

Briefing Paper 103

“Very small, very quiet, a whisper” – Black and Minority Ethnic groups: voice and influence

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Introduction

This paper aims to identify the current position of the Black and Minority Ethnic voluntary and community sector (BME VCS) in relation to voice and influence in terms of policy and practice. The current climate has presented challenges for third sector organisations, such as responding to the economic downturn, the introduction of austerity measures and the impact of changing funding mechanisms. Yet research into how BME CVS organisations are faring in this changed context is limited not only in the area of understanding direct service provision for BME communities but, particularly, around the capacity of the BME VCS to play a strategic advocacy role.

The research therefore aimed to address the following:

1. Whether there was a BME VCS and its characteristics.
2. The perceived voice and influence of the BME VCS within the third sector as a whole.
3. The resilience of the BME VCS in the face of the current challenges.

Methods

The findings draw on the available body of practitioner and academic literature on the current position of the BME VCS in England. A total of 21 interviews were carried out with 14 community group representatives, five members of strategic organisations and two

representatives from a government department. Focus groups were convened in Greater Manchester and Birmingham with members of 35 BME organisations. All primary research was undertaken in 2012.

Context

All those BME organisations interviewed had, in the past, undertaken activities aimed at influencing policy and practice. They reported that, increasingly, their main focus was becoming core service provision. This included advice work, the provision of health and social care, or education; often with very specific communities – e.g. in established BME neighbourhoods, with recently arrived migrants, asylum seekers and refugees. The research generated a broad picture of the current context for such organisations.

1. A significant (and increasing) reduction in funding and resources, as a result of the economic downturn and the political response to that downturn. Additionally the reduction in funding available to build organisational capacity was having an impact on the potential for new and emerging organisations.
2. The impact of the Single Equality Act 2010 was widely perceived to have diluted the funding (and other support) available specifically to minority communities.
3. The perceived reduction in commitment to racial equality by the current government.

Findings – “very quiet, a whisper”

The research elicited a complex, often contested, and heavily nuanced range of opinions on the current position of BME organisations. The key messages from participants were, however, that the BME VCS voice was not strong and there were challenges facing the BME VCS both in relation to access to resources and political support.

Is there a BME VCS?

There is a debate in the current literature on whether there is a distinct and definable BME VCS. This was reflected in the views of interviewees – but on balance the prevailing view was that there was ‘a sector’, albeit one which is diverse and lacking in coherent leadership, particularly at regional and national level. The main explanation given for this was that most organisations were struggling to survive and therefore have limited capacity to cooperate with others. even to deliver services. Funding for strategic BME organisations was also perceived to have been severely curtailed.

Voice and influence

Voice and influence can be effective at different levels – in terms of individual change, community development and shifts in local, regional and national policy and practice across sectors.

Both in the literature and the primary research there was a view that the BME VCS could exert influence at an individual and community level and many organisations set out to do so as part of their mission. However the shared concern was that, beyond the individual/immediate community, there was little power. The general view of voice and influence is summed up by the quote, from one of the BME community group participants, that provides the title of the paper, ‘Very small, very quiet, a whisper’.

It was also felt that the larger ‘mainstream’ VCS organisations were unwilling or unable to

provide support. Indeed the impression given by many interviewees was that they were struggling in an unequal competition with much of the VCS for resource and voice, although it was also the case that smaller ‘mainstream’ VCS organisations were facing many of the same challenges. BME VCS organisations were also being adversely affected by the Single Equalities Act, which was perceived as affording relatively higher priority than previously, and consequently influence, to other inequalities.

At a political level there was a perception that BME organisations were not being listened to. Respondents commented that race issues were no longer seen as important by policy makers and funders, who considered that racism ‘had been dealt with’ and it was time to ‘move on to other issues’. Interviewees commented that the period roughly coinciding with the first decade of the millennium had been one of growth and development, but gains made were now being undone by current economic and political changes.

The economic downturn has been used as a reason to cut sources of funding. Many BME organisations were originally funded, and subsequently maintained, through Area Based Initiative (ABI) funding streams such as the Inner City Partnership Programme or Single Regeneration Budget which have now been completely curtailed.

In the policy context participants in the research considered that leadership within the sector had therefore been significantly diminished.

Strategies

In light of challenges faced by BME organisations, strategies used by the staff and management of organisations to maintain their advocacy role were examined.

In order to maintain their existence and develop, organisations were using the following strategies:

- Demonstrating need – using a ‘traditional approach’ of developing responses to

needs within ethnic minority communities with those services then integrated into the mainstream. This had become more difficult. However participants noted the danger of 'following the money' simply to survive (e.g. the Prevention of Violent Extremism Initiative). This had been resisted as it could damage their credibility within their community.

- Capacity building and education – a key strategy was seen as developing strong governance and capacity within BME organisations. Interviewees also identified an educational role, in relation to keeping issues of race and racism on the agenda.
- Politicisation – few participants had capacity to commit to this in their organisation's work, but identified that supporting campaigns such as Operation Black Vote was important in potentially affecting change in areas with substantial BME populations.
- Partnerships – interviewees agreed that building alliances and partnerships was an important strategy in order to exert influence around specific issues that 'cut across' communities – such as hate crime.

Resilience in the face of challenges

Policy barriers to influence were recognised by research participants but they also identified barriers within communities, such as age, gender, diversity, and tensions that originate in the country of origin. These included a perceived lack of interest by young people; male hegemony and tensions between refugees from different sides of conflicts in their country of origin.

Across the range of interviews there were examples of smaller organisations, where most or all activity was supported by volunteers, and where there had been little adverse impact due to the recession. Generally they were not seeking to influence policy or campaigning at any level but were described as 'working from the heart' and having some impact – for example in anti-

deportation campaigns and the protection of a specialised health provision.

The dynamism and inventiveness of some organisations had enabled them to adapt to the current situation and manage to continue delivering their services. However this had been achieved by increasing the use of volunteers, or reducing wages and/or hours of staff. This could have an adverse impact in the long term, by reducing the quality or accessibility of the service and limiting the capacity to tackle 'the bigger issues'. Nevertheless it was a pragmatic response to adversity and a demonstration of the level of commitment by many individuals in the BME VCS.

There were no examples of organisations successfully applying for, or being commissioned to deliver, public service contracts, even in partnership with a larger BME organisation. There was recognition of a need to generate funding from within communities in order to survive. Although this was seen as increasingly difficult, there were successful examples from small BME (particularly faith based) organisations securing resources from within their own communities. An interviewee gave an example of a group that had started off with half a dozen people and now had their own premises and had become self sufficient through using the energy and creativity of their congregation. It is these examples of dynamism that may well point to one possible future for the sector.

Conclusions

In approaching this research, the key consideration was to attempt to identify the 'health' of the BME VCS, if it existed as such, in the current political and economic climate. Participants supported the existing literature (Yeung, 2010; ROTA, 2009; Just West Yorkshire, 2012), articulating that the position of the sector was very weak compared even to two or three years ago, particularly in respect of funding available to support activity.

This meant that services had been, and were likely to be, reduced. There was little confidence that mainstream organisations would be able, or possibly even willing, to pick up work with the diverse range of BME communities.

A particular concern was that this came at a time when individuals in all disadvantaged communities generally (within which BME groups are over-represented) were facing challenges in relation to unemployment, low income for those in work, and a reduction in statutory services. The Single Equality Act was perceived to have further weakened the sector, by reducing the ability to challenge policy, particularly in a legal context, on race specific issues. Additionally the localism agenda did not provide opportunities for BME communities that were dispersed, rather than concentrated in a specific geographical area, to exert influence.

As a consequence the feeling was that 'voice' was indeed 'very quiet, a whisper'. There was a perception that organisations were 'keeping their heads down', becoming more inward-looking and focused on their own communities. Participants also identified reduced politicisation within the BME VCS, and a focus on religious issues rather than racism as a key response by some parts of the sector in the wake of 9/11 and the London bombings.

There was clearly still a willingness to question and confront adverse changes and to maintain a level of opposition to race

inequality. Participants identified the need for the BME VCS to articulate a strategy for consolidating gains previously made around race equality issues. Given concern about the quality and representativeness of leadership in the sector, developing such an approach may prove challenging. It was perceived that low level, unfunded, community activity will continue whatever the wider scenario, and that communities may develop new ways of coping and developing, based on new models of operation that will have to depend less on state support. There are also possibilities to increase internal funding within communities, which would provide more scope for organisations to prioritise their own agendas and responses rather than be purely responsive to the priorities of the funding body.

A key concern for the sector in the short to medium term will be to devise ways of developing leadership to strengthen voice and influence in adversity. There may also be new models of collective organising that can be developed through the use of social media, including ethnically specific platforms such as QQ for the Chinese communities and Nasra Klas amongst the Polish. Additionally there is scope to build alliances across the sector and with the 'mainstream' voluntary sector where 'common cause' can be identified.



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