







An exploration of the lived experiences and future needs of North Lanarkshire's Black, Asian and other Minority Ethnic people.

FINAL REPORT

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The views expressed in this report are solely those of the authors and research participants, and do not reflect those of North Lanarkshire Council.

Executive summary

This research was commissioned by North Lanarkshire Council (NLC).

The objective was to explore the lived experiences and future needs of Black, Asian and other Minority Ethnic (BAME) people residing in North Lanarkshire in relation to four key themes identified by NLC as being of interest in relation to this project: ageing population; digital skills and inclusion; employment and skills; and community cohesion and integration.

Key findings

Ageing population:

- Language was a barrier in making effective use of health and social care services especially for those who had limited or no proficiency in the English language.
- The lack of a culturally sensitive care service was leading to personal care being rejected by ethnic minority families.
- There was a perception that mainstream mental health services were western-centric and failed to acknowledge and consider alternative perspectives on mental health.
- There was frustration at the attitude of receptionists when engaging with primary health care services such as GP services to request appointments.
- Some BAME groups compared their experience of health care services in the UK unfavourably with their country of origin.
- Overall, the pandemic was viewed as having had an adverse impact on the experience of using health and social care services among BAME communities.

Digital skills and inclusion:

- In most BAME communities, there was a marked digital divide between the younger and older generations and between those who had better proficiency in English and those who lacked the necessary language skills.
- The provision of IT training by NLC and other agencies was deemed helpful. However, there were concerns that some aspects of the training did not meet the needs of learners and consequently uptake was low.
- There were mixed views among BAME communities as to whether cost was a barrier to accessing digital hardware and reliable internet services with affluent BAME families not impacted by the cost of digital devices and internet provision.
- In terms of future needs, some financial support for accessing digital and IT equipment would be welcomed by specific communities especially over concerns that digital services were overtaking face to face service provision since the pandemic.

Employment and skills:

- Occupational segregation in the labour market was viewed as being rife with BAME employees overrepresented in low status and low paid jobs.
- There was a perceptions that racial discrimination and lack of opportunities for BAME people in the labour market contributed to unemployment and confinement to low level jobs.
- For some BAME groups, language was a barrier to attaining high paid and high-status jobs even for those who possessed good educational qualifications and experience from their country of origin.
- Self-employment was an attractive option for many BAME groups as it provided an escape route from unemployment and low paid jobs and compensated for lack of educational qualifications.
- BAME groups would welcome training schemes and better support from agencies and organisations to help boost skills that could help enhance employment prospects.
- There was frustration that skills and qualifications acquired overseas were not always recognised in the UK and this impacted on the ability to compete in the labour market.

Community cohesion and integration:

- Integration with the host or white majority community was broadly supported by all BAME groups but language was viewed as a key barrier especially for those born overseas and the elderly.
- Despite support for integration, most
 BAME groups believed in the importance of maintaining their cultural and religious identity.
- The ability to speak English was viewed as important by BAME groups for a variety of reasons. However, some BAME groups did not feel that ESOL classes were effectively tailored to their needs.
- There was a broad consensus that the diverse cultures of ethnic minority groups were not celebrated by NLC in ways seen elsewhere in Scotland.
- Racism from the white community was not a major issue but children experienced a degree of racial microaggression at school.

- Most BAME groups had a better relationship with other ethnic minority groups than with the white community due to facing common challenges and having shared values and interests.
- Most BAME groups felt relatively safe in their neighbourhoods and did not have too many concerns when going about their day-to-day activities.
- Engagement with the political process was low as most BAME communities did not feel that politicians at local or national level did enough to address the issues they faced.

The findings reported above are broadly representative of all or most BAME communities who took part in the research. However, there are also findings that are unique to specific BAME groups that are highlighted below.

Polish Community:

- The Polish community perceived themselves as having a stronger work ethic than their Scottish counterparts but felt they lacked confidence in asserting their rights at work.
- Despite taking on work that was below the level of education and skills that had been acquired in Poland, there was a belief that the UK offered opportunities for career progression.
- Polish participants were divided on whether they would stay in the UK permanently with some expecting to return to Poland at some stage in the future.

Chinese Community:

- The Chinese community would welcome a care home service designed specifically for elderly members of the Chinese community.
- There was a feeling that some ethnic minority groups received more resources from the Council than the Chinese community.
- Although most Chinese people were doing financially well, success came at certain costs such as anti-social hours and poor working conditions.
- The Chinese community was underrepresented in politics at both local and Parliamentary level, not just in Scotland but across the UK. This was down to apathy among the Chinese community about participating in politics and mistrust of authorities.

Black African and Caribbean Community:

- Health services, including GPs, needed to employ more people from ethnic minority backgrounds to create a more welcoming environment for ethnically diverse service users of both primary and secondary health care services.
- There were concerns that some community centres and community facilities did not have access to reliable internet services.
- There was a lack of trust when it came to white co-workers and a perception that they were out to make life hard for black employees in the workplace.
- There was perceived discrimination in the allocation of housing with ethnic minorities offered poor and unsuitable housing in comparison to white people.

Congolese Community:

- There is a digital divide between Congolese men and Congolese women due to women having childcare commitments and not having access to affordable childcare and being primarily housebound. This meant men had more opportunity to attend classes to get training in IT skills.
- Congolese women would like the Council to provide greater access to IT equipment. While libraries did have computers these were always in demand and because libraries had specific opening and closing times, this was not always convenient.
- Congolese males were struggling to find suitable employment due to lack of training and prior work experience.
- Schools were not doing enough to demonstrate their inclusivity, for example primary schools had no pictures of Black children on their walls.

Syrian Refugee Community:

- There was a need for access to doctors who shared the same gender as patients due to cultural reasons as members of the Syrian community felt uncomfortable being examined by practitioners from the opposite sex when accessing health care services.
- The adults among the Syrian community were reliant on their young children for language support as the latter had attended school in Scotland. Children were often translating for their parents and the elderly in various situations.
- Syrian women who were mothers were keen for their daughters to get educated rather than get married very young and become housewives.

- Syrian women are happy to pursue employment and volunteering work once their children are older.
- The pursuit of selfemployment was appealing to Syrian women but they lacked the funding to make this a reality.
- There was a perception that Syrian men were struggling to find appropriate employment for a number of reasons such as jobs on offer not matching their skills, language barrier, and because some were suffering from health conditions acquired as a result of the conflict in Syria. Agencies geared to help find employment such as the Department for Work and Pensions (DWP) were not viewed as supportive.

- There was disappointment that Syrian families were not given the choice to send their children to nondenominational schools.
- Children had experienced racial bullying at school including name calling and girls were harassed because they wore the hijab.
- The value of integrating in Scottish society was accepted but this would not be at the cost of neglecting religious and cultural practices.
- The experience of fleeing persecution and the trauma of war had shaped or impacted the engagement of the Syrian community with certain services such as the police.

Indian Sub-continent Community:

- There was a lack of awareness of where to seek support in the future as more members of the Indian subcontinent community were becoming older and needed personal care, especially if they lived on their own and had no family support.
- A key barrier to the recruitment of more ethnic minority carers was the depiction of care work being a menial job.
- Hospital care services were not culturally sensitive with some hospitals unaware of 'halal' food. This meant that secondary health care services were not meeting the needs of patients from minority faiths.

- It was noted that NLC provided funding and resources for IT training in different languages. However, these were poorly attended and viewed as a lost opportunity.
- There was a feeling that the areas where participants reside had an impact on experience of racism. Those living in affluent areas and who attended schools there were less likely to experience issues than those who lived in deprived areas.
- It was difficult to gauge the prevalence of domestic abuse in the Indian sub-continent community but it was felt that it did exist and that it was very much hidden as it was considered a taboo area in Asian society.

 Some men from the Indian sub-continent were viewed as having a backward culture and were keen to push their own career forward whilst holding women back.

1. Introduction and research aim

North Lanarkshire is Scotland's fourth largest local authority area by population and in relation to ethnic diversity, the 2011 census revealed that the area is home to a number of BAME communities (National Records of Scotland, 2021).

It is envisaged that data from the most recent national census carried out in 2022, will show an increase in the ethnic diversity of the overall Scottish population including in North Lanarkshire.

Until recently, there had not been an undertaking by North Lanarkshire Council (NLC) to examine the lived experiences of BAME communities. However, in 2020, a working group was formed with a commitment to explore and understand the needs and issues facing BAME people. The group agreed an approach to carrying out a piece of research over 2 phases. Phase 1 involved a questionnaire of BAME communities and was conducted between December 2020 and February 2021 (Policy and Strategy Committee, 2021). Although some useful quantitative data was generated, it was deemed that phase 1 did not capture the qualitative aspect of the lived experiences of BAME communities. It was felt that this could be addressed through a qualitative study involving focus groups and interviews with BAME communities that would provide a voice to those communities and a deeper insight into their real-life experiences. Hence, NLC commissioned phase 2 of the research, the aim of which was to develop an understanding of the lived experiences and future needs of North Lanarkshire's BAME communities in relation to: an ageing population; digital skills and inclusion; employment and skills; community cohesion and integration; and the specific experiences of the Syrian refugees.

2. Methodology

2.1 Research approach and design

In line with the aim of the research to capture the lived experiences of BAME communities residing in North Lanarkshire, the research adopted a qualitative approach using focus groups and interviews to collect rich data and insights based on real life experiences of participants.

Focus groups and interviews are widely used in qualitative research of this nature (Quinlan et al., 2019; Saunders et al., 2018).

Although the original plan was to undertake only focus groups, the difficulties in getting sufficient participation from the Chinese community and the reluctance of this community to partake in a focus group setting led the researchers to revert to the use of one-to-one interviews with members of the Chinese community. This was viewed as a viable contingency plan that was better than opting to forgo the involvement of the Chinese community. The reasons for the unwillingness of the Chinese community to take part in a focus group in a physical setting appeared to be for a combination of reasons such as fear of Covid and concerns of a backlash because of the media spotlight on China having been the possible origin for the virus.

Furthermore, initially the research programme had aimed to undertake a separate male and female focus group with each community. However, this was not possible due to insufficient numbers in relation to some BAME groups. In such instances, a mixed focus group was undertaken.

A series of focus groups and interviews were undertaken with each of the 6 main ethnic minority groups residing in the North Lanarkshire area. The fieldwork was conducted between May and August 2022 using a combination of face to face and online platforms. Participants were recruited through a blend of the researchers' contacts and those provided by NLC. In total, 8 focus groups were carried out as illustrated in Table 1.

Ethnic background of focus group/interview participants	Gender of participants	Number of participants
Polish	Mixed	8
Congolese	Female	4
Congolese	Male	6
Black African and Caribbean (excluding Congolese)	Mixed	5
Syrian	Male	3
Syrian	Female	4
Indian sub-continent	Female	8
Indian sub-continent	Male	4

Table 1: Composition of focus groups by ethnicity, gender and number of participants

In addition, 5 one to one interviews were conducted with the Chinese community comprising 3 females and 2 males. Further information on the demographic profile of research participants can be found in section three of this report.

No interpreter was required for the focus groups undertaken with the Polish, Congolese and Black African and Caribbean communities as participants' proficiency in the English language was adequate in responding to questions and prompts. Interpreters were recruited for the Syrian focus groups and for interviews with the Chinese community. For the Indian subcontinent focus groups, the researchers assumed responsibility for interpreting as they were proficient in the languages spoken by participants. Proposed focus group and interview themes were piloted with gatekeepers and the project team. Following the pilot, an agreed focus group and interview schedule was constructed that was used as a basis for the fieldwork (Appendix 1).

2.2 Data analysis

The qualitative data that emerged from the research was exposed to thematic analysis. This process involves the use of categories and codes for common themes that emerge from the findings. The analysis of the data was further supported by the rich insights captured directly from focus group participants and interviewees which shed further light on the findings and increased the reliability and validity of the research. The approach adopted in the analysis of the data will allow the outcomes of the research to be interpreted by a broad audience of stakeholders thereby increasing the value and impact of the research.

2.3 Research ethics

To ensure that the research adhered to ethical practices, the lead researcher submitted plans for the proposed research to the University of the West of Scotland's (UWS) Ethics Committee for formal approval. This process assessed all stages of the planned research to ensure that it complied with the principles of anonymity, confidentiality, data protection and consent in relation to both participants and the data collected. UWS is registered with the Information Commissioner's Office, which implements the General Data Protection Regulation and the Data Protection Act 2018. Formal notification that ethical approval was granted was received in March 2022.

All data collection instruments used involved the dissemination of a participant information sheet which provided would-be participants an overview of the research and laid out the purpose of the research (Appendix 2). The information sheet also communicated the voluntary nature of the research and the right of would-be participants to withdraw their involvement at any point. The information provided set out the level and nature of involvement required on the part of participants and how the data collected would be managed, including, how it would be stored, protected, used and disposed of. For the focus group and interviews, participants were required to sign a consent form confirming their willingness to take part and their consent to being audio and video recorded (Appendix 3).

Data captured was stored securely on a password protected device to ensure that it could not be accessed by any unauthorised party. Further security of the data was ensured through all files being password protected. Focus group and interviews conducted in-person were recorded using a digital camera while online focus groups and interviews were recorded via Microsoft teams and zoom. Transcription of the files was undertaken by a professional transcription service who signed a data processing agreement to ensure the safeguarding and confidentiality of the data.

2.4 Challenges and limitations

Phase 1 of the research that involved a questionnaire of North Lanarkshire's BAME communities had identified a number of shortcomings such as a low response rate and gaps in the following areas:

- Responses from the Indian sub-continent and Chinese communities
- Responses from the Northern Corridor and Kilsyth areas
- Responses from the Congolese refugee community
- Response from males

While phase 2 of the research also has limitations, it has however plugged most of the gaps that emerged from phase 1 by managing to engage with the Indian sub-continent, Chinese and Congolese communities as well as with male participants from all targeted BAME groups. As with phase 1, participation from BAME individuals living in the Northern Corridor and Kilsyth was low. On reflection, phase 2 presented the researchers with a number of challenges:

• Initial reluctance and lack of engagement from BAME communities to take part in the research due to lack of trust and confidence in the purpose of the research.

- Lack of engagement and apathy from 'gatekeepers' representing various BAME communities in supporting the recruitment of participants and slow response time.
- Complexity in finding a convenient time and date suitable for all would-be focus group participants.
- Unwillingness of the Chinese community to participate in a focus group.

These challenges impacted on the initial timeline for the research. However, the researchers used their experience and perseverance to navigate the challenges and managed to recruit a sufficient number of participants and carry out the fieldwork despite the initial delay. As noted above, in relation to the Chinese community, the researchers resorted to undertaking one to one interviews in an online setting. It is also worth pointing out that uncertainty over Covid restrictions and the general reticence created by the pandemic impacted on getting the research underway.

3. Demographic profile of participants

During the process of recruiting participants for the focus groups and interviews, the aim was to ensure that the cohort of participants were as representative as possible of different agegroups, gender, and employment status among the targeted BAME communities.

While this task proved quite challenging given the initial lack of engagement and interest from would-be participants, the researchers managed to compile a reasonably diverse cohort of participants. Table 2 provides a breakdown of the characteristics of the overall sample of participants who were recruited for the research.

Table 2: Demographic profile of research sample

Ethnic background	Total number of participants
Polish	8
Congolese	10
Black African and Caribbean	
(excluding Congolese)	5
Syrian	7
Indian-sub-continent	12
Chinese	5
Gender	
Female	27
Male	20
Age-group	
16-25	4
26-35	12
36-45	14
46-55	7
56-65	5
Over 65	5

Ethnic background	Total number of participants
Employment status	
Employed (including self- employed)	20
Unemployed	3
Student	6
Retired	5
Housewife	7
Disabled/unfit to work	1
Other – including unpaid	5
carer and volunteer	
Total number of	47
participants	

The research managed to recruit participants from both sexes as well as from all agegroups above 16. In terms of employment status, participants were representative of a wide range of categories including those who were employed, unemployed, students, retired and housewives. Table 3 lists the geographic areas of North Lanarkshire where participants resided. While most of the main areas of North Lanarkshire are represented in the research, as noted above in the limitations, it was not possible to achieve a satisfactory level of engagement of individuals from BAME communities that resided in areas such as Kilsyth and the Northern Corridor where relatively low numbers of BAME individuals reside.

Table 3: Geographic areas represented in the research

Geographic areas			
Airdrie			
Bellshill			
Coatbridge			
Cumbernauld			
Motherwell			
Shotts			
Stepps			
Wishaw			

4. Findings

Findings from the analysis undertaken of the focus groups and interviews are reported in this section.

These findings are deemed to be representative of all or most of the BAME communities that participated in the research. The findings are presented under each of the 4 key themes in relation to this research: An ageing population; digital skills and inclusion; employment and skills; and community cohesion and integration. Given the additional interest of the research in understanding lived experiences from a gendered perspective and a desire to gauge the specific experiences of Syrian refugees, some findings in relation to these areas are also presented. It should be noted that quotes cited from responses by participants in their mother tongue were translated into English by interpreters.

4.1 Key findings by theme

4.1.1 Ageing population

Language was a barrier in the ability to make effective use of health and social care services especially for those who had little or no proficiency in the English language. This was particularly the case among elderly ethnic minorities and those who were born outside the UK.

The problem was accentuated by regulations which prohibit patients from using family and friends to interpret at appointments and consultations. In instances where professional interpreters were provided, they were not always available on a consistent basis: "I think the main area is the language barrier....it is quite hard to get the necessary support if the service provider cannot provide the language support. I think a lot of older ethnic minorities still cannot speak fluent English. How can a home help be of any use if they can't pick up what support the client needs?"

 $(Chinese\ interviewee\ 2\ \text{-}\ male)$

"In the household we have people who can speak English but because legally my child or my wife is not allowed to translate or interpret that is where the barrier comes in...the council, the NHS need to provide an interpreter"

(Congolese male focus group - participant 4)

"I had interpreting service support for a while when I went to see the GP. That was given for a short period of time and then it was stopped. It also depends on which staff you are dealing with. Some staff are very aware of who to phone to arrange for an interpreter but other staff just don't have a clue"

(Chinese interviewee 3 - female)

The lack of a culturally sensitive care service was leading to personal care being rejected by ethnic minority families and subsequently increased the burden on family members and relatives. Effective personal care at home required more paid carers who represented the ethnicity of patients and who were therefore culturally sensitive to the needs of service users. Where this was not possible, an alternative could be to provide training in cultural awareness to white carers. The current gap in providing effective and culturally sensitive personal care to BAME communities was viewed with pessimism in the context of the future needs of disabled and elderly ethnic minority communities in North Lanarkshire:

"Asian families want people coming into their homes who understand the religious requirements, the personal hygiene requirements, all those sorts of things, and the trouble with home carers is the majority of them are non-Muslim and where families have them coming in after a few weeks they say 'no thank you' because it is not working"

 $(Indian\ sub-continent\ female\ focus\ group\ -\ participant\ l)$

"It is a big gap (the lack of ethnic minority carers)...I am not aware of a lot of Chinese carers out there. So, I think there is a need for maybe a kind of drive or incentive to recruit the carers who can speak the ethnic minority languages"

 $(Chinese\,interviewee\,2\,\text{-}\,male)$

"There is not enough people from our culture to understand what the elderly will go through during the time when they need personal care.... I think maybe more research in how those people in that community live and look for people who have at least knowledge on the culture and the needs and values of that person. So maybe before they (social and personal care services) send people to support the person, they need to make sure that person has at least the knowledge of the culture"

(Congolese male focus group - participant 6)

There was a perception that mainstream mental health services were western-centric and failed to acknowledge alternative perspectives on mental health, which in turn reduced trust in the services among BAME communities:

"All services including the mental health department need to actually understand Islamic beliefs because they have got a viewpoint of psychology and they think everything is medical when in fact there are spiritual issues involved which need to be looked at when dealing with mental health issues"

(Indian sub-continent male focus group - participant 3)

"Mental health is not just about someone being depressed or going crazy. There can be other forces at work which had led to this situation. These need to be explored with the help of religious people"

$(Syrian \ male \ focus \ group \ - \ participant \ 2)$

There was frustration at the attitude of receptionists when engaging with primary health care services such as GP services when requesting appointments. Over inquisitive receptionists were endangering patient confidentiality and lack of respect from receptionists towards BAME patients was discouraging engagement with GP services: "When you go to the reception there is that 'you are not meant to be here'.......'you are meant to do it online'....the receptionist was like 'you don't have an appointment', 'you must leave now', 'you can't be here'... so people are finding that their health is getting worse"

 $(Syrian \ male \ focus \ group \ - \ participant \ 2)$

"I think the chain of communication needs to be improved when it comes to GPs so sometimes if you call and if you are not dying then you don't get to see the GP!"

 $(Black\,African\,\,and\,Caribbean\,\,female\,\,focus\,\,group\,\text{-}\,participant\,\,4)$

"There was one incident when there was a mix up with my appointment when I arrived at the surgery and the receptionist said 'we can't do anything about it, it's not our fault', and while I was speaking to her she went 'could you wait at the side' and she started serving the other patient who was white. I felt like this was racism because when it is a white British person they show them more respect"

$(Indian\ sub-continent\ male\ focus\ group\ -\ participant\ l)$

Although long waiting lists for diagnosis and treatment of long-term health conditions were not viewed as being uncommon, they were causing much frustration. Some BAME groups were making comparisons with their country of origin where they felt they had received a better standard of service:

"Oh my god! You can die waiting for everyone....I went to the GP because my daughter had a serious mental health issue and the doctor said he could not do anything but gave me a referral but said I might have to wait for months by which time I thought that my child might kill herself"

(Polish focus group -participant 1: female)

"It used to be 3 or 4 days waiting for a GP appointment, now you are waiting way longer that that. Then it is on the telephone, you don't understand them, there is no interpreters or nothing available"

(Syrian female focus group - participant 3)

"Some people I know are going back home because it is quicker to be seen by a specialist there whereas here it is longer"

(Syrian male focus group - participant l)

"I have been here for 4 years and honestly the GP service is nothing to write home about. They don't care...you won't believe me when I tell you that I come from a small village in Africa where they are more organised. Here I do not even know who my doctor is as they are always changing doctors all the time"

(Black African and Caribbean focus group - participant 1: female)

Overall, the pandemic had had an adverse impact on the experience of using health and social care services among BAME communities.

4.1.2 Digital skills and inclusion

For most BAME communities, there was a marked digital divide between the younger and older generations and between those who had better proficiency in English and those who lacked the necessary language skills.

There were concerns about the ability of the older generation to cope with the increase in services provided online since the pandemic. Given that many services were likely to remain online in the future, this was increasing concerns in relation to future needs. While some communities were able to rely on younger people to bridge the digital divide, those who were alone or had no family or friends were viewed as being vulnerable to further isolation:

"They (older people) can't really use the technology. They are not up to date on that kind of thing and those elderly people who are living on their own they are struggling even more to access important information that is online"

(Congolese female focus group - participant 2)

"My mum has an i Phone 12 but all she can use it for is to make telephone calls. It is a shame. She can't use it for any other purpose. She does not have an iPad or Laptop and she would not know how to use it"

$(Chinese\,interviewee\,5-male)$

"I don't want to generalise, but I think the older generation the majority of them don't actually know how to read or write in English and because the internet and digital services are geared more towards English, they just cannot cope and are reluctant to learn"

 $(Indian \ sub-continent \ female \ focus \ group \ -participant \ l)$

"We can maybe use the phone and stuff like that but when it comes to reserving things or booking things or a GP appointment we can't do that"

(Syrian female focus group - participant 3)

"I think you have the issues with the older people...they don't speak English but there are IT courses available if you look for them. Digital skills are not a problem it is more language skills"

(Polish focus group - participant 3: male)

The provision of IT training by the council and other agencies was deemed helpful and was welcomed. However, there were concerns that some aspects of the training did not meet the needs of learners and consequently uptake was low. Furthermore, offering IT training in different languages was seen as being more effective and would encourage higher uptake given that poor proficiency in the English language was a contributory factor in the lack of engagement with training:

"I would welcome IT classes for myself to increase or enhance my IT skills. I would welcome any support from the Council on this"

(Chinese interviewee l - female)

"The support we would like to see is yes maybe training for us. We would like it to be in 2 languages for it to be effective"

(Syrian female focus group - participant 4).

"There used to be IT classes I think but they are too basic. They are not really the ones we need when it comes to dealing with real life situations and trying to get a job"

(Congolese female focus group - participant 2)

Views were mixed on whether cost was a barrier to accessing digital hardware and reliable internet services with those communities who were relatively affluent such as the Indian sub-continent, Chinese and Polish communities not viewing cost as an impediment, but the Congolese and Syrian refugee communities and the Black African and Caribbean community were concerned about the cost of purchasing digital hardware:

"The prices of devices is very expensive. During Covid some of the kids got devices to use at home but now if you don't have a job you cannot afford these devices"

(Syrian male focus group - participant 3)

"If you look at the prices at the moment, everything is high. So, wages completely dropping for the income and getting a computer right, what am I going to buy a computer or pay for electricity or food...you have to prioritise"

 $(Congolese \ male \ focus \ group \ - \ participant \ 4)$

"Cost is an issue because sometimes the only thing you have is the library and the library have a set time for closing and opening...sometimes when you go there all the computers are taken....more places are required where people can access equipment if they can't afford to buy it"

 $(Congolese \ female \ focus \ group \ - \ participant \ 1)$

"Because of cost we are looking at free access to the internet and digital equipment... the council should work hand in hand with charity organisations to get people access"

(Black African and Caribbean focus group - participant 1: male)

In terms of future needs, some financial support for accessing digital equipment would be welcomed by specific communities especially over concerns that digital services were overtaking face to face service provision since the pandemic.

4.1.3 Employment and skills

Occupational segregation in the labour market was viewed as being rife with BAME employees overrepresented in low status and low paid jobs. Many BAME people were working in jobs that were below their level of education and qualifications:

"I've worked in a few places, I've worked in warehouses and home deliveries...I'm working at a takeaway now....I just think it's slave labour. You're getting a low wage and barely getting a break. You are sometimes constantly working for 5 or 6 hours in a row.... this cannot be right or even legal"

 $(Indian\ sub-continent\ male\ focus\ group\ -participant\ 4)$

"You get your CV done, you go to work and you tell them that you have these qualifications and experience from back home... at the end of the day you get a job in a factory and it is nothing related to your experience"

 $(Congolese \ male \ focus \ group \ - \ participant \ 6)$

"There are barriers that stop people progressing in jobs... I don't like to use the word discrimination but you know what I mean....There is an element of people finding it quite hard to break into say management when they are obviously qualified so the job they end up with is kind of low down and there is very few people from ethnic minorities in senior management"

(Chinese interviewee 2 - male)

Perceptions of racial discrimination and lack of opportunities for BAME people in the labour market contributed to unemployment and confinement to low level jobs as well as the inability to acquire the desired experience: "My son has got a degree and had a job. He lost his job because of Coronavirus. Now he can't get a job wherever he applies. He's got education...he says he has submitted 30 or 40 applications. It's racism that is happening with my son"

 $(Indian \ sub-continent \ male \ - \ participant \ l)$

"The interview processes are not fair....at the end of the day you hear things like 'oh sorry we got someone that's more qualified'... it is silent discrimination...you feel really uncomfortable with the whole process"

(Black African and Caribbean focus group - participant 3: female)

"Racism can be subtle and not always easy to prove. You go for a job interview and there are ten people going for the interview. They could all have the same skills and experience but the Chinese one will not get picked"

(Chinese interviewee 3 - female)

For some BAME groups, language was a barrier to attaining high paid and high-status jobs even for those who possessed good educational qualifications and experience from their country of origin:

"I think for me, my husband is a gas safe engineer because there was no other option. He has a language problem. So, he could not find a job so he chose to be self-employed"

 $(Indian\ sub-continent\ female\ focus\ group\ -participant\ 2)$

"There are people here who came over with great qualifications like electricians and plumbers but they are working for low paid jobs now because they still can't' bring themselves to speak English so they are working well below their qualifications and skills"

(Polish focus group - participant 3: male)

"Nowadays you need to apply online for jobs. Some people can do that very easily but some people can't. The forms you have to fill in are in English so people whose background is Indian or Pakistani it is a bit hard for them even if they were qualified back home"

(Indian sub-continent female - participant 2)

Self-employment was an attractive option for many BAME groups as it provided an escape route from unemployment and low paid jobs and compensated for lack of educational qualifications. Furthermore, there was an expectation among some BAME groups that children would carry on with the family business that had been built by their parents at the expense of pursuing education:

"Children after they come from school a lot of them have to share responsibilities of the family business. Lots of families don't have educational aspirations because they have the family businesses to fall back on"

(Indian sub-continent female focus group - participant 8)

"I set up a business because I could not find a job. It (self-employment) is very hard but once you go on that path you don't want to go back to working for someone else"

(Indian sub-continent male focus group - participant 3)

BAME groups would welcome training schemes and better support from agencies and organisations to help boost skills that could help enhance employment prospects and assist individuals to gain work experience:

"Unemployment is high in our community because when we came here we didn't have experience. So for every job, they ask for experience and more training and if you don't have that training then how do you get a job...we need more training and apprenticeships opportunities including for adults"

(Congolese male focus group - participant 2)

"I think there should be more support in getting more Chinese people back to work especially the work they are looking for. Not everyone wants to work in a Chinese kitchen or restaurant. Maybe some training to help them get the right qualifications to do the kind of work they really want to do"

(Chinese interviewee 2: male)

"The government needs to provide better support for people who want to set up their own businesses and guide people...we made appointments with organisations but their services were not suitable...we need somebody to take us through step by step and explain the law and regulations that come with that"

(Syrian female focus group - participant 2)

"To open up a shop or other business you need to do a lot of paperwork...there is a lot of bureaucracy...they will send you to this big Business Gateway who will give you papers and tell you to go find someone who will help you do this (complete the paperwork)"

(Congolese male focus group -participant 4)

4.1.4 Community cohesion and integration

Integrating with the host or white majority community was broadly supported by all BAME groups. However, language was viewed as the prime barrier to integration especially for those born overseas and the elderly.

"Yes I think it (integration) is important...for a couple of years when I first came here I did not want to integrate with anyone especially people from here as I did not feel Scotland was my home. However, after a few years I now see this place as home and I now try to connect with local people"

 $(Polish \ focus \ group \ - \ participant \ 4: \ male)$

"I think to integrate with the community of any country you are going to have to learn the majority spoken language to have the proper inclusion and integration

 $(Indian \ sub-continent \ female \ focus \ group - participant \ 6)$

"The main barrier is the language....can you integrate if you do not understand Scottish people?...You struggle with the accent"

 $(Polish \ focus \ group \ - \ participant \ 5: \ male)$

"I would like to meet more friends and go to different clubs and whatever but due to language barrier I am not able to do that.....I can't have any in-depth conversations or meaningful interactions with my neighbours"

(Chinese interviewee 3 - female)

Despite support for integration, most BAME groups believed in the importance of maintaining their cultural and religious identity and felt they had to strike a balance between the two. Achieving integration and preserving cultural and religious identity simultaneously were viewed as being possible but challenging:

"I think it is possible to do both (integrate and maintain cultural and religious identity)... personally I am an ambassador of my own country and my culture...I would go out of my way to try and make friends with my neighbours

(Indian sub-continent female focus group - participant 7)

"You can integrate to a certain point.....you can't fully integrate because you will lose your own cultural and religious heritage so there has to be a limit to integration"

(Syrian male focus group participant l)

"I don't want to integrate completely into Scottish society. I want to maintain my Chinese identity. This is important for me"

 $(Chinese\ interviewee\ 4\ \text{-}\ female)$

"My culture is very important. Even though my children are Scottish, I don't want them to learn one language.....I want them to be bilingual as they have another culture"

$(Congolese \ male \ focus \ group \ -participant \ 5)$

The ability to speak English was viewed as important by BAME groups for a variety of reasons. However, some BAME groups did not feel that English classes provided were effective or tailored to their needs: "English is very important because we live here but the ESOL classes are not appropriate or sufficient. There should be classes about real life things such as jobs... the English they get in class is not what they need...Unfortunately the way ESOL is run is still kind of like what is your name? What is your address?"

 $(Syrian \ male \ focus \ group \ - \ participant \ 2)$

"100% if we are staying in the UK, it is an English-speaking language here so to get by we need to be able to speak it. I feel very strongly about that"

(Indian sub-continent female - participant 3)

"We struggle with the English classes because we cannot read or write in our own language so English classes are hard for us. We would rather that the classes focused on English conversation"

(Syrian female focus group - participant l)

There was a broad consensus that the diverse cultures of ethnic minority groups were not celebrated by North Lanarkshire Council in ways seen in other parts of Scotland such as Glasgow:

"No the council does not celebrate diverse events like Eid....Maybe the Chief Executive does in his own office! But we don't know anything about it"

(Indian sub-continent male focus group - participant l)

"I would say no (diverse cultures not celebrated). Nothing in Lanarkshire. I think Glasgow is more welcoming that way and there are more signs of welcome there"

 $(Indian\ sub-continent\ female\ focus\ group\ -participant\ 8)$

In general, racism from the white community was not a major issue but children experienced racial microaggression at school:

"The girls suffer more bullying because of the hijab. Schools would benefit if they had an awareness of other cultures and showed the positive of each religion....seeing your child bullied and crying makes you uncomfortable"

 $(Syrian \ male \ focus \ group \ - \ participant \ 2)$

"There is racism and some kids have felt the wrath of it more than others but also if the ladies are in the hijab it's worse

 $(Syrian\,female\,focus\,group\,\text{-}\,participant\,4)$

"I used to go to a white majority public school and I obviously made friends with a lot of white people and I feel like some people are very nice but there is quite a big group of people who maybe their parents have given them some stereotypes and they bring these to school and use racist slurs and call you terrorist"

$(Indian \ sub-continent \ female \ focus \ group - participant \ 6)$

Most BAME groups had a better relationship with each other than with the white community due to shared values, interests and challenges:

"We have more relations and more friendship with Pakistanis than actually white British people because of the similarity in culture and religion

 $(Syrian \ male \ focus \ group \ - \ participant \ 2)$

"I feel I can relate to Pakistani, Polish and anyone else who is not like white...we can talk about more things with my Pakistani friends and I can eat the same food and talk about similar things"

(Syrian female focus group - participant 4)

"We love non-Scottish people because I think they are my friends, and they are in the same situation as we are"

(Polish focus group - participant l: female)

"Definitely...100% our relationship is better with other ethnic minority groups than whites....I feel that they are facing the same things we blacks have to deal with you know the same issues.."

(Black African and Caribbean focus group - participant 2: female)

Most BAME groups felt relatively safe in their neighbourhoods and did not have too many fears when going about day-to-day activities. However, the language barrier and cultural differences hindered greater socialising with the white community:

"My neighbours here are very nice. When I first moved in, they were trying to help me and said 'if you need this' or 'there's a community centre here' and things like that"

(Black African and Caribbean focus group - participant 4: female)

"I find that some of the older white people are really nice, like my own neighbours. We go over to their house and have dinner with them...they are almost like my Scottish grandparents"

 $(Indian \ sub-continent \ female \ focus \ group - participant \ 6)$

"Where we stay is alright. We know the neighbours. We know everyone....never had any problems"

(Indian sub-continent male focus group - participant 3)

"My neighbours are very good and they have been here for a long time. They have become good neighbours so I feel safe in this community"

 $(Chinese\ interviewee\ l-female)$

Engagement with the political process was low as most groups did not feel that politicians at local or national level did enough to address the issues raised by BAME communities:

"There is not enough representation of Chinese people in local or national politics. Definitely not....you know they are well underrepresented in the Houses of Parliament and in Holyrood. How many Chinese councillors are there or Chinese MPs? I think there is a general apathy about participation in politics"

(Chinese interviewee 2 - male)

"They (councillors and politicians) just use you. They use you just to get what they want and after that they tell you they are too busy. They just want your votes but after the elections they are not interested"

(Black African and Caribbean focus group - participant 1: male)

4.2 Gendered perspectives

In relation to gendered perspectives, this research did not extract anything of note from the Polish, Chinese and Black African and Caribbean communities.

However, for the remaining BAME groups there were some gender-specific concerns that are worth highlighting as follows:

- In the Congolese refugee community, there is a digital and English language divide between men and women due to women being primarily housebound with childcare commitments. Not having access to affordable childcare meant that Congolese women lacked the opportunity to attend English classes and IT training. Congolese women also expressed an interest in pursuing employment but found this challenging because their male counterparts were not willing to share the burden of childcare.
- In relation to the Syrian refugee community, women conveyed a desire to pursue employment including volunteering opportunities but only once their children were older and required less monitoring and supervision:

"We want to work with something that is giving back to the community. I would love to volunteer on anything to do with care or mental health"

$(Syrian\ female\ focus\ group\ -\ participant\ l)$

Syrian women felt that their husbands would only support their wish to work as long as they did not neglect their household duties:

"My husband would not have been happy for me to work before but now he is as long as they don't have to look after the kids and we do all our house duties"

(Syrian female focus group -participant 3)

• Women from the Indian sub-continent stressed that domestic abuse existed in their community but was very much hidden as it was viewed as a taboo area in their culture. The lack of a confidential and culturally sensitive support service discouraged women from speaking out:

"Domestic abuse I would say is very much hidden because of the communities. The Pakistani community here everyone knows each other, and they are very reluctant to bring it out in the open but it is very much there and there is no specific services here in Lanarkshire to provide that sort of cultural support as well. So, whatever happens, it is behind closed doors"

(Indian sub-continent female focus group - participant 7)

Indian-subcontinent women also felt that they were held back from realising their full potential by a dominant male culture among their community:

"I think in general it's a man's world. This also applies to the white community but is more so in our communities"

 $(Indian\ sub-continent\ female\ focus\ group\ -participant\ 4)$

"A lot of Asian women in Lanarkshire can only access services if men are ok with it. If they (men) are not happy with women folk accessing a service they can cause hindrances and put up barriers....it is very much a patriarchal society"

(Indian sub-continent focus group - participant 8)

4.3Findings from the Syrian refugee community in the context of the indicators of integration framework

If we assess the experience of the Syrian refugee community using the indicators of integration framework devised by the Home Office (2019), the findings disclose the following in relation to those indicators of the framework captured in this research:

- Health and social care Participants from the Syrian refugee community felt that mental health services in the UK were not equipped to deal with those suffering from the effects of war and conflict trauma.
 Furthermore, health care services were not viewed culturally appropriate, for example: where male patients wished to be examined by a male doctor, this was not always possible.
- **Digital skills** In comparison to other BAME groups in North Lanarkshire, the Syrian refugee community did not perceive there to be a big digital divide between the older and younger members of the community and digital illiteracy was not necessarily seen as a problem.
- Work Poor health was preventing some Syrian men from gaining employment. Those who were fit for work were struggling to find appropriate employment due to the language barrier and jobs not matching their skills. There was a strong appetite for pursing self-employment including among females but financial constraints hampered this.

- **Safety** There were no major concerns about safety and security in the immediate neighbourhoods where refugees resided. However, there was disquiet at bullying and racial and religious microaggressions experienced by some Syrian children at school.
- Language and communication Language proficiency among adult Syrians was poor and many were relying on children who had attended school in Scotland to help with interpreting and translation.
- Social bonds with those who share a sense of identity Relationships were very positive with those communities with shared cultural and religious heritage such as other Arab communities and with the Pakistani community.
- Social bridges with people from different backgrounds – Relationships were challenging with people who did not share the same language or religion, including members of the white host community. The language barrier and a desire not to compromise cultural and religious principles were key impediments to building social bridges with people from different backgrounds and hence had a negative impact on advancing integration.

5. Discussion

How should we interpret the findings about the lived experiences and future needs of BAME communities in North Lanarkshire?

The evidence from this research suggests that health and social care services in North Lanarkshire are currently perceived as not being equipped to provide a culturally inclusive service that is able to meet the needs of service users in a number of areas such as interpreting and translation, dietary, spiritual and religious needs.

This appears to concur with the situation across the UK as previously echoed by organisations such as Carers UK (2011) and Age UK (2021). The health and social care system needs to develop greater awareness of diverse cultures and provide support that is sensitive to cultural attitudes and practices if it is to meet the future needs of BAME communities. In relation to personal care in particular, the lack of a culturally appropriate care service is putting additional pressure on BAME families to plug the gap.

In line with previous studies, this investigation also reveals a familiar story of language being a barrier to access and effective engagement and uptake of health and social care services among BAME communities. Empirical research undertaken by the Centre for Migration, Policy, and Society (COMPAS, 2006) documented how the language barrier among migrant and refugee communities can lead to less favourable outcomes in a number of domains such as health and social care. More recent research provides further credence to this and suggests that barriers related to language and communication and a lack of cultural inclusivity contribute to health inequalities for BAME people (Age UK, 2021; Oluwatosin, 2021) and can stifle attempts to achieve successful integration (Home Office, 2019).

Studies across the UK acknowledge that over the next few decades we are likely to see a rise in the number of elderly BAME people needing care (Greenwood, 2018) and if care services are not able to provide a culturally competent service, then negative outcomes are likely to persist for the foreseeable future.

Studies undertaken across the UK have identified that digital exclusion is a real problem faced by BAME groups, especially refugee communities (Refugee Studies Centre, 2021). Digital exclusion is likely to remain an issue if IT training does not meet the needs of learners and if elderly service users do not engage with training. There is already growing evidence to suggest that digital exclusion is associated with social isolation especially among the elderly and this was especially obvious during the Covid-19 pandemic (Seifert, 2020). Furthermore, as highlighted in this research, there is a digital divide between the younger and older generations and also between those with differing levels of proficiency in the English language. Engaging older people in IT training and language support classes will help bridge the digital divide among generations.

In relation to employment and skills, this research reveals that self-employment is a popular avenue for attaining employment for many BAME communities due to multiple reasons including discrimination and disadvantage in the labour market. In this respect, the findings validate studies that have consistently revealed the disproportionately higher rates of selfemployment among BAME groups in the UK (Clark and Drinkwater, 2000). The research also concurs with literature that underscores problems encountered by BAME individuals in relation to seeking employment and being confined to low-income employment with lower prospects for promotion and progression (Kirton and Greene, 2022).

In considering the theme of community cohesion and integration, the findings indicate a general perception that the cultures of ethnic minority groups are not adequately celebrated or showcased across North Lanarkshire. Most BAME groups appear to have a better relationship with other BAME communities than the white community, with the language barrier and differing expectations and practices in relation to culture and religion the main impediment to greater cohesion with the host community.

The language barrier appears to be a key denominator in the negative outcomes for most BAME communities in relation to multiple areas. It is evident from the voices of BAME communities in this research that the language barrier is impacting negatively on the experience of services received. It is also worsening digital illiteracy and exclusion as the lack of confidence created by a poor grasp of the English language is hindering engagement with IT training and digital services. Furthermore, lack of proficiency in English is hampering employment opportunities, both in terms of applying for jobs and performance at work, and impacting on the ability to develop social bonds with the host community. These outcomes align with evidence presented in studies undertaken by the Home Office over a number of years which have consistently illustrated the detrimental impact of poor language proficiency for BAME groups (Home Office, 2010). More recent work by Morrice et al. (2021) reiterates how poor language and communication skills impede the chances of successful integration.

In relation to gender, for women from the refugee communities in particular, the lack of adequate childcare prevented them from accessing ESOL classes and thereby achieving English language proficiency. This had a subsequent effect on their ability to integrate with the local community and pursue employment. In this research, we have witnessed women from the Congolese refugee community drawing attention to the lack of childcare support. A report by the All-Party Parliamentary Group (APPG) on refugees confirmed the need to provide adequate childcare to allow women from refugee communities to access ESOL classes (APPG, 2017).

The findings reported from this research have implications for a range of stakeholders. In addition to NLC, health and social care providers, employment agencies, business support organisations, educational authorities and voluntary and third sector organisations and community groups need to consider the implications and respond appropriately. The issues faced by BAME communities suggest that a coordinated approach among relevant stakeholders is needed to address the challenges faced by BAME groups across the key themes explored in this research. Consideration could also be given to the framework developed by the Scottish Government to support the integration of refugees (Scottish Government, 2013) and its 'priorities plan' for race equality (Scottish Government, 2021) when considering policy prescriptions.

Local authorities and public sector agencies, in particular, have a legal duty under the Equality Act 2010 and the public sector duty to tackle inequalities in employment and service delivery (EHRC, 2020). They also have an added moral or social justice duty to tackle discrimination and disadvantage across society (Dickens, 1999). At a national level, there may also be lessons for the Scottish Government to take on board as part of its approach to supporting BAME communities across Scotland.

6. Conclusion

This investigation set out to develop an understanding of the lived experiences and future needs of North Lanarkshire's BAME communities in relation to: an ageing population; digital skills and inclusion; employment and skills; and community cohesion and integration.

To date, studies on the lived experiences of BAME communities in Scotland have been rather sparse (Ishaq et al., 2021).

As well as adding to the body of knowledge, this research builds on the phase 1 survey undertaken by NLC, the findings of which contributed towards informing the themes for this phase of the research. It is worth noting that the qualitative findings as highlighted in this report broadly support the quantitative data collected in phase 1. The evidence gathered leads to the conclusion that while BAME communities in general are positive about life in North Lanarkshire, there are areas where they face challenges and barriers that will require policy interventions and institutional support from the authorities and agencies at both local and national level.

While the challenges experienced by BAME groups reported in this research are broadly synonymous with those revealed elsewhere in the UK, the findings from this research are invaluable as they represent the voices of North Lanarkshire's ethnic minority communities which up until this point have been largely neglected. The need to gauge the lived experiences of BAME groups was made more pertinent by the emergence of the Black Lives Matter movement over the past few years, which placed greater spotlight on the plight of BAME communities.

Furthermore, understanding the lived experiences of BAME groups in North Lanarkshire will allow lessons to be learned about the prospective needs of future immigrant and refugee communities arriving in the area as well as improving the present circumstances facing BAME communities. Reflecting on the experiences reported in this research will support evidence-based decision making, and allow for better and more effective planning for the future to ensure that resources and infrastructure are in place to meet the future needs of both current and new communities. A set of recommendations reported in the next section of this report could help in addressing the barriers that are preventing BAME groups from achieving positive outcomes in all aspects of their lives in North Lanarkshire and also allow NLC to achieve progress towards the equality outcomes it set out (NLC, 2021). By providing a platform for ethnically diverse communities to articulate their views, this research represents a potentially significant development. In contemplating the findings, there is an opportunity for NLC and other agencies to work with BAME communities and allow them to be co-constructors of policy approaches that can help meet their future needs while at the same time instilling a sense of empowerment among those communities. We know from research carried out by Collier (1998), the National Audit Office (2004) and Hussain and Ishaq (2008) that managing service delivery to ethnic minority communities and meeting their needs is both challenging and complex. It is hoped that this research can go some way in contributing to an improvement in the lived experience of BAME communities and allow NLC to successfully implement its plan for North Lanarkshire to be "the place for people to Live, Learn, Work, Invest and Visit" (NLC, 2019).

7. Recommendations

The findings from this research in relation to the 4 areas explored suggest the need for action. A set of general recommendations that could be considered by NLC and other stakeholders in relation to each of the 4 themes are presented here.

Further suggestions to address specific challenges faced by women and the Syrian refugee community are also stated.

7.1 General recommendations

Ageing population and health care:

- Poor proficiency in the English language is adversely impacting the ability of BAME communities to engage effectively with health and social care services. Health boards and other service providers should review the current level of interpreting services they offer and consider recruiting more interpreters to address the language barrier, which is a particular issue among the elderly.
- In view of the increasing numbers of elderly people among BAME communities, there is a need for an overhaul of the current system of personal care to ensure that it is culturally sensitive and can meet the demands of BAME families. In particular, service providers need to ensure that the training regime implemented for those who undertake care roles incorporates an understanding of the cultural needs of diverse communities. NLC could also explore ways of recruiting more carers from BAME backgrounds. In this respect, outreach work in BAME communities may prove helpful.
- A one size fits all approach based on a western centric model is not effective at meeting the mental health needs of BAME communities. Primary and secondary heath care services therefore need to acknowledge alternative perspectives on mental health. Working with a range of stakeholders including community gatekeepers and faith leaders would be helpful in creating and promoting greater understanding of alternative approaches to mental health.
- More trained practitioners are required to support service users from the refugee communities who have experienced trauma and persecution in their country of origin. This is important in helping refugees settle in the UK and provide a sense of stability and security to individuals.
- Hospitals should be doing more to meet the cultural needs of ethnic minority patients including in relation to dietary, spiritual and religious matters. Overall, health service providers at all levels of health care need to develop cultural competence.

- Places of worship could benefit from more resources and support from NLC as they are viewed by some BAME communities as ideal venues to help tackle social isolation among the elderly.
- Mainstream day care centres should incorporate more culturally sensitive activities to attract greater engagement and participation from elderly members of the BAME community.

Digital skills and inclusion:

- The move by NLC and other service providers to move services online since the pandemic has led to social marginalisation among the elderly in BAME communities who have lower levels of digital literacy and language skills. There is a need to review this approach and consider providing more face to face opportunities to address the digital skills gap and consider ways to engage the elderly in IT training to improve future digital competency. At present, some elderly people are missing out on important information that is only available online.
- NLC and other stakeholders needs to improve the provision of IT training to BAME communities by tailoring such provision to the specific requirements of BAME groups and offering training in a variety of languages other than English.
- NLC should explore the possibility of making more venues available where BAME communities can access the internet, digital hardware and IT equipment.
- NLC should investigate possible further avenues for financial support to help low income BAME households acquire better quality digital and IT equipment.

Employment and skills:

- Employees from BAME backgrounds are overrepresented in low status and low paid jobs and face discrimination in the recruitment and selection process.
 Employers across North Lanarkshire should sign up to more schemes and charter marks that embrace or promote equal opportunities in employment to help improve workplace and labour market opportunities for BAME groups.
- Members of BAME communities have indicated that the skills and qualifications some of them acquired in their countries of origin are not always recognised and valued in the UK and this hampers employment prospects further. Relevant agencies and organisations such as the DWP should implement strategies that could help boost employment skills and opportunities for BAME groups. This could include exploring the extent to which skills and qualifications acquired by BAME communities before their arrival to the UK can be matched to equivalent qualifications recognised in the UK.
- Business support agencies such as **Business Gateway and Scottish Enterprise** could explore ways in which they can tailor their advice to assist individuals from the BAME communities wishing to pursue entrepreneurial activity. Agencies and authorities could investigate partnership and collaboration with other organisation to provide specific support to for example refugee communities wishing to engage in entrepreneurship. One such example to draw on could be TERN (The Entrepreneurial Refugee Network), a nonprofit social enterprise set up in London to provide business advice, support and start-up training tailored to the needs of refugees (TERN, 2022).

Community cohesion and integration:

- Given the value of language in helping to promote community integration and cohesion, NLC should evaluate the curriculum delivered in ESOL classes to ensure that it is tailored to the needs of learners.
- NLC should take a more proactive approach in celebrating diverse cultures across the North Lanarkshire region.
- Children from BAME backgrounds have reported experiencing racial microaggression and bullying at school. NLC should ensure that schools showcase the region's rich ethnic and racial diversity in their educational provision to promote tolerance and greater understanding between BAME groups and the host community.
- NLC should explore the feasibility of allowing families from minority faith communities to choose whether to send their children to a denominational or non-denominational school.
- Greater diversity of the workforce in NLC and partner agencies would help to improve the uptake of council services among BAME service users as well as increase BAME groups' sense of belonging to the host community.
- NLC should give greater consideration to the safety and security of BAME families when offering housing in certain areas and this should be considered in the criteria applied by housing providers.
- More transparency from NLC about the criteria used to allocate resources to certain BAME groups is required in order to address concerns of favouritism that some BAME groups benefit from more resources than others.

- Elected officials at both council and parliamentary level need to do more work to understand the needs of BAME communities, especially out with election time. This would go some way to allay concerns that the views of BAME groups only matter when elections are approaching.
- Political parties in North Lanarkshire should work more closely with BAME communities to encourage interest in politics and consider active ways in which to increase representation of BAME groups in the political process.
- More work is required to gain access to BAME communities living in areas which are poorly represented in this research. This includes Kilsyth and the Northern Corridor. Perhaps collaboration with third sector organisations and community groups could be beneficial here.

7.2 Gender-specific recommendations

In addition to the above set of general recommendations, it is worth considering specific actions that could benefit women from various BAME groups:

- As reported in this research, Congolese women face challenges in their attempts to improve their proficiency in the English language and achieve digital literacy on par with their male counterparts. This is down to their confinement to household chores such as looking after children. NLC and other agencies could consider investing more resources into providing childcare facilities that would allow Congolese women to participate in English classes and IT training.
- We have also gathered from this research that Syrian women with children not requiring regular supervision would be open to volunteering opportunities. NLC and other organisations should consider Syrian women for appropriate opportunities within the voluntary sector. This would also have the added benefit of increasing Syrian women's sense of belonging to the local community.
- Syrian females were also more likely to face discrimination as a result of wearing the hijab. The authorities should consider ways to support Syrian women to report such instances of discrimination. Relevant measures should also be put in place through community groups and schools to educate local communities about diverse cultures and practices to promote tolerance.

- Women from the Indian sub-continent indicated that domestic abuse was an issue within their community but was very much a taboo area, which made it challenging to address. There was a suggestion that the absence of a culturally sensitive support service made it difficult for victims to come forward. NLC in conjunction with other stakeholders should explore the possibilities of setting up a support service staffed by those with appropriate cultural awareness training. To tackle this issue sensitively and successfully will require a change in mindset among men from the Indian sub-continent and any support networks should therefore also engage with males from the Indian-sub-continent to educate them about the negative impact of domestic abuse.
- To help women from the Indian subcontinent realise their potential and develop careers and contribute to the labour market, relevant organisations across North Lanarkshire should consider investment in training courses that can help improve interpersonal skills and empower women within their local communities. There should also be consideration given to setting up a women's organisation dedicated to the needs of women from the Indian sub-continent similar to those that exist in Glasgow. Women in this research bemoaned the absence of such organisations devoted to their needs.

7.3. Lessons from the experiences of the Syrian refugees: 7 years on

Based on the views expressed by the Syrian refugee community in this research there are lessons that the authorities can learn that will allow them to consider appropriate interventions.

Some of the suggested policy interventions have already been captured in the general set of recommendations identified above but it is worth recapping that in relation to health and social care, services need to ensure that they are responsive to the needs of the individual. This should include ensuring that services have the capacity to be culturally appropriate when providing care and treatment. There is a need to focus on improving the language skills of the adults among the Syrian refugee community. Without effective language skills, work prospects for those fit and able are being hampered as is the ability to integrate effectively with the host community.

Schools in North Lanarkshire could also do a better job at celebrating the rich diversity of cultures including the Syrian culture. This could go some way towards tackling microaggression and bullying faced by Syrian children. As noted in the findings, Syrian females who wore the hijab were concerned about the abuse and discrimination they encountered.

References

- Age UK (2021), "Breaking down the barriers of ethnic inequalities in health", available at: https://www.ageuk.org.uk/ discover/2021/october/breaking-downthe-barriers-of-ethnic-inequalities-inhealth/ (accessed: 8 September 2022).
- APPG (2017), Refugees welcome? The experience of new refugees in the UK, The Refugee Council: London.
- Carers UK (2011), "Half a million voices: improving support for BAME carers", available at: https://www.carersuk.org/ for-professionals/policy/policy-library/ half-a-million-voices-improving-supportfor-bame-carers (accessed: 10 September 2022).
- Clark, C. and Drinkwater, S. (2000),
 "Pushed out or pulled in? Self-employment among ethnic minorities in England and Wales", Labour Economics, Vol. 7, No. 5, pp. 603–628.
- Collier, R. (1998), Equality in Managing Service Delivery, Open University Press: Buckingham.
- COMPAS (2006), Refugees and Other New Migrants: a Review of the Evidence on Successful Approaches to Integration, University of Oxford: Centre on Migration, Policy and Society.
- Dickens, L. (1999), "Beyond the business case: a three-pronged approach to equality action", Human Resource Management Journal, Vol. 9, No. 1, pp. 9-19.
- Equality and Human Rights Commission (EHRC) (2020), "Public sector equality duty", available at: https://www. equalityhumanrights.com/en/advice-andguidance/public-sector-equality-duty (accessed: 15 September 2022).

- Greenwood, N. (2018), "Supporting black and minority ethnic carers", available at: http://raceequalityfoundation.org.uk/ wp-content/uploads/2018/10/REF-Better-Health-484.pdf (accessed: 7 September 2022).
- Home Office (2010), Spotlight on Refugee Integration: Findings from the Survey on New
- Refugees in the UK, Research Report 37, Home Office: London.
- Home Office (2019), "Home Office indicators of integration framework: 2019 third edition", available at: https:// www.gov.uk/government/publications/ home-office-indicators-of-integrationframework-2019 (accessed: 8 August 2022).
- Hussain, A. and Ishaq, M. (2008),
 "Managing race equality in Scottish Local Councils', International Journal of Public Sector Management, Vol. 21, No. 6, 2008, pp. 586-610.
- Ishaq, M., Hussain, A. and Ilyas, M. (2021),
 "Minority viewpoint: capturing ethnic minority voices in Renfrewshire', Scottish Affairs, Vol. 30, No. 3, 2021, pp. 381-397.
- Kirton and Greene (2022), The Dynamics of Managing Diversity and Inclusion, 5th edition, Routledge: London.
- Morrice, L., Tip, L., Collyer, M. and Brown, R. (2021), "You can't have good integration when you don't have a good communication: English-language learning among resettled refugees in England", Journal of Refugee Studies, Vol. 34, No. 1, pp. 681-699.

- National Audit Office (2004), "Delivering public services to a diverse society", available at: https://www.nao.org.uk/ report/delivering-public-services-to-adiverse-society/ (accessed: 23 August 2022).
- National Records of Scotland (2021), "North Lanarkshire Council area profile", available at:https://www.nrscotland. gov.uk/files//statistics/council-area-datasheets/north-lanarkshire-council-profile. html (accessed: 15 August 2022).
- North Lanarkshire Council (NLC) (2019), "The plan for North Lanarkshire", available at: https://www.northlanarkshire.gov. uk/sites/default/files/2020-10/The%20 Plan%20for%20NLC%20v.3%20 accessible.pdf (accessed: 11 September 2022).
- North Lanarkshire Council (NLC) (2020), "Equality strategy 2019-2024", available at: https://www.northlanarkshire.gov. uk/nlc-equality-strategy-2019-2024/ our-equality-outcomes (accessed: 11 September 2022).
- Oluwatosin, A. (2021), "A perspective on health inequalities in BAME communities and how to improve access to primary care", Future Health Care Journal, Vol. 8, No.1, pp. 36-39.
- Policy and Strategy Committee (2021), "North Lanarkshire Council report", available at: https://mars. northlanarkshire.gov.uk/egenda/images/ att96169.pdf (accessed: 9 June 2022).

- Quinlan, C., Babib, B., Carr, J. C., Griffin, M. and Zikmund, W. (2019), Business Research Methods, 2nd edition, Hampshire: Cengage Learning.
- Refugee Studies Centre (2021), "Refugees and digital exclusion", available at: https:// www.rethinkingrefuge.org/articles/ refugees-and-digital-exclusion (accessed: 4 August 2022).
- Saunders, M., Lewis, P. and Thornhill, A. (2018), Research Methods for Business Students, 8th edition, London: Pearson Education Ltd.
- Scottish Government (2013), New Scots: Integrating Refugees in Scotland's Communities 2014-2017, Edinburgh: Scottish Government.
- Scottish Government (2021), "Race equality: immediate priorities plan", available at: https://www.gov.scot/ publications/immediate-prioritiesplan-race-equality-scotland/pages/12/ (accessed: 16 September 2022).
- Seifert, A. (2020), "The digital exclusion of older adults during the Covid-19 pandemic", Journal of Gerontological Social Work, Vol. 63, Nos. 6-7, pp. 674-676.
- TERN (2022), "We are Tern", available at: https://wearetern.org/ (accessed: 8 September, 2022).

Appendix 1 - Focus group and interview schedule

Theme 1: Ageing population

- Views on health and social care services available to cater for the needs of older members of this specific ethnic minority group - specific focus on the perceptions of the challenges faced by older members of ethnic group in relation to health and personal care needs.
- Concerns about isolation, especially if no close family at hand and also the impact of health conditions on mobility and the ability to undertake social activities that could accentuate a sense of isolation explore also impact of mental health.
- Consider barriers related to language, dietary needs, religion and cultural practices when accessing health and social care services.
- How would you sum up the future needs of your community in relation to health and personal care needs with specific focus on the needs of the elderly?

Theme 2: Digital skills and inclusion

- Degree of digital literacy among ethnic minority group e.g. the extent of the ability to navigate the internet and use IT equipment and devices - is there a gap in digital skills? Is there a need for support? What kind of support would be welcome e.g. training/education? Is digital illiteracy worse for the elderly? Could it be linked to isolation among the elderly?
- Level of access to digital hardware and quality of that hardware e.g. is broadband available for internet services? What support e.g. financial could help bridge the digital divide? What is the level of access to IT equipment?
- How would you sum up the future needs of your community in relation to digital skills and inclusion?

Theme 3: Employment and skills

- Views of those unemployed reasons for unemployment. What support can you access to help get you back into work? Is more support needed? What skills could be provided and are required to participate in the labour market? Can education and training help? What are the barriers to employment? Would you welcome opportunities for volunteering in your local community?
- Views of those in employment the extent to which job undertaken was desirable and met expectations. For those educated, does the job match the level of education? Does employment meet your needs in terms of standard of living?
- For those in self-employment why have you chosen this form of employment?
 Were options to enter mainstream employment limited?
- What do think your community's future needs are in relation to employment and job skills?

Theme 4: Community cohesion and integration

- Level of proficiency and confidence in speaking English; level of importance attached by communities to English.
- Whether ethnic culture is celebrated and respected in the North Lanarkshire area.
- Relationship with host community or white majority community: How welcoming is the host community? Do you have regular interaction with host community e.g. family visits, share food? Do you engage in traditional UK cultural activities? Any barriers to integrating effectively with host community?
- How important do you envisage the need to integrate with the host community? How much value do you place on maintaining your cultural identity? Do you feel a sense of confidence in displaying your religious identity?

- How would you rate your sense of belonging to the local area and to the country?
- Do you feel safe within your local community e.g. when going to work, school and day to day activities and accommodation?
- Do you think integration with the white majority community would help reduce phobias and stereotypical views of ethnoreligious groups?
- How would you define your relationship with other ethnic minority groups?
- Do you engage with third sector voluntary and ethnic minority organisations?

The above themes were explored at all focus groups and interviews undertaken.

However, the research represented an opportunity to explore a few additional themes in relation to specific ethnic minority groups. For example, given the widely accepted view that men tend to dominate in Indian sub-continent culture, participants in the focus group with female participants from the Indian sub-continent were given the opportunity to comment on the following:

- Does the patriarchal system prevalent in Indian sub-continent culture - where men tend to hold more power than women and where there may be perceived prejudice against women (misogyny) - impact on choices for females when accessing services e.g. mental health services?
- Similarly, given that the civil war in Syria was the impetus for the UK to accept Syrian refugees, participants in the Syrian focus groups were asked for their views on the following:
- Has the trauma of fleeing from war and persecution had any impact on your level of engagement with services?

Appendix 2 - Participant information sheet

Name of Department/School: School of Business and Creative Industries



Researcher: Dr. Mohammed Ishaq

Title of Research: An exploration of the lived experiences and future needs of North Lanarkshire's Black, Asian and other Minority Ethnic people

Dear participant,

I would like to invite you to take part in this research. Before you decide, you need to understand why the research is being undertaken and what it involves. Please take time to read the following information carefully. Please feel free to ask questions if anything you read is not clear or you would like more information. Take time to decide whether or not you want to take part. This research is sponsored by the University of the West of Scotland and is being undertaken on behalf of North Lanarkshire Council.

What is the purpose of this investigation?

Since the last census, diversity within communities is growing. The council area of North Lanarkshire has welcomed refugees from Syria and many have now applied for settled status having lived here for more than 5 years. The area is now about to receive refugees from Afghanistan. However, there has never been an undertaking to comprehensively examine the lived experience of North Lanarkshire's BAME communities. This is crucial in order to understand the needs and issues for those communities. This research offers that opportunity. More specifically, the research seeks to develop an understanding of the lived experience of BAME people in relation to: an ageing population; digital skills and inclusion; employment and skills; and community cohesion and integration.

Do you have to take part?

Participation in this study is voluntary. I or my representative will describe the study and go through the information sheet, which will be given to you. I will then ask you to sign a consent form to show you agree to take part. You are free to withdraw anytime without giving a reason.

What will you do in the project?

If you agree to participate in the research, you are required to take part in a focus group or interview. These will be moderated and undertaken by Dr. Mohammed Ishaq and Dr. Asifa Maaria Hussain. During the focus group or interview, the moderators will lead a discussion on a number of themes and issues relevant to this research. You will be free to participate in the debate and discussion that these themes will generate.

Why have you been invited to take part?

You have been chosen to take part because you represent a stakeholder whose contribution would be valuable in meeting the objectives of the research.

What are the potential risks to you in taking part?

During the research you will not be exposed to any physical, psychological or legal risk or harm. Focus group and interview themes have been structured in such a way as to protect your privacy and no pressure will be put on you to answer sensitive questions. All information provided will be anonymised and kept confidential.

What happens to the information in the project?

Every care will be taken to maintain confidentiality and anonymity. All information received will be stored securely and out with the reach of any third party. The University of the West of Scotland is registered with the Information Commissioner's Office who implements the General Data Protection Regulation and the Data Protection Act 2018. All personal data on participants will be processed in accordance with the provisions of this legislation.

What happens next?

If you are happy to be involved in the research then please proceed to take part in the focus group or interview, which will be viewed as your agreed consent and sign the consent form. If you do not wish to be involved, then thank you very much for your time and you may leave.

Research Ethics

This study was granted ethical approval by the UWS School of Business and Creative Industries Ethics Committee.

If you have any questions or concerns, during or after the investigation please contact:

School of Business and Creative Industries

University of the West of Scotland

Paisley Campus

High Street

Paisley

PA1 2BE

Lead researcher contact details:

Dr. Mohammed Ishaq

E-mail: mohammed.ishaq@uws.ac.uk

Appendix 3 - Consent form

Title of research: An exploration of the lived experiences and future needs of North Lanarkshire's Black, Asian and other Minority Ethnic people

Name of Researcher: Dr. Mohammed Ishaq

Please initial/check box:

- 1. I confirm that I have read and understand the participant information sheet for the above study and have had the opportunity to ask questions
- 2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason
- 3. I agree to take part in the above study
- 4. I agree to the interview/focus group being audio/video recorded

Name of participant:	Date
Signature:	
Researcher:	Date
Signature	

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