Black and Minority Ethnic Elders’ issues

1. Introduction

The circumstances of black and minority ethnic older people are affected by many different factors, including time of immigration, culture, language, education, employment history, gender, geographical location and housing conditions, health status and family.

Whether someone is defined as being from a minority ethnic group is dependent on their own perceptions as well as those of society and government. People’s perceptions of ethnic origin may change over time, as reflected in changing ethnic-group categories in the 2001 Census and Labour Force Survey [1]. More recently the new National Statistics identity classification reflects the need to encompass both ethnicity and national identity [2], while future Office of National Statistics figures on identity will focus on a range of related issues such as language and religion [3].

Older people from minority ethnic communities are not all the same. There are language and cultural differences between groups based on country of origin and religion. The dynamics of each population are unique and reflect the group-specific fertility patterns, differences in timing of arrival, and the age–sex composition of original migrants. There are also different rates of ageing among different cultural groups, with some populations ageing faster than others. These differences are reflected in their diverse needs for support and services.

The ethnic dimension with regard to social inequalities among older people has been largely overlooked in public policy as there is little national data available on the socio-economic circumstances of minority ethnic older people in Britain because of insufficiently large samples within national surveys to allow detailed analysis [4]. What evidence there is suggests that there are significant differences both between and within black and minority ethnic groups in access to material and social resources, which need to be taken into account by policy makers and planners.
2. Policy statement

The increasing population, contribution to the community, and needs of older people from black and minority ethnic groups should be recognised. They should be effectively consulted and involved in the development and provision of culturally sensitive services and products that meet their particular needs.

3. Key facts

- The estimated size of the minority ethnic population of Great Britain was 4 million in 2000 – 7.1% of the total population [3].
- Britain’s minority ethnic population in 2000 was mainly concentrated in large urban areas; for example, four-fifths of Bangladeshis and three-fifths of Black-Africans live in London [3].
- The ‘white’ majority group also includes minority communities such as Irish and East Europeans.
- Minority ethnic communities tend to have a younger age profile than their white counterparts; for example, the average age of people from all minority ethnic groups in Spring 1995 was nearly 27, compared with 38 for the white population [5].
- The relatively young age structure of minority ethnic groups means that they are the fastest ageing groups within the population. Just over 7% of the total minority ethnic population is aged 65 and over, but this will increase as a further 12% of those who are presently ‘middle-aged’ (aged 45 – 64) become pensioners [6].
- There are significant differences both between and within ethnic minority groups in access to material and social resources. For example, Indian older people are least likely to experience multiple deprivation, displaying similar levels to white older people, while under half of older Pakistani and Bangladeshis, two-fifths of older Black Caribbeans and a quarter of Irish elders experience medium or high deprivation. [4].
- With respect to housing and housing quality, older Black Caribbeans are more likely to reside in local authority or housing association accommodation than other groups, while over a quarter of older Pakistani and Bangladeshis live in households with no central heating, and over a third live in households with more than one person per room [4].
- One third of older Black Caribbeans, half of older Indians and three-fifths of Pakistani and Bangladeshi older people are in the bottom fifth of income distribution compared to just over a fifth of white and a quarter of Irish older people [4].
- A lower proportion of ethnic elders are in receipt of a pension from their former employer than white or Irish older people, while three-quarters of older Pakistani and Bangladeshis and three-fifths of older Black Caribbeans are in receipt of Income Support [4].
• Older people from minority ethnic communities tend to have been born outside of the UK. For example, virtually all (97%) people from minority ethnic communities aged 45 and over are born outside of the UK. However, this proportion will change over time because between 1997 and 1999 90% of the total minority ethnic population children aged 0–14 were born in the UK [3].

4. Key issues

4.1 Discrimination

There is evidence that black and minority ethnic elders experience more discrimination in terms of both age and race than other groups within the population in health, community and social care services, income and housing.

4.2 Health

Black and minority ethnic populations are the highest users of primary care services, yet they are less likely to gain access to appropriate health services and treatment and they report the worst health outcomes [5]. For example, older people from minority ethnic groups are more likely to describe their health status as poor than the total population.

Although many older people from black and minority ethnic groups are registered to and use General Practitioner services [7, 8], the usage of community health services among black and minority ethnic elders tends to be low [9, 10]. A study undertaken in Birmingham found that rates of referral of minority ethnic elders by GPs to the district nursing service were very low and that the district nursing service itself was permeated with ‘stereotyping, ignorance and misunderstanding of black clients’ [11].

The findings of a recent Help the Aged and Policy Research Institute on Ageing Ethnicity report [12] on the experiences of black and minority ethnic older people while in hospital showed that:

• Older people receive a different level of service dependent on their command of the English language;
• Food quality and quantity is often inadequate; and
• There is a need to employ more nurses from minority ethnic groups.

4.3 Community and social care services

Older people from black and minority ethnic communities do not always receive appropriate social care [13, 14]. Reasons include:

• Language barriers;
• Insufficient knowledge of availability and rights to social and public services;
• Low expectations of their life in the UK;
• Negative experiences of retirement;
• Poor mental and physical health;
• Racism – overt and often inadvertent – at individual and institutional levels, including professional assumptions that their family will provide care and a ‘colour-blind’ approach to service provision and assessment;
• Inadequate support from their family; and
• Lack of consultation with black and minority ethnic communities in service planning and delivery.

These barriers mean that few services are designed to meet the needs of older people from minority ethnic groups. Lack of cultural sensitivity is reflected in the high rate of people either not accessing or being refused services [14].

A survey of social services departments’ and district health authorities’ provision of services for black and minority ethnic elders found that there was great variation between organisations in the extent to which they catered for any specific needs of ethnic elders [15]. What provision did exist was patchy and small-scale. The main reasons given by staff for lack of provision were:

• Lack of resources;
• Lack of demand/ small numbers;
• Lack of organisational commitment;
• Lack of initiative by black or minority ethnic populations themselves;
• Racism; and
• Ageism.

However, more recently, as the Race Relations (Amendment) Act 2000 comes in to force, requiring public authorities to demonstrate how they are actively promoting racial equality, guidance has been developed on how services can be provided sensitively to minority ethnic communities. For example, the Commission on Racial Equality [16] and the Association of Local Government [17] have produced ‘good practice’ guidance on promoting racial equality, including direct service provision. Some social service departments have developed their own good practice, such as Kent County Council’s publication Culturally Competent Care Services [18].

4.4 Income

After retirement older people from black and minority ethnic communities are more likely to be at risk of poverty because of their employment history in the UK [19]. For example, people from black and minority ethnic groups often work in lower-paid jobs which do not have occupational pension schemes. They are also less likely to have a private pension due to lower incomes and
the inability to afford the personal contributions. This problem is exacerbated if the person is a first generation migrant as they tend to have insufficient National Insurance contributions to qualify for a full pension.

There are wide variations in income distribution across black and minority ethnic groups. Specific minorities face high risks of poverty. For example, well off Chinese people have more than twice as much income as Pakistani and Bangladeshi people, while Black Africans are far more likely to experience poverty than Black Caribbeans [20].

### 4.5 Housing

There are different patterns of tenure and quality of housing among people from black and minority ethnic groups due to immigration and household economic position [5]. Newly arrived immigrants tended to find accommodation in the private rented sector as it was the most accessible part of the housing market. For many, council housing was not available as a person had to be resident in an area for a specific time period to qualify. The main option for many immigrants was to buy cheaper properties on the market. In particular, people of South Asian origin have high levels of owner-occupation, even among those with lower paid jobs. [36]

The housing problems, which affect some older people, are more acute for people from black and minority ethnic groups. Many Asian older people, particularly members of the Pakistani and Bangladeshi communities, live in the worst housing in terms of size of home, lack of adaptations, poor design, poor insulation, disrepair, inconvenient location, poor access, overcrowding, problems with neighbours, isolation from family, religious and cultural institutions, and poor health and safety [21].

For example, in a 2001 survey carried out by Age Concern, 78% of Bangladeshi householders said that they lived in households with five or more people, while none contained five or more bedrooms. Over half (55%) of Pakistani respondents said that they lived in households with five or more people, but only 3% of households contained five or more bedrooms [21].

### 4.6 Information and lack of access

Problems older people from black and minority ethnic groups face include lack of information, lack of awareness of information or other services, language barriers or culturally inappropriate services and information [23, 24]. Solutions to these problems, as put forward at an Age Concern workshop [25], include:

- Working to identify the ethnic profile of the local community and their needs;
Publicising and advertising of services in culturally relevant languages, media and places where people meet;
Promotional work on health, social care and housing services targeted specifically at different, individual ethnic minority groups, for example through outreach and roadshows;
Employment of staff who speak minority ethnic languages instead of reliance on family members for interpretation;
Emphasising confidentiality of service if the minority ethnic community is small and people tend to know each other;
Providing information which goes beyond literal translations of information to make them culturally sensitive; and
Offering information in a range of formats, including videos and audiotapes, to address the lower levels of literacy and education in older migrant populations.

A 1998 survey of health information services (HIS) showed that while many HIS possessed written information in different ethnic languages, few staff spoke languages other than English [26]. A few claimed that an ethnic language information service was not needed as they rarely received calls from non-English speakers. However an ethnic information service was successfully piloted by the College of Health in the North and South Thames area [27], receiving an average of sixteen calls a day when previously there had been none. It provided a Bengali and Sylheti speaking staff member, recorded health information in Bengali and advertised the service in the local ethnic media.

4.7 Isolation

Lack of access to information and public services can result in older people from black and minority ethnic groups being socially isolated from their peers.

Evidence shows the importance that older people from black and minority ethnic groups place on being close to family or other people from the same ethnic background and to local facilities [21, 28, 29, 30]. For example, older people who attended three regional Age Concern Consultation Events for black and minority ethnic elders in 2000 said that they felt less lonely and isolated when they were able to meet up with people who had shared similar experiences and spoke the same language.

An Age Concern survey of older people’s housing needs [21] found that over two-thirds of older Bangladeshi and Pakistani householders said that living with family, close to local shops and near a place of religious worship were important. Over two-thirds of older Black Caribbean householders said that it was important to live near shops and a place of religious worship. While over two-thirds of Indian and Irish householders said that it was important to live near shopping facilities.
Another key element in reducing social isolation is to have an affordable, well integrated and fully functioning public transport system, as fewer older people from ethnic minority populations own a car than older people in the general population.

4.8 Consultation and involvement

In order for public services to identify and meet the needs of older people from black and minority ethnic groups, their views and experiences need to be incorporated into service planning and decision-making processes at local, regional and national levels. For example, the National Association of Citizens’ Advice Bureaux (NACAB) sought advice from the Commission for Racial Equality’s Voluntary Sector Team to compile an action guide to help Citizens Advice Bureaux develop their links with black and minority ethnic communities and plan action for working with those communities [31].

Public, voluntary and private sector staff need to identify more appropriate ways of communicating with and involving older people from minority ethnic backgrounds. Suggestions include:

- Schemes and courses for community development and personal capacity building to increase older people’s skills and confidence to participate in decision-making processes with public officials on boards and committees. Existing training courses such as Age Concern’s ‘Voice and Choice’ [32] or the College of Health’s ‘Voices in Action’ [33] need to be adapted for and targeted towards older people from minority ethnic communities.
- Special initiatives to encourage participation from older people from black and minority ethnic communities to engage with public services, such as through the organisation of specific listening events which recruit participants by advertising in ethnic media and organisations.
- Acknowledgement of the importance of mainstream voluntary organisations in developing sustainable relationships between public services and black and minority ethnic organisations. For example, listening events are often the result of three way partnerships [28, 29, 30].
- Public service organisations should encourage the recruitment of staff from minority ethnic backgrounds as their greater understanding and knowledge would help to reduce language and cultural barriers and increase participation.
- Public services should advertise the use of interpretation and translation services more widely to encourage greater participation and communication with older people from minority ethnic communities. For example, some local authorities have formal relationships with interpretation services. A formal contract does not in itself guarantee a more accessible service. However, if a wider number of older people from
ethnic minority backgrounds were aware of the availability of interpreting services, then they might be more likely to participate.

5. Public policy

The recent policies and initiatives listed below demonstrate the Government’s commitment to tackling racial discrimination and social exclusion. However, the issue has not been addressed consistently and coherently – legislation tends to be piecemeal, and is often of secondary importance to all older people’s issues generally. More joined-up work across government departments is needed to meet black and minority ethnic elders needs adequately.

**The Human Rights Act (1998)**
This Act came into force in October 2000. It incorporates the European Convention on Human Rights into national law and guarantees a range of political rights and freedoms of the individual against the state, including the individual’s rights to privacy, freedom of religion, expression, association and assembly and to marry and found a family. These rights must be guaranteed to each individual irrespective of sex, race and a range of other grounds, providing litigants with a range of positive entitlements to assert when in dispute with any public body.

**They Look After Their Own Don’t They? (1998) Department of Health**
This is a national overview report on the accessibility of social services departments’ to minority ethnic people. It found that there was a genuine attempt to make services accessible, and examples of good practice, but that the choice of minority ethnic older people was severely limited.

**Respect (1999) Department of Health**
Commissioned by the Racial Equality Unit, this is learning material to provide guidance for social care and other staff working with black and minority ethnic communities on how they can better approach older minority ethnic groups’ culture and experiences to help them review and improve services.

**Developing Services for Older People Phase 2 Department of Health**
Phase One of this work started in May 1999 and concentrated on four local authorities’ involvement of representatives from local communities to devise an action plan for improving services for black older people. Phase two focuses on mainstreaming those services into all ways of working. The Department of Health has introduced an audit process to ensure that all policies are not discriminatory and a race equality unit.
One of a number of draft proposals to combat discrimination under Article 13, this directive implements the principle of equal treatment between persons irrespective of racial or ethnic origin. It establishes for the first time a minimum standard of legal protection from racial discrimination across Europe. The directive must be implemented in member states by July 2003.

Race Relations Amendment Act (2000)
This Act extended the coverage of the Race Relations Act 1976 to the functions of all public authorities (not just the police) to promote race and monitor race equality. The Act also places a general duty on public authorities to eliminate unlawful discrimination and to promote equality of opportunity and good race relations. The Act obliged public authorities to publish by May 2002 a racial equality scheme showing how they will achieve their aims and the arrangements for racially monitoring their workforce in areas such as recruitment, training, job promotion and workforce profiles.

This paper states the need to promote race equality, particularly in the provision of public services such as education, health, law and order, housing and local government. It sets out the need to monitor outcomes to ensure progress by the publication of an annual publication (Race Equality in Public Services) and a set of race equality performance indicators across the public sector, and to achieve representative workforces in the Home Office and its police, fire, probation and prison services.

This strategy aims to tackle minority ethnic social exclusion as an integral part of its broader work on deprivation and social exclusion. Specific action put forward to tackle minority ethnic social exclusion includes: tackling racial discrimination; ensuring mainstream services are more accessible and relevant to people from minority ethnic communities by involving them in service design and delivery and ethnically monitoring outcomes; implementing programmes specifically targeted at minority ethnic needs; tackling racial crime and harassment; and improving information available about minority ethnic communities.

National Service Framework for Older People (2001) Department of Health
The National Service Framework for Older People is a ten-year programme that aims to increase access to, and the quality of, health and social care services for older people on a national basis. It aims to address issues of race and culture as well as old age. It emphasises that all services must be able to deliver effective support irrespective of ethnic background.
This guidance aims to eliminate unlawful racial discrimination and promote equality of opportunity and good relations between persons of different racial groups. It seeks to achieve its aims through:

- General consultations with black and minority ethnic groups;
- Improving information on their housing needs for policy development;
- Monitoring and reviewing the impact of policies on black and minority ethnic groups; and
- Working in partnership with other government departments and organisations to tackle housing issues affecting black and minority ethnic people and help those who need more than housing solutions.

The Nationality, Immigration and Asylum Act (1999)
Unlike other recent legislation and policy initiatives mentioned above, this Act is externally focused. The Government states that it aims to modernise and integrate the immigration and asylum system, by developing a flexible and streamlined system of immigration control for those qualified to enter or remain in the UK, as well as strengthening controls on those who are not. The Act also contains new support arrangements for asylum seekers in genuine need and other safeguards such as immigration advisers and bail provisions to persons detained under immigration legislation.

There has been much criticism of this Act. The Commission for Racial Equality [35] has expressed concerns about the adverse impact it might have on the greater integration of black and minority ethnic communities into mainstream UK life in terms of employment, accommodation and education. The CRE also points out that English tests prior to settlement in the UK discriminate against older people and those with special needs.

6. Age Concern Policy and Objectives

The Government should adopt a strategic approach to understanding and meeting black and minority ethnic elders’ needs and concerns, led by the Cabinet Sub Committee on Older People to ensure that their issues are addressed across ministerial departments and not lost within them.

Further research is needed into the impact of proposed government schemes, such as stakeholder pensions and pension credit, on black and minority ethnic older people to see if they widen access and reduce post-retirement income inequalities. More generally, there needs to be improved national data on the socio-economic circumstances of black and minority ethnic elders.
Public service providers need to identify and take into account the needs of local black and minority ethnic elders through initiatives to encourage their greater involvement in community consultation processes.

The work being undertaken by national, regional and local National Service Framework for Older People implementation teams in the areas of health and community care services needs to raise the awareness of the plurality of needs within black and minority ethnic communities. This should be carried out through media campaigns, staff training and other appropriate initiatives to ensure that black and minority ethnic elders are not treated as a homogeneous group.

The Joint Department of Health and Office of the Deputy Prime Minister’s Housing and Older People’s Development Group should make meeting the housing needs of black and minority ethnic elders a priority issue.

Existing information services, such as NHS Direct and the Care Direct pilots, need to address the barriers that black and minority ethnic older people face in accessing information. Culturally sensitive information in appropriate languages and formats should be targeted, through specific initiatives, at black and minority ethnic elders to increase knowledge of service availability and rights such as health, social care, housing and benefits.

References:


17. Association of London Government (ref?)


36. Survey of English Housing, Department of the Environment.

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