

# Tailoring Communication Strategies towards Minority Groups to Improve Engagement with NHS Services

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# Overview

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- Analysis
- Deconstruction
- Rebuilding

# Analysis

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1. Internal – as an organisation? (Culture, People and Processes)
2. External – who are the audience?
3. Environment – what is happening in society today?
4. Current Interactions
  1. Do we understand who?
  2. How effective are our current methods? And who said they were good?
  3. Do we engage or inform? Public notice board?

# Black and South Asian

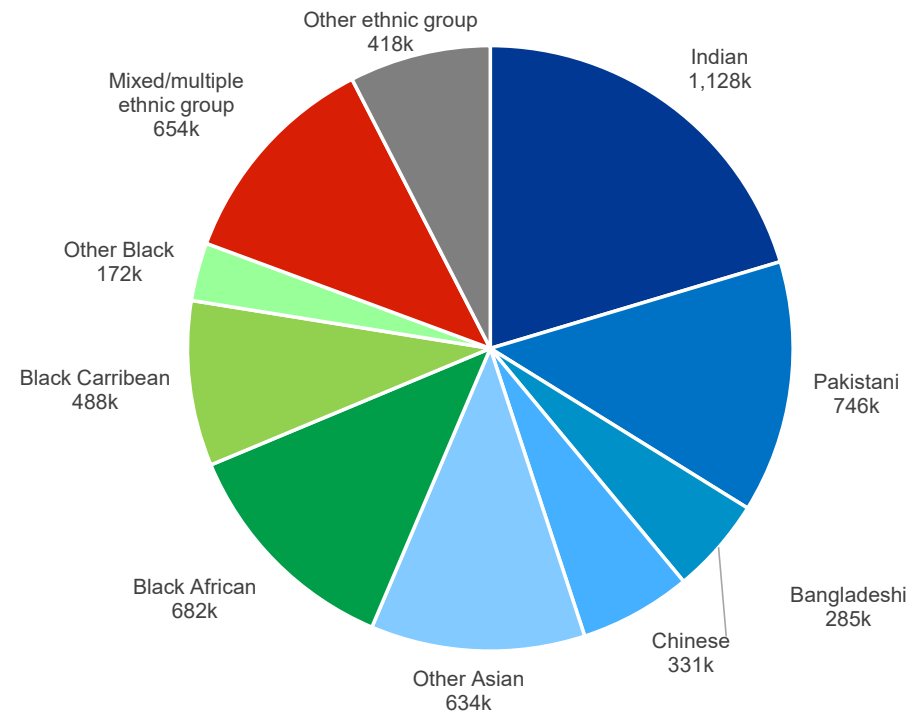
## Black (1.3m)

- Black African 682k
- Black Caribbean 488k
- Black other 172k

## Asian (2.1m)

- Indian 1.2m
- Pakistani 746k
- Bangladeshi 285k

BAME Adult 16+ population size - England



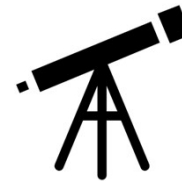
# Recognising the need for a different mindset



Personal relevance is the key to engaging new audiences



Earning trust, both in what we do and who we partner with



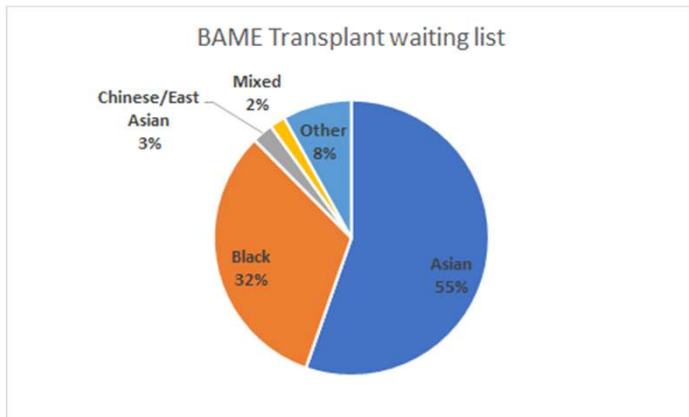
Monitoring global news for **connected reference points**



Design campaigns to drive **word of mouth**

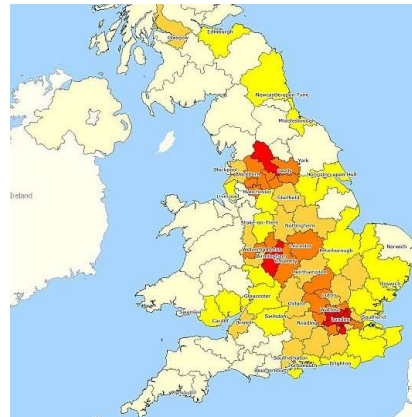
# Identifying clearer focus areas

## 1. Clinical need – Black and South Asian communities



**South Asian** – Indian, Pakistani, Bangladeshi  
**Black** – Caribbean, African

## 2. Geographical focused engagement activities



## 3. Motivations and barriers to giving stem from faith

Actively pursue further engagement opportunities with predominantly Indian Hindu and Sikh communities



22% of all Muslims have opted out on the ODR, highlighting the need for further engagement to embed the Fatwa



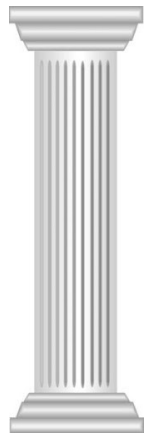
Whilst Black churches represent a supportive faith partner, there is significant work required to build trust



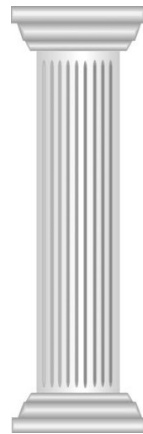
# 3 Pillars of Engagement

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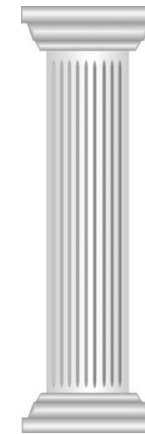
National -  
Faith



Local-  
Place



Commercial  
Community



Working and commissioning trusted partners to create tailored messages that 'land' well

# Any further questions?!

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