

Exploring the Contribution of Multidisciplinary Research to the Social and Cultural Graph of **Pakistan**

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Abstract:

This paper explores the contribution of multidisciplinary research to the social and cultural graph of Pakistan. The research considers the impact of various disciplines, such as sociology, anthropology, history, economics, and political science, on the development of Pakistan's social and cultural landscape. The paper examines the implications of multidisciplinary research for understanding the complex web of relationships between different social groups in Pakistan, as well as the impact of various research methods on the formation of Pakistan's social and cultural graph. Additionally, the paper discusses how multidisciplinary research can be used to inform policy decisions and contribute to a better understanding of Pakistan's social

Keywords:

Cultural landscape, Cultural Graph of Pakistan.

Introduction:

Bristol Health Partners, Bristol, North Somerset and South Gloucestershire Integrated Care Board (BNSSGICB) has been awarded funding from NHS England to participate in health and care research. The number of people from disadvantaged communities can be increased.

It is one of 17 ICBs to have received £1.7 million from NHS England's Integrated Care Systems Research Network Development Programme.

By increasing the diversity of people involved in research, responding to their needs and changing the way research is conducted, BNSSGICB and partners aim to help reduce health disparities in the region, and to ensure that as many people as possible know about the services, and can access them when they need them.



The Covid-19 Pandemic Has Raised Health Inequalities

Literature Review:

The new Healthy Together research engagement network will be led by an increasing diversity of organizations and community groups from the region's voluntary, community and social enterprise sectors. Work is now underway with partners to develop a network that will bridge the gap between researchers and marginalized communities in the long term. It will first focus on addressing race-related inequalities in health and care research.

People living in the most deprived areas of Bristol, North Somerset and South Gloucestershire live 15 years less than people living in the least deprived areas in good health. Deprivation disproportionately affects some black, Asian and minority ethnic communities. Issues such as discrimination make this worse, and these groups are more likely to report poor health care experiences that often lead to worse outcomes.

For example, in the BNSSG region, pregnant women from black, Asian and minority ethnic groups, as well as those in more deprived areas, are more likely to experience poor birth outcomes. Influenza and Covid-19 vaccine uptake is lower in more deprived areas and in more ethnically and linguistically diverse communities, even after accounting for deprivation. Lack of trust and poor experience with health services plays a major role in this. [i]

To make health and care provision equitable, different people and communities require different approaches and levels of resources to meet their needs. There is an urgent need to work to increase partnership work and build trust with the most affected communities and groups to better understand barriers to improving access to and access to services and They can be removed.

At the BNSSG, there are many examples of projects where researchers are codeveloping health and care research alongside Indigenous peoples, including:

Dementia: South Asian people are more likely than white British people to be diagnosed with dementia at a later stage, when their symptoms are worse. They are therefore less likely to be prescribed medication or receive prescribed treatment. The researchers worked with South Asian communities at the BNSSG to explore the challenges faced by patients and their families or caregivers, ranging from awareness of the condition. Until his medical diagnosis, and why help after the diagnosis. This resulted in the development of a new online toolkit of culturally appropriate resources, designed to assist healthcare professionals in supporting people of South Asian heritage living with dementia. Is.

Analysis:



Sexual health: A disproportionate number of people of African and Caribbean heritage living in Bristol are unaware they are HIV positive, and are only diagnosed when their infection progresses and they become seriously ill. . Community members are working with researchers, sexual health professionals and the HIV charity Bergstowe to reduce HIV stigma, increase HIV testing and sexual health care in their communities. Design and deliver targeted approaches to address access to care issues.

These projects are great examples of how working in partnership with diverse communities is improving health and care in those communities. This funding from NHS England should enable rapid progress across commissioning, primary care, social care and public health to enable research practice and culture to be more inclusive and meet the needs and aspirations of diverse communities. could

Munira Chaudhary, Head of Equality, Diversity and Inclusion (EDI) at North Bristol NHS Trust and EDI Chair at the BNSSG Integrated Care Board, says:

"Participating in health and care research is a great opportunity for people to provide direct benefits to the communities they belong to. We already have examples of inspiring and important work, but our region For many communities, research is not providing the opportunities, benefits and experience they need to make lasting change.

Conclusion:

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