

Mile in My Shoes: Shahid's story

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Health inequalities often are not caused by one thing. They often cluster together. So, if you have high rates of poverty, you end up with having higher rates of takeaways moving into those spaces which then adds to the diabetes problem and adds to sedentary behaviour problems. And then you've got things like high levels of older vehicles which are highly polluting, which don't help with the air quality matters which has a big impact on things like stroke and heart attacks and various other lung conditions. So, the idea is that we should think about those things in a cluster, but also think about how do you improve each one, with a view that, if you improve things for lots of people, overall, you'll improve everybody's health.

I'm Shahid Islam. I'm a Principal Research Fellow at the Bradford Institute for Health Research. I'm also the Vice-Chair for Bradford 4 Better, a new grassroots organisation which tries to find ways to instigate community action for things that matter to Bradfordians.

Bradford is, I'd say, unfairly depicted in the media in a really negative light. It's described, you know, in really derogatory terms by people who have never been here. But those of us who live here, it's a city which has got massive potential. I mean, if you look where we're located, we've got brilliant countryside on either side of us and it's a very young city. So outside of London it's one of the youngest cities in UK from what I understand. But it's also worth saying that we have high levels of health inequalities here. If you caught a bus from Burley in Wharfedale, which is about eleven-ish miles from here, and you ended up towards the centre of town, for every mile you were travelling you're losing one year in life expectancy.

One of the big problems with research is it's considered like an elitist subject where people who've had to go through the PhD route and got into a top, you know, academic institution come in. And that's fine, that's fine, you know. Some people do take that route to get in. But communities sometimes already have solutions to problems. So, we ask for help from communities to help us collect data, so they can then look at things like green spaces and road traffic and congestion and indoor air quality. And also help us shape what the questions must be. So, if those questions that we thought of which would be really helpful may not be the same questions that communities think of.

So, we found that a better way to engage with communities is to not burden them with really convoluting and, you know, like complicated jargon. But bring it to them in some artistic form so they can sketch their ideas, and they can sort of show you what some of the issues might be. So that helps people who may not find it easy to sit round the table and meet academics. But it makes it easier for those people who, you know, like a conversation, like a cup of tea and would be happy to sketch and draw their ideas.

When we were doing the research around Clean Air Zones for Bradford - at the time, Bradford was one of the most, about 30 other local authorities which was mandated to reduce its levels of outdoor air pollution. Through our patient and public involvement work we displayed the four different kind of Clean Air Zones that are available and says, 'Okay, let's draw and scribble and chat about the causes and consequences of air pollution, and what would be a good way to tackle this, given that these are the four Clean Air Zones.'

So, we drew these out on four big charts. And people added all sorts of ideas through the sketching format. We made sure that it was people who were living in the areas which had the highest amounts of air pollution. In the end, it made us decide that we should go for a Clean Air Zone which wasn't likely to hit people in their pockets, and that is the one that Bradford went for in the end. And it turns out it was quite successful, you know, levels of air pollution have dropped quite a lot in Bradford and people - ordinary people - haven't been out of pocket as a result of it.

Bradford 4 Better started just before the pandemic. And we came together with one vision which was, how can we do something to bring communities together. Too often we just say, 'Oh, it's the local authority, they're not doing anything.' Or 'It's the police.' And we created hyperlocal WhatsApp groups, 20 different ones now, for different postcode areas, to try and fix it a little bit. And so, things like, 'Let's get a litter-picking group going.' We shared that with the other groups, and everybody says, 'We better do the same.'

So, before you know it, you've got groups of people who were litter picking. And then whilst they're out there picking litter, they're getting to know each other. So that builds social capital, cos the more you know your neighbours, the better it is, because the more you look out for each other. As a result of that, people are on these groups talking about local issues that matter to them. And then, the Councillors are added to those groups, WhatsApp groups, so they can see what the hot potato topics are and then they can go and represent their constituents at council electoral level.

So, one of the big issues, I'll just give you one example. BD5 is - it's an area which is very close to the town centre. It's a fairly multi-ethnic area with high levels of deprivation. And it's almost impossible to get a GP appointment. So that was a big thing for everybody in the BD5 area which is always in A&E. So, a short report was created by the people in BD5 area, and they highlighted what the challenges were. You know, you just can't get through to the phone. When you get through, there are no appointments. You try the next day, the same thing. So, you end up going to A&E. That's costly to NHS and it's not good for people's health. And if you miss an important health check as a result of it, it's really, really costly. You might end up with some major health problem that you didn't know about, and nobody picked up. So, they're the kinds of like, very, I'd say grassroots issues feeding into services which have come about through Bradford 4 Better.

I didn't come through the traditional PhD route. I've always considered myself as more of a community activist than a research academic. And I use the research as a vehicle for my community activism.

I was born in Pakistan, and I came here as a two-year-old. So, I remember nothing other than Bradford. Like most people in my class and in school, I didn't do too well at school. And then I went to work in a greeting card factory and that was - some hard toil. And I realised this is not the life that I really want. So, I went back and resat everything that I needed to sit. In the end you, know, got Masters with Distinction. And I looked at what opportunities are available to me to really help others. So, I did a Masters in Social Work and Social Welfare. And I was energised by the idea that, if I can make use of my career and time to sort of, help others then that would be a life well lived. And so, I ended up helping communities sort of really influence how they can improve their own health and wellbeing. And - and influence how services should be run.

I was in a wedding recently where I was sat next to a guy who I didn't know too well, I didn't know of him. And when we introduced ourselves properly, he says, 'Oh, ever since you shared all the work about litter picking and tree planting, we actually took the same thing to our area, and it's really helped us.' They're the stories that I really like. I'm not that interested in citations and all these other things, I'm interested in people's stories about changes that they've made. And I try and store that somewhere as, on a day when I'm not feeling great, I look at them and think, 'Yeah, this does make a difference.'