

Annual Report for Brighton & Hove City Council and Brighton & Hove Clinical Commissioning Group

April 2018



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Introduction

The Trust for Developing Communities (TDC) is one of several community organisations commissioned by Brighton and Hove Clinical Commissioning Group (B&H CCG) and Brighton and Hove City Council (BHCC) in order to consult with diverse communities of identity within the city on topics relating to their experience of health and wellbeing services.

At TDC, we work alongside volunteers to deliver community development work, community engagement, developmental youth work, research and training across our neighbourhood bases and through citywide activities and programmes.

We work with Black and Minority Ethnic (BME) communities across the city. Our BME work project aims to enable BME communities to play a greater role in improving their own health and wellbeing. We build on our existing relationships with BME groups; develop partnerships with new groups and organisations; ensure representation from the BME communities and create points of contact for the services for the health services and other community and voluntary sector organisations.

In the work commissioned by BHCC & B&H CCG, TDC engages with BME groups and communities to consult them on a range of health related topics. We engage widely with BME communities Brighton and Hove, including working with community groups across the city and engaging individuals through attendance at local events and approaches in public and community places and spaces. Through our engagement work, we enable the most marginalised service users to articulate their needs to public and voluntary sector service providers.

TDC delivers this commission in partnership with the Hangleton and Knoll Project (HKP), which supports the involvement of the Hangleton and Knoll Multicultural Women's Group and BME involvement in the Hangleton and Knoll Health Forum, and Sussex Interpreting Services (SIS) who support the work by cascading information via their networks and involving service users and volunteers in our engagement activities, as well as providing interpreting and translation services at or annual event.

Overview

We have worked across the city of Brighton and Hove during 2017/18 to engage with individuals from BME communities on the following topics:

- Priority Setting – for both B&H CCG and BHCC at the start of the commission.
- Medicines: the study focuses on the use of medicines and understanding the use of the pharmacy services in Brighton and Hove.
- Diabetes & Heart Conditions: those people having or caring for someone with a personal experience of diabetes and/or heart condition. The engagement activity focused on raising awareness, individual experience, service uptake and addressing barriers to access and support service improvement.
- The development of the Urban Design Framework tool: this was a specific engagement project with a defined place based assessment methodology designed by the commissioners. The aim of the consultation was to gather views from members of the community of how the Urban Development Framework Supplementary Planning Document could help identify design principles to guide development and identify priorities to help:
 1. deliver high-quality buildings and spaces;
 2. deal with climate change; and
 3. deliver City Plan policies, especially delivery of new homes.
- Intersectionality: TDC has worked with Possability People and HKP has worked with Age UK to support them in their engagement with BME communities as part of the intersectionality topic. TDC and HKP are currently working with LGBT Switchboard to consult with BME LGBT communities.

Methodology

Who did we engage with?

TDC engaged with BME residents, community group members and community interpreters. After our work last year with a wide range of BME residents, we used our existing contacts to conduct the research. We contacted the various community groups who readily participated in the research. We were pleased to interview respondents who have a trusting relationship with us as community workers. Through the last couple of years' work, we have been able to make them feel valued and more aware of the various services. The core groups we have worked with, either participating directly in consultations or disseminating information and invitations to their members include:

- BME 50+ Group
- Chinese Elders Group
- Moulsecoomb Bangladeshi Women's Group
- Maha's Multicultural Coffee Morning
- Euromernet
- BMECP
- Mosaic
- BMEYPP

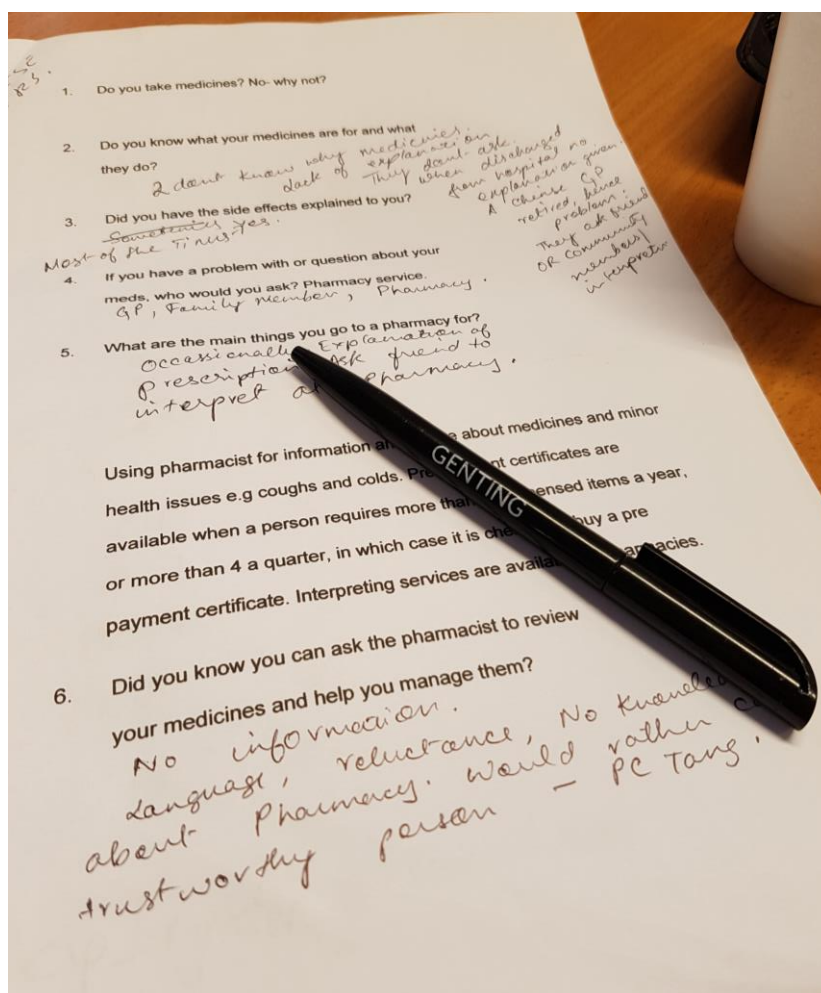
We also worked in partnership with SIS, who used their networks to disseminate information and invitations for the consultations via their extensive networks of service users and volunteers.

HKP delivered their engagement work in the neighbourhood of Hangleton and Knoll, consulting with the Hangleton and Knoll Multi Cultural Women's Group. This is a well-established group with a wide and varied membership representing a number of ethnicities, predominantly Bengali and Arabic women. HKP also worked with an ESOL Group and supported a newly formed Hungarian Choir.

What did we do?

TDC:


We conducted focus groups and individual interviews. Organising focus groups was more practical due to the existing contacts with the BME community. It was also time saving and an opportunity to share and exchange ideas within the community. Community members came to know each other and met service providers that proved to be useful. Some of these groups were arranged at the meetings of a single existing BME community group, and others were open focus groups with attendance from a range of communities, some who are members of community groups and others not.



Questionnaire from the medicines consultation for the CCG

Individual interviews proved to be more suitable for some. Part of the problem was the practicality of matching the time and dates available. Some topics like domestic abuse required a level of privacy and confidentiality. Hence, we did conduct some individual interviews.

TDC also used social media to promote the consultations and conducted an online survey using Survey Monkey. This is a relatively new approach for us in terms of consultation and we are working to build our audience and participation via this method in the hope that it will enable greater participation from those who cannot or would not attend a focus group or community event. We hope that this will also enable us to reach a wider range of new participants who we might not otherwise engage.



The Trust for Developing Communities
Published by Lyndsey Whatyousow · 4 December 2017 ·

TODAY! We would like to hear from patients from Black & minority ethnic backgrounds and carers, with direct/indirect experience of diabetes and/or heart conditions. [Focus groups](#) 1-3pm & 6-8pm today at the Brighton BME community partnership.

Contact Céza Da Luz - cezadaluz@trustdevcom.org.uk to book a space.

Focus Groups: Experiences of patients with diabetes and/or heart conditions from Black & minority ethnic backgrounds in Brighton & Hove.

We would like to hear from patients from a Black and minority ethnic backgrounds, and carers, with direct/indirect experience of diabetes and/or heart conditions.


- 1) Do you have personal experience of diabetes and/or heart conditions
- 2) Are you a carer for a family/friend who have diabetes and/or heart conditions

Join us on one of the following:
Focus group one: [Monday 4th December from 1-3pm](#)
Focus group two: [Monday 4th December from 6-8pm](#)

Your views and experience are important! They will help Brighton and Hove Clinical Commissioning Group to improve services; address concerns and barriers to access for Black and minority ethnic patients/carers.

To book a place, and more information, please contact Céza Da Luz cezadaluz@trustdevcom.org.uk or call 01273 262220


If you're not able to attend the focus group but would like to contribute please complete short online survey - see link below:
<https://www.surveymonkey.co.uk/r/Y3L3TQL>



The Trust for Developing Communities
Published by Lyndsey Whatyousow · 11 December 2017 ·

We would like to hear from anyone who has [diabetes](#) and/or heart conditions, from a Black and minority ethnic background and who lives in Brighton and Hove.

Please complete this survey and share it with people you know
<https://www.surveymonkey.co.uk/r/Y3L3TQL>



BME people with [diabetes](#) and/or heart conditions Survey

Web survey powered by SurveyMonkey.com. Create your own online survey now with SurveyMonkey's expert certified FREE templates.
[SURVEYMONKEY.CO.UK](https://www.surveymonkey.co.uk)

529 people reached

Boost Post

Challenges

There is an ongoing challenge around ‘over consulting’. The more established BME community groups are approached on a very regular basis by a number of organisations across the city wishing to consult with them in order to improve their reach or find out about certain topics. Most, if not all of these groups are entirely run by volunteers and meet for their own purposes, such as social and peer support or to organise activities. In both cases, group members may only meet once every few weeks or months and they want to use their time for themselves and their own aims, rather than have all their meetings taken up with consultation. We have developed a trusted working relationship with many of these groups whereby we will offer development support or we will organise activities that interest the group to sit alongside the engagement activity. We also try to alternate the groups we consult with in order to ensure we are not consulting with the same groups too regularly – this approach also enables us to target relevant topics to the most relevant groups and achieve interesting results. For example, for the medicines consultation, among the groups that we chose were the BME 50+ Group as we felt that older people were more likely to be using a greater number of medicines. However, we also consulted with the Chinese Elders group, as we were interested to explore whether their approach to using western medicines was different as they may use or also use traditional Chinese medicines.



Traditional Chinese Medicine brought to the consultation by a member of the Chinese Elders group

There were some particular challenges in finding participants to engage around the Diabetes and Heart Conditions topic as there were quite specific criteria – people over 40, from a BME background and with personal experience of the conditions, who we are able to reach and are willing to talk about their experience. Numbers for this consultation were lower than the more general topics that we have consulted on in the past (such as accessing your GP for example) which apply to a much wider section of the population.

There is still stigma attached around some topics, which has also been challenging. We had to elaborate on the aspects of anonymity and confidentiality to gain the trust of the respondents. We have often come across cultural barriers in our research. Gender identities, family roles and expectations have often prevented BME respondents to participate in our research. However, respondents are increasingly willing to engage with us due to familiarity with the workers and the actual research process.



More regular feedback from services on the progress of work as a result of the consultations the accompanying recommendations is still necessary in order for this work to continue to develop – participants need to see the value of their participation, otherwise they question the validity of the engagement.

HKP:

We have engaged with 217 BME people over the year through delivering and supporting the following engagement activities, focus groups and consultations in Hangleton and Knoll:

For our BHCC engagement work we delivered in partnership with the planning department a rate the space exercise at a local park with 8 members of the MCWG to inform the Urban Design Framework. We worked with TDC and the MCWG to identify key priorities for BHCC and the CCG. For the CCG element we delivered focus groups with the MCWG on Medications, Healthy Eating and Active Living and Diabetes and Heart conditions.

We supported the partnership and organisation of a local Black History Event with BH Black History and MCWG. 70 people attended the event and enjoyed activities including African Drumming, Exhibitions, Bollywood Dancing and arts and crafts.

Through HaKIT we have supported a member of the MCWG to deliver 3 English Courses over the year. We responded to needs within the group for 1-1 support around training, volunteering and employment through our routes project. 10 BME people (8 women and 2 men) have benefitted from this support resulting in the following individual outcomes –

Female – volunteered with the Brighton Festival Your Place in Hangleton, completed Level 2 Working in schools, volunteering in a school and doing ESOL classes with WEA.

Female – Completed Level 2 Working in Schools, volunteering in local school, doing ESOL with WEA

Female – Single parent. Completed level 1 & 2 AAT accountancy qualifications. Now started Level 3 and will be linked with an apprenticeship.

Female – Single parent. Studying Maths and English GCSE at Varndean. Doing a Radiographer apprenticeship with the NHS.

Male – Produced a CV and now a volunteer in the IT department with the NHS

Female – Single parent. Now studying for PLAB exams to be able to practice as a GP in the UK

Male – Uses HaKIT drop-in and has been linked in with better support from the disabilities team at the Job Centre and with the Work Programme.

Female – Starting up a ceramics group, volunteering with the Brighton Festival Your Place, volunteering in a local school and studying Level 3 Teaching Assistant course at PACA. We worked in partnership with Impact Initiatives to support the MCWG involvement in the Older People's Festival, this resulted in commissioned photographs of the women being displayed at Brighton Station and at the HOP.

We worked in Partnership with Brighton Festival to distribute 30 tickets to the MCWG to attend a Kathakali Dance Performance at Hangleton Community Centre.

We worked in partnership with AGE UK to organise and co facilitate a focus group with members of the MCWG which supported their reach to BME older people as part of their intersectionality topic for the CCG Engagement.

We have continued to support the link between the MCWG and the HK Health Forum ensuring a rep from the group attends meetings to feed in and feedback to the group which enables BME voice in primary care services.

We have supported a new Hungarian Choir to become a constituted community group based in Hangleton. We helped them through the process of identifying their aims and objectives, developing their constitution and organising and facilitating a public meeting and building links with other groups and services.



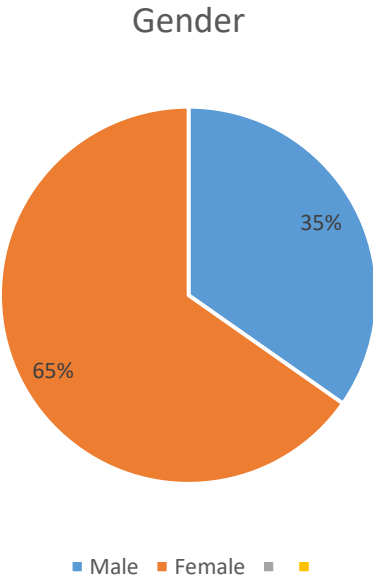
Hangleton & Knoll Multicultural Women's Group members attending an event

Demography

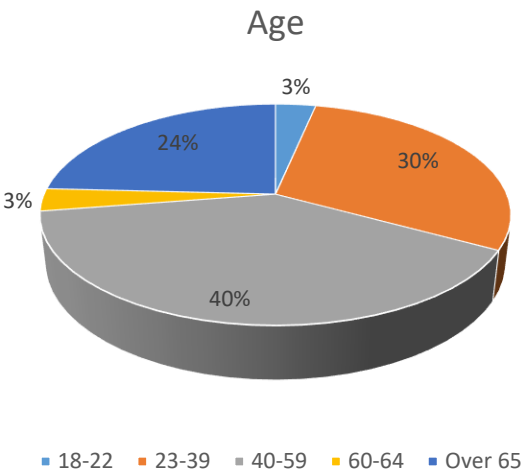
Breakdown by gender, age, ethnicity and geography of who we engaged with in 2017/18.

Across the partnership, we worked with 665 people over the year.

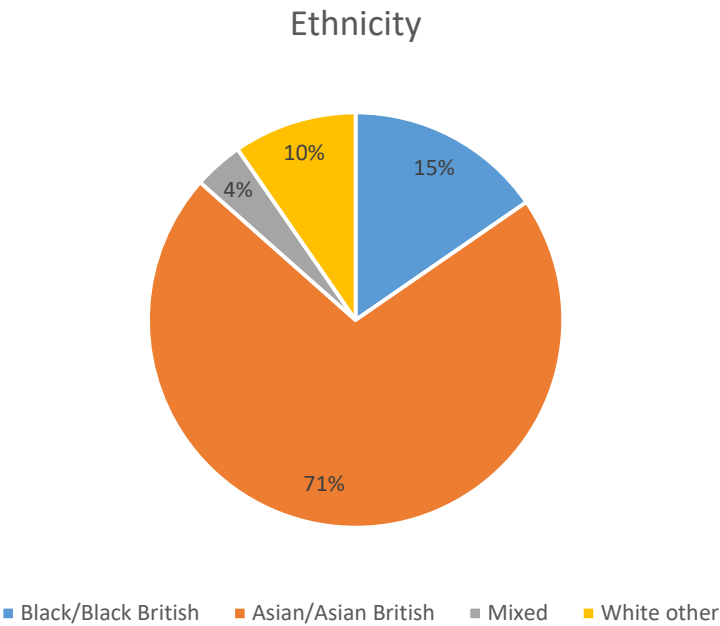
Gender



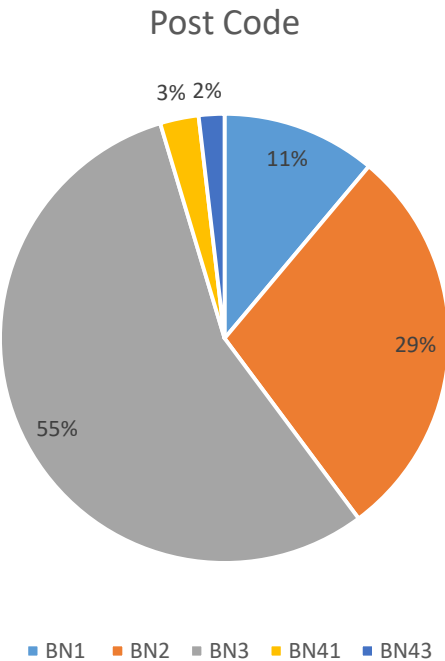
Age



Ethnicity



Geography



Main Findings

TDC and HKP worked in partnership to ask communities about the main issues affecting them and their lives in Brighton and Hove:

Health came out as a top priority across the board. People said health issues, particularly for women, can be very isolating and far reaching (impacting all family members). They said that they felt cultural pressure to “hold it all together”, and mental health issues in particular can be isolating, and remain unaddressed. Although they acknowledged the rise in targeted BME support, for issues around domestic abuse for example, people said local self-help community groups, where resources and investment is made in local community support might benefit those most vulnerable. They also acknowledged the pressures and expectations of being a carer, and how this impacts on mental health, as the role can remain unacknowledged within families and communities.

Health and exercise was also a priority for many, and it was felt people should have better and more open access to exercise, and that this should not be restricted to targeted groups, for example over 50's or people with a health condition. They felt more activity and exercise events should take place in open spaces, and be free and open to all. There were discussions about “social prescribing”, where GPs prescribe people to join community groups, choirs, or the gym. The group felt that more consistent information and initiatives like this should be available and promoted to everyone.

People were keen to see more preventative support and investment, so they could make lifestyle changes. Although it was acknowledged that healthy eating messages were given through school and youth support, this didn't always filter out to impact on whole families or those without children for example.

Inequalities and discrimination was an emerging issue in the discussions across the board. People talked about austerity cuts and it was felt that many communities were affected by them. They talked about people in positions of power being accountable for discrimination.

Women's groups such as the Hangleton and Knoll Multicultural Women's Group and the Bangladeshi Women's Group were keen to focus on the role of BME women and the challenges of being split between the roles of mother/wife/home maker and having a job. The group felt it

was hard for BME women to progress in a career, and they faced prejudice and discrimination from employers, for example when women attend an interview wearing a headscarf. The women were keen to see more BME women as role models in organisations and work places.

Employment & Volunteering: Many women reported their desire to seek employment. They saw employment not only as a financial opportunity, but also as a way to integrate in their communities, improve their language skills where their English was not strong, and also to prevent themselves from becoming isolated, unfit, overweight and depressed when stuck at home on their own. They all stressed the importance of putting their home and family lives first and the need to find employment that would fit round this. Many expressed an interest in suitable volunteering opportunities as a step towards achieving all of the above.

People also discussed the challenges young BME people face, and talked about bullying and inclusion issues at school. They discussed the differences between schools in how they tackle these issues, and they felt a more consistent and accountable approach was needed. There were discussions about schools implementing their policies, and how good practice could be shared between schools to enable this. They also said that more information should be given to parents and carers about rights for young people and families, and schools should be more open about their processes and policies (including inclusion and anti-bullying).

People talked about access to services, in particular housing, as they still felt this was a relevant issue. They felt that, in their experience, refugees were scapegoated as being the reason for limited resources. They said more information and understanding about the eligibility for refugees and those seeking asylum and the housing procedures need to be promoted to the wider community, so they were more informed. The group said they were aware that there was significant overcrowding in social housing and some housing was not adequate, or “fit for families”.

People talked about **access to services** in general, and said that the bureaucracy involved in accessing some services can deter people from engaging with them, particularly when English is not a person’s first language. They talked about information for services being more joined up, so people could join the dots, to fully get the support they needed. It was felt that if a service

user did not know the right questions to ask, they would not get full information or support, and information between services and organisations was inconsistent.



Chinese Elders Group participating in a consultation @ the BMECP



Giving feedback to service providers on engaging with BME communities

Recommendations & Updates

Recommendations to each theme can be found in the appropriate reports and are very specific to each theme. There are no specific themes relating to changes in the council or CCG (this has not been discussed in any detail during the consultation processes). However, there are particular themes which are common across all consultations which are worth pulling out in their own right. These focus on:

- **Better information and education targeted at BME communities**

We found during the course of many consultations that there was not necessarily a weakness or lack or appropriateness of particular services, but rather than people were just not aware of them. It was much rarer for anyone to complain that they felt culturally excluded from a service than that they just did not know about it – in many cases people were delighted to learn about particular services and said they would access them in future. They fed back the need for more information in places they would access it (local venues, local businesses, places of worship, hairdressers, nail salons, corner shops, GP surgeries, etc.) or via information events.

- **Better understanding of the lived experience of people from BME communities**

It was felt that services should get out and about more, coming to communities rather than wondering why people don't come to them. People felt that services are often keen to broaden the demographic of their service users, but think this can be done through a new leaflet. Whilst better targeted information is important (as reported above), it is also the case that services would benefit from getting out and telling people directly about their services and building up relationships. This not only makes the services more approachable to potential clients, it improves the knowledge and understanding of the range of people and experiences within BME communities in the city so services might be better able to design services, reach out, and also create better employment and volunteering opportunities.

In response to people from BME communities identifying their top priorities:

- HKP have developed a working relationship with ReThink to look at how they can collaborate to support engagement into their service. They have organised a co-

facilitated workshop with the group around managing stress and anxiety, and aim to gather their feedback around topics of interest to form an action plan of future workshops and identify support needs around accessing the services.

- The HKP CDW worked with the Food Partnership to develop a new model of community led Shape up, combining nutritional advice and exercise. The CDW focused on inclusive and targeted promotion via the group, which resulted in four BME women joining the weekly Shape up Group. Since the FP lost this contract, the CDW has been developing the group locally as a community group and has supported BME Women to participate.
- TDC has formed a partnership with RISE, supporting them to develop their targeted services for women from BME communities experiencing or having experience domestic abuse. RISE and TDC are running a number of joint initiatives to inform and educate about the support as well as volunteering, training and research opportunities available, as well as consulting key female figures in the BME community on how services and outreach should look.
- In response to the need to explore issues affecting BME women, there will be a women-only space at this year's BME wellbeing event, focusing on healthy relationships, women's cancers and employability issues.
- TDC has worked with the Brighton and Hove Food Partnership to run an event exploring food poverty in BME communities, and how this might best be addressed.
- TDC is working with Possability People to hold an open discussion event on how we can all work better together to support people living with health conditions or disabilities from diverse cultural backgrounds.
- TDC is supporting Occupational Therapy volunteers on placement from the University of Brighton to work with older people in BME community groups to broaden their experience of working with people from diverse backgrounds.

- TDC co-delivered the Community Works Equalities Symposium in February, educating and encouraging service providers across the city to be more aware of the needs of people from different BME backgrounds, as service users as well as employees and volunteers. TDC is encouraging local organisations to think creatively about how they might remove barriers such as lack of English language skills or family commitments when providing employment and volunteering opportunities. Link to Blog post: <https://www.trustdevcom.org.uk/news/thriving-not-just-surviving-community-works-equality-symposium/>



Maha and Mish share their experiences with Equality Symposium participants

- TDC has carried out carry out a consultation for Impetus on their Neighbourhood Care Scheme, exploring how they can tailor their services for BME people and volunteer befrienders.
- TDC has been working with Brighton Digital Festival (BDF) to explore notions of how the digital world deals with identity and representation, bringing together a group of young people from BME backgrounds to explore what young people from ethnically and culturally diverse (BAME) backgrounds feel about the general representation and portrayal of people like them on the internet. The broader questions and issues explored related to 'digital otherness/identities' and the colonisation of online spaces.

Link to blog post: <https://www.trustdevcom.org.uk/blog/brighton-digital-festival-researching-young-people/>



Young people taking part in research at the Brighton Digital Festival

- TDC supported the BME 50+ Group to run a celebration event as part of the Older People's Festival in October and members of the BME 50+ Group and other BME groups in the city participated in a film made by staff from TDC celebrating the contribution older people make to our city's communities. The film was shown at the TDC Older People's Festival event which was opened by Mayor Mo Marsh.

Full film (26 mins): <https://youtu.be/BgophhRs6uM>

A clip of Farah, who volunteers for several BME community groups in Brighton and Hove (3 mins): <https://youtu.be/f-BzgLATIOk>



Interview with Farah

Outcomes for Participants

There has been an increase in confidence and reduction in isolation for many participants through their involvement in the process and the groups they belong to.

Links have been forged between groups, such as Maha's Multicultural Coffee Morning and the Moulsecoomb Bangladeshi Women's Group through their participation in consultation exercises. Some of these women have started to attend one another's groups and have also been to the library together to access books and find out about the other services available, there, as well as starting to attend classes at The Bridge together to improve their English and learn employability skills such as CV writing. The leaders of the two groups came with TDC to the Community Works Equalities Symposium, where they stood up in front of a large, crowded room of service providers to talk about their lived experiences in the city. Both women spoke of the value of helping people understand their unique lives and experience so the city could better respond to their needs. One recounted how she tells her elderly mother how important it is to fill in Equalities Monitoring forms by explaining that if you don't tell people who you are and that you are here, you can't be included in their plans.

Members of the Hangleton and Knoll Multicultural Women's Group have commented through discussions that they feel involved, active and have a voice in the development of services.

"I feel empowered, as women it is important we have this voice, our mental and physical health is so important"

(BME Woman aged 60)

100% of participants said they would be more likely to participate in future planning exercises as a result of taking part.

(Taken from the UDF Report submitted to BHCC)

Volunteer Linguists and Community Interpreters at Sussex Interpreting Services reported feeling better informed and having a better understanding of what will happen as a result of their participation in consultations.

They are able to represent the experience of the service users they support through their volunteer roles, as well as their own views and opinions, and their improved knowledge of health services and support increases their resources when accompanying clients to appointments, for example.

Feedback from Greek-speaking Community Interpreter and Volunteer Linguist:

It was very interesting not only the information provided and what people shared (so I am more aware of the issues involved).

When I agreed to participate, I had in my mind 2 service users that I went for interpreting session and a relative. Whilst I was there, I started remembering relatives that had those conditions that I totally forgot, even one of my grandfather who unfortunately died by heart condition.

I shared whatever I knew and what the facilitator asked. I hope the providers take into consideration all the useful information shared, to inform prevention and make better services.

Feedback from Arabic/Portuguese/Spanish speaking Volunteer Linguist:

This was a vibrant and informative reference group. We were told that our discussion would be reference by the CCG as they are interested in how BME communities access health and social care while manage their health vis-a-vis their racial and cultural difference.



Appendices

Reports submitted in the last financial year:

- Medications report (CCG)
- Diabetes Report (CCG)
- Urban Design Framework Report (BHCC)
- TDC, HKP and LGBT Switchboard are currently engaging with people from BME LGBT communities
- TDC also contributed to the Possablility People consultation on disabled BME people
- HKP also contributed to the Age UK consultation on older BME people



We would like to thank all the people from BME groups and communities across the city who have given their time to participate in our engagement and consultation work over the past year.



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