISATIONS
23 SEPTEMBER 2015

(Time Not Specified - Time Not Specified)

PRESENT Councillors Councillor Edith Macauley (in the Chair),
Councillor Fidelis Gadzama, Councillor Abdul Latif and
Councillor Marsie Skeete

Councillor Joan Henry, Councillor Agatha Akyigyina, Councillor
Adam Bush
Mr Rahman, Mr Savage, Mr Sheikh, Dr Arumugaraasah, Mr
Mogan-Thorne

1 DECLARATIONS OF INTEREST (Agenda Item 1)

None

2 APOLOGIES FOR ABSENCE (Agenda Item 2)

Apologies were received from Mrs M Ahmed, Mr Hall and Mr Islam.

3 MINUTES OF THE LAST MEETING (Agenda Item 3)

The minutes were agreed.

4 MATTERS ARISING (Agenda Item 4)

There were no matters arising.

5 MERTON CLINICAL COMMISSIONING GROUP PATIENT ENGAGEMENT
GROUP (Agenda Item 5)

A representative from the Clinical Commissioning Group (CCG) was unable to attend the meeting. The CCG will be invited to a future meeting to discuss engagement with the BAME community.

6 PREVENTING DIABETES IN THE SOUTH ASIAN COMMUNITY - STELLA
AKINTAN, LBM SCRUTINY OFFICER (Agenda Item 6)

Councillor Brian Lewis-Lavender outlined the aims of the Overview and Scrutiny Task Group that has been set up to examine the prevalence of Diabetes in the South Asian community .

The task group is comprised of a small group of councillors. The panel members will look at the issue of diabetes in depth by speaking to witnesses, visiting services and receiving reports from officers. The task group will gather all the evidence and make recommendations to the Council and health partners on how best to reduce the level of diabetes in the borough's South Asian community.

Councillor Lewis-Lavender explained that Diabetes is on the rise, making it one of the NHS's biggest and most expensive challenges. Diabetes accounts for approximately 10% of the total NHS resource expenditure. This equates to £36 million per day.

South Asians are between three and six times more likely to develop Type 2 diabetes when compared to white Europeans. South Asians tend to present with diabetes at an earlier age, with an associated increase in the risk of disease-related complications.

Councillor Lewis-Lavender ended by asking 'How can we encourage more people from South Asian communities to increase their level of exercise and have a healthy diet?

There then followed a discussion and it was suggested that as it was predominantly women who cooked in South Asian households, perhaps the task group could consider holding a focus group comprised of South Asian women.

It was also noted that the older generation may be more difficult to get them to change their eating habits and cook healthier meals.

It was highlighted that lack of exercise is a problem, especially for those at home all the time.

Concern was expressed that the charitable organisations will not be able to support communities properly because the organisations have lost funding and can no longer afford to put on some of the initiatives that they previously did.

It was also commented that people have access to information but there is no will form the council to support organisations that help to promote this agenda.

Numerous representatives commented that it is not as straight forward as reducing sugar intake and being healthy because some people lead health lifestyles but still inherit the illness. Once you get the disease all that can be done is to effectively manage it.

It was suggested that the task group speak to the Ethnic Minority Centre that has been implementing healthy lifestyle programmes.

Diabetes is a complex illness that has cultural and hereditary factors. It was suggested that the title should be changed because it is not just a South Asian issue but affects other BAME communities too.

The Health Champions is a good route to help promote healthy lifestyle. Work is being done already and a concentrated effort and consistency is needed to do things well.

The JCC representatives were encouraged to give further comments to Stella Akintan.

7 FEED BACK FROM THE SAFER NEIGHBOURHOOD BOARD - ABAYEH SAVAGE (Agenda Item 7)

Abayeh Savage is the chair of the board, he reported that Stop and Search is decreasing but is still an issue for the BAME community. He explained that the SNB does not focus on petty crime but focuses on the MOPAC 7.

Abayeh was disappointed that no bids for SNB funding were submitted by BAME organisations.

Neighbourhood Watch canvassing is about to start with the aim of encouraging households to register.

It was suggested that the scrapping of Police Community Support Officers be discussed at the next SNB. It was felt that perhaps bids had not been submitted because BAME groups are frustrated with not getting their bids accepted.

Concern was expressed that some members of the community were not reporting crime because they don't have the confidence that anything will be done. Abayeh undertook to report back to the SNB.

8 BAME VOICE UPDATE - EVERETH WILLIS, LBM INTERIM HEAD OF POLICY, STRATEGY AND PARTNERSHIPS (Agenda Item 8)

Evereth Willis updated the meeting on the progress to develop BAME Voice in the borough. Initially it was envisaged that the new organisation would be launched in September, however, the steering group has not met for some time.

Evereth made an appeal for people to get involved to develop an organisation that supports the BAME community's interest well.

It was noted that part of the problem was the differing opinions on the steering group and this was hindering progress. It was felt that the steering group needs to have a mandate.

It was agreed that the launch should be done by November 2015.

9 COMMUNITY COHESION STRATEGY UPDATE - EVERETH WILLIS, LBM INTERIM HEAD OF POLICY, STRATEGY AND PARTNERSHIPS (Agenda Item 9)

Evereth Willis outlined the priorities for the refreshed Community Cohesion Strategy 2016-18 and invited comment. The JCC endorsed the timeline for the strategy and proposed priorities and local issues section.

10 ANY OTHER BUSINESS (Agenda Item 10)

Dr Arumugaraasah made an appeal for support for the South London Tamil Welfare Association because it can no longer afford to run some activities, particularly health activities for older people. Evereth undertook to make enquiries regarding Adult Social Care funding, however Merton Voluntary Services is the starting point. Abayeh undertook to support Dr Arumugaraasah.