

The experiences of local people from minority ethnic backgrounds when accessing services in north Edinburgh

Living in Harmony, November 2018

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Introduction

Living in Harmony supports residents from ethnic minority backgrounds in north Edinburgh to have more influence on how local services are delivered. A group of 11 community volunteers took part in action research training in May 2018 to develop the skills and knowledge to carry out a piece of community-led action research between July and September 2018. The group decided to look at the experiences of residents from minority ethnic backgrounds when accessing services. They also asked about how people get information about these services. They wanted to find out about the barriers and challenges that people faced and what could be done to improve experience.

Who did we speak with?

The group designed a set of interview questions and arranged interviews with local people from ethnic minority backgrounds (26), service providers (12), and one politician. Some people answered the questions by e-mail where it was difficult to arrange a face to face interview. We plan to report back and use the findings to inform future actions. We asked respondents how they felt about being interviewed. Overall the responses were good.

'(I) felt confident that she knew the community and we had met before during introductory visit' (Respondent)

We talked to:

Local people from minority ethnic backgrounds:

- 58% (14) have lived in the area for more than five years. Others have lived in North Edinburgh between two months and thirteen years.
- 84% (22) were aged between twenty-five and forty-four years.
- Fifteen different nationalities and ethnicities were given. Black African was the most common ethnic group (9).
- 76% (20) were female (76%) and 24% (6) were male.
- Respondents were a mix of people who: live alone (3), live with their family (18), are students (3), carers (4), employed (5) and unemployed (5).
- Gap: No respondents were over sixty-four. Future research needs to reach the over 60s.

Service providers: statutory (9), third sector (3):

- Services included: community social work, police, housing, healthcare, education and family and household support.
- Services provided were: Community safety, supporting victims, prevention, education, listening, support, challenging stigma, addiction and alcohol support services, specialist health services.
- Gap: Need to include more Third Sector organisations in future research.

Limitations

Our biggest challenge was organising the interviews with the people we wanted to reach during the summer holidays, which meant that we had less responses than we had hoped for.

Findings

Accessing services and information

Local residents from ethnic minority backgrounds told us that:

- They have access to a GP and most people have access to dentist, transport, education and housing.
- To get information about services they used: the internet (18), the library (8) and/or a community centre (7).
- 58% of people would find out by word of mouth (15).
- The high level (69%) of internet users might be linked to the majority respondent age range (25-44 years). The experience of the over 60 years needs further investigation.
- Positive experiences were reported in relation to healthcare services, and accessing housing services. Two people had sort information from a local Information Centre.

Local service providers told us that:

- Information and awareness of services is widely available through distributing leaflets, telephone, social media, community events, outreach services. One organisation described having 'estate walk-about's'.
- Most (8) organisations reported good participation/uptake of services by ethnic minority people. 2 organisations reported no/limited uptake of their services.
- Interpretation and translation services help (9): in person, by phone and/or written. But there is less funding to cover this due to cuts. Informal translation available when in-house staff or volunteers speak different languages works well for some organisations.
- Organisations referred people to other agencies when they were unable to meet specific needs such as GP, council, voluntary organisations, police and other statutory agencies.
- Some organisations offered 1:1 support to help individuals cope with stigma and discrimination.

The local MP told us that:

'Immigration is an area reserved to Westminster and, with around 30% of my office case work related to immigration, I see first-hand the effects of the UK's hostile immigration policies on my constituents. I'd like to see a fairer, more welcoming approach with immigration

Immanuel* is a young man from Nigeria, living in the area for the past 5 years. He lives alone. He found most the information using the internet and form word of mouth. He has access to the GP and the dentist, he states that he can only access information as an immigrant, and that not all services are available for him. He also says that the government or other agencies could make the ethnic minority people eligible for housing and other benefits as taxpayers.

powers devolved to the Scottish Parliament.

One of the greatest things of my constituency is the fact that it is so multicultural. I think that makes it a much more interesting place to live but I'm aware that ethnic minorities, due to certain challenges or experiences, may need extra support.'
(MP)

Barriers and difficulties in accessing services and information

Local residents from ethnic minority backgrounds told us that:

- Barriers included:
 - Language and lack of access to an interpreter
 - Fear and anxiety
 - Waiting times between appointments
 - Lack of continuity in information and staff
 - Lack of access to services, information and public funds due to being an immigrant
- Less than 50% of respondents have access to employment and immigration services

Local service providers told us that:

- Language was highlighted as the main barrier to people accessing services (9).
- Other barriers included:
- Cultural stigma (e.g. around drug and alcohol misuse, mental health).
- Lack of equal opportunities and discrimination (e.g. fear of police and/or fear of being known by services like social work).
- Previous poor experiences when trying to access services (e.g. asylum seekers trying to register with a GP being turned down because they don't have a passport which is often being held by the Home Office).

"I would go to all these places to try finding information, but I was never sure I was on the right track as there was no particular person guiding me and there was so much different information online. One organisation had different workers during every of my visit. This caused me a lot of anxiety but eventually I got everything sorted and am now well settled here."
(Respondent)

James* is a young man from Sudan, who has been living here for 9 years. He is from a black African ethnic group, he lives alone and is unemployed. He had access to all the services named in the questionnaire, but he feels the language is a barrier, and so is the fear of being judged by the Muslim Sudanese community.

Kasandra* is a young woman from Syria. She's been living here for the past 2 years. She is unemployed and lives with her family. She has access to education and health services, but she states that the length of the time waiting for GP and scans can become a barrier.

Gabrielka* is a young woman from Czech Republic, living in the area for 11 years, she lives with her family. She gets the information from internet, citizen advice bureau, local council office and she also states that she has access to services such as GP, dentist, transport, education, employment, etc. Her biggest barriers are the waiting time and uncertainty whether she was looking for information at the right place.

- Lack of knowledge and awareness about services.

Lessons from what other researchers found

Our findings echoed those of other reports. In particular, the key issues for minority ethnic people in north Edinburgh that were highlighted in the *Positively Diverse* (2015), *Living in Harmony* (2013) and *Talking about our Health* (2009) reports which included:

- Finding it difficult to learn about what is available in the area
- Language barriers in terms of accessing services and being part of the community
- ‘Feeling left out’
- Experiencing employment barriers
- Waiting for immigration decisions and the difficulties this can cause

For the full reports, see:

Positively Diverse:

http://www.pchp.org.uk/sites/default/files/resource/files/PCHP_DIVERSEREPORT_LINKS_0.pdf

Living in Harmony:

<http://www.pchp.org.uk/sites/default/files/resource/files/Living%20in%20Harmony%20Report.pdf>

Talking about our Health:

<http://www.pchp.org.uk/sites/default/files/resource/files/Microsoft%20Word%20-%20final%20report.pdf>

A Scottish Government report on their findings from focus groups with minority ethnic communities in Edinburgh, Fife, Glasgow and Grampian also found that:

- Language barriers and being able to communicate effectively are the biggest problems that people had when trying to access health care services
- Care might not be culturally appropriate and people can feel that health workers do not understand or are not aware of different cultures, religions and values. For example, there may be cultural differences around food, privacy, nudity and modesty.

For more information, see *Focus Groups With Minority Ethnic Communities* at

<http://www.gov.scot/Publications/2003/10/18394/28232>

How can the barriers people face when accessing services and information be tackled?

- Local residents, in this survey, wanted the way information about services is communicated to be improved through the internet, open days in libraries, text messages, and the local paper (NEN).
- Two people highlighted a need for English language classes and written information to be available in different languages
- Respondents also thought Health Visitors could be a source of information for accessing services as they were the professional they had most contact with. This could help with reduced waiting times, help people get consistent information and staff continuity.
- Service providers highlighted need for funding for e.g. translation services and services that cater specifically for the needs of ethnic minority groups.
- Multi-agency working for example, joint appointments arranged which include interpreters leads to more consistent support and information for the person.
- Community engagement – some respondents suggested that agencies should get more involved in the community through involvement in groups and organisations, and/or organising specific groups, drop-in services, community events.
- Training, education and awareness raising for example around cultural stigmas surrounding health problems, mental health for minority ethnic people, training for working with minorities: customs, culture and language.

'It would be good if the local council had a one-stop shop for giving advice and help for new residents and guide those through all the areas they need to know and things they need to do to settle here' (Respondent).

Conclusion – What next?

Our findings suggest that:

- Some local people from minority ethnic backgrounds had positive experiences of accessing healthcare and housing services
- But some people do not have access to services, information or public funds because of their immigration status
- Both people accessing services and service providers found that language barriers and lack of access to interpreters was a barrier for people accessing services
- Fear and anxiety – possibly caused by discrimination, cultural stigma or previous negative experiences – can also be a barrier for some people when accessing services

This research highlights the importance of including, involving and listening to the voice of local residents to inform actions and the provision of local services.

Recognising that word of mouth is an important way for many people to get information about local services, it can be important for local agencies to:

- Build trust with local communities by providing continuity of service provider or carer for individuals accessing services

- Offer language support through interpretation and translation of written materials whenever possible
- Support staff to attend cultural awareness training
- Engage in multiagency working and get more involved in the community through involvement in groups and organisations, and/or by organising specific groups, drop-in services, community events

In response to these findings, Living in Harmony will:

- Support community volunteers to help make changes in the local community
- Actively seek out opportunities to present our findings to stakeholders such as community planning groups, the council, local services (statutory and non-statutory) and other local organisations
- Attend or support community volunteers to join local group consultations where the voice of ethnic minority people can have more influence on local services and community planning

Please get in touch with Amanda at Living in Harmony **if you want more information about how to get involved in this work or about how your organisation could become more accessible** for people from minority ethnic backgrounds. You can call Amanda at 0131 551 1671 or email amandahunter@pchp.org.uk

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*All names have been changed.