

**INVOLVING AND
CONSULTING
BLACK AND MINORITY
ETHNIC ELDERS**

Proud to Speak Up



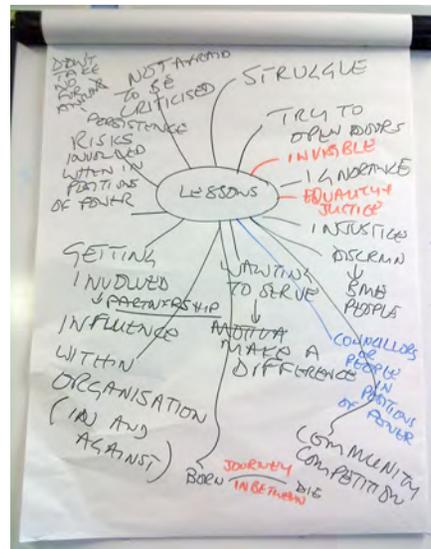
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Introduction

What this guide is

This guide provides some practical ways to involve black and minority (BME) elders in public life so that they can participate in the decisions that shape the way services are designed and delivered. It also provides advice and good practice on how to consult BME elders so that both existing and new services will be accessible and appropriate for them, leading to better take up and satisfaction.

The guide is in two parts:

- Involving BME elders in public life
- How to consult BME elders

Who this guide is for

The guide is for those who design and manage services in the public sector, and for the increasing number of engagement officers whose remit is to involve and consult with the diverse groups in their local area.

The BME Elders Engagement Project

The work to inform this guide was coordinated by Age Concern East Midlands, with partner East Midlands Racial Equality Consortium. The BME Elders

Engagement Project was steered by a group with members from the local Age Concerns and local Racial Equality Councils (RECs), including Derby REC and Northamptonshire REC. It was project managed by Age Concern East Midlands and Age Concern Leicester.

Funded by the Equality and Human Rights Commission, the project piloted different approaches in each sub region of the East Midlands that enabled BME elders to play a role in influencing public authorities.

The project was received with great enthusiasm by BME Elders across the region. Local examples from the pilot projects are used to illustrate what works in involving and consulting with BME elders, and what needs to be improved.

Why focus on BME elders?

- The BME population in the East Midlands was 10.8% of the total population in 2005.
- It has the faster growth rate compared to the White British population: from 2004 to 2005 the BME population increased by 6% compared to 0.2% for the White British population.

As the population ages there will be an increasing number of BME elders. As active citizens within the East Midlands, they have a right to expect services that meet their needs, and to contribute to the design and delivery of the services they use.

Empowerment and equalities in the spotlight

Empowerment and engagement

Over the last two years the Government has introduced a number of measures designed to ensure that public agencies involve local people in decisions that affect them. The White Paper *Communities in Control: Real People, Real Power* sets out proposals to give real control and influence to people.

This was followed by the Local Democracy, Economic Development and Construction Bill 2008, which will introduce a new *Duty to Promote Democracy* for local authorities. This will mean that local councils must inform citizens:

- about their work and services
- how the local decision-making process works
- how services are designed
- how to make their voices heard
- how to stand for a civic role.

The Bill will also extend the *Duty to Involve* (first introduced in the Local Government and Public Involvement in Health Act 2007) to local authorities and their statutory partner authorities, giving citizens more opportunities to shape public services in their area.

Alongside these new duties is also a requirement to establish Local Involvement Networks (LINKs), which are forums that empower citizens to have a say on health, and social care services that they receive.

Equalities

The year 2007 saw the establishment of the Equalities and Human Rights Commission in 2007, which takes on responsibility for race equality, gender and gender reassignment, disability, religion or belief, age and sexual orientation, as well as human rights.

The Equality Bill currently going through Parliament aims to simplify and harmonise existing legislation and establishing a new Equality Duty to include all the seven strands of equalities.

To complement these new arrangements the Improvement and Development Agency (IDeA) launched a new Equality Framework for Local Government in March 2009, which builds on and develops the former Equality Standard for Local Government.

One of the five areas of performance by which councils will assess themselves will be community engagement and satisfaction.

Comprehensive Area Assessment

As part of the Comprehensive Area Assessment, which includes not only local authorities but also their partners, questions will be asked about empowerment, engagement and equalities, specifically about the ability to improve the quality of life outcomes for diverse local communities. Consultation with BME Elders and partnership approaches with older people's organisations can support local authorities to improve quality of life outcomes for older people in general, and more specifically to meet the specific needs of BME Elders.

Involving BME Elders in Public Life

Getting involved in public life

Being involved in public life means participating in decisions about the way services are designed, managed, delivered and monitored.

Involvement in public life requires active participation on the part of the citizen and a duty to involve on the part of public agencies

As citizens, BME elders can exercise their right to participate and hold public agencies to account - to ensure that the services they receive are appropriate to their cultural, linguistic and religious needs. BME elders

have a right to be assertive as citizens, and in most cases taxpayers, in this country.

They can get involved in a number of ways, for example:

- being elected as a member of the local council or being a magistrate
- sitting on the Board of an NHS Trust, Police Authority, or other public sector Boards
- participating in a neighbourhood forum for their local area
- sitting on a public sector advisory group such as the local authority's Older Person's Forum, which provides a link into spending decisions for older people's services.

Although there are both national and local initiatives that have been successful at encouraging BME individuals to take public office such as local councillors or magistrates, BME elders are often not represented on mainstream Boards, advisory groups and forums.

This guide concentrates on the role of public local forums and advisory groups in engaging BME elders. These forums have a role to influence public agencies and through them individual members may gain the confidence to sit on decision making boards or to go for public office.

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Older people's forums

The Better Government for Older People (BGOP) initiative was established by the Department of Work and Pensions in 1998 and aimed to encourage older people to achieve participation and citizenship and to bridge the gap between the policy intentions of local and central government, and implementation on the ground locally.

Through this initiative local Older People's Advisory Groups (OPAGs) were established throughout the country, including a network throughout the East Midlands. The OPAGs provide a direct voice for older people in the UK at a local level.

However, in the recent review *Older People's Engagement with Government*, the author, John Elbourne, points out that the initial enthusiasm generated through OPAGs has not translated itself into "more than a patchy and irregular influence on central or local government."

The Elbourne Review concludes that there are significant opportunities to provide a clearer and more influential voice for older people at all levels of government. to provide a focus for older people's issues



Elbourne also identified a need to provide more support to strengthen grassroots forums. Importantly he identified an opportunity to complement the efforts of all organisations and forums to ensure that a **diversity of views** is heard. The review recommends that older people's forums around the UK, including OPAGs, should be supported and built upon.

This guide gives some pointers on how to better integrate the needs of BME elders into the work of public authorities, either through BME specific forums or more diverse generic older people's forums.

Forums may have multiple objectives

The main purpose of both BME specific or more diverse older people's forums and advisory groups is to give BME elders a voice. However, in practice older people's forums can have a variety of purposes from involvement in activities to improve their lives and dignity, to becoming representatives on public advisory groups where they will have an influencing role. **Forums can:**

- bring older people together to get involved in maintaining and improving their lives
- share information and good practice about how to maintain and grow small BME community groups
- act as a consultative group for public agencies
- become empowered to engage effectively with public agencies

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The Leicestershire and Rutland Minority Ethnic Forum is very well attended by members of small community groups and the coordinator has been active in supporting these groups to find funding. This strengthening of groups is an important part of the engagement agenda since people meeting together regularly to discuss common problems are more likely to be open to engagement activities, and will certainly be easier to recruit.

In the City of Leicester, the BME Elders' Forum is mainly attended by paid workers of small community groups. Nevertheless they are an important route to engaging the members of their group.

Leicester Black and Minority Ethnic Elders' Forum

This Forum was established as part of the East Midlands Regional BME Elders Project. The original intention was to carry out outreach work with BME elders' groups and seek their views and perspectives about how services for BME elders could be improved. The main aim of the Forum is to unite BME elders and communities and seek their active

involvement in maintaining and improving their lives and dignity. The Forum does this by promoting positive images about BME elders, contributing to research, helping identify gaps in service provision and influencing service provision.

The Forum meets bi-monthly and though attendance at its meetings is open to representatives of all BME elders' groups, meetings are currently attended largely by paid workers servicing these groups. The Forum operates a small 'executive' group, which takes responsible for developing the agenda for forthcoming meetings and arranging speakers.

Good practice points for forums

- Achieve recognition by public authorities as a legitimate body for consultation and dialogue about issues affecting BME elders.
- Work towards becoming a unifying force for BME elders' groups and instil confidence in them to enable them to assert themselves when dealing with public authorities.
- Employ a paid worker with the appropriate skills and experiences to develop and maintain a trusting relationship between BME elders' groups, the Forum and public authorities.
- Strive to be reflective of the diversity of BME elders, unite diverse interests and give these a common voice.
- Ensure good communication with and between elders' groups outside the formal meetings.

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Advisory groups

Advisory groups of local service users can be set up by public agencies to advise them on a particular service. They are most often used *when* planning a new service and their existence can be time limited. Advisory groups can also arise from within the voluntary sector as a means to campaign and raise the profile of certain issues. In the example below, the BME group recruited wanted to meet together to discuss how to influence both the voluntary and the public sector on local services for BME elders.

Age Concern Northamptonshire

Age Concern Northamptonshire (ACN) recruited a small group of BME elders to participate in an externally facilitated empowerment session. The group wanted to meet again to discuss how they could raise the profile of BME older people's needs in Northamptonshire. They want to improve the quality of life for BME older people and they want a strong voice for the community.

Before involving public agencies they wished to discuss how they could engage better with Age Concern Northamptonshire. The group recognised the valuable outreach work that is being done by ACN and the practical activities that have been organised within BME groups. However, as BME elders, they wanted to work more closely with ACN in its strategic and influencing role.



A meeting was held with the Chief Executive of ACN and it was agreed that the group would visit another local Age Concern to see what work it was doing on behalf of BME elders in that area, and in particular what work it is doing with statutory agencies to mainstream services for BME elders.

The group hopes that this might provide them with ideas on how they might be able to work with ACN to influence public agencies to look at the way services used by BME elders could be improved.

Recruiting BME forum/advisory group members

One of the key challenges for public bodies and third sector organisations is maintaining an up-to-date picture of the demographic make up of a local area. This is made more difficult than you might imagine since some groups, such as new migrants and gypsy travellers do not show up in statistics. In the research for the BME Elders Engagement Project, we relied on local intelligence: BME people and public sector officers who knew their patch. This helped us to build up a picture of the BME communities in different sub-regional areas, and the older people's groups currently providing services and support to these different communities.

Getting in touch with BME community groups is an obvious way to recruit members, but don't under-estimate the difficulty of finding and developing ongoing relationships with those groups. In recruiting participants to take part in this project it was found that many local authorities did not know the BME groups on the ground, and where directories existed they were out of date. Thus a cascading method was used: finding out two or three main groups as well as key individuals, and asking them for further contacts.

Recruiting participants in Lincolnshire

Compared with many other counties Lincolnshire has a fairly small population of around 650,000 of which

approximately 85,000 live in Lincoln city. At the last census the minority ethnic population was 5.6% of which 1.47% was from black minority ethnic communities. BME elders constitute a very small percentage of the population.

To reach BME elders and to generate interest in the project contact was made with representatives of Age Concern Lincoln, Lincolnshire Racial Equality Council and the City and County Councils. From these meetings one BME elder was identified who agreed to participate in the project. Further calls were made to Lincolnshire Community Foundation and the local Councils for Voluntary Service (CVS). From a contact list supplied by a local CVS a member of a women's organisation passed on the details of a black woman who she knew. It transpired that the contact was a member of the African Caribbean Support Group who met on the last Thursday evening of every month and who agreed for the consultant to attend the group in November 2009 to speak about the project. This approach recruited a further four BME elders to the project, one of whom encouraged a friend to also participate. Thus a total of six elders, two from Asian backgrounds and four from African Caribbean backgrounds took part. To reach them took four months.

Approaching community activists can be a good way to engage other BME individuals, particularly in areas where there are not many BME community groups. Sidney, who told us his story below, has been

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instrumental in inspiring other BME elders to engage in the public agenda. He was able to sell the benefits of being involved by his powerful story.

Sidney McFarlane, MBE - His Story

Sidney came to England 'The Motherland', from Jamaica in 1955. He worked for London Transport before getting called up to national service, choosing the Air Force, and was posted to Lincoln. Through his working life Sidney has fought injustices sometimes in small ways. For example during his first years in the Air Force he was ordered to make tea for a staff of 30 including senior officers on a regular basis, but they stopped asking him when they didn't like his tea not realising he had deliberately sabotaged the tea so he wouldn't have to make it anymore.

Since leaving the Air Force Sidney has been active in public life. He is a former Chairman and member of the Independent Monitoring Board for Lincoln Prison, looking at how policy is applied to BME prisoners. In many instances there has been evidence of bias against black prisoners with their being charged with more offences than their white counterparts for similar incidents. He has seen an improvement in the application of policy during his tenure, which he puts down largely to diversity training, which has given prison guards a better understanding of different minority ethnic communities.

Sidney also writes and gives talks to organisations about prison life and sits on the Lincolnshire Crown Prosecution Service's Hate Crimes Scrutiny Panel which looks at why hate crimes have failed through the criminal justice system.

Sidney's view is that:

“you have to get involved to effect change as this improves lives for everyone”.



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Training forum members

Empowerment training enables forum members to speak up with confidence and to represent their constituent groups on other advisory groups.

The aims of the empowerment training sessions in this project were to enable BME elders to:

- explore the experiences of BME elders and carers of public services
- gain a better understanding about how public services were structured and organised
- examine the barriers faced by BME elders in accessing and engaging with public services
- consider strategies for greater partnership working and engagement with local public services by BME elders.

The sessions were interactive and used a mixture of small and large group discussion, case-study materials, handouts and brief inputs.

Role-play is a useful and lively way to engage participants and give them confidence to speak up. This technique was employed in Northamptonshire and in Derby where the groups discussed a particular issue and presented it to a 'committee'.

Content of the training in Lincolnshire

The training was facilitated by an independent trainer and the content involved:

- a Local Authority employee outlining the roles, responsibilities and scope of a local authority and how BME elders could engage with it
- an exploration of individual and collective experiences of working with and/or accessing local authority services
- listening to and sharing experiences of community engagement led by an established figurehead who had been involved actively in the community for many years
- problem solving and working on areas of service delivery which needed further attention by public authorities
- deciding what to do next and how the lessons learnt could be taken further and more formal dialogue opened up with the local authority

“It was good to have a Black trainer who could speak from a Black perspective and could easily relate to the group’s members.”
(Community Engagement Manager, Lincolnshire County Council.)

Role play in Derby

The role-play involved asking one group to be committee members of a GP practice and another to be a group of patients wishing to understand better how the GP appointments system worked and how it could be improved. The rest of the group was asked to observe. The committee members were briefed to listen but question the patients and in turn the patients were briefed to be assertive in making their points.

After a while, the dialogue between the patients and the committee was becoming stale and directionless. The trainer invited anyone else from the audience to take part if they thought they could make a stronger argument but they had to do this by tapping one of the patients on their shoulder, taking their place and carrying on with the dialogue.

This technique was used to emphasise to the group that:

- backup people are needed to help present a case in case of lack of availability of the usual representatives
- it is okay to be substituted by someone who is able to make the point more assertively and/or raise related points
- shared leadership is an important strategy for groups trying to represent their arguments to external bodies

Understanding barriers

An understanding of the barriers experienced by BME elders trying to participate in the public agenda is crucial.

- First of all public sector officers need to develop more long-lasting and trusting relationships with local communities, go out into the community more, or fund community development workers, to persuade more BME people to volunteer in public life.
- They must be able to give examples of BME elders who have made a difference to services by sitting on forums and going to public meetings.
- Get BME elders already active in the community to encourage others to attend forums. You could also set up a shadow system where one experienced member of the forum supports another to attend public meetings.
- In many BME communities, there may be a 'culture of silence' amongst BME elders and a reluctance to speak up in public settings, sometimes arising from a belief that one is subservient in white-dominated settings, a throwback to colonial times.
- This barrier may need to be overcome by presenting the subject matter in a way that is accessible, interesting and meaningful, rather than a very formal meeting. Make it interactive and participatory.

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- There is a need to create an environment where people can ask questions and clarify the information presented.
- Where needed, community languages will need to be used to ensure inclusion and understanding. For BME elders that understand English, they may still feel more confident to speak up, and better able to express themselves using their first language.
- Make sure that you give local representatives plenty of advance notice – at least two weeks.

A perspective from a Forum member

I am a member of a 50+ support group and have been involved in it for a number of years. I was a local authority officer previously and was also, for a brief spell, a district councillor.

I have a particular interest in the health needs of BME communities and find the support group a useful way of getting more information about what is going on. For the last two years or so, group members agreed that instead of just relying on external speakers to come and present information to us, we ought to represent the interest of BME elders at meetings held by various public authorities.

I agreed to represent the support group on an older people's strategic forum, which focuses on health and social care and meets four times year. I have been to several meetings and have found them to be useful, feel I can make my voice heard and am able to bring back information, which is useful to the support group.

Although I was a district councillor, after a health scare I lost some of my confidence and so the empowerment training was useful in helping me build my confidence to speak and express my view in future events.

Unfortunately since the training I have not had the chance to try out the things I learnt at the training. I was ill on one occasion and another time, the letter of invitation arrived too late for me to be able to go. Herein lies one of the problems – so many times we do not get the papers or the notification of meetings from public bodies on time and sometimes I get frustrated. I should not just be expected to turn up to meetings without proper notice – I have other things to do as well. The other issue for me is that when I go to meetings I have to find a way of communicating the outcomes to other group members so they can see its relevance for their work and the work of the group as a whole.

Some more practical tips on encouraging attendance at consultation meetings are listed on page 18.

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This section on involving BME elders in public life has raised some of the points statutory agencies will need to consider if they are to engage and empower BME elders to speak with confidence and attend public forums and advisory groups.

It has focused on how to reach and empower BME elders. However, once in the public arena BME elders must be able to see the fruits of their endeavour and be able to see how they have influenced decisions.



HOW TO CONSULT WITH BME ELDERS

Introduction

This section gives advice on how to consult with Black and Minority elders. Consultation carried out by the BME Elders Engagement Project included both service users and potential service users in pilot approaches that have informed this guide. The project did not focus on consultation by surveys, which are more about identifying need, but sought to test ways that public agencies use consultation to:

- enable non-users of specific services to be more aware of the services available and to address barriers to take-up, leading to **better take up** by BME elders
- collect information on how to improve existing services, leading to **better satisfaction** as well as **better take-up**
- consult with BME elders to inform new provision: **planning for the future**

Consultation techniques, such as questionnaire surveys, can include 'off-the-cuff' responses when people are asked for their views. While these can be useful to give a snapshot of a large number of people's views - and are useful to identify differences between age groups, and different ethnic groups, for example - they do not allow

respondents to give a considered response. The pilot approaches used within the project tried to obtain the considered responses of BME elders in a supportive environment, with the aim of helping public agencies make changes to their services, and increase take up by, and satisfaction with, BME elders.

As a public agency exploring consultation methods you will need to think about:

- why you want to involve people (e.g. improve take-up, increase satisfaction, increase outcomes, inform service planning)
- what is expected of the participant and what the participant should expect of you
- what are the most appropriate consultation techniques and what skills are needed
- what will support people to attend
- what budget should be set aside
- whether you are prepared to take action on what you have learned, and whether you have the power to do so
- how you feed back the results of your consultation
- how you will evaluate and measure the impact of the consultation

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Consultation techniques

A number of techniques were used in the pilots and these serve to illustrate some good practice.

Information giving

Information giving on its own is not a consultation method, but if it is used as a two way process that also obtains information then it can be a useful method to inform service design.

In the example below the development worker of a group of Chinese elders suggested that participants were more likely to attend an informal talk on health than to attend a formal consultation, but that the session could be used to obtain information on the barriers to taking up health services.

Nottingham Chinese Welfare Association

As part of the Engagement Project a focus group was run with older members of the Nottingham Chinese Welfare Association (NWCA) to find out if they were interested in influencing any particular services. They talked about various experiences with health professionals and how these could be made more appropriate for them. In particular they pointed out that their symptoms were often not taken seriously by GPs as some were told that *“they had to expect some of those symptoms if they were older.”* This often put them off from visiting the GP. They

expressed an interest in attending a health awareness session.

Following this, we contacted the Nottingham Primary Care Trust initiative Change Makers, a new programme to raise awareness of cancer symptoms, so that people benefit from early diagnosis and treatment. Two sessions were held, one on breast cancer, and one on bowel and lung cancer. The sessions used simultaneous translation into Cantonese, a video with a Cantonese voice-over, and pictures to describe symptoms. They were highly interactive and designed, not only to talk about identifying early symptoms, but also to seek views on what prevented people from visiting the doctor with symptoms.



User feedback

User feedback can be a way for a public agency to collect important information on people's experiences with the service and their views on how they might be improved. A mystery shopping exercise was carried out for one of the pilots which tested how easy it was to obtain the older person's bus pass. This method encouraged people to be involved in testing out a service and feeding back their real experiences.

Mystery shopping is a technique that aims to improve customer service by obtaining the experience of a real user who then feeds back their findings to the service provider. It is usually commissioned by the service provider itself, but in this case it was used as a technique to give local people the skills to test out a service and to feed that back in the form of a letter.

Testing out how easy it was to apply for a bus pass was chosen by a group of BME elders because they thought it might reveal issues related to lack of proof of date of birth and address. After a short training session which included a role play, our group went out to the transport centre, the leisure centres and libraries to use their mystery shopping skills.

Older Person's Bus Pass

The Older Person's Bus Pass not only gives access to free transport around a local area, but also free bus local bus travel all over England. The particular Seniors' Card in this city gives older people reductions on certain leisure and library facilities. Our group of older people tested out how easy it was to obtain the pass and whether clear information was given on all the ways it could be used. Issues they encountered were:

- Although the council website states that application forms are available at local libraries, when our mystery shoppers approached the library the staff were not able to provide these forms, and were not aware that the forms were available from libraries.
- Because the mystery shoppers were not able to pick up application forms from their local libraries, this meant an extra trip into the City Centre to pick up the form, and then return at a later date with their proof of age and address.
- One of our members was renting a room in a house and did not pay the bills – hence he thought it would be difficult to prove his address. Although other ways you can prove your address, such as a medical card, are listed on the application form, this was not explained to him. The person at the desk was not particularly helpful, and rather than discussing what

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acceptable proof of address he might have, merely pointed at the form.

- In contrast, another member found the person at the customer service desk extremely helpful, working out with her what would be the best proof of age since she had mislaid both her birth certificate and her passport, and did not have a driver's licence. Finally it was decided that a medical card with her birth date would be fine.
- Our shopper also asked whether she could travel to London using a local bus and whether she would be able to use the tube there. The assistant told her that it would be possible to travel to London, but that it would take a long time, and once there she could use the London bus network, but not the tube.
- Our shoppers went out to leisure centres and one was pleased to find that he could get free swimming sessions. When he asked which sessions were free to the over 60's the receptionist pointed out the rack where there were leaflets detailing this information. Another found to her pleasure that she could get a discount for Aqua Aerobics.

We met again with the shopping group to discuss what to do. The shoppers wrote letters to both the travel centre and the libraries recounting their experiences and suggesting improvements; they found this an empowering experience.

Derby PCT was keen to consult with Asian people about their health experiences and needs since they had identified that people living in areas with a high concentration of Asian people tended to die at a younger age than the overall population.

Derby PCT's consultation with Asian women's groups

When Derby PCT is making decisions on how to spend its £400m annual budget, it needs to ensure its services are designed to meet the needs of Derby residents. To determine needs they have previously referred to health statistics about who is dying and why. From these it knows that people living in Arboretum and Normanton, which are disadvantaged areas of Derby and where a significant proportion of Derby's Asian population live, are likely to die 15 years younger than those living in Allestree, a prosperous area of Derby with mainly white residents.

Through an initial training session the Asian women identified the main problems in their community were high blood pressure and heart attacks, which could possibly be decreased by a more healthy diet and lifestyle. Working with the local community, including this group of Asian women, will enable Derby PCT to better understand local issues, and to design and implement services that would begin to address this inequality.

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Informing new services

Specific consultation with a range of groups should take place when a public agency is thinking of relocating or redesigning its services. It's very important to:

- get communities involved at an early stage
- present the issues or options in a very clear way
- convey the idea that participants' views are welcome and will be considered
- feedback what changed as a result of the consultation

Lincolnshire County Council review of services for older people

Lincolnshire County Council is reviewing its services for older people and was keen to ensure the needs of BME elders were addressed.

An event organised through the BME Elders Engagement Project brought local BME people together and was facilitated by the County Council's Engagement Manager using small and large group exercises. From this event, two issues of particular concern were highlighted:

1. lack of information and communication
2. loneliness and isolation

The group suggested ways for the issues to be addressed which formed the basis of a BME Elders

Strategic Action Plan. The group agreed that it was important for senior council officials to consider the Action Plan if they were truly committed to engaging with BME communities.

A pre-meeting was held prior to the second 'accountability' event and a chair was elected from the group of BME elders. The group put their recommendations to key staff within the County Council:

- Director of Communities
- Head of Service for Healthy Communities
- Elected city councillor with a portfolio for social inclusion.

In the process the BME group found out about many of the initiatives that the council was undertaking.

BME participants said:

"I never knew about any of these things and the help there is for older people. We only found out about them because of this project."

"I was glad when I was contacted because I have been trying to get the council to know about our African Caribbean Support Group which has been going for seven years with no help whatsoever. We have to rely on members subscriptions to carry out our activities."

Top tips on encouraging attendance

Whatever consultation techniques are chosen you will need to ensure that BME elders are encouraged to attend. Here are some of the things you should consider:

- Older people can have busy lives! Be sure to send notification on meetings out in plenty of time – at least two or even three weeks in advance.
- Find out people's needs as regards assistance and diet – never be afraid to ask!
- Make sure the venue is physically accessible.
- Organise transport or pay for travel expenses.
- Avoid school holidays as grandparents may be looking after grandchildren.
- Offer some form of incentive, be it good food and/or a small monetary incentive (can be in the form of a voucher).
- Offer bilingual support if appropriate.

Encouraging participation

This guide has highlighted the importance of recognising the diversity of the BME population, and ensuring fair representation and engagement for all. It has also emphasised the importance of establishing and updating a database of BME elders' groups and developing ongoing relationships with these groups.

Mystery shopping

“The mystery shopping activity made me feel it was valid to point out areas for improvement, even when I was largely satisfied with the service offered and grateful for benefits I will be getting from the Senior Card. The activity made me feel that it was not just about me reacting to poor service, but that I was doing something on behalf of many others who would be in the same situation as me.

Doing the activity with another person definitely helped my motivation, and the role-play helped me feel I could approach the Council workers confident of my position. The best thing, though, was probably getting the speedy replies from both Council departments – they made me feel I was being listened to.

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Tips on overcoming barriers to participation, including making the event lively and participative, are listed on pages 10 and 11. They are equally application to those participating in a consultation event, as the two contrasting events held in Leicestershire show.

Decisions at life's end

Two consultation events were held for members of the Leicestershire and Rutland Minority Ethnic Forum by a local PCT to talk about the DALE (Decisions at Life's End) project. DALE provides community nurses to help people plan the care needed during a person's final stages including dying at home. The service is for anyone over 50 and carers and families are encouraged to be involved in any decision making process.

These were two contrasting events: one was attended by nearly 50 BME elders and the setting was very formal with people sitting around tables in a large room with the speakers all at the top of the table. The session was dominated by the chair and there was poor facilitation to get other people involved in discussing the issues raised.

A group member had volunteered to be the interpreter but had little prior knowledge of the DALE initiative. In one key instance, due to poor interpretation, there was confusion created about whether the community nurses were the same as Macmillan nurses.

At the second event, approximately 16 BME elders attended. The session followed a similar format to the one above, but was less formal with people sat around in an open circle.

The presentation was more informal compared to the one above and most of the participants knew each other, which helped to increase their confidence to speak out. Finally, the presentation of a live case study by a community nurse about how she worked with an older person who wanted to die at home after a brief stay in hospital helped to bring to life the whole experience.

At both events food was provided to entice people to come as well as to thank them for their contributions.

Outcomes

This examples from the mystery shopping trip demonstrate that council managers do take suggestions seriously and reply speedily.

It is very important that BME elders are informed about how their views have been taken into consideration after a consultation event. The participants will be interested in what action is being taken, and this example from Lincolnshire shows how the BME elders recruited as part of the Engagement Project are continuing to meet with the council.

Involving and consulting black and minority elders

Actions following the Lincoln Consultation Event:

A number of actions arose from the Lincoln project that have been sanctioned by senior officials at the City and County Councils:

- A working group comprising of representatives from the elders group, Age Concern, and the city and county councils has been formed to move forward the agreed recommendations from the BME Elders Strategic Action Plan.
- The Head of Services for Healthy Communities would be the group's key contact – his contact details were circulated to the whole group.
- The elders' group will work with the two councils to map BME groups across the county so that information, support and services can be targeted.
- Group members would act as conduits between other BME individuals and groups, and the two councils to enable them reach out to more BME communities.
- Age Concern Lincoln and the City Council's diversity officer will meet with the African Caribbean Support Group to help them raise funds and support them with other capacity building initiatives.
- The Community Engagement Manager has started to inform the group on activities such as the Lincoln

Seniors' Forum, Older People's Advisory Group, the LINK and will continue to do so.

The Council's Community Engagement Manager said: "This was my first opportunity to have contact with the African Caribbean Support Group. I was keen to get involved as I felt it was an unmissable opportunity for me to reach out and consult with BME Elders. I now have all the contact details of the group members and have invited them to all the initiatives that are happening locally, so that they can be full informed on issues that affect them. I now sit on the working group that was formed as part of this project to take the agreed recommendations forward. One member has been successfully elected as a steering member to the newly formed Local Involvement Network."



Conclusion

This guide on involving and consulting with BME elders across the East Midlands has had some successful outcomes for the participants, which will hopefully be sustained.

The key learning points from the project can be applied to a range of consultative processes between public bodies and community groups.



The key recommendations to take this work forward are:

- Take time to build up a relationship with individuals and community groups, rather than approaching them for the first time when the need to consult arises.
- Choose an accessible venue that will encourage participants to feel comfortable to participate.
- Ensure the time, location and venue for the event is accessible and appropriate for the target audience.
- Provide translation and interpretation, as required, to ensure understanding and active participation in consultation events.
- Give feedback after the event, to let participants know how information has been used and what will change as a result.
- Use a range of consultation methods to ensure the diverse range of views within communities are captured and explored, including surveys and participation events.

**INVOLVING AND
CONSULTING
BLACK AND MINORITY
ETHNIC ELDERS**

Proud to Speak Up



East Midlands

