



Understanding the health needs of the
Arab community

Full reports and additional resources can
be found on the [Community Health](#)

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Arab ethnic group included in top 20 ethnic group categories within the 'Other' subgroup:

Arab

Any other ethnic group

Data that are relevant to the experiences of Arab people may include:

Country of Birth

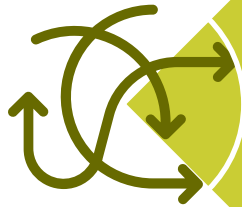
Length of Residence in UK

English Proficiency





People from Arab ethnic group often categorised under 'Other' ethnic group category



Inconsistent use of ethnic group categories inhibits efficient analysis of health and wellbeing needs



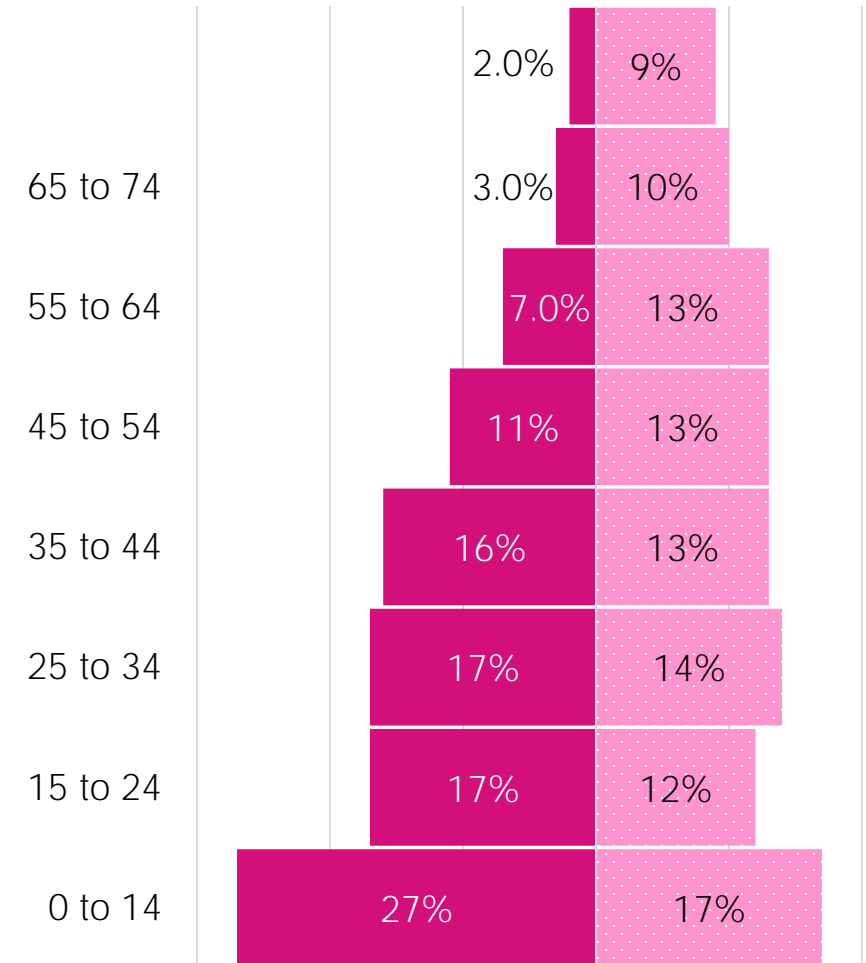
data from GP patient survey (GPPS) and Health Survey for England (HSE) have not been adjusted

46,391 (4.1% of the total population)^[1]

92% of Arabs identify as Muslim

Large young population– with 27% of Arabs 14 and under, and 53% under 25 years old

58% identify as 'British Only' (63% Birmingham average). 35% identify with a 'non-UK identity only'



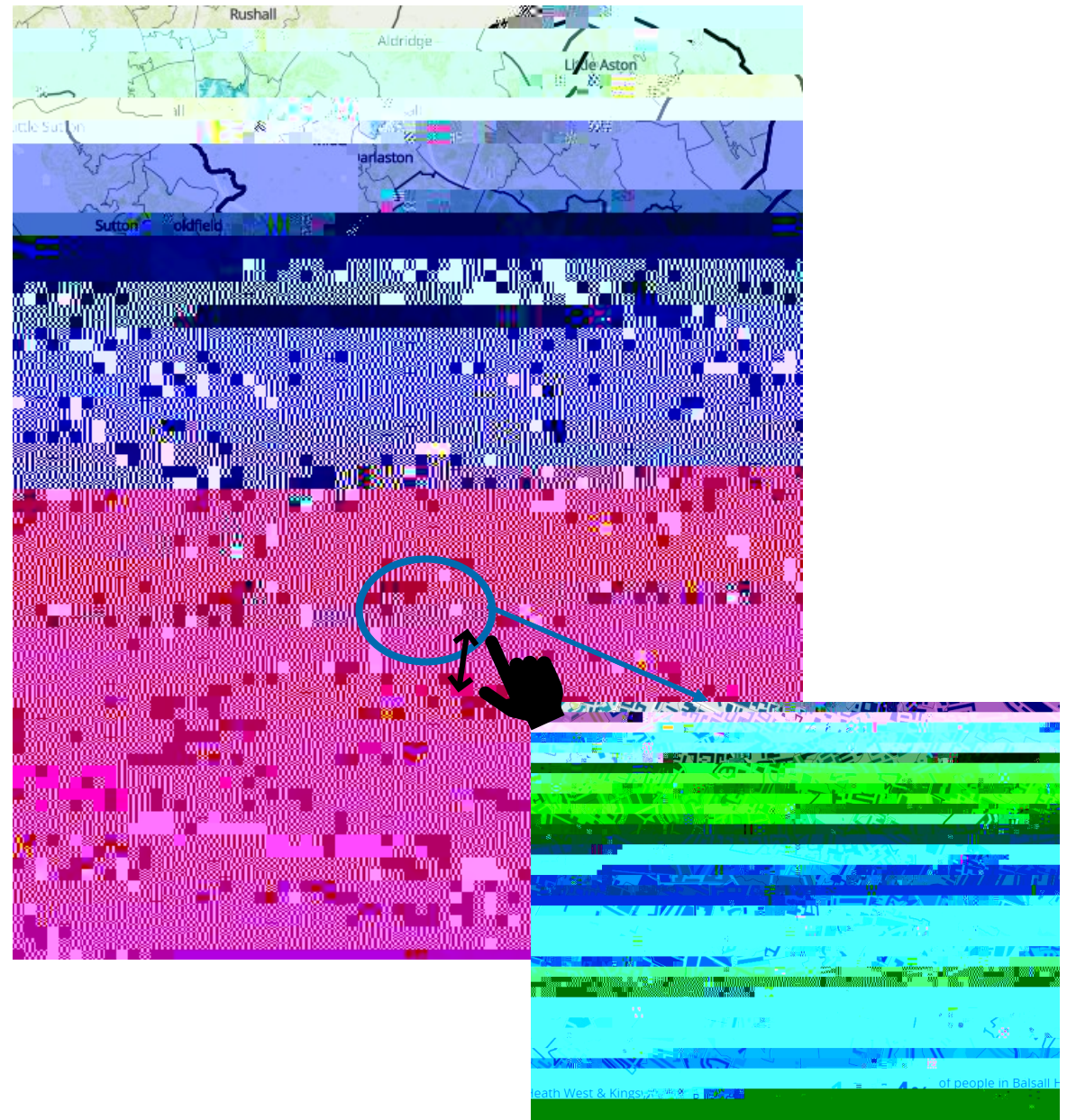
[Census mapping tool](#): ethnic group available to output area (OA)^[2]

MSOA density of Arab ethnic group ranges from <0.1% to 16.4%

Ward by population density:

1. Balsall Heath West (15.1%)
2. Sparkbrook and Balsall Heath East (8.2%)
3. Bordesley and Highgate (5.6%)

2,238 people in Sparkbrook & Balsall Heath East were Arab



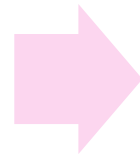
Total Fertility Rate (TFR) (2011):
3.9 women born in North Africa;
2.6 women born in Middle East
(1.5 UK-born).



In a cross-sectional study of UK adults (n=132,597), 20% of people from Arab/Other ethnic groups were current smokers (18% study average).^[6]

The odds of e-cigarette use for cutting down and temporary abstinence from cigarette use was 42% lower among those of Arab/Other ethnicities (OR 0.58, 95% CI 0.40 to 0.83) compared with those of White ethnicity.^[6]

Between 4% to 12% use reported in Arab countries



Practice associated with lung cancer and COPD



Users typically viewed shisha as less harmful and addictive than cigarette smoking



Limited information on obesity prevalence of Arab population in UK.

International data from 2011 suggested overweight and obesity prevalence to range from 25% to 38% in men and 28% to 83% in women in Arab countries.^[8]

Obesity contributors: genetic predispositions, lack of physical exercise, and food culture and diet.

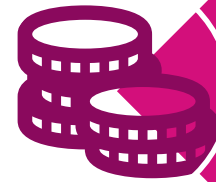
BMI has limitations such as no consideration for ethnicity, age, sex or stage of development

Suggested that for Arab adults, BMI threshold for obesity should be set to 26.6 kg/m² due to the increased risk of diabetes at lower BMIs than people from White ethnic groups.^[9]



In England, 52% of people from Arab ethnic group were 'physically active' (62% all adults in England)

High rates of physical inactivity (<30 mins/week) among Arab (35%) populations compared with people from other ethnic groups



Access to easy and affordable physical activity resources



Religion and culture



Awareness of physical activity programmes and facilities

37% of people from Arab ethnic group in Birmingham lived in a household classified as deprived under the 'housing' dimension in the 2021 census (11% White British).^[1]

Standardised measure of health-related quality of life (e.g. mobility, self-care, pain or discomfort, anxiety and depression)

Outputs in study ranged from 0 (value of death) to 1 (perfect health)

Health inequalities were apparent in all ethnic groups other than White British

Arab men () and women () in England experienced than White British men (0.77) and women (0.75).

Increased prevalence of long-term conditions or multimorbidity

Poor experiences with primary care

Insufficient support from local services

Low patient self-confidence

Social deprivation compared with White British group



Team members



- [1] [Office for National Statistics Custom Data Tool](#)
- [2] Office for National Statistics (2023). [Census maps](#)
- [3] Office for National Statistics (2021). [Parents' Country of Birth](#)
- [4] Al-Rifai RH, Abdo NM, Paulo MS, Saha S, Ahmed LA. Prevalence of Gestational Diabetes Mellitus in the Middle East and North Africa, 2000- 2019: A Systematic Review, Meta-Analysis, and Meta-Regression. *Diabetes*. 2021;12:668447
- [5] Bawadi H, Al-Hamdan Z, Ahmad MM. Needs of Migrant Arab Muslim Childbearing Women in the United Kingdom. *Journal of Health, Behavior, and Society*. 2020;31(6):591-7.
- [6] Beard E, Brown J, Jackson SE, Tattan-Birch H, Shahab L. Differences between ethnic groups in self-reported use of e-cigarettes and nicotine replacement therapy for cutting down and temporary abstinence: a crosssectional population-level survey in England. *BMJ*. 2021;116(9):2476- 85.

[7] Aki EA, Gunukula

[12] Watkinson RE, Williams R, Gillibrand S, Sanders C, Sutton M. Ethnic inequalities in COVID-19 vaccine uptake and comparison to seasonal influenza vaccine uptake in Greater Manchester, UK: A cohort study . 2022;19(3):e1003932

[13] Watkinson RE, Sutton M, Turner AJ. Ethnic inequalities in health related quality of life among older adults in England: secondary analysis of a national cross-sectional survey. 2021;6(3):e145- e54

[14] Ministry of Housing Communities & Local Government (2019). [English indices of deprivation](#)