

Working and engaging with BAME communities – learning from Ageing Better

Introduction

Ageing Better is a test and learn programme. It is collecting information and insights from across 14 partnerships to identify learning that will be useful for other programmes and organisations delivering activities aimed at reducing social isolation in people aged 50+.

This paper focuses on our learning from Ageing Better in relation to working and engaging with Black, Asian and minority ethnic (BAME) communities. It is based on the learning and insights from the Birmingham, Camden, Greater Manchester, Hackney, Leeds, Leicester, Middlesbrough and Sheffield Ageing Better areas who attended a workshop to explore this theme.

At the end of this report we provide links to specific learning reports from Ageing Better areas on this topic.

Context for social isolation and loneliness

As at February 2020, 1 in 4 of Ageing Better participants nationally identify as BAME. Comparing the figures¹ from Ageing Better participants to those from the last census shows that Ageing Better is reaching a greater proportion of people who identify as BAME (25%) than are found among those aged 50 and over in the same areas (10%). The BAME community is a target group for many Ageing Better partnerships, as the vulnerability of some BAME communities to social isolation and loneliness is well documented.

¹ <https://www.tnlcommunityfund.org.uk/funding/strategic-investments/ageing-better#section-2>

In our learning to date, we have mapped a wide range of risk factors for social isolation and loneliness. These risk factors include deprivation and inequality as well as personal circumstances such as becoming a carer or mental and physical ill-health. Research done by Ambition for Ageing, the British Red Cross, as well as our own practitioner led experience delivering across all the Ageing Better areas suggests these risk factors can increase in some BAME communities.

Ambition for Ageing identified in their report² how health, economic and social inequalities are more prevalent in BAME communities and that these can accumulate over a person's lifetime. At the same time, however, they also highlight that the risks of social isolation are not the same across all BAME communities and that this complexity needs to be unpicked and understood in order to prevent and address social isolation.

This is also emphasised in research by the British Red Cross³ which reveals that people from BAME backgrounds are more at risk of experiencing factors associated with loneliness, including feelings of not belonging and discrimination, and are additionally more likely to experience barriers accessing help to join community activities and making social connections.

Themes (with health warning)

As a starting principal for our learning around BAME communities we fully recognise there is substantial complexity and variation between individuals and communities. A key Ageing Better learning point to date is that we need to recognise that people are all individuals and that no "one size fits all". This is even more relevant when looking at a group as diverse as BAME, a community itself made up of different communities. We would also wish to acknowledge diversity linked to intersectionality - i.e. the experience of belonging to multiple marginalised communities based on gender, disability, sexuality etc., as well other individual differences.

In approaching this learning theme, however, we have been able to draw together some common themes about the communities Ageing Better has worked with. These themes are helpful on one level as they provide insight for organisations new to tackling social isolation and loneliness. But we continue to stress that each community is different and that co-production and co-research play critical roles in helping to understand the particular issues and challenges each community faces.

- *Expectations* - we found that there are often expectations in both BAME communities and in the services they connect to that they will be part of a large extended family living together as they age. The reality for many, however, is often that children have moved away for work or other reasons. This results in expectations of people aged 50+ about what their later life would be like not being met. We also heard that the "perception" by providers that older BAME people would be looked after by family or community often meant the topic isn't raised and support isn't provided so increasing the risk

² <https://www.ambitionforageing.org.uk/social-isolation-and-older-black-asian-and-minority-ethnic-people-greater-manchester>

³ British Red Cross and Co-Op (2019) Barriers to belonging: An exploration of loneliness among people from Black, Asian and Minority Ethnic backgrounds <https://www.redcross.org.uk/about-us/news-and-media/media-centre/press-releases/people-from-bame-backgrounds>

they will become more isolated

- *Desire for home* - we heard from areas that for some of the people they worked with who had moved to the UK during their lifetimes, there was a real longing for home. For some, this wish to return to their place of origin increased as they aged. But there were often financial and practical barriers to being able to act on this wish as well as the reality that 'home' itself was different and will have changed. A message we heard several times was how hard the reality of being in another country separated from family and loved ones was as people aged. We heard that it was particularly difficult for people in the UK when people "at home" died and they were not always able to be part of a shared grieving process for loved ones who were back in their original country. We heard that people were struggling with their mental health because of this unresolved grief
- *Respect* - we also heard that as people aged their expectations on how they and others should behave also shifted and often resulted in mismatches between cultural expectation and reality. Connect Hackney identified that in some of the African Communities they worked with older people felt that they were traditionally expected to be "calm and cared for". The reality, however was that in order to navigate society they had to be "assertive and active", with the mixed expectation leading to people being isolated. We also found an expectation of respect for elders that may not always be met in reality
- *Identity* - we heard how people's identities (or perceptions of identity) changed as they aged. One example of this was the experience for women who "lost" their identity when their children left home. We heard how there were also strongly gendered expectations of roles in some BAME communities. We also found that there was often a perception of a role or duty to 'care' which meant the role and work which caring entailed wasn't fully acknowledged, often resulting in people not claiming the support they were entitled to or needed. We also identified people being "othered" by their BAME identity. In other words, people were seen only through the lens of their BAME identity and not seen as the complex people they were with different layers
- *Finance* - we found particular issues for some bereaved BAME people who were struggling with process and bureaucracy as they had not been involved in domestic financial arrangements prior to the death of their partner. Financial exclusion linked to poverty was also an issue in some families but also to specific cultural situations such as family members of people assuming responsibility for financial problems elsewhere in the family
- *Language* - we identified how gendered roles within some BAME households meant that for some South Asian communities, where a woman had moved to the UK to marry, they may not have necessarily have had the opportunity to learn English, either through choice or exclusion. Then as people age, conversations in different languages are happening around them, leading to feelings of isolation. Areas also highlighted that even where someone's spoken English was good, their written English could be poor which as more information moves online in turn can become a bigger barrier
- *Translation of concepts* - there is a further and dual problem with language in that it's not just engagement with English that can be an issue but that some concepts just don't translate culturally. Different languages can't be assumed to have words which mean the same thing and cultural views of a range of

issues can shape language in ways a non-native speaker wouldn't understand. So for example the term "hearing loss" in Cantonese is "sat cung" which some Cantonese speakers also understand to mean "learning disability"⁴ which could cause some people to avoid identifying themselves as having hearing loss. Linking into the earlier point of the importance of co-production and co-research we heard that rather than just have documents translated it's better to take time to talk to a community first and see if there's a conceptual match with what you want to promote or communicate

- *Awareness and stigma* - the insight from our session was that there is often considerable cultural stigma around physical and mental illness. We heard that people were often unwilling to share their problems within their communities as a result of embarrassment, and shame which when added to gendered expectations of stereotypes often led people to isolate themselves
- *Experience of racism* - we also heard that people's shared experience of racism was often a common bond, although we also heard that this may vary between first generation migrants and that of subsequent generations.

As set out above, there is a lack of research around BAME communities, social isolation and loneliness. Ageing Better is seeking to add to this research base and to deliver and commission services that listen and respond to their communities (please see links listed at the end of this report). But research undertaken by the British Red Cross and Co-op Partnership⁵ also highlights the extent of the problem or of services not meeting the needs of the BAME community.

This research highlighted that a lack of courtesy and respect because of their religion, ethnicity and 'being a migrant' led to an increased likelihood of feeling lonely. They identified how *'feeling unsafe, unwelcome or fearful of hostile encounters in the workplace, services and neighbourhoods disproportionately affects non-white British people'*. They also identified how non-white British people are more likely to think a service is 'not for them'. The research also showed only 31% of Black African respondents had **not** experienced any kind of discrimination, compared with 74% of White British.

Our session identified issues of structural racism, unconscious bias and a lack of cultural sensitivity as key issues experienced by BAME communities and their engagement with the public and third sector. In addition we heard that sometimes issues aren't addressed or conversations started because of embarrassment on the part of non BAME staff nervous of starting conversations for fear of causing offence.

A further issue identified during the session was that many of the communities being worked in and with were "priority" communities for different parts of the public sector. For example, they may be a priority for public health, the police or for regeneration initiatives. This meant that the people in these communities were consulted as organisations looked to shape a response to local problems. However, despite being involved it was often felt that the outcomes of the consultation and the perspectives of BAME communities were not always fully reflected in the subsequent reports or strategies. We heard how this can result in "consultation fatigue" and how it can lead to a cycle where people feel less willing to be involved

⁴ <https://lgbt.foundation/downloads/AFAWaiYinaccessible>

⁵ Barriers to Belonging: An exploration of loneliness among people from Black, Asian and Minority Ethnic (BAME) backgrounds

in any future consultation as a result so further reducing access and voice.

Key message : There are some common issues faced by BAME communities linked to changes in expectations, identity and cultural views. However, each community is different and co-production and co-research play critical roles in helping to understand the particular issues and challenges each community faces. BAME communities can also experience discrimination, racism, unconscious bias and a lack of cultural sensitivity when services are being designed and delivered by both the public and third sector.

Creating Connections

Many of our learning reports highlight how important it is to be proactive and reach out to and connect with people who are socially isolated. We are also finding that the most effective way of reaching people who are socially isolated involves being part of a wide partnership of organisations, both statutory and voluntary who can help identify and refer people to support.

For people aged 50+, where social isolation is entrenched it is even more unrealistic to expect them to identify and reach out to provision themselves without some support or help via a connecting role. This is even more the case for people in some BAME communities who are facing the additional language and contextual factors identified earlier in this report.

There is of course as already noted, considerable diversity within BAME communities. In some communities it will be easier to reach and engage with men, in others easier to reach women. Men, for example may not ask for help as much but might be easier to reach through their places of worship. Women, however, may be more willing to reach out or accept help but it may be harder to find those who are socially isolated.

People taking on this important connecting role need to be genuine and interested in the individual they are working with, and to really listen to what people say. It is vital to have and show respect to the person and their community and it can be particularly beneficial to have either multi-lingual or staff with the appropriate community language.

As in our earlier learning report on the role of food in building connections, we also heard how important food is in providing that link or “hook” drawing people into a project and giving them a reason to connect or take part in an activity. We also heard how food can have particularly important shared cultural connections for some communities.

We identified the following things to consider when connecting to and engaging with people aged 50+ in BAME communities:

- *Safe spaces* - working with people who are socially isolated or have substantial mistrust requires a safe space in which to build a relationship and start this work. We found (as with other Ageing Better learning) that meeting initially in someone’s home could help start build a connection, find out about people’s skills, wishes and challenges as a way to work through their individual layers of complexity that led to social isolation
- *Peer connectors* - across all communities we found activating peers in a community helped draw other people in and develop wider connections and sustainability. We found cross-generational connectors could be particularly effective. Younger people enjoyed being in a place where the language, food and culture felt comfortable and also provided a pool of volunteers to reach out into the community. Some sensitivity is required when thinking about

using peer connectors as we also heard from areas that in some communities the use of peer connectors would be seen as a barrier - this related to fear or suspicion that people's personal issues would "get out into their community" and a lack of confidentiality

- *Word of mouth* - this is a less formal route than the peer connectors. Proactive word of mouth involves activating "community ambassadors" or people that others respect or listen to. This is key to building trust in the community and can also help with activating the strengths present within the community
- *Co-research* - reaching and understanding a community can only happen if you are really talking to and engaging with people. Activating the community to take part in co-research is an effective way of doing this. Ambition for Ageing have used this tool extensively to help them understand and reach marginalised communities and understand the issues and barriers each specific community faces
- *Transport* - throughout Ageing Better transport is often raised as being a barrier for many reasons to people being able to connect with others. In this session we heard that many older BAME people from some communities may be reluctant to make use of public transport even where it is available. This we heard, can be linked to concerns about people's lack of confidence in speaking English, worry whether they would be understood as well as issues of written English and reading timetables or signs etc., However, transport can also be used as a tool for connecting. In Leicester Ageing Together they run Bumping Buses, where Community Connectors travel on a bus and talk to people. They found this was very effective at reaching and engaging with people who are isolated
- *Literacy* - some BAME communities may, for a number of reasons have low levels of written literacy but equally this should not be assumed. We heard that for many African Communities the people who migrated here were often highly qualified professionals. Migrating to the UK was not an easy or cheap journey and the generation that came were highly qualified and their children often even more so. Where written literacy is an issue we found WhatsApp voice recording and dictation was a good way to share messages with people
- *Form filling* - many communities dislike form filling but there is additional resonance and it can be particularly intimidating for people who have experienced discrimination or previous problems with immigration or claiming benefits. This was also raised as an issue for any project evaluation or outcome measurement. It is important to understand and respond to the potential sensitivities and suspicion about what will happen to the information provided and with whom it will be shared.

Key message : Connecting with socially isolated people aged 50+ in BAME communities needs people who are genuine, interested and understand the community they are working in. Connecting people to projects or programmes needs trust and activating the strengths of the community can help this happen. Be aware that form filling may be a considerable barrier which generates distrust, particularly for people who have experienced challenges with immigration or benefits. Be wary of stereotypes and take time to co-research and understand communities when seeking to connect with socially isolated people within them.

Community Infrastructure

One of the biggest challenges identified across the Ageing Better partnerships was that of finding ways to get investment or funding to those smaller groups working with specific parts of the BAME community. Our learning work shows that there is considerable value in having a range of groups working in different areas which are reflective of the interests and communities in that area. These groups through their support and networking ability can help to both prevent social isolation and in providing an exit route for people who are becoming less isolated. They can also act as a forum to activate the community to help each other.

This way of working brings people together around similar interests and can result in a large number of diverse groups operating in any area. These can be formed around shared cultural interests but can also be focused on food, friendship or activities. They also reflect what makes us individuals - we may each identify as part of a specific cultural group, religion or language speaker but also as an individual who enjoys particular activities or hobbies. The key to these groups working well is that there is some common interest between the members of the group and that they represent or create a safe space where people will talk to each other and build connections.

A further challenge we identified was how to reach, support and develop these groups. The groups are often small and serve a niche within a community. They are often working with a community that other groups or organisations would find it hard to do. We found through Ageing Better that micro-funding, combined with a community development approach really helped to reach and develop these groups. We found it was also enormously valuable to involve the wider community in making decisions about this micro-funding. A link to our more detailed paper and learning on micro-funding is provided below.

Through Ageing Better we have been able to develop these groups as part of a wider programme or partnership. This way of working emphasises the benefits of being part of a partnership that allows different organisations to meet different needs in the community. For example a group supporting a particular community in a ward may be the vital first link in identifying someone who is socially isolated. The support works best if they can then refer the person to another “partner” organisation that can help solve a particular problem or challenge, for example providing support in their caring role or help to claim benefits or debt advice etc.

A further challenge we identified through working in this way was the focus of some funders and commissioners on “hard” outputs or targets. This way of working (community development) will take time to yield tangible results and there was a clear call to funders and commissioners to trust the way of working and to have more flexible ways of demonstrating success.

We also identified the following key considerations when supporting the local infrastructure for people aged 50+ in BAME communities:

- *Cultural awareness* - designing and delivering interventions needs to take place within a context of good cultural awareness of the communities you are working in and with. This means being sensitive for example to the need for women only provision in some communities. It also means not making assumptions as well as being prepared to ask questions and working in a co-production way
- *Community research* - the most effective way to understand a community is for community research to be undertaken by and with the community. This

helps identify gaps but also builds awareness of what the area needs and increases community investment in its success

- *Venue* - religious spaces can be really effective as one way of reaching people but they can be also be off-putting as a venue for activity
- *Befriending* - specifically targeting BAME communities through befriending work can be a challenge. We found a huge mix of experiences around befriending. This included challenges with language if the befrienders are from different communities through to challenges around stigma and fears around lack of confidentiality if they were from the same communities. Each match in befriending needs to be carefully managed and simply trying to match within communities is likely to be challenging. Again, our wider learning would have application here - it is important to provide and support the conditions which then allow friendships to then develop naturally
- *Communities of interest* - much of the learning from Ageing Better emphasises the value of place-based working. It is important, however, when considering interventions to recognise some communities cover a large geographical area. For example, in Leicester, the West Indian community is dispersed across the city. Providing support to groups like this means considering a larger geographical area than more focused place based approaches

Key message : Community development work takes time, regardless of the community being worked with. Reaching and developing small groups who are targeting specific communities requires creative ways of working. We found micro-funding combined with community development work an effective way of doing this. Any intervention working with BAME communities needs to be culturally aware and needs to recognise the value in activating the community itself to research, design and develop groups or activities right for it. They also need to be part of a wider partnership of organisations that can provide additional expertise and support. This way of working requires trust between commissioners, funders and deliverers. Community development is an effective way of reaching groups and reducing social isolation but the pace this is achieved will be different in different communities.

Further information

- Birmingham Ageing Better - [Chat and splash](#)
- Bristol Ageing Better - [Reaching & Engaging older Somali women](#)
- Greater Manchester Ambition for Ageing - [Ageing in Place for minority ethnic communities](#)
[Social isolation and older Black Asian and minority ethnic people in Greater Manchester](#)
[Social Infrastructure : How shared spaces make communities work](#)
Ageing Equally? programme [Ageing Equally?](#)
[Equalities Board publications](#)

- Time to Shine (Leeds) - [Connecting with culture](#)
- Leicester Ageing Together - [Social isolation and loneliness in South Asian communities](#)
- Ageing Better Middlesbrough - [Engaging marginalised communities](#)
[Community for Life](#)
[Mend the Gap](#)
[Knowing Me Knowing You](#)
- Ageing Better learning Report - [Role of food in building connections and relationships](#)

More detail on our wider insights from across the Programme to date together with an overview summary of our learning to date are available at [Ageing Better](#)