

Response ID ANON-8H41-QX32-K

Submitted to **A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections**

Submitted on **2018-04-27 16:58:54**

Key questions for everyone

1 What needs to change in your community to reduce social isolation and loneliness and increase the range and quality of social connections?

Input your answer here::

In reducing social isolation and loneliness in BME groups, it is important to know that BME individuals and communities may choose to self-isolate from wider communities as a tactic to avoid racism. Isolation is perceived as a 'lesser evil' to experiencing racist abuse and harassment in the public sphere. To truly eradicate social isolation for BME communities, there will need to be a specific focus on routing out racism, racial discrimination, and racial harassment to make all areas of public life safe and open to BME groups.

There must be an emphasis not just on better addressing hate crime, but on combatting the prejudicial attitudes and beliefs that lead to hate crime. CRER and other third sector groups have highlighted the difficulty in obtaining place-specific racist incident/hate crime data from Police Scotland. Prior to the creation of Police Scotland, it was possible to obtain very detailed information about hate crime 'flash points' in local areas. This was useful for developing a targeted approach for particular communities, and for tracking changes. Making this information accessible again could help identify specific communities and areas in which racist hate crime is common (and, therefore, in which BME individuals are more likely to experience social isolation and feel disconnected from the community), and invest appropriate resources therein.

Outwith this, there needs to be a better emphasis on equal participation and representation in bodies such as community councils, volunteering projects, local governance structures, etc. When BME communities feel that their needs are being taken into account and that their input is valued, it may contribute to lessening feelings of social isolation and furthering a sense of community cohesion.

2 Who is key at local level in driving this change, and what do you want to see them doing more (or less) of?

Input answer here::

There should also be an emphasis on better engaging BME communities in community planning partnerships, local governance structures, etc. If BME communities are more involved, they may feel less isolated and have access to better social connections. This, in turn, will ideally increase feelings of community cohesion.

Care is needed to ensure that those involved are not just 'the usual suspects' and do not act as gatekeepers for communities. The voices of a few individuals do not speak for the entire BME community as a whole. Engagement must be authentic and sustained, rather than tokenistic and piecemeal.

3 What does Government need to do nationally to better empower communities and create the conditions to allow social connections to flourish?

Input answer here::

To allow social connections to flourish and build more empowered, connected communities, the Scottish Government needs to focus on tackling prejudice and hate crime, especially racist attitudes and beliefs. Awareness-raising campaigns and social media activity will not challenge and change these attitudes in the long-term. The focus must be on eradicating prejudice and changing racist belief.

A concerted campaign to address and eradicate racism which does not shy away from the realities of racial discrimination is needed, and leadership from the Scottish Government will be a necessary component of this.

When racism and racial attitudes persist in communities, BME groups will continue to feel isolated and community cohesion (and social connections) will be severely limited.

Do you want to answer any of the detailed questions?

Detailed questions

4 Do you agree or disagree with our definitions of (i) social isolation and (ii) loneliness? Please provide comments, particularly if you disagree.

Input answer here::

5 Do you agree with the evidence sources we are drawing from? Are there other evidence sources you think we should be using?

Input answer here::

While we agree with the evidence sources used, we also note that several of these sources contain information relevant to race equality which are not highlighted in this consultation. For example:

- The Mental Health Foundation also notes that people from BME groups living in the UK are more likely to be diagnosed with mental health problems, more likely to experience a poor outcome from treatment, and more likely to disengage from mainstream mental health services, which leads to social exclusion. These

differences can be explained by poverty, racism, and feelings of exclusion from mainstream services.

- The Scottish Social Attitudes Survey 2010 found that 19% of those in Scotland do not know anyone who is from a different racial or ethnic background and only 36% have a friend from a different racial or ethnic background.
- The Scottish Social Attitudes Survey 2015 found that 22% of people still felt there was sometimes a 'good reason to be prejudiced'.
- The Scottish Household Survey 2014 reported that those from a BME background were less likely to feel very strongly that they belonged to their immediate neighbourhood than those with a white background (37% compared to 19%).
- The Scottish Household Survey 2014 stated that the highest proportion (18%) of those who reported experiencing harassment believed they had been harassed because of their race or ethnicity.

The evidence overview is also missing evidence that shows that racist bullying is the most frequently reported type of bullying in Scotland, according to a 2015 report from the EHRC.

The Runnymede Trust has highlighted issues relating to loneliness and social isolation for older people from BME groups, which suggest a 'hidden loneliness' among older BME people, including those who have large family networks, and particularly for those born overseas, who live in poverty, or who experience language barriers.

The Scottish Government's strategy to tackle social isolation and loneliness should consider commissioning research that considers these issues for BME communities in Scotland, as much of the research is piecemeal and at a UK-level. Without fully understanding the problem, we cannot be sure that BME communities will fully benefit from work being undertaken.

6 Are there examples of best practice outside Scotland (either elsewhere in the UK or overseas) focused on tackling social isolation and loneliness that you think we should be looking at?

Input answer here::

7 Are you aware of any good practice in a local community to build social connections that you want to tell us about?

Input answer here::

8 How can we all work together challenge stigma around social isolation and loneliness, and raise awareness of it as an issue? Are there examples of people doing this well that you're aware of?

Input answer here::

To challenge stigma, it will be important to engage with BME communities directly. There may be particular stigmas present within some BME groups and certain issues that could be overlooked if a one-size-fits-all approach is adopted. Particular consideration is needed to ensure that all communities in Scotland are aware of and can benefit from this work.

The use of Community Ambassadors by CRER in the development of the Scottish Government Race Equality Framework for Scotland may provide a useful template for directly engaging with BME communities, and we would welcome the opportunity to explore this further.

9 Using the Carnegie UK Trust's report as a starting point, what more should we be doing to promote kindness as a route to reducing social isolation and loneliness?

Input answer here::

For BME groups, more groundwork will be needed to arrive at a place where kind communities seem attainable. Building respect, tackling racial discrimination and prejudice, and eradicating racial harassment and violence will all need to take priority for BME groups before communities can be seen as kind.

10 How can we ensure that those who experience both poverty and social isolation receive the right support?

Input answer here::

Every Child, Every Change: The Tackling Child Poverty Delivery Plan 2018-2022 identifies 'priority families' who are most likely to experience poverty: lone parents (most of whom are women), families which include a disabled person, larger families, minority ethnic families, families with a child under one year old, and families where the mother is under 25 years of age.

It is likely that several of these groups, in addition to being more likely to experience poverty, are also more likely to experience social isolation and loneliness. A majority of these groups are also equalities groups who share a protected characteristics (e.g. sex, age, race, disability).

The Scottish Government should undertake work to identify 'priority groups' for this strategy to measure the intersections between poverty, social isolation and loneliness, and equality. A targeted approach to address the structural factors that leave these groups most at risk for experiencing poverty and social isolation should be adopted.

For BME groups (who are twice as likely as their white British/Scottish counterparts to experience poverty), living in poverty can lead to social isolation and loneliness. Working jobs with unsociable hours, holding down multiple part-time jobs, having zero-hours contracted jobs, or being unemployed can all contribute to social isolation and loneliness for adults. It can also have an effect on children, who may not be able to partake in afterschool activities which require fees or transportation. It will be important to be aware of these factors when planning support for these families.

11 What do we need to be doing more of (or less of) to ensure that we tackle social isolation and loneliness for the specific life stages and groups mentioned above?

Input answer here::

Groups who are protected by hate crime legislation due to their race, religion, disability, sexual orientation, or transgender identity should also be included in the list of vulnerable groups. As these are the communities most likely to be affected by prejudice, discrimination, and harassment, it is likely that they may have particular difficulties associated with the life stages identified, in addition to the feelings of social isolation and loneliness caused by prejudice, discrimination, and harassment.

Work should be done to identify the particular concerns these communities face and to eradicate the prejudice that can exacerbate social isolation and loneliness.

12 How can health services play their part in better reducing social isolation and loneliness?

Input answer here::

Health services can signpost patients to projects that work with BME communities on particular issues, such as mental health, isolation, or loneliness. As healthcare providers are often the first point of contact for an individual struggling with mental health, being properly supported and signposted from GPs is critical to receiving proper support.

13 How can we ensure that the social care sector contributes to tackling social isolation and loneliness?

Input answer here::

14 What more can we do to encourage people to get involved in local groups that promote physical activity?

Input answer here::

Government strategies will need to have cognisance for the challenges associated with promoting physical activity in BME communities. Studies have shown that in Britain, South Asian individuals are the least likely to be sufficiently active. Research has highlighted the importance of gender differences in physical activity within ethnic groups, for which there may be particular cultural barriers. These will need to be addressed to enable full participation in physical activity and sport.

It may also be beneficial to promote BME role models in sport and to invest in sport which is popular among BME communities but may be less so in the majority white Scottish/British community. Providing for afterschool physical activity (which is not cost-restrictive for families living in poverty) should also be considered.

15 How can we better equip people with the skills to establish and nurture strong and positive social connections?

Input answer here::

Action should be taken to better equip teachers and school administrators with the ability to effectively address prejudice-based bullying, particularly racist bullying. Racist bullying is not only an attack on a young person, but on their family and community. We know from our engagement with communities that schools are not well-equipped to address this, and that even when the matter is addressed, often the prejudicial attitudes that led to the bullying are not. Sustained racist bullying can lead BME young people to feeling socially isolated at school and lacking in support.

Consideration should also be given to the way culture, ethnicity, and race is taught in schools. If teachers reinforce stereotypes and 'other' those who are not white British/Scottish, pupils are likely to develop prejudicial attitudes against their BME peers, which will severely limit the development of strong and positive social connections. Schools should improve their focus on teaching about commonalities and equality, rather than highlighting differences. This will be particularly important in schools without a high BME population, as these stereotypes may go unchallenged.

16 How can we better ensure that our services that support children and young people are better able to identify where someone may be socially isolated, and capable of offering the right support?

Input answer here::

Services that support children and young people should be aware of the impact race can have on a young person's school experience and should be trained and prepared to address issues related to racist bullying and harassment. The particular impact of prejudice-based bullying compared to other types of bullying should be acknowledged and addressed.

17 How can the third sector and social enterprise play a stronger role in helping to tackle social isolation and loneliness in communities?

Input answer here::

Third sector bodies can play an important role in tackling social isolation and loneliness by undertaking bespoke anti-prejudice work which is evaluated and effective. The EHRC has produced guidance on this which should be promoted. There should also be an emphasis on effective good relations work (under the Public Sector Equality Duties) that serves to foster community cohesion and address prejudice. This work should receive long-term funding and support from the Scottish Government.

18 What more can the Scottish Government do to promote volunteering and help remove barriers to volunteering, particular for those who may be isolated?

Input answer here::

CRER has produced a research report – Minority Ethnic Volunteering in Scotland – which explores experiences, perceptions, and reflections on volunteering. This highlighted barriers to volunteering including awareness of opportunities, understanding the value of volunteering, confidence, and perceptions about language and communication. The research also found experiences of inequality in volunteering involving discrimination due to negative assumptions, being overlooked for roles or progression opportunities, use of racist and prejudiced language, and tokenism.

The Scottish Government should take cognisance of these barriers and experiences to ensure volunteering is accessible to and positive for all communities.

19 How can employers and business play their part in reducing social isolation and loneliness?

Input answer here::

Employers can do more to recruit a workforce which is representative of the Scottish population. BME groups are significantly underrepresented in the workforce, including in the public sector, in which CRER research finds that white candidates are twice as likely to be appointed as BME candidates after the interview stage.

Having a diverse workforce is particularly important for promoting contact between BME groups and white British/Scottish groups. Whereas young people are likely to encounter those from a different ethnic background at school (and whereas a family could include a disabled person or LGBT person, for example), adults have fewer opportunities to interact with and form relationships with those from other ethnic backgrounds. There should be an emphasis on positive active in recruitment to create a workforce which is more representative of the people of Scotland, as this will contribute to a reduction in prejudice and, potentially, a reduction in social isolation and loneliness.

20 What are the barriers presented by the lived environment in terms of socially connecting? How can these be addressed?

Input answer here::

BME groups can oftentimes live in housing or in areas which are very poor in quality. This has a negative effect on mental health and limits social connections. The Scottish Government should press landlords and housing associations to ensure housing is of a decent quality and has amenities which promote socialising, such as communal spaces, gardens/parks, and community events.

Housing associations and tenants groups should also be aware of the effects of racial discrimination and harassment on residents' ability to socially connect, and should ensure that BME residents are engaged in efforts to improve conditions and the local community.

21 How can cultural services and agencies play their part in reducing social isolation and loneliness?

Input answer here::

Cultural services should be strongly encouraged to support diverse voices and authentically engage BME communities in ways which are not tokenistic. Work should be undertaken to identify areas in culture, heritage, and the arts in which BME communities are underrepresented and a concerted effort should be made to better engage and involve these groups.

22 How can transport services play their part in reducing social isolation and loneliness?

Input answer here::

Public transport, particularly buses, are often a flashpoint for hate crime and harassment. Work should be undertaken to better train drivers and other workers to address instances more effectively, as sustained experiences of racial harassment on public transportation can discourage BME groups from usage, leaving them isolated.

23 How best can we ensure that people have both access to digital technology and the ability to use it?

Input answer here::

In widening access to digital technology, particular work will be needed to address online hate speech and hate crime. With digital technology such as smartphones ubiquitous, the chances of experiencing hate speech (and potentially hate crime) online is higher than ever for BME communities. Negative experiences can discourage use of digital technology and, as such, the Scottish Government and stakeholders should look to better address this issue to protect BME communities online.

Any other comments

24 Taking into account answers to questions elsewhere, is there anything else we should be doing that doesn't fall into any of these categories?

Input answer here::

25 Do you agree with the framework we have created to measure our progress in tackling social isolation and loneliness?

Input answer here::

26 Is there anything missing from this framework that you think is important for us to consider?

Input answer here::

As previously stated, it is critical to understand that BME individuals and communities may choose to self-isolate from wider communities as a tactic to avoid racism. Isolation is perceived as a 'lesser evil' to experiencing racist abuse and harassment in the public sphere. To truly eradicate social isolation for BME communities, there will need to be a specific focus on routing out racism, racial discrimination, and racial harassment to make all areas of public life safe and open to BME groups.

Furthermore, while the BME population in Scotland is relatively younger compared to the white British/Scottish population, this will not always be the case. As BME groups age, social isolation and loneliness will become more significant issues for the community. As the Runnymede Trust has highlighted, to understand the causes of loneliness among older BME people, misconceptions and stereotypes have to be challenged. There is an assumption that BME older people live within 'traditional' family structures, with younger family members looking after the older generations. This belief clouds the reality of loneliness for many BME older people.

Difficulties faced by BME older people may include:

- 'Hidden loneliness' – feeling lonely even within a busy household
- Less likelihood to participate in activities outside the home

- Poverty, which makes socialising and traveling difficult due to the lack of resources
- Language barriers, particularly for older BME people who speak English as an additional language communicating with British-born relatives
- Cultural barriers, such as feeling disconnected from country of birth but not as comfortable in British culture as younger generations

Addressing these problems will become a key issue for Scotland in coming years as it attempts to tackle social isolation and loneliness in aging BME populations.

About you

What is your name?

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Are you responding as an individual or an organisation?

Organisation

What is your organisation?

Organisation:

Coalition for Racial Equality and Rights

Are you responding on behalf of a community discussion that has taken place?

No

If you used our facilitation guide, please upload the Event Registration form here.

Upload:

No file was uploaded

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

Publish response with name

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

Yes

Evaluation

Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)

Matrix 1 - How satisfied were you with this consultation?:

Slightly satisfied

Please enter comments here.:

Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:

Slightly satisfied

Please enter comments here.: