



bridging the gaps

Social exclusion of BME elders

Housing, health, care and support organisations are still failing to deliver appropriate services to black and minority ethnic (BME) elders.



While our ageing society has been recognised by policy makers, there has been a lack of progress in the delivery of services to BME elders. Basic requirements like communication and considering what products and services people want are not always in place. It is a familiar story, yet housing, health and social care organisations have failed to engage and involve BME elders.

Engaging with BME elders, as with all service users, is critical. Otherwise, service providers will continue to fall into the trap of making assumptions about BME elders, resulting in services that are inappropriate, underused and, as a consequence, presumed not to be needed. Engagement can be facilitated through BME, refugee and migrant community organisations, which are ideally

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The Older People's Programme

The Third Sector has always played a critical role in developing ideas and practical solutions, but this ingenuity is often compromised by a lack of the requisite resources needed to develop ideas into sustainable solutions.

In 2003, using funding from the Henry Smith Charity and the Housing Corporation, hact launched its Older People's Programme, in order to pioneer housing solutions for older people.

In partnership with the LintelTrust in Scotland, NIHACT in Northern Ireland and Community Housing Cymru in Wales, hact invited voluntary and community groups to apply for grants for projects that would develop and test practical solutions to issues affecting older people. In total, 19 projects from England, Scotland, Wales and Northern Ireland were given funds totalling £1 million.

The criteria for choosing the projects included ideas that could address gaps in services affecting marginalised older people, including those with mental health problems, older people in rural areas and BME and refugee elders.

All of the projects worked with, as well as for, the benefit of older people. Hact encouraged all the projects to consult with older people, to develop partnerships with other organisations and to share their experiences with other projects on the programme. To ensure that insights from the programme were captured, hact employed Moyra Riseborough and Peter Fletcher Associates to evaluate the project. Finally, an Advisory Group was convened, composed of experts in older people's housing and this met regularly over four years.

A number of the projects specifically addressed the needs of BME and refugee elders. They included projects led by BME organisations such as CatalystPlus, the 1990 Trust, Milan Senior Welfare Council and the Latin American Women's Rights Service, as well as projects in areas with high BME populations, such as the Lorrimore and Westminster Advocacy Service for Senior Residents and Family Housing Association (Wales) Ltd.

Some were involved in advocacy work with BME elders. Others sought to develop and improve links between BME communities and housing, health, care and support service providers. All engaged with their service users, whether through formal research, the collation of casework data or simply through understanding that complex casework meant spending more time with each individual.

Project information

Latin American Women's Rights Service – *increase access to social housing for older Latin American people*

London

www.lawrs.org.uk

PROJECT AIM

- to develop stronger links with larger housing providers, and promote the specific needs of older Latin American people.

ACHIEVEMENTS

- established a housing advice and advocacy service for older Latin American people, assisting over 250 people;
- used its casework to develop a body of knowledge and evidence on the housing needs of older Latin American people, and ran a campaign on elder abuse as a result;
- developed referral rights to six housing associations, enabling older Latin American people to access good housing for the first time.

Family Housing Association (Wales) Ltd – *engage with and provide pre-tenancy support for Chinese elders*

Swansea (Wales)

www.fha-wales.com

PROJECT AIM

- engage with local Chinese elders and research their housing and support needs, in preparation of the opening of a new sheltered housing scheme.

ACHIEVEMENTS

- the sheltered housing scheme was fully let by the time it opened, and tenants were well prepared for the move;
- developed good practice on developing supported and specialist housing for BME elders;
- developed relationship with local Chinese community organisation.

Saathicare (now trading as CatalystPlus) – *identify and address the housing needs of BME elders*

West Midlands

PROJECT AIM

- work with BME elders to identify and meet their housing needs, as well as with housing organisations who are not specialist providers for BME groups, and establish mechanisms for their involvement.

ACHIEVEMENTS

- identified the housing, health, social, linguistic, cultural and religious needs of BME elders in parts of the West Midlands;
- mapped and identified gaps in housing and support service supply;
- developed into an intermediary organisation, with plans to produce good practice guidelines aimed at housing and service providers and service commissioners.

The 1990 Trust – *understanding the housing needs of South Asian elders*

Leicester, Leeds, Ashton under Lyme, Walsall, Bristol, Brighton

www.blink.org.uk

PROJECT AIM

- research the housing and support needs of South Asian elders, compare these with perceptions of local organisations, and develop improved consultation mechanisms.

ACHIEVEMENTS

- interviewed 278 South Asian elders and produced a report about their needs;
- highlighted how older people are frequently asked for their views, but these appear to make little difference to the decisions that are made.

Westminster Advocacy Service for Senior Residents – *advocacy for BME elders with mental health problems*

Westminster (London)

www.wassr.org

PROJECT AIM

- to provide independent advocacy for BME elders with housing problems, particularly those with dementia or other mental health problems.

ACHIEVEMENTS

- trained older people to become volunteer advocates and raised the profile of BME elders with local agencies;
- gathered detailed evidence about the need for advocacy services for BME elders with mental health problems, and presented this to LB Westminster's Review and Scrutiny Committee.

Milan Senior Welfare Council – *outreach advocacy for BME elders*

Edinburgh (Scotland)

www.milanswc.org

PROJECT AIM

- to develop an outreach and advocacy service on housing and support for BME elders, particularly those in the Pakistani, Bangladeshi and Mauritian communities.

ACHIEVEMENTS

- conducted research about the needs of BME elders from the target group (unpublished);
- developed their housing advice and advocacy service, securing Supporting People funding for the future.

The Lorrimore – *home improvement and advocacy*

Lambeth, Southwark (London)

www.lorrimore.org.uk

PROJECT AIM

- to help BME elders with mental health problems to continue living in the community, through a mix of home improvement and advocacy services.

ACHIEVEMENTS

- successfully extended their Home and Dry model to older people;
- supported 41 older people to improve their living conditions, access support and advocacy;
- demonstrated that BME elders with mental health problems are living in some of the worst housing despite being in regular contact with care or health workers.

Still hidden

Despite their numbers, many BME communities still remain hidden from mainstream providers. The project run by the Latin American Women's Rights Service (LAWRS) set out to change this. Despite its estimated size – between 80-100,000 people – the Latin American community had previously been invisible to service providers. Spread out across Greater London, for many years members of the community earned a living in hidden jobs in the service industries.

Many arrived during the 1970s and 1980s, and are, as a result, now reaching older age. Many are women who have fled from state violence, rape and torture. Many have poor English and find it difficult to access advice and services. With little information available to them – and service providers having limited knowledge about them – most were living in poor housing conditions.

LAWRS established a partnership with the Latin American Elderly project, called the Older People's Housing and Development Project. It had two aims: to develop links with housing providers, principally housing associations, in order to increase the availability of safe, secure housing; and to give advice to older people who were homeless or living in poor housing.

They were successful on both fronts. Formal links were made with support organisations, including Help the Aged, increasing the amount of information available to older people. Contacts were made with housing associations, including Women's Pioneer Housing, London & Quadrant and the Peabody Trust. Consequently, older Latin American people now have access to quality, affordable housing for the first time, with the project playing a supportive role before, during and after people move – a role much appreciated by the social landlords, as it bridges the gap for people whose first language is not English.

The project advised over 250 people, some face-to-face, some in workshops and others by

phone. The project has used the data from these cases to develop evidence about the housing needs of older Latin American people in order to influence future service delivery. One example that emerged during the project was elder abuse. LAWRS decided to run a campaign about the issue amongst the Latin American community and to develop closer ties with St Mungo's housing association, so that a number of women who had been abused could be successfully rehoused.

The LAWRS project was successful because it had existing, close ties with its community. It compiled information about a previously hidden community, which will benefit service providers, and service users. Two other projects focused on hidden BME communities: Westminster Advocacy Service for Senior Residents found that BME elders with mental health problems were living in extremely poor housing that was seriously affecting their health and wellbeing, because they were falling through the gap in service delivery.

Similarly, the Lorrimore found that the basic housing needs of BME elders with mental health problems in Southwark and Lambeth – for example, the need for security and safety – were hidden from mainstream service providers. As with LAWRS, by working with their client groups, and understanding their specific circumstances, both projects were able to contribute knowledge and practical ideas for tackling social exclusion and addressing inequality.

Listen and learn

Researching the needs of BME elders requires communication, co-operation and community involvement. That was one of the lessons from the project run by Family Housing Association (Wales). Hact provided funds to the Swansea-based organisation to engage with and research the needs of Chinese elders in advance of the opening of a sheltered housing scheme.

The research discovered and documented

the living conditions of the older Chinese population in and around Swansea, providing new information about their hidden housing, health, care and support needs. As a consequence, Family HA (Wales) made a number of alterations to its sheltered housing scheme. It has now produced guidelines for other housing organisations on the changes needed to develop the capacity to meet Chinese support needs in supported housing.

Three reasons lie behind its success. First, it involved a local Chinese community organisation with existing links to the Chinese community in and around Swansea. It didn't have to reinvent the wheel when contacting community leaders or over-researching community members. The importance of using a community organisation in touch with its constituency was also shown with LAWRS, who established a steering committee with community members and invited ideas from members of its partner organisations.

While both cases confirm the importance of involving community organisations – and especially refugee community organisations – in research projects, the converse is also true. When community organisations conduct research, they will benefit by partnering with research experts, a lesson that both Milan and the 1990 Trust learned as a result of their experience. Both had insights into local issues. Both had local contacts. Both, however, struggled on their own to bring their research to fruition.

The second lesson from Family HA was the importance of communicating in the language of the BME group being researched. Contrary to expectation, the Chinese community in Swansea did not live in one area – they were dispersed throughout South Wales. As a result, information flows were restricted. For many, their working lives had involved long working hours, especially in the catering trade. As a result they had higher incidences of ill health and disability, which were exacerbated by linguistic problems.

Many were unaware of health care services.

Others were unable to access them. Family HA responded to this lack of English by conducting the interviews in the language of the interviewee's choice and then by translating information into two Chinese dialects. SaathicARE (now trading as CatalystPlus), who also conducted research among BME elders, failed to make provision to engage researchers and translators with community language skills for their survey work. Their research took longer than anticipated and delayed the project's progress.

Finally, Family HA's project succeeded because it directly influenced the management and service arrangements of the sheltered housing scheme. Their work with the local community identified detailed needs of individuals, how the services should be delivered and how it should communicate with tenants. These were implemented. All too often, research into the needs of BME elders – and BME communities – fails to change policy and practice on the ground because of a lack of will or understanding within the commissioning organisation. Family HA took the recommendations of the research on board and implemented them. As a result, their sheltered housing scheme was a success.

Developing the hub

An intermediary organisation playing a brokering role is one way to address the failure by most housing, care, health and support organisations to meet the needs of BME elders. That was one of the findings from the project run by a new organisation, CatalystPlus, that, at the beginning of the funding period, had a long list of desired outcomes. Its central aim was to develop a model of partnership and collaborative working with key statutory and other agencies providing services to BME elders.

Central to the organisation's success and its ability to change its direction and objectives during the project was its engagement with

BME elders in different communities in Leicester, Wolverhampton and Birmingham. While this research period took longer than anticipated, the research itself was invaluable. It began a dialogue between older people and local health, care and housing providers, demonstrating the hub role that the organisation could, and did, play.

Another key lesson was the advisory group the organisation established. This involved representatives from a range of older people's groups, social housing providers, care and health agencies. It didn't just provide guidance and feedback on the organisation's development. It brought people together in a forum where they could share information about who the experts were, where they were located and how they could get in contact with them.

CatalystPlus demonstrated the value of its hub role by creating partnerships in all three locations. In Nuneaton it brokered an arrangement with four communities that included a Sikh temple, an Afro-Caribbean day centre, a Hindu temple and a Muslim mosque to ensure that a local hospital was able to provide appropriate food for its patients from these communities. It developed an intermediate care model for BME elders with North Warwickshire PCT. It became a member of a local Housing Partnership Board, worked in partnership with a range of local and regional agencies and assisted others to improve their understanding of issues affecting BME communities.

Funding a project managed by a very new organisation was a risk. It was, however, worth taking, because of the structures that CatalystPlus managed to establish, structures that have helped to bridge a gap in service delivery. The project succeeded because it sought to do something about poor services, seizing opportunities to bring local community-based service providers together with agencies that were failing to provide appropriate services. It is an important model for the future successful delivery of housing, care, health and support services to BME elders.

A different perspective

Public sector organisations are failing to respond to the needs of South Asian elders. That was the key finding from the research conducted by the 1990 Trust, based on interviews and focus groups with over 270 elders in Walsall, Leicester, Brighton, Leeds, Bristol and Ashton under Lyme. Six themes resulted from the research.

/1 Access to information was critical. Without it, South Asian elders were unable to maintain their independence. The provision of leaflets in community languages was not enough. Elders reflected that they needed someone to come to them to explain the availability of local services.

/2 Stop making assumptions. For example, it's assumed that South Asian elders only want to live within their own community or with their extended family. The research found there was a huge diversity of aspirations. **/3 Consultation has to have an impact.** Too often consultations by local authorities or local housing providers failed to result in changes to service delivery. *People come and ask us what we think, one stated, but we never hear what has happened as a result. What is the point?*

/4 Discrimination continues. Many elders felt strongly that services were delivered in an inequitable way, with a perception that white older people had far easier access to services and support.

/5 Stop housing ghettoisation. Housing departments were singled out for criticism. The elders stressed the lack of action to tackle racist abuse by statutory service providers meant that some South Asian elders were prisoners in their own homes.

/6 Make it culturally appropriate. South Asian elders wanted a culturally appropriate dimension to services. This didn't mean that they wanted services to be provided specifically for them, but that any services that are provided should take account of their cultural needs. Fundamental issues, like employing staff able to speak a diverse range of languages or ensuring that culturally appropriate diets are catered for, have to be addressed.

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positioned to provide knowledge about minority populations. Partnerships between community groups, housing, care and support organisations, and commissioners should be encouraged.

Bringing BME elders into direct contact with decision makers is critical for influencing future policy. There is a role for intermediary organisations to facilitate these partnerships, breaking down the barriers between communities and service providers, and building new bridges for the future.

Seven projects from the Older People's Programme were led by, or worked with, BME communities. The Latin American Women's Rights Service developed links between the community and a number of housing providers. The 1990 Trust researched the diverse needs of South Asian elders in six English locations. SaathicARE (now trading as CatalystPlus) developed a potentially replicable model for organisations acting as a hub between BME communities and mainstream service providers.

Family Housing Association (Wales) engaged with Chinese elders in and around Swansea to deliver appropriate sheltered housing. Milan Senior Welfare Council researched the needs of local BME elders, with a view to developing an appropriate advocacy service. Both the Lorrimore and Westminster Advocacy Service for Senior Residents provided advocacy and support services to BME elders with mental health problems.



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Key learning

- Social housing providers and others have made inadequate progress on the basic requirements of BME elders, whether in communication or understanding what they want. Service providers should visit BME elders at places where they socialise, and talk with them in a language they choose.
- Working in partnership with local BME, refugee and migrant community organisations is critical when engaging with BME elders – otherwise their needs are likely to remain hidden and services provided to them will be inappropriate.
- Housing, health, care and support organisations tend to overlook BME elders and should stop making assumptions about them.
- There is a desperate shortage of knowledge about some minority populations, particularly when people are not concentrated in one locality, but are scattered over large geographical areas.
- When consulting BME elders, service providers and commissioners should ensure the outcomes are clearly communicated and show what action is being taken.
- Intermediary organisations should be resourced to play a role in facilitating partnerships between small BME groups and mainstream service providers.
- Bringing BME elders into direct contact with decision makers should be encouraged, because of the positive impact it has on policy development.