

# JSNA Health and Wellbeing Profile 2023/24

## Migrant Health Needs

### Summary points

- 18.8% or 1 in 5 of the population of Bristol were born outside the UK in more than 185 different countries. Out of a local population of 472,465 people, approximately 89,000 were born outside the UK.
- The largest single country of birth for migrants in Bristol is Poland (8,770 people), followed by Somalia (4,654 people) and India (4,381 people).

### Findings

Figure 1 shows Census 2021 data for the number of people living in Bristol from the top 10 most common places of birth, excluding UK countries. 8,770 people reported they had been born in Poland, 4,654 in Somalia, 4,381 in India, 3,782 in Romania, 3,616 in Spain (including Canary Islands), 3,586 in Pakistan, 3,123 in Italy, 2,638 in China, 2,594 in Jamaica and 2,430 in Ireland.

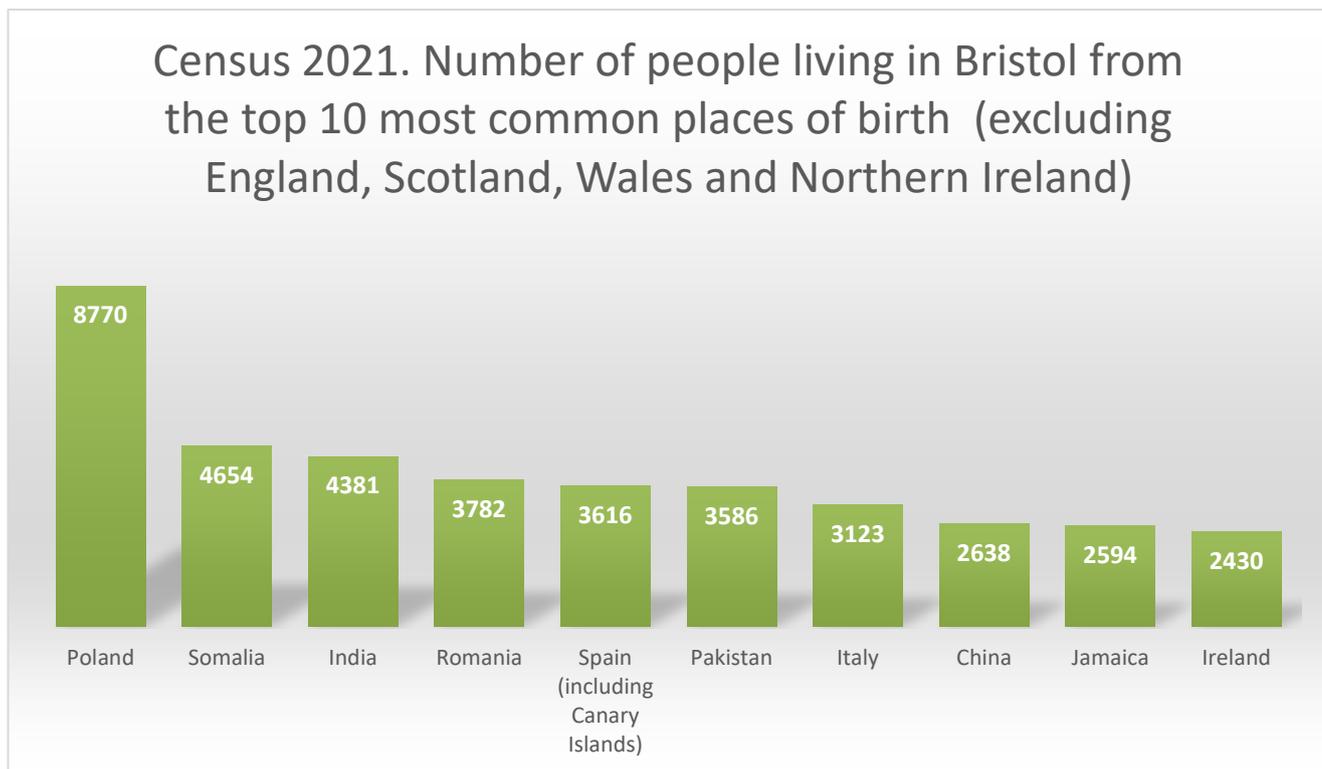


Figure 1: Number of people living in Bristol by country of birth. Source: Census 2021

Figure 2 overleaf displays the data from Census 2021 of the number of Bristol respondents who selected each main language, excluding those who chose 'English'.

11,322 people selected 'Any other European languages', 7,017 Polish, 4,157 African languages, 3,858 Spanish, 2,918 Mandarin, Cantonese and other Chinese languages, 2,330 Arabic, 1,745 Portuguese, 1,655 Any other South Asian languages, 1,645 French, 1,544 Urdu, 1,446 West or Central Asian languages, 1,363 Any other East Asian languages, 1,155 Panjabi, 834 Bengali (with Sylheti and Chatgaya), 744 Russian, 598 Other European languages (non-

EU), 549 Turkish, 411 Gujarati, 371 Tamil, 300 Any other languages (including sign and supported languages) and 275 'Any other UK languages'.

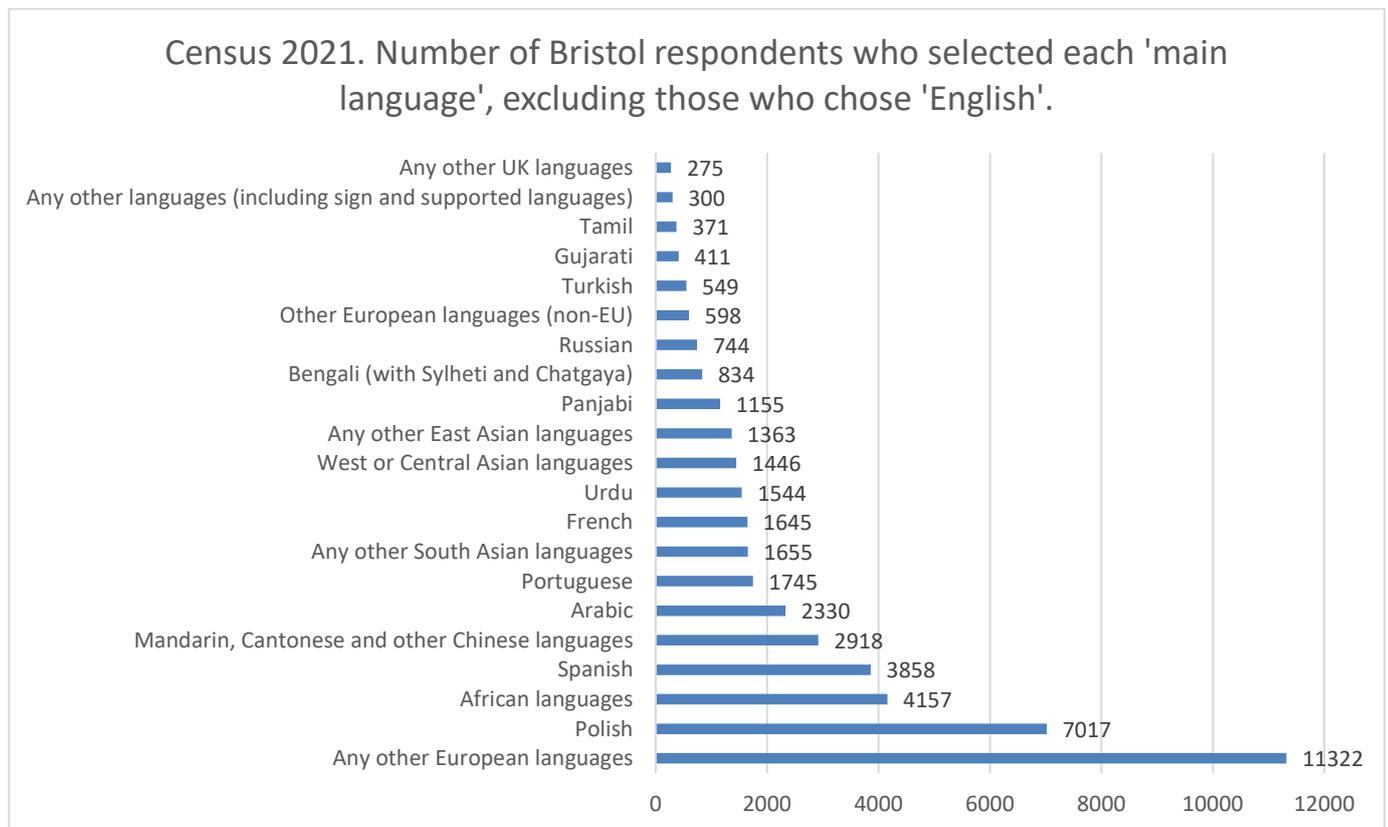


Figure 2: Main language of people living in Bristol (excluding English). Source: Census 2021

The health of migrant people living locally is influenced by a wide range of individual and societal factors. These include life experiences and exposures to disease in the country of birth and during their journey to Bristol. Often, it is the younger members of a community who can travel for employment, family, or study and these migrants tend to have better health (on average) than people born in the UK. However, the age and health status of people who have fled violence and persecution in their country of birth is mixed and they may experience worse health outcomes than the UK average (The Migration Observatory , 2020).

Figures 3 and 4 overleaf show Census 2021 data for self- reported levels of health of residents in the local Integrated Care Board (ICB) area of Bristol, North Somerset and South Gloucestershire by broad continent of birth or UK country of birth.

Of people born in parts of Europe other than the UK and living in Bristol, North Somerset and South Gloucestershire, 91% reported good or very good health and 2% bad or very bad health. For those who were born in Antarctica and Oceania (including Australasia) 91% reported good or very good health and 2% bad or very bad. For those born in African countries, 87% reported good or very good health and 3% bad or very bad. Of Middle East and Asian born respondents 85% reported good or very good health and 4% bad or very bad. Of respondents born in the Americas and Caribbean 84% reported good or very good health and 5% bad or very bad health. 83% of respondents born in England reported good or very good health, similar to

responses from those born in Ireland (82%) Wales (81%). Of respondents born in all three of these UK countries, 5% reported bad or very bad health.

Respondents from Scotland were least likely to report good or very good health with only 79% selecting one of these. Scottish born people living locally were also most likely to report bad or very bad health; 6% selected one of these.

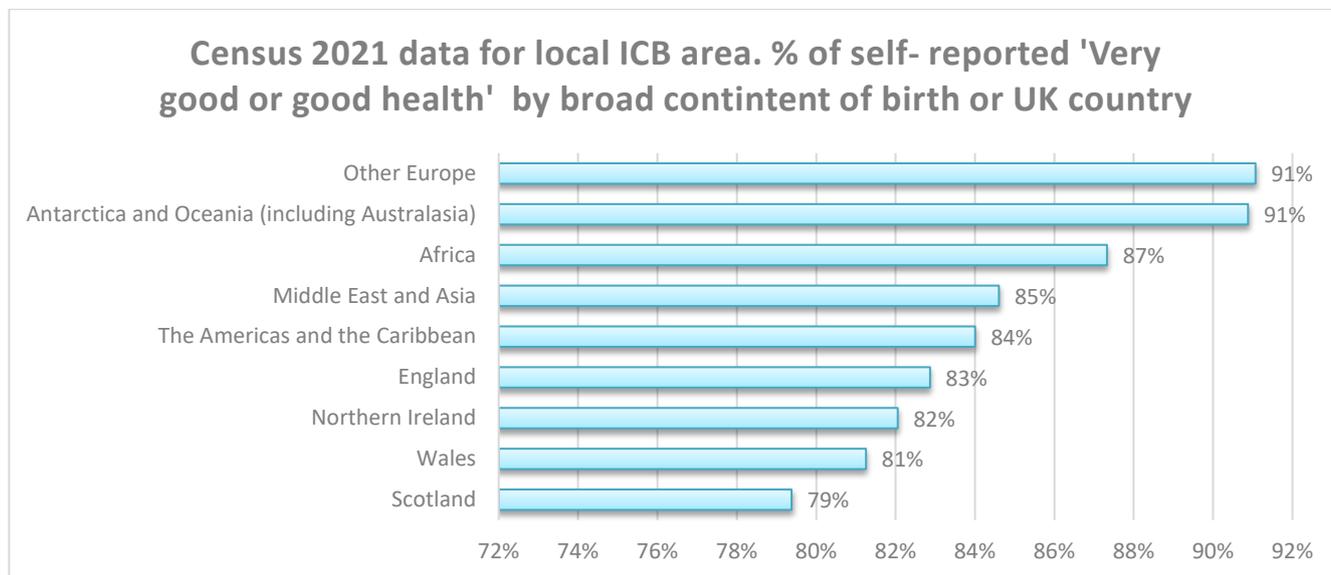


Figure 3: % people self-reporting they are in good or very good health by country of birth. Source: Census 2021

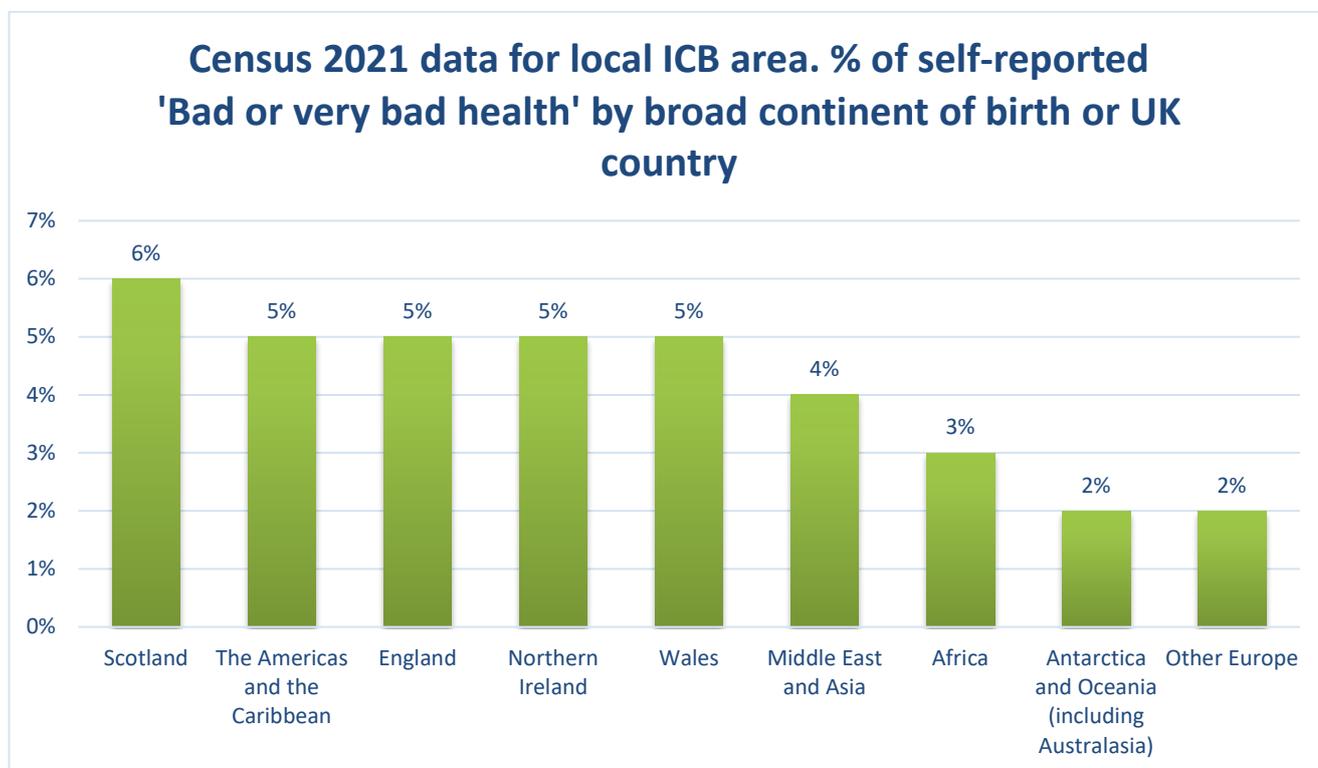


Figure 4: % people self-reporting they are in bad or very bad health by country of birth. Source: Census 2021

### Health considerations for people from Poland

- Screening for Hep C as there is a higher prevalence in Poland than in the UK
- Checking that the individual has been immunised against typhoid.

(Public Health England, 2016)

Various data sources suggest that smoking prevalence amongst people from Poland may be as high or higher than that of the Bristol population average.

Women in Bristol were less likely to report they smoke than men (13.3% vs.19.5%) in 2021 (Annual population survey data via local tobacco control profiles).

Similarly, levels of smoking in Poland surveyed in 2019 were reported as 14.1% for women and 20.8% for men (Statista, 2019). However, a cross sectional study of 1,090 individuals in Poland found higher smoking rates of 27% for women and 31% for men (Jankowski M, 2022).

Annual Population Survey data on smoking for the population of England is available by some countries of birth. Respondents living in England who were born in Poland were far more likely to report that they smoke (20.8%) than those born in England (12.8%) (Office For Health Improvement & Disparities , 2022).

### Health considerations for people from Somalia

- Higher risk of having contracted TB, Hep B and Hep C so screening is advised.
- Pregnant women should be screened for Hep B and if positive their babies should be immunised.
- GPs are asked to be alert for symptoms of Polio, Malaria and helminth infection.

(Public Health England, 2019)

Consideration should be given to the health impacts of Female Genital Mutilation on women and girls from Somalia and local and national guidance followed.

### Health considerations for people from India

- Infectious disease:
  - higher risk of having contracted TB (which may be multi-drug resistant), so as well as initial TB screening GPs are asked to maintain long term vigilance for symptoms of TB even if the initial screening is negative.
  - The rate of Hep C is higher in India, so GPs are advised to screen for this.
  - Pregnant women should be screened for Hep B and if found positive their babies should be immunised.
  - Some parts of India harbour mosquitos that infect people with Malaria, so unwell patients should be tested if they have arrived in the last year from an infected region.
  - GPs should also be aware that there is a risk of helminth infection in India
- Nutritional and metabolic concerns
  - Anaemia

- Vitamin d deficiency.
- Reproductive health – higher numbers of children born per woman over the course of her lifetime and lower levels of contraception use.

(Office for Health Improvement and Disparities , 2023)

### **Health considerations for all newly arrived migrants**

Primary Care providers are asked to check new arrivals for illnesses and infections that are more common in the country of origin than in the UK, and for infections that they may have picked up during their journey. Consideration is also given to whether strains of disease found in the country of origin are resistant to antibiotics (Office for Health Improvement and Disparities , 2021).

### **Understanding the UK healthcare system**

People who are new to the UK may need support to understand how to UK healthcare systems work and how these compare to those they have been used to (Office for Health Improvement and Disparities , 2021).

### **Infectious disease**

Ensure that patients are up to date with the UK immunisation schedule (Office for Health Improvement and Disparities , 2021).

### **Language support**

Language support is important to providing good healthcare. Communication barriers may be overcome by using language interpreters and translators (Office for Health Improvement and Disparities , 2021).

### **Covid-19 impact:**

There is a higher risk from coronavirus to people born in South Asia (including India). This is mainly due to the high prevalence of type 2 diabetes (The Migration Observatory , 2020).

### **Further reading**

- Checklists for GPs when assessing new patients:  
<https://www.gov.uk/guidance/assessing-new-patients-from-overseas-migrant-health-guide#checklist-for-assessing-migrant-patients>
- Resources are available from Doctors of the World:  
<https://www.doctorsoftheworld.org.uk/what-we-stand-for/supporting-medics/resources-and-training/>
- The Right to Care report is available here:  
<https://www.doctorsoftheworld.org.uk/publications/>

### **References**

Cambridge Dictionary , 2023. *Cambridge Dictionary*. [Online]

Available at: <https://dictionary.cambridge.org/dictionary/english/migrant>

[Accessed 28 Septmeber 2023].

Jankowski M, O. A. S. R., 2022. *The Prevalence of Tobacco, Heated Tobacco, and E-Cigarette Use in Poland*.

[Online]

Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9031359/#B11-ijerph-19-04904>

[Accessed 28 September 2023].

Office For Health Improvement & Disparities , 2022. *Local Tobacco Control Profiles*. [Online]

Available at: [https://fingertips.phe.org.uk/profile/tobacco-](https://fingertips.phe.org.uk/profile/tobacco-control/data#page/7/gid/1938132886/pat/6/par/E12000009/ati/402/are/E06000023/iid/92443/age/168/sex/4/c)

[control/data#page/7/gid/1938132886/pat/6/par/E12000009/ati/402/are/E06000023/iid/92443/age/168/sex/4/c](https://fingertips.phe.org.uk/profile/tobacco-control/data#page/7/gid/1938132886/pat/6/par/E12000009/ati/402/are/E06000023/iid/92443/age/168/sex/4/c)  
[at/-1/ctp/-1/yr/1/cid/4/tbm/1/page-options/ine-ao-1 ine-vo-0 ine-yo-1:2021:-1:-1 ine-pt-0 ine-ct-52](https://fingertips.phe.org.uk/profile/tobacco-control/data#page/7/gid/1938132886/pat/6/par/E12000009/ati/402/are/E06000023/iid/92443/age/168/sex/4/c)

[Accessed 13 October 2023].

Office for Health Improvement and Disparities , 2021. *Assessing new patients from overseas: migrant health guide*. [Online]

Available at: <https://www.gov.uk/guidance/assessing-new-patients-from-overseas-migrant-health-guide#checklist-for-assessing-migrant-patients>

[Accessed 28 September 2023].

Office for Health Improvmenet and Disparities , 2023. *India: migrant health guide*. [Online]

Available at: <https://www.gov.uk/guidance/india-migrant-health-guide>

[Accessed 28 September 2023].

Public Health England, 2016. *Poland: migrant health guide*. [Online]

Available at: <https://www.gov.uk/guidance/poland-migrant-health-guide>

[Accessed 28 Septmber 2023].

Public Health England, 2019. *Somalia: migrant health guide*. [Online]

Available at: <https://www.gov.uk/guidance/somalia-migrant-health-guide>

[Accessed 28 September 2023].

Statista, 2019. *Proportion of smokers in the population*. [Online]

Available at: <https://www.statista.com/statistics/236594/proportion-of-smokers-in-the-population/>

[Accessed 17 October 2023].

The Migration Observatory , 2020. *The health of migrants in the UK*. [Online]

Available at: <https://migrationobservatory.ox.ac.uk/resources/briefings/the-health-of-migrants-in-the-uk/>

[Accessed 28 September 2023].

**Date updated:** October 2023    Kate Cooke, Senior Public Health Specialist.

**Next update due:** October 2024