How Born in Bradford uses your data

Why does Born in Bradford collect personal information like sex and ethnicity?

Born in Bradford was established in 2006 as a positive force for change in Bradford to improve health and tackle inequalities. Our vision is for a healthier, happier and fairer future for all children, young people and families. Our research model is 'people-powered' and we work closely with communities and local authority, health, education and voluntary sector providers across Bradford district to set research priorities and subsequently co-produce, implement and evaluate ambitious programmes to improve population health and reduce inequality.

Where people are born, live, and work, all affect their health and wellbeing. Sometimes people face discrimination based on their sex, ethnicity, financial or other circumstances. Together researchers call these the "social determinants of health". These social determinants are often the main cause of poor health. These determinants usually overlap with each other meaning that a person's health is likely to be influenced by both their sex and their ethnicity, their income, and their family situation in different ways. For example, White British boys are most likely to be physically active - meaning that they are the least likely of all children to be overweight, but they are also more likely to smoke or vape , which puts them at greater risk of lung and other conditions.

This is why it is important for BiB to collect information on characteristics including sex, ethnicity and financial circumstances and why we have been doing this since 2007 - it allows us to identify ***who*** needs support with a particular issue, ***what*** that support should look like, and ***where*** that support should be delivered. It is important to us that when we describe these characteristics in our work we do so with respect to the communities who have so kindly given their time to be part of our project.

Why does BiB compare ethnic groups in its research?

Bradford's rich ethnic diversity makes it one of the best places in the world to understand the health and wellbeing of families living in Britain who have an ethnic minority background. Most research in the UK has overlooked these populations. This means that a lot of services and interventions are designed using research on the majority White British population. These services might not be as accessible, or as effective, for families from other ethnic backgrounds.

By comparing the experiences of different ethnic groups we can show where these services are unfair, and we can develop solutions that do work for different communities, and that are based on their specific needs. For example:

- Smoking during pregnancy – smoking in pregnancy means that a baby is more likely to be born small, and is at more risk of sudden-infant-death-syndrome (SIDS; previously known as cot-death). In BiB we have shown that pregnant women from White British and Central/Eastern European ethnicities are more likely to smoke during pregnancy than women from South Asian backgrounds. However, these South Asian mums might be at risk of 'passive smoking' - breathing in smoke from others who smoke in the house. This information has allowed services to support families in the ways they need (smoking

cessation services for those mums from White British and European communities, and wider family support for the South Asian communities).

BiB also continues to learn a lot from the positive health and development outcomes of different ethnic groups, meaning we can develop better solutions for everyone. For example:

- children living in larger households are less likely to have language delay, and mums with a strong faith and/or good social support are less likely to have depressive symptoms. These findings have helped BiB to shape services and local policies to improve health for everyone.

By recognising the importance of ethnicity alongside other factors like income and family life, Born in Bradford is helping to build knowledge that is inclusive, culturally relevant and globally significant, turning diversity into better health and wellbeing for families everywhere.

How does BiB keep this personal information safe?

We understand that collecting and using sensitive personal data comes with a great responsibility to protect this data from being misused. We take the safety of all participants' information seriously. Everything is kept in secure databases, accessible to very few people, with strict rules about who can access which data. Participants names and addresses are never revealed. If there's even a risk that a person could be identified (because of a rare medical condition, for example) we have clear steps to make sure this won't happen. We do share anonymous data with external researchers, but every request is scrutinised by senior researchers in the BiB Executive team. We will only share sensitive personal data where there is a good scientific reason to do so, and where we are assured that it will be used for to turn diversity into better health and wellbeing for families. More information on how we collect, store and use data can be found https://borninbradford.nhs.uk/privacy-policy/ .