

## Community for Life – FINDINGS OF RESEARCH

### How have you conducted the research?

#### What methods has the project used to gather information?

We used a number of methods to gather intelligence around loneliness in the BAME community in women over the age of 50. This consisted of the following:

#### **Focus groups:**

9 focus groups were held with a total attendance of 97 women in total between them.

#### **In-depth Interviews:**

11 in-depth interviews were carried out. The format of these was left informal to allow for questions to flow naturally and in a manner that the individual was comfortable with. However, some key questions (focussing on our original aims) were incorporated into the interviews.

#### **Surveys:**

11 surveys were completed. Again, these focussed on the original aims of the project.

#### **Informal Chats:**

We had informal chats with over 60 women. These proved to be very useful and gave us a great insight into what women of that age think and feel.

#### Describe the groups/demographics of people who have participated in the research. How many people of each demographic has the project spoken to?

We focussed our research on individuals from the BME community. Specifically Pakistani women over the age of 50.

However we did not limit it to this and on some occasions we did have women from other backgrounds attend as well. We welcomed this participation from other groups including:

Pakistani - 133

Indian - 5

Bengali - 5

Arabic - 25

Afghans - 11

**What did the project find out?****Issues that BAME older people face around loneliness.****Issue/Experience/Insight****Extended Family Living**

Living amongst an extended family which is usually a busy household – Some older people may feel alone as everyone has their own priorities. In large family networks older people's individual needs may be overlooked

*"I love my family but sometimes I feel that everyone is too busy nowadays"*

*"My kids and grandkids always have so much going on! Life is so busy from our days.....I don't like asking for myself as my son works very hard and needs less stress"*

*"no one even realises I am there, sometimes I feel like a burden in their busy lives"*

**Intergenerational Issues**

Lack of inter-generational understanding amongst the changing needs of second and third generation BAME's.

*"My grandkids are always going to some kind of clubs after school and on the weekend..... I never sent my kids to any and they were much more happier growing up"*

*"Whenever I talk, the children always have some gadget in their hands... a phone, a tablet... their parents are the same.... I doubt they even hear what I'm saying!"*

Cultural barriers for those born overseas – some people feel little connection to their country of birth but are also detached from the British culture they and their children are living in.

*"Everyone speaks English nowadays, even my own kids....we are losing our language and culture here but no one seems to mind"*

*"in our days, weekends were all about visiting family and keeping ties... nowadays people only have time for others through the phone, no time to catch up with others in person anymore!"*

*"I have no one to talk to who understands me"*

<p><b>Poverty/lack of disposable income</b> A lack of resources makes travel and socialising difficult.</p>	<p><i>“Taking part in all these activities cost money.....I’d rather the money was spent on more important things in the house”</i></p> <p><i>“Finances are always difficult when you live in a big family....there’s always something that needs to be paid for”</i></p> <p><i>“We only have one car and I don’t like asking for a lift as my family need to take time out for me..... I don’t like to burden them....taxis are too expensive”</i></p> <p><i>“I would love to go out and meet people and do things with them like I use to when I was younger, but we cannot afford it and I do not like to ask family or be a burden on them, so I just accept things the way they are..”</i></p>
<p><b>Language barriers</b> Some people find it difficult to access services that could reduce isolation because the services are not offered in their language. They are unable to fully express or have their needs understood.</p>	<p><i>“I always get given leaflets but there’s no point as I can’t read them because they are in English”</i></p> <p><i>“I sometimes wait for my kids to explain the leaflets to me but they don’t always make sense to be honest”</i></p> <p><i>“I would like to do things that interest me, things that I enjoyed doing when I was younger”</i></p>
<p><b>Culturally appropriate services</b> Mainstream activities may not always be sensitive to the needs and preferences of BAME older people so are underutilised.</p>	<p><i>“There is a gym in my area but there are men there and I don’t really feel comfortable”</i></p> <p><i>“I don’t think the council understand what we really need....we needs more women only events”</i></p> <p><i>“learning to dance isn’t really what we do in our culture!”</i></p>

## Understand how these differ from mainstream older people.

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### Issue/Experience/Insight

A large proportion of BAME older people live with or around an extended family set up. This differs greatly from the majority of the population. There is a general assumption that such older people are well supported and would not feel as lonely. However, our engagement suggests that this may not be the case. Surprisingly, some of our participants described feeling isolated as everyone around them was too busy. There is generally a greater dependency on the extended family and a fear of offending others if loneliness is raised as an issue.

*“I love my family but sometimes I feel that everyone is too busy nowadays”*

*“My kids and grandkids always have so much going on! Life is so busy from our days.....I don't like asking for myself as my son works very hard and needs less stress”*

*“no one even realises I am there, sometimes I feel like a burden in their busy lives”*

Nearly all of our participants were Immigrants who had arrived to the country over 40 years ago as labourers. Many of the females came to the UK as spouses to join their husbands. Participants explained having less common ground with their children and grandchildren who were mainly born in the UK. This inter generational gap has caused greater feelings of isolation. Furthermore, many participants have friends of the same backgrounds so there is less opportunity or need to integrate with people of other backgrounds.

*“My grandkids are always going to some kind of clubs after school and on the weekend..... I never sent my kids to any and they were much more happier growing up”*

*“Whenever I talk, the children always have some gadget in their hands... a phone, a tablet... their parents are the same.... I doubt they even hear what I'm saying!”*

*“Everyone speaks English nowadays, even my own kids....we are losing our language and culture here but no one seems to mind”*

*“in our days, weekends were all about visiting family and keeping ties... nowadays people only have time for others through the phone, no time to catch up with others in person anymore!”*

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Many participants have never been employed and come from households where there is only one person in employment. This person is responsible for providing for the needs of the whole household. There was a general feeling that elders in the family sacrificed their own needs so that other priorities could be fulfilled. Furthermore, most of the elder females are unable to drive so require help from family members with transport.

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Language Barriers were commonly quoted as a reason for being unable to access services. Simply not being able to understand what was on offer led to a low up take of services. Some in the group felt that they were 'lost in the system' because of this language barrier.

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This view was echoed through our research.

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As all our participants are from a BAME background, this gives rise to a number of considerations to be taken in to account when developing projects. Being unable to express their needs and sensitivities usually resulted in culturally inappropriate services being delivered. The participants had demonstrated many ideas that would be culturally appropriate but felt they had no platform and a lack of access to bring these to the attention of the decision makers.

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*“what is the point my dear... people always come and ask us lots of questions about what we would like to do but no one does anything about it.”*

*“I hope there comes a time when we stop being the forgotten generation, we worked so hard all our lives but no one cares about us anymore, we have lots of things we would like to do but who listens to us?”*

*“we are invisible now, the sort of things we like doing, no one organises them for us and we are not clever enough to do them.”*

*“time has changed so much. Nothing for us anymore.”*

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**Identify what sort of things can be done to reduce loneliness in the BAME community.**

**Gup Shup (Chit Chat) - Women's friendship and support group**

A healthy lunch club for over 50s BME women with an emphasis on health and wellbeing. Sessions including awareness of mental health, looking after themselves, healthy eating,

We will incorporate the reflexology, skin care, manicures, pedicures and massage. This will improve their overall health and well-being and they will have the opportunity to make new friends and reduce their social isolation.

The women can plan an Eid party for next July for women over 50 and then donate the profits to a local charity.

We believe it would be a good idea to get the women some positive media attention and make them believe in their own self-worth and that they are capable of giving back to the community. The ideas the women suggested were as follows:

Community projects giving back to the community e.g.

- knitting hats and gloves to be donated to premature babies unit
- Sewing pillows to be donated to cancer patients
- Cooking and donating food for a local soup kitchen

Many women mentioned they are keen to do some 'good'. We would want to pursue all 3 (if not at least 2 of the ideas mentioned here) and involve the media to show the positive work being done through these loneliness type projects.

**Exercise Club – Get healthy and socialise**

Women are keen to get healthy and fit. We want to increase levels of physical activity in adults by a significant amount especially in these hard to reach groups including women, ethnic minority groups and those over 50. The initial health message will get them interested in taking part, however, the social and emotional benefits of sport and physical activity are immense and will keep them going.

**Walking clubs**

For those who want to get fit at a more relaxed pace and want to meet others in a similar situation. Planned routes exploring new areas. This will develop the groups confidence to get out and explore new areas of Middlesbrough.

**Well-Being co-ordinators**

The wellbeing coordinators will work with isolated people to try and get them involved in the community by signposting them to existing activities and other local services.

The wellbeing coordinators will accompany people to groups and activities at the beginning to help them settle in if they are feeling nervous. Once at the community centre the volunteers will help to build up the person's self-esteem and see if the person has any skills, such as cooking or crafts, that they could pass on to others and contribute back to the community.

**Identify what skills older people have to offer and how they might like to be involved in the community. What skills, networks, and assets has the project unearthed? In addition, what ideas have been put forward to utilise these skills, networks, and assets?**

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**Issue/Experience/Insight**

Many of the women spoken to were keen and highly skilled seamstresses. Our research showed that it was skill they were encouraged to learn in their home countries when they were younger. Some even sewed clothes in factories when they first came to the UK.

This information has come directly from the focus groups and interviews.

Many of the women still sew their own clothes.

A large number of the participants are housewives and have developed strong culinary skills. Such skills can be utilised in catering for luncheons clubs or soup kitchens, as well as teaching others

This information has come directly from the focus groups and interviews.

The women love cooking and feel this is something they are good at. They are keen to teach others their skills.

Some of the participants highlighted skills in free handed knitting and crochet. Again this was a skill that they had obtained during their teenage years and one that they would like to enhance further by being taught by a professional using patterns

This information has come directly from the focus groups and interviews.

The group dynamics showed that many of the women, over the years, had build up stable social networks which meant they had access to other older people. This was mainly due to extended family ties, as well as friends who were from similar regional areas in their home countries. These networks would provide a strong basis for recruiting other participants on to the project

This information has come directly from the focus groups and interviews.

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**Additional data/information that doesn't fit into the above categories but might still be useful.**

We feel like we have done justice to the research and gathered as much intelligence as we could. We have spoken to man women within this time and have taken the time to listen to them and what they would like to see happen. We have pulled together all their ideas and tried to format them in a manageable way that can be seen as a number of different activities set over a period of time.

We are really keen to start the second phase and make a real difference. However to make a real impact that can be seen we feel we would require more than the 6 months that is left. We would like to carry out this phase over a period of approx. 10. We are keen to make this meaningful and make actual in-roads into reducing isolation. The women have come up with some amazing suggestions and we want to do this project justice by seeing this through and not just 'scratching the surface'. We believe that we can get some positive messages out there through this programme and some positive media coverage about working to reduce isolation but doing 'good' for the community as well through some of the ideas mentioned above.

At the core of our research and second phase of this programme is the theory of the **'Five Ways to Well-Being' which are: Connect. Be Active, Keep Learning, Take Notice and Give.'**