

What Works in Tackling Social Isolation of Older People in Bangladeshi Communities Briefing



Key learning from the project:

- Models that emphasise one to one work and connecting individuals to external agencies to reduce their isolation - like the Community Navigator model - may not be the most appropriate choice for tackling social isolation in these communities.
- Creativity and being adaptable with delivery plans to work in a culturally sensitive way can support success in achieving project goals.
- Traditional gender roles can increase risk and provide protection for social isolation for different people, and this needs to be accounted for when planning projects.
- Co-design is essential to ensure projects are culturally aware, appropriate, and effective.

Introduction

Older people in certain small, marginalised ethnic minority communities are at higher risk of social isolation, and some community members are at particularly high risk, due to intersecting barriers from multiple factors.

Many minority communities have strong internal social support structures that have traditionally met the support needs of community members. However, these may not meet everyone's needs when circumstances change. Older people may strongly uphold traditional cultural values and social practices, and agencies need to work with high levels of cultural awareness to ensure a project is relevant and effective.

This briefing shares learning and recommendations about working effectively and sensitively with small tight-knit ethnic minority communities, and about risks and protection factors for social isolation. It is drawn from an Ambition for Ageing - funded British Red Cross project tackling social isolation of older people in Bangladeshi communities in Greater Manchester. The project had two workers, one a native Bangla speaker. It faced a number of challenges and had some key successes, particularly in working with women.

Photo: Clare Bonetree

Ambition for Ageing is a Greater Manchester level programme aimed at creating more age-friendly places and empowering people to live fulfilling lives as they age.

We do this by providing small investments to help develop more age-friendly neighbourhoods in Greater Manchester in addition to funding larger scale work across the city-region. As a research project, we are committed to sharing the learning we gain from the programme to help influence local, regional and national policy. Ambition for Ageing is part of Ageing Better, a programme set up by The National Lottery Community Fund, the largest funder of community activity in the UK.

Resilience in Minority Communities

The Bangladeshi communities who were involved in the project in Oldham, Rochdale, and Longsight in Manchester, are tight-knit, strongly self-reliant, and family-oriented. Informal volunteering is embedded as a collective practice of care within the communities.

Small tight-knit minority communities often have high levels of bonding capital*, but low levels of bridging capital in terms of connections to social structures or networks outside the community. This was true of the Bangladeshi communities in this project. Older people in these communities

strongly maintained traditional cultural beliefs and patterns. These included traditional gender roles and gender relations. Men were more visible and more active in the public sphere. Women were, as traditionally, more likely to be occupied with domestic and family responsibilities, with fewer opportunities to socialise or connect outside their own or their neighbours' homes. Many older people in these communities lacked trust in authorities, and placed a high value on privacy and keeping information within the community, if not within families. This can have a higher impact on women's social isolation.

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Cultural awareness is failing to take the time to understand the differences between the White British culture and the culture of the target audience.





Finding the right model

The project workers found it difficult to recruit participants to the project. It was a year before any referrals were received from Housing Associations and GPs, and community members did not respond to publicity inviting self-referral. Investigation by the project workers found a number of factors behind this, relating to the tight-knit nature of these small minority communities.

Use of language

Community members found the term 'social isolation' confusing. When it was clarified and explained as 'loneliness' people felt it was an offensive suggestion that their community was failing to look after its older members.

Social isolation vs community connections

Many men in the communities rejected the idea that they were socially isolated, pointing out that they had strong social networks within the community, via work and through the mosque - even if they did not have much or any connection outside their community. Community members may not see a difference between internal connection and external isolation, aka 'bonding' and 'bridging' capital respectively**. Communities may therefore not have structures for addressing the lack of the latter and risks arising from this.

One to one work was not taken up

Community members were generally not interested in the offer of one to one support work. They expressed a number of concerns, including:

- Women might be encouraged to abandon traditional cultural practices, disrupting family relationships.
- Privacy of families and the community would be violated.
- Support workers would have to enter private homes. Using community spaces instead turned out to be unsatisfactory as the lack of privacy undermined the one to one work.

*See: www.ambitionforageing.org.uk/resilience

**See: www.ambitionforageing.org.uk/socialinfrastructure



Group work was more successful

in helping women widen their social networks within the community, outside their homes. Groups included a women's walking and luncheon group, single sex mental health workshops, and a Ramadan workshop and an Eid meal for women. These resulted in increased confidence to try new activities and go to new places.

Volunteering was not seen as relevant or appropriate

The older people approached rejected suggestions to get involved in volunteering. It seemed this was because there were already informal support structures embedded in their communities, or because they perceived the suggestions as invitations to undertake unpaid work.

Recommendations for Practitioners

Show support and build trust

- Respect the community.
 Don't assume that learning about one small ethnic minority community transfers wholesale to work with another.
- Consult and co-design projects from the start.
 This makes sure that projects are relevant and appropriate, and based on a community's needs rather than on assumptions about what a community needs.
- Take time and take care to build trust.
 The Bangladeshi communities' concern for privacy, historic difficulties with government departments, and history of marginalisation, contributed to an initial lack of trust.
- Find ways to support community
 infrastructure. Wherever possible share project
 funding with the community itself. Bangladeshi
 community centres are severely underfunded, but
 the project needed to work with them to reach
 community members.

Understand gender patterns

- Work sensitively with traditional gender roles. Project staff successfully created social activities for women based around religious festivals. Adapting to and working with a community's cultural patterns is respectful, and also means you can provide opportunities for connection and community for more isolated community members.
- Work carefully with cultural patterns around gender. The project was able to reach more people through separate workshops for women and men run by workers of the same gender as participants. This made it possible to tackle even taboo subjects such as mental health.
- Be creative with documentation.
 Women participants often did not want to be photographed, but there are other ways to document group activities.

Be sensitive to the community's values

- Take care to use appropriate terms. Community members were alienated by words such as 'loneliness' or 'isolation' that they perceived as undermining or misunderstanding the community.
- Be sensitive with data capture. Asking questions about sexuality may alienate people in whose culture this is taboo.
- Be prepared to face challenges based on a community's ethical values. Project staff found resistance to a project perceived to be funded by gambling, through the lottery.

Be creative and flexible

- Be flexible with data capture. If patterns of participation fluctuate, then evaluation methods will need to respond to that.
- Make materials accessible for people who struggle with reading English. Project staff found they had to spend time helping people with forms.
- Increase resources to extend activities.
 Project staff had to use leftover food from men's activities to create a new separate women's luncheon project.

Risks and Protections

The combination of gendered differences in social visibility and the weak bridging capital of these communities conferred different levels of risk and protections for social isolation for older men and women.

Older men in these Bangladeshi communities are often well connected within their communities through their roles in the public sphere. Many of them socialise with work colleagues and at the mosque, or are visible within the community through shopping and other public responsibilities. However, they are often not well connected to social networks and services outside the community. So although their community connections may protect them from social isolation, if they lose those connections, or need new support (for example in the case of developing impairments, or dementia) they may be at higher risk. Older women in these small, inwardly-focused communities often lead more domestic lives. This creates a high risk for social isolation even within the community, and can make it harder to access support outside the community.



Cultural Comfort Zones

The informal support structures of small, marginalised communities have traditionally been sufficient to take care of most people's needs within the community. However, when a community does not have strong connections to external networks and services, individuals who have weak bonding capital may be at particular risk of isolation.

It is vitally important to bring new knowledge to older people in marginalised communities, for example about health, diet and other aspects of wellbeing. Weak bridging capital in tight-knit communities can mean that the less connected members are unable to access valuable new information on health and wellbeing. However, to work successfully with these communities, and

effectively reach those most at risk of social isolation, a project must be highly sensitive to the values and norms of the community, and the expectations of community members.

This may mean an organisation has to work outside its own cultural 'comfort zone', and adapt to work with traditional cultural patterns, for example of gender roles. The project needs to understand the community's strengths and assets, as appraised and valued by the community, and work in a way that supports these. Ideally, all aspects of the project (including, for example, data collection and evaluation) should be co-designed, or designed following consultation, with members and leaders in the community itself.

For reports referred to in this briefing document see www.ambitionforageing.org.uk















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