

**EVCP**  
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# BME communities and the empowerment agenda

Research on the development of a  
black and minority ethnic voluntary &  
community sector practitioner network

West Midlands Race Equality Advisory Board



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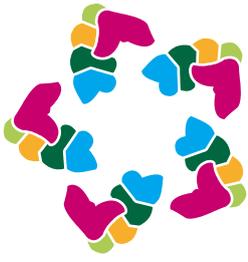
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## **The third sector and the voluntary and community sector**

The third sector is a diverse, active and passionate sector. Organisations in the sector share common characteristics. They are non-governmental; value-driven; principally reinvest any financial surpluses to further social, environmental or cultural objectives. The term encompasses voluntary and community organisations, charities, social enterprises, cooperatives and mutuals both large and small. (Office of the Third Sector)

This report is based on research with the voluntary and community sector. Where appropriate, reference has been made to the voluntary and community sector, as distinct from the wider third sector.

## Summary

Black & Minority Ethnic Voluntary & Community Sector (BME VCS) participation at local authority and regional levels is important as it impacts on a community's ability to engage with regional policy and agencies. This study showed that BME VCS organisations, whether based in urban (Birmingham) or rural (Worcester) areas have the same issues and problems when engaging in consultations with public sector agencies.

Voluntary & Community Sector (VCS) organisations want to be listened to by public sector agencies (43%), want more respect and equality (48%), local consultations (46%) and development of local and regional networks (35%). Organisations also want public sector agencies to give clearer reasons for consultation (43%) and to publish honest and clear outcomes of the consultation (54%).

Consultations with public sector agencies were seen as a 'tick box' exercise (51%); 54% said that public sector agencies do not understand their needs and 48% felt there was a lack of respect from these agencies for BME VCS organisations. For sustainability organisations wanted long term funding (62%), engagement in the decision process at local level (54%) and partnership working with the VCS (48%). They also wanted public sector agencies to publish honest and clear outcomes of the consultation (54%).

Suggestions are given for developing a regional BME practitioners' network where the remit, terms of reference, structure and administration has to be developed through participation of BME VCS organisations to ensure success of the network.

## 1. Introduction

West Midlands Race Equality Advisory Board (WM REAB) has recognised the lack of co-ordinated Black and Minority Ethnic (BME) participation at local authority and regional levels, which impacts on the communities' ability to engage with regional policy and agencies. This research project, commissioned by Regional Action West Midlands, gathers and discusses evidence to support the development of a regional BME practitioners' network.

## 2. Context

A plethora of government initiatives and policies developed since 1997 have resulted in BME communities being bombarded with invitations to establish partnerships and requests to contribute to the development of strategic objectives and action plans. Millions of pounds have been earmarked to address deprivation and disadvantage, particularly in urban areas (especially inner city areas) populated by diverse marginalised and excluded communities, including BME communities.

According to the report published by the Office of the Deputy Prime Minister (ODPM) in January 2005 entitled *Improving the Prospects of People Living in Areas of Multiple Deprivation in England*, over 70% of the BME population of England live in deprived areas. The West Midlands has the largest BME population of any region outside of London and has not escaped the input of vast sums of resources to alleviate the deprivation experienced by BME communities living in the inner city areas of the major urban towns and cities. However, from the perspective of grass roots BME organisations, this extra funding has not provided the promised regeneration.

It is with this background that many BME organisations are reluctant to participate in consultations. When they are persuaded to participate it is with apprehension and hope that maybe this time someone will listen to their views and make a difference in the way public sector agencies fund, work and respect BME VCS organisations.

### 3. Scope of the study

In the short time available for this research project, it was decided to choose two areas in the region, one an urban area with high percentage of BME population and the other a rural area, having low levels of BME population. The issues and problems faced by the BME VCS organisations in these two areas would then provide a good indication of the types of issues and problems faced by this sector across the West Midlands. The areas chosen for this study were the cities of Birmingham and Worcester, which have 39% and 3% BME population respectively.

Organisations and voluntary groups in the study areas were identified from a number of sources; research was undertaken to identify the issues and problems faced by these organisations and to gather suggestions for improving the consultation process with public sector agencies.

A broad range of organisations providing services to BME communities were contacted, ranging from training and education providers, providers of support and advice (including those that focus on business support), religious faith groups, health groups and community forums. For details of methodology used see section 6.

### 4. The role of the voluntary and community sector in regeneration

It is evident from published research that active engagement with the VCS and the wider third sector is critical to the creation of vibrant communities that are united by common visions as well as valuing diversity and equality of opportunity. This is also recognised by national, regional and local policy-makers. A high level of community involvement is associated with low levels of crime and disorder, higher educational achievement, better health and a greater involvement in the democratic process. In stimulating community involvement an active VCS is important, as is easy access to this sector for those who want to get involved.

Voluntary organisations contribute nearly £7bn to Gross Domestic Product (GDP); therefore, it is important for public sector agencies to work in partnership with the VCS, including the BME VCS, to ensure effective regional regeneration. The government's final report of its review of the wider third sector, which was completed last year, sets out a strategy to work with third sector organisations over the next ten years to promote social and economic regeneration.

More than £515 million will be invested by the new Office of the Third Sector in third sector programmes to support thousands of community organisations across the country. The aim is to give the VCS and wider third sector organisations a greater voice and to work with the sector to strengthen communities, transform public services, encourage social enterprise and support the conditions for the sector to thrive (and survive).

## 5. Current initiatives: compilation of directories of BME practitioners in Birmingham and Worcester

More than 13% of the population of the West Midlands is made up of people from BME communities (West Midlands Minority Ethnic Business Forum Annual Report 2006). With currently 39% of the population being BME communities, the city of Birmingham is culturally diverse and is predicted to become one of the first cities in the UK where black and minority ethnic communities form the majority of the population by 2010 ([www.birmingham.gov.uk](http://www.birmingham.gov.uk)). In many inner city wards, BME communities account for nearly 70% of the total population. Pupils with BME heritage account for over 50% of the total school population ([www.birminghameconomy.org.uk](http://www.birminghameconomy.org.uk)).

Early records show that the first BME communities settled in Birmingham in the late 1870's, with major migration from the West Indies and the Indian Subcontinent starting soon after the Second World War. This was followed by migration from East Africa in the 1970's and recently from Somali and Eastern Europe. BME communities had a tendency to settle in certain inner ward cities and today they continue to concentrate in these wards ([www.birminghameconomy.org.uk](http://www.birminghameconomy.org.uk)).

Whereas the Hindu and Sikh communities predominately live in Lozells, Handsworth, Handsworth Wood and Soho wards, the Bangladeshi communities are found in Birchfield, Aston, Nechells and Small Heath areas. The Pakistani community in Washwood Heath, Small Heath, Sparkbrook and Sparkhill areas. Estimates show that up to 80% of the 'Pakistani' community are actually Kashmiri, originating from the Mirpur area of Azad Kashmir. It is this community that gave rise to the Balti dish, which has allegedly become the nation's favourite meal. The communities from Somali and Yemen are located in the Small Heath, Sparkbrook and Washwood Heath areas.

Although Birmingham elected its first Asian councillor, Dr Dhani Prem, in 1946, it was not until the late 1970's that more councillors from

BME communities started to contribute to the political decision making process. Prior to this, many organisations representing the needs of the BME communities were established in the city, firstly as part of larger VCS organisations that dealt with their needs and then as separate organisations led by and for BME communities.

Although several directories of BME VCS organisations have been compiled, there is no single up-to-date directory of all the BME VCS organisations operating in Birmingham. There are at least four city-wide directories of organisations available. Whereas the Birmingham Index of Voluntary Organisations directory, compiled by the Primary Care Trusts (PCTs) in Birmingham and the Black Country, has a searchable facility for finding BME VCS organisations, the constituency directories have a list of all the organisations operating in the locality and further detailed search needs to be done to identify which are BME VCS organisations.

BME VCS-specific directories have been compiled by the Birmingham Community Empowerment Network (Black Minority Ethnic Community Directory) and Birmingham Race Action Partnership (b:rap). Other ward-specific directories have been produced through various regeneration schemes, such as Aston Pride. However, there is no mechanism in place to keep these directories up-to-date or to capture information about newly formed BME VCS organisations.

In comparison to Birmingham the BME community in Worcester has been established for a far shorter period of time and accounts for about 3% of the population, of which the Pakistani population is the largest (Office of National Statistics). In the ward with the largest minority component the figure reaches 10.9%.

These communities are predominantly Pakistani with smaller Caribbean and still smaller Indian populations. As in Birmingham, 80% of this 'Pakistani' community is actually Kashmiri, originating mostly from the Mirpur area of Azad Kashmir. Even with a low BME population, Worcester currently has two Asian councillors and in 2004 saw the first Asian occupant of the 777 year old post of the Mayor of Worcester. Worcester is famous for



the Lea & Perrins Worcester sauce, which was produced in 1837 at the request of Lord Marcus Sandys, the former governor to Bengal.

The current directory of BME VCS organisations that was available from the local authority was published in August 2005. Worcester Volunteer Centre, in its role as the Council for Voluntary Services, was established in 1989. Its future plans are to develop links to local BME groups.

ensure it was an accurate reflection of the BME VCS at any given time, and the advantages of being listed would need promoting.

### The need for a regional directory of BME VCS practitioners

The majority of the areas where BME communities live are deprived and undergoing continual regeneration. Research on past regeneration programmes has highlighted the lack of engagement or exclusion of BME communities in the regeneration activities. Many BME organisations are small and find it difficult to navigate the regeneration arena. Even if they have the capacity and experience to ensure that their communities participate in and benefit from regeneration and neighbourhood renewal programmes, they have not seen the progress that they had hoped for. Community networks provide a vehicle through which BME organisations can build capacity, provide mutual support and share information. They can also generate the critical mass to enable dedicated staff to be employed to provide representation on their behalf and to deliver support services to their members.

There appears to be a opportunity to establish a directory of BME VCS organisations in the region. Advantages to BME organisations of being included in a directory would be the access to information about similar organisations working in the region and the potential to develop networks to exchange best practice and experiences of being involved in regeneration programmes.

Careful consideration would need to be given to the function and purpose of a directory, how it might be used, how data might be captured and how information would be kept updated. There would also be issues of data ownership and how the VCS would access the directory. BME VCS organisations would need encouragement to provide information for the directory to



## 6. Methodology and overall response rates

As part of this study to understand the problems and issues faced by BME VCS organisations involved in consultation with public sector agencies, organisations which either provide for BME communities or are BME-led were chosen from Birmingham and Worcester. A set of questions was developed and questionnaires were completed electronically or via telephone interviews. Telephone interviews provided the highest response rate (55%) compared to responses received by emails (14%), as illustrated in Figure 1. Figure 2 shows that the response rates from Birmingham and Worcester were not dissimilar.

The feedback from the questionnaires was analysed in order to build a picture of the issues faced by the VCS when engaging in a public sector consultation process and the suggestions (solutions) made by the VCS for changes in the public sector approach when working with this sector.

The answers to these questions were analysed for Birmingham, Worcester, regional organisations and as a total regional picture.

Figure 1 – Response rate

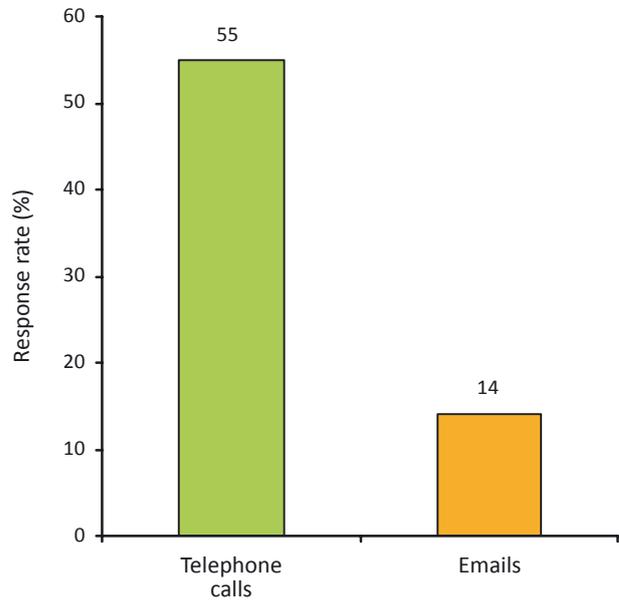
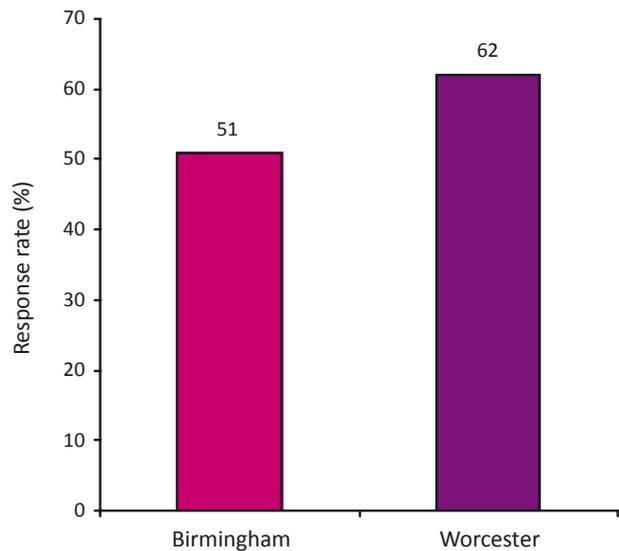


Figure 2 – Response rate from the two areas



## 7. Findings

### 7.1 Issues faced in Birmingham

The range of issues experienced by BME VCS organisations when they are trying to engage in consultations with public sector agencies is shown in Figure 3.

Although many organisations had initial apprehension in taking part in the survey once they understood the reasons for the study and that no specific comments were attached to their organisation they were quite willing to share their views. Many organisations expressed deep reservations with public sector agencies as they had bitter experiences of previous contact where they felt they were let down by them. Many felt that public sector agencies ‘use and abuse’ the BME VCS to justify their existence.

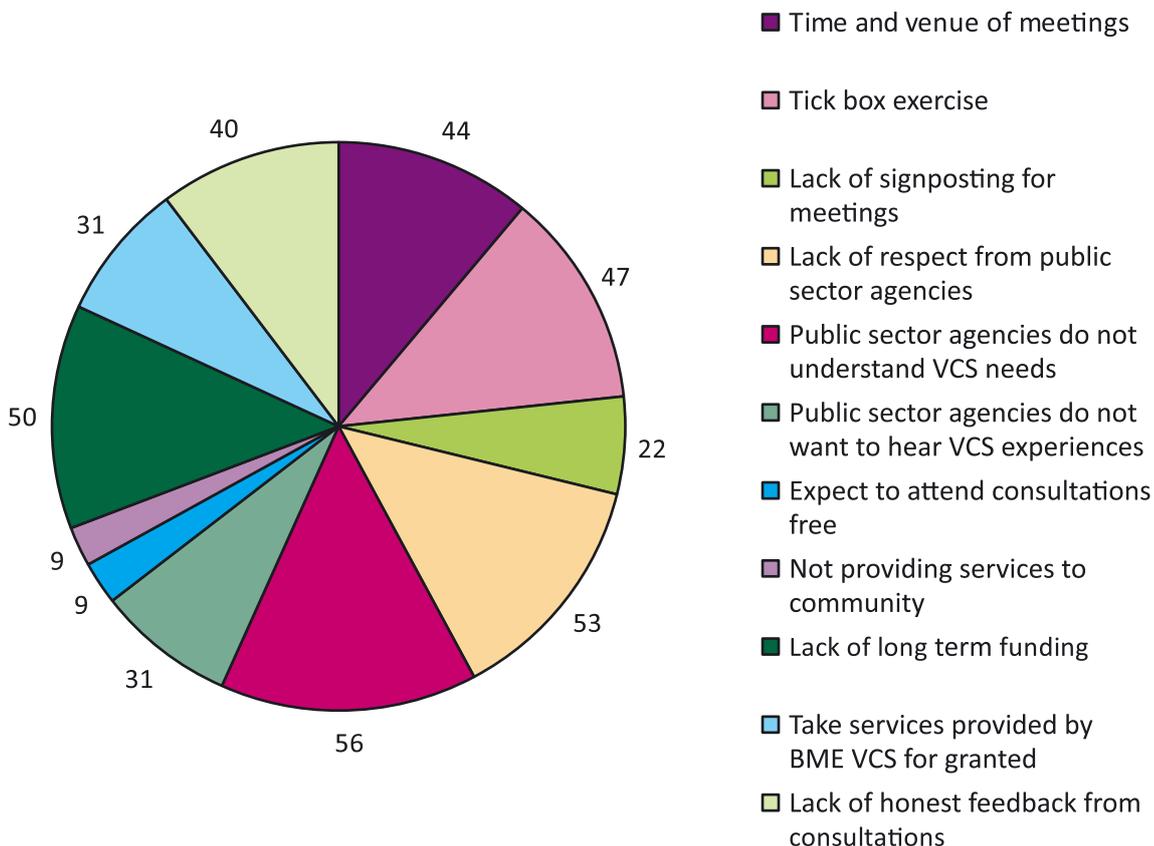
There were also concerns about the transparency and equality of the funding process, specifically where BME VCS organisations have been left out. Cases have been highlighted where BME VCS organisations

had been asked to develop a project idea only to be told later that the project has been given to another public sector agency to deliver as the BME VCS did not have the capacity to deliver the project.

A number of organisations described the funding for regeneration as ‘teflon funding’, with millions supposedly spent in their areas yet the areas still remained deprived. The level of Deprivation of Multiple Indices, instead of decreasing, had worsened with increased funding the areas received. Many had lost faith in the commitment by public sector agencies to make a difference to their areas.

The major issue faced by BME VCS organisations in Birmingham was that public sector agencies do not understand the VCS needs (56% of all respondents). 47% of the respondents felt that consultation process with public sector agencies was a ‘tick box’ exercise, 44% said that time and venue of meetings were inconvenient, 50% said that there is lack of long term funding and 44% of the respondents stated that there was lack of respect from public sector agencies.

Figure 3 – Issues: Birmingham



Following are some of the quotes from the feedback:

- “Don’t take us seriously.”
- “No respect for our time; delayed/ cancelled meetings.”
- “They are out of touch.”
- “Time constraints.”
- “Lack of resources.”
- “It’s about who you know.”
- “Do not listen to us.”
- “Tick box exercise.”
- “Used and abused.”
- “Agenda set – want to authorise decision by holding consultation meeting.”
- “Do not recognise the needs of the BME VCS, therefore failing to provide for needs as a consequence.”
- “Artificial exercise – just want to show numbers as decisions have already been made.”
- “Lack of respect – do not see BME VCS as professional organisation.”
- “Not included in consultations as seen as a threat to public sector agencies.”
- “Public sector agency staff do not have vision or direction for BME VCS needs as their managers lack vision and direction.”

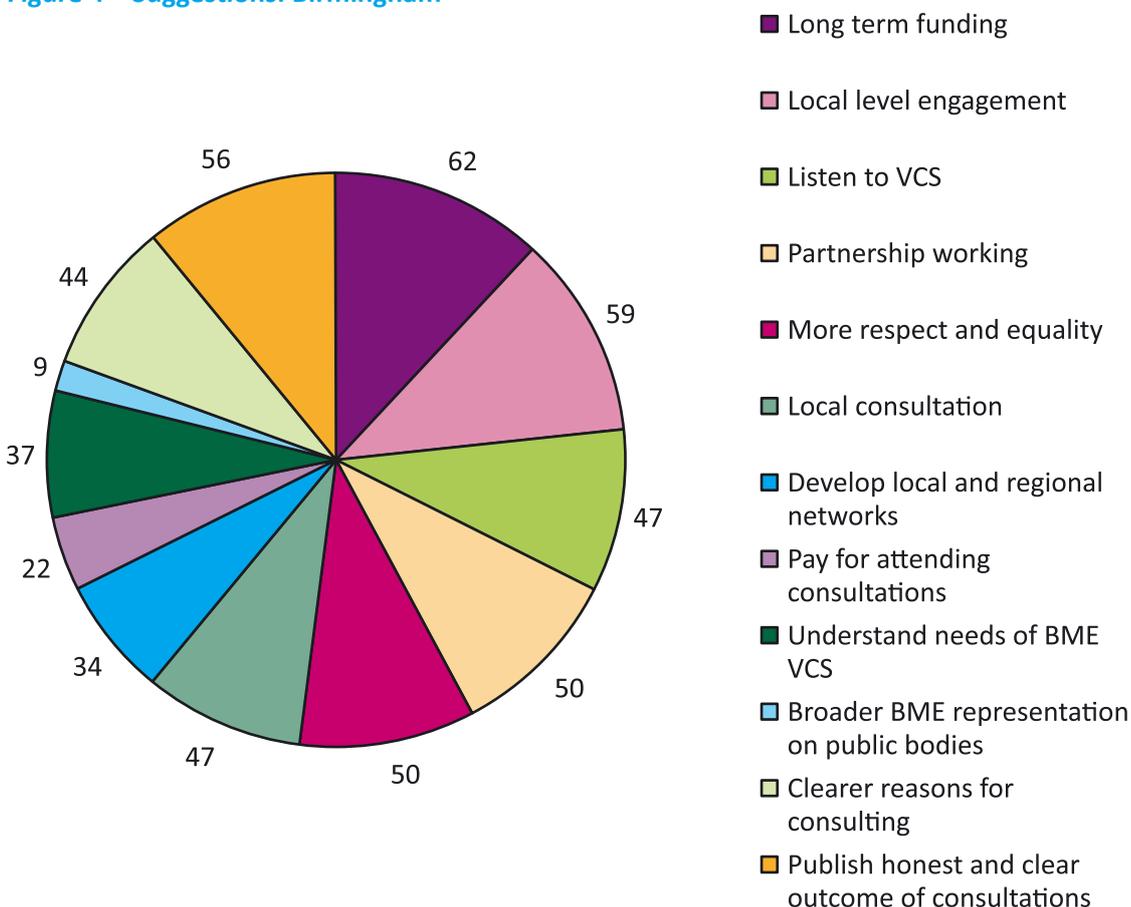
## 7.2 Suggestions made by Birmingham’s BME VCS

Figure 4 illustrates what VCS organisations feel the public sector needs to change and improve when it is consulting with the sector.

There was a strong plea by BME VCS organisations for more respect and equality from public sector agencies (50% of all respondents), local level engagement (59%) and local consultations (47%). 47% wanted public sector agencies to listen to VCS organisations, work in partnership (50%), understand the needs of the BME VCS (37%), and develop leadership skills (37%). 34% also wanted the development of local and regional networks.

The majority of the respondents wanted long term funding (62%) to allow for sustainability, give clearer reasons for consultations and publish honest and clear outcomes from the consultation process. Several organisations that were interviewed mentioned that the funding for some of the services provided by them was coming to an end at the end of March and that they were going to lay off staff, thus losing the expertise, knowledge and experience of these staff as a result of short-term funding.

Figure 4 – Suggestions: Birmingham



Many organisations were fed up with consultations and wanted to see action from the public sector agencies. Many saw the VCS and wider third sector as generating the ideas, but funding is given to mainstream organisations, who keep failing communities as they do not deliver. Many also suggested that it was difficult to become a sustainable organisation until there was genuine push from the mainstream to allocate budgets to the sector; this would not happen until the statutory sector realises its shortcomings. They also wanted recognition by the public sector on the quality of the services provided by the BME VCS organisations. Branding of public sector agency services needs to take into consideration end user needs. Public sector agencies need to understand their customers/clientele and local geography for effective policy and service delivery.

Following are some of the quotes from the feedback:

- “Long term funding needed for sustainability.”
- “Three or five year funded needed.”
- “Listen to us and take on board what is said.”
- “We are not there to fulfil their agenda – they need to work with us.”
- “Need to get a personal touch.”
- “Need to come and access at local level.”
- “Instead of judging our English or reading the paper, come and see what we do.”
- “Lots of publication but information

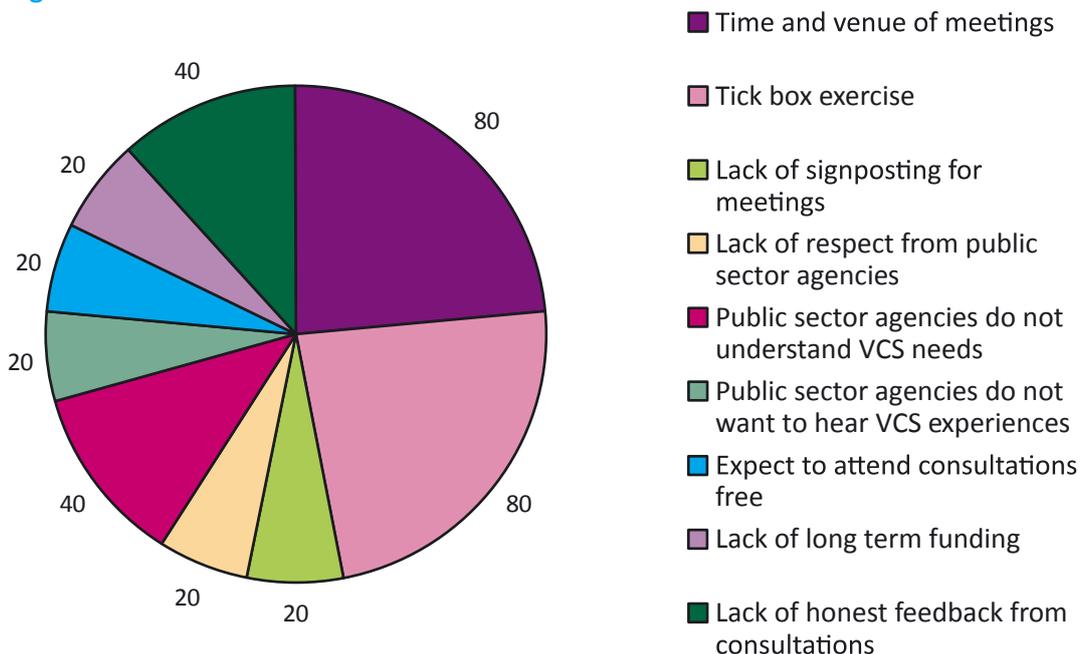
- not readily available.”
- “Fed up of being consulted – need practical help and action.”
- “More credit given to faith organisations.”
- “Decision-making must have engagement from local people.”
- “Do not play with lives of the communities.”
- “Come down to grass roots level to engage with us.”
- “Treat us equally.”
- “Value the Third Sector.”
- “Honest and sincere evaluation.”
- “Public sector agencies fail us time and time again.”

### 7.3 Issues faced in Worcester

Although the sample size for BME VCS organisations was much smaller than the sample size in Birmingham, it is evident that issues faced by VCS organisations in these two areas are similar (Figure 5).

80% of respondents indicated that the time and venue of consultation meetings was inappropriate, that the consultation process was a ‘tick box’ exercise (80%) and there was lack of honest feedback from consultations (40%). 40% perceived public sector agencies as not understanding the needs of the sector.

Figure 5 – Issues: Worcester



Following are some of the quotes from the feedback:

- “Public sector agencies look down on us and see us as not being professional.”
- “Tick box exercise.”
- “Do not understand needs of sector.”
- “Getting funding from agencies.”
- “Time and venue of meetings inappropriate.”
- “People reluctant to get involved as not listened to.”
- “More names on sheets.”

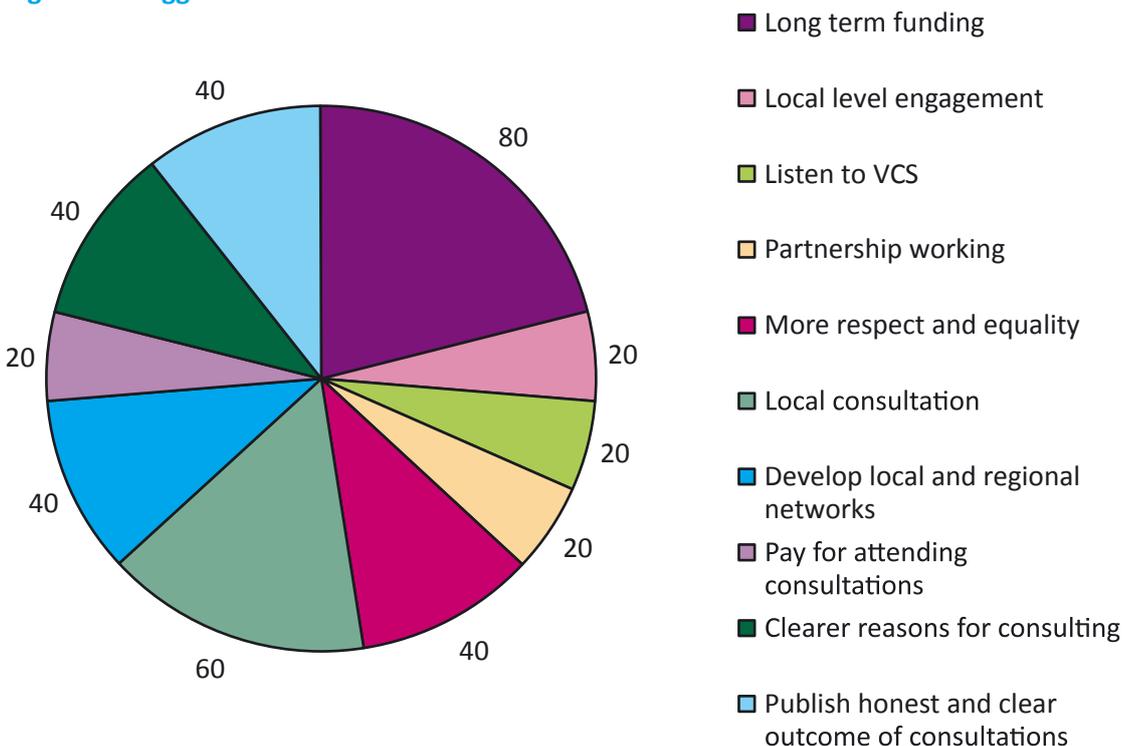
#### 7.4 Suggestions made by Worcester’s BME VCS

The majority of organisations wanted long term funding for sustainability (80%). 40% also wanted the development of local and regional networks. 40% wanted clearer reasons for consulting and to publish honest and clear outcomes of the consultation (40%) (Figure 6).

Following are some of the quotes from the feedback:

- “Listen and work in partnership with VCS.”
- “More respect and equality for the VCS.”
- “Need numbers to justify themselves.”
- “Long term funding.”

Figure 6 – Suggestions: Worcester



#### 7.5 Issues faced by both Birmingham and Worcester

The overall issues faced by VCS organisations in Birmingham and Worcester when engaging with public sector agencies were as follows:

- Agencies do not understand the needs of the BME VCS organisations (54%);
- There is lack of respect from these agencies for BME VCS organisations (48%);
- The time and venue of the consultation meetings is inappropriate (48%);
- There is a lack of funding (46%).

See Figure 7.

The process of consultation by public sector agencies was also seen as a ‘tick box’ exercise (51%) and lack of honest feedback from consultations (40%).

#### 7.6 Combined suggestions from Birmingham and Worcester

Figure 8 shows that in order to be sustainable organisations wanted longer term, three to five years funding (62%), engagement in

decision-making processes at a local level (54%) and partnership working with the VCS (48%) by the public sector agencies.

BME VCS organisations want to be listened to by public sector agencies (43%), want more

respect and equality (48%), local consultations (46%) and development of local and regional networks (35%). Organisations also want public sector agencies to give clearer reasons for consultation (43%) and publish honest and clear outcomes of the consultation (54%).

Figure 7 – Issues: Total

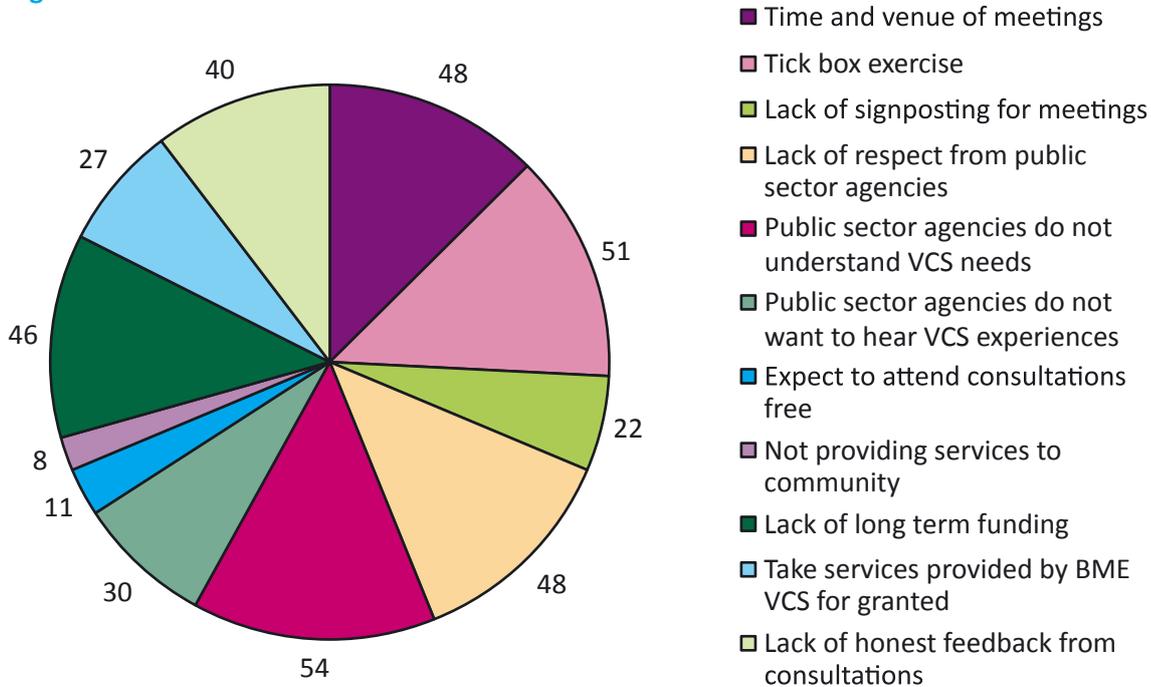
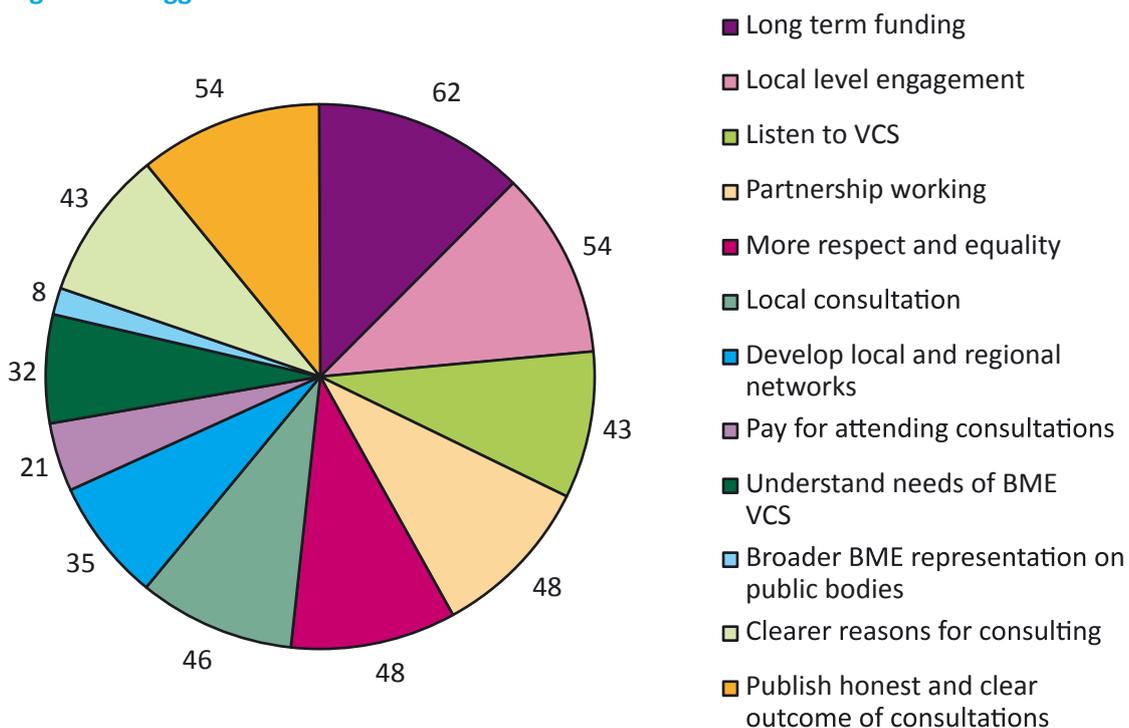


Figure 8 – Suggestions: Total



## 8. Developing a regional BME VCS network in the West Midlands

The findings from Birmingham and Worcester highlight the opportunities for a regional network to lobby for changes in relationships with public sector agencies and overcome inevitable fragmentation and a lack of co-ordination. A network could also usefully facilitate exchange of good practice and innovation around BME VCS participation in public sector consultation and the wider regeneration arena.

### 8.1 Review of existing networks

Currently there is no regional BME practitioners' network in the West Midlands, apart from the BME Network that has been established by the Heart of England NHS Foundation Trust to support the aims of the trust which covers east Birmingham, Solihull, Sutton Coldfield, Tamworth and South Staffordshire. The key issues for this network are to tackle racial harassment in the NHS, establish an equalities framework and address other policy and procedural issues relating to grievance, violence and aggression.

Advantage West Midlands last year awarded the tender to manage the Agency's new region-wide programme for Black and Minority Ethnic Third Sector organisations to Birmingham Race Action Partnership (b:rap). This new two year funded programme, called Routes to Opportunity (R2O), is the first of its kind in the region and will enable BME organisations and individuals to have better access to a range of targeted training, coaching, mentoring, business support, finance and advice.

The new programme is a direct response to results of Agency funded research which highlighted the lack of capacity among VCS and wider third sector organisations to deliver public service contracts.

How effective this programme will be in targeting the needs of BME VCS organisations and wider third sector organisations across the region has yet to be seen. This programme does offer the opportunity, if taken, to develop a BME VCS regional practitioner's network.

Consideration also needs to be given to the benefits of developing a BME practitioners network which invites early 'buy-in' by organisations and uses a 'fresh

sheet of paper', inviting organisations to participate in the development of the network from the beginning, rather than persuading them to join in at a later stage.

A number of regional BME VCS networks have been established; these could be used to find best practice and models for developing similar structure in the West Midlands (see recommendations).

### 8.2 Issues, views and aspirations of regional organisations for a West Midlands BME practitioners' network

In addition to the research with the BME VCS in Birmingham and Worcester regional organisations were approached as part of this study to ascertain their views and issues concerning consultations with public sector agencies. These organisations were Birmingham Race Action Partnership (b:rap), Rights and Equality West Midlands (previously known as Race Equality West Midlands), West Midlands Faiths Forum and the West Midlands Equality and Human Rights Commission (previously known as the Commission for Racial Equality).

As shown in figure 9, the issues highlighted by the regional organisations are lack of honest feedback from consultations (50%), lack of long term funding (50%), lack of respect from public sector agencies (50%) and that the consultations are 'tick box' exercises (50%). There was also a lack of signposting for meetings (50%) and a feeling that services provided by the BME VCS were taken for granted by public sector agencies. This reflects the views of grassroots BME VCS organisations in the study.

Following are some of the quotes from the feedback:

**"Public sector agencies tend to be very protective."**

**"Want to hear good news and not bad news."**

**"Reluctant to publish mildly critical reports of the public sector agencies."**

**"Consultation seen as an event, rather than a process."**

**"Worse than tick box exercise."**

**"Not clear about what they are consulting about and with whom."**

**"Many organisations do not know that opportunities to participate exist."**

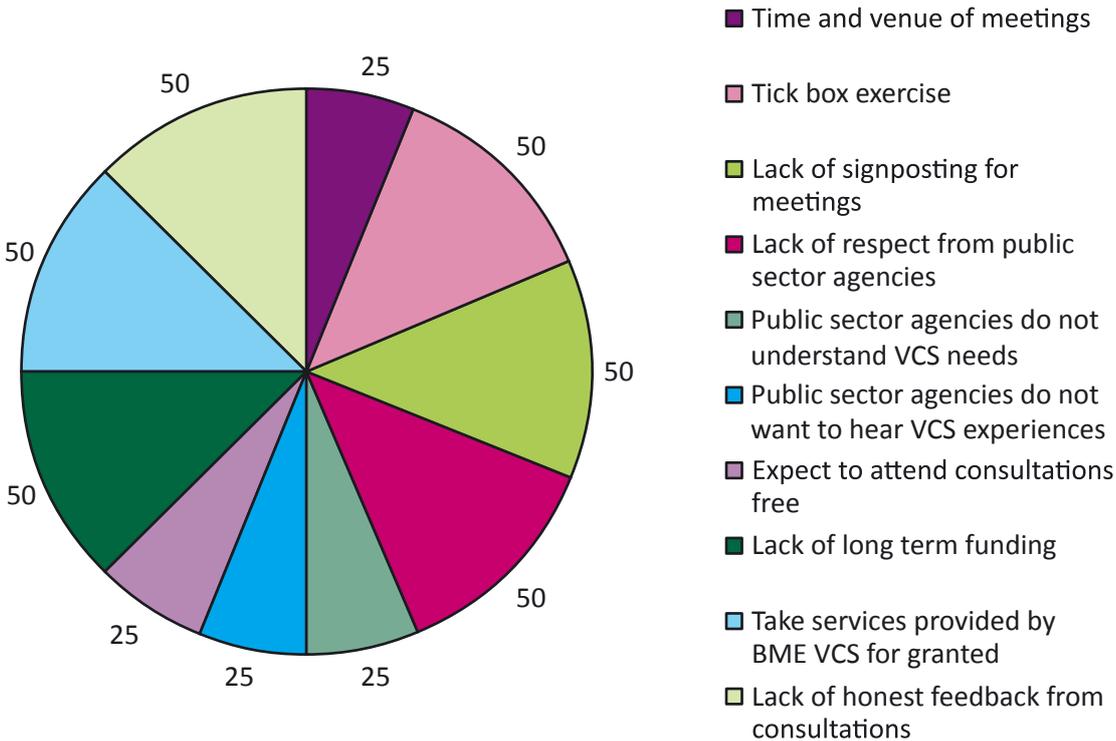
**"Many organisations have previously 'participated' and have seen no benefits so are**

**unwilling to spend time/resources on it again.”**  
**“Many consultations are ‘tick box’ in approach so are not meaningful and are often not marketed widely.”**

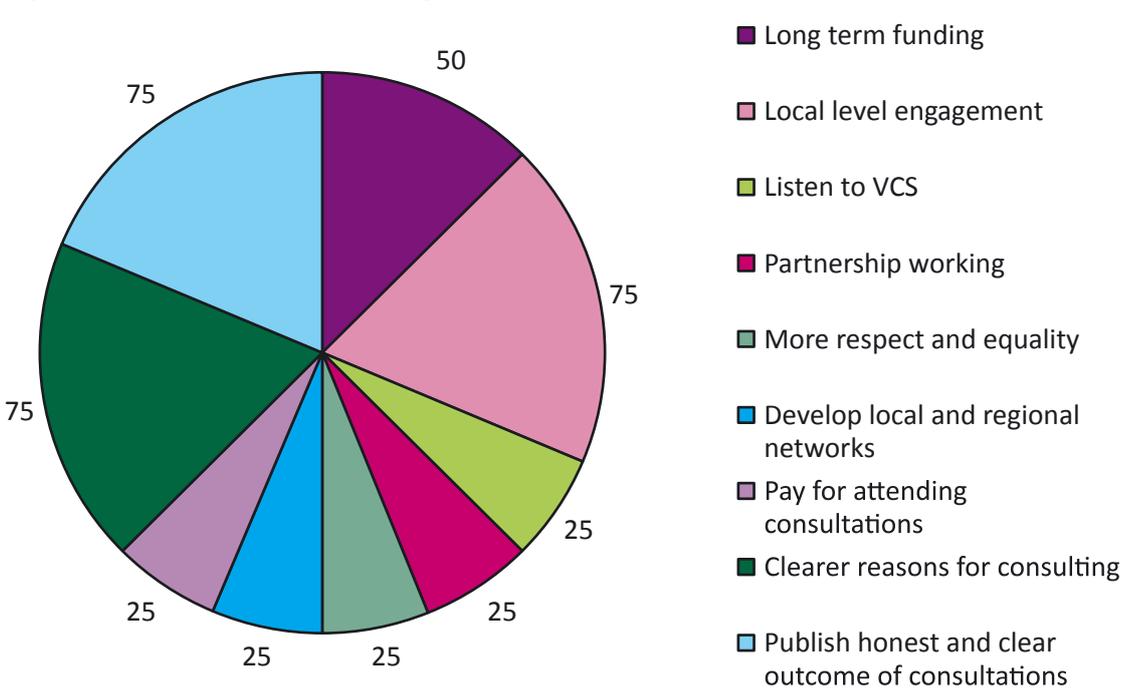
Figure 10 shows that regional organisations suggested that long-term funding was needed for sustainability of the BME VCS (50%)

and it was important to organise local level engagement by public sector agencies with the VCS organisations (75%). Regional organisations also wanted to ensure that public sector agencies provide clearer reasons for consulting (75%) and publish honest and clear outcomes of the consultation (75%), again reflecting the views of the grassroots BME VCS organisations.

**Figure 9 – Issues: Regional**



**Figure 10 – Recommendations: Regional**



Below are some of the quotes from the feedback:

**“Improvement in consultation.”**

**“More effective engagement.”**

**“Steady three year funding.”**

**“Public sector agencies need to be much clearer about their reasons for consulting with communities and provide much clearer guidelines for individuals and organisations that wish to participate so that people feel able and confident to contribute.”**

**“Public agencies should promote more widely the positive outcomes of consultation and why consultation is the best way of making decisions.”**

**“Public agencies should shape communities’ expectations so that participants can make more informed decisions on whether to participate.”**

### 8.3 A framework for developing and delivering a BME practitioners network in West Midlands

When addressing the development and delivery of a regional BME practitioners’ network in the West Midlands consideration needs to be given to ensuring the elements suggested below are covered. How these are included must be decided by the members themselves:

- Membership and level of membership (individual/group or both);
- Membership costs;
- Decision-making process:
  - » regional body that is elected from all regional BME VCS organisations;
  - » sub-regional bodies which are elected locally and provide elected members to the regional body;
  - » themed subgroups, i.e. health, employment, enterprise, etc. to look at specific issues to develop networks, which then feedback into the regional network.
- Objectives of the network;
- Activities;
- Benefits/impacts;
- Organisation, management and administration;
- Funding and sustainability of the network;
- Cost to organisations of attending meetings on behalf of network;
- Level of commitment required.

Any BME practitioners’ network would also need a degree of flexibility and would need to address the following issues:

- Equality: the need to ensure that BME VCS organisations from different communities are equally represented (proportional representation to ensure a balanced view of all the community groups);
- Ensure that there are frequent meetings with information dissemination and informal networking between meetings;
- Provide local networks;
- Ensure the views of smaller BME organisations are respected equally alongside the larger BME VCS members;
- Open accountability to members, usually through reporting processes and voting mechanisms;
- Actively pursue dialogue and partnership working not only amongst themselves, but also with public sector agencies;
- Ensure the provision of help and mentoring support to new organisations;
- Ensure that there is a degree of commitment from public sector agencies to work with the network.

These are only suggestions as any framework for developing and delivering a BME practitioners network would need to be developed with participation from BME VCS organisations to ensure they have ownership of the framework.

### 8.4 Practical considerations for the structure of a BME practitioners’ network

The West Midlands is a vast and diverse area and there are huge practical and logistical problems in trying to establish a network that involves every BME voluntary and community organisation in the region. Unless organisations are paid for travel expenses and their time it will be difficult to ensure that all of them attend regional meetings. This may be seen as a lack of commitment; however, voluntary and community organisations lack the resources and funds to participate in additional activities outside the remit for which they are funded.

One solution might be to develop a regional steering group, organised and supported by regional agencies such as the West Midlands Race Equality Advisory Board and Regional Action West Midlands. This regional backing might encourage buy-in to a BME practitioners' network by regional public sector agencies. It would be important for a steering group to invite other BME organisations from the region to participate with them to develop terms of reference, remit, function and structure of a BME practitioners' network.

Sub-regional and local networks would need to be identified or established to serve as links between the regional network and local networks. Formal election processes would need to be organised to allow for equality of participation by all BME VCS organisations and to ensure that representation is proportionate to the local BME population.

Where systems, structures and procedures are forced upon any organisation to develop networks, the success of that network is limited. By working on the remit, terms of reference and structure BME organisations would be able to not only bring their experiences and knowledge of what works and is feasible for voluntary and community organisations, but they will also own the network, allowing it to grow organically by ensuring participation by other organisations. The sooner the process of transferring ownership of the network starts the sooner a network would begin to assume a life of its own.

As part of the structure for any BME practitioners' network, consideration needs to be given to the development of subgroups whose function might be to identify the needs and opportunities available for the sector, including reporting and accountability to the member organisations.

The success of a network would depend on 'buy in' from BME voluntary and community organisations and public sector agencies, and longer-term funding to maximise sustainability.

## 9. Conclusion

It is evident that BME voluntary and community organisations, whether based in urban or rural areas, have similar issues when engaging in consultations with public sector agencies.

Many BME VCS organisations viewed consultation processes as a 'tick box' exercise; many felt that public sector agencies do not understand their needs and that there is a lack of respect from these agencies for BME voluntary and community organisations. In order to ensure sustainability organisations want long-term funding, engagement in the decision-making process at local level and partnership working with the VCS. They also want public sector agencies to publish honest and clear outcomes of consultation processes.

## 10. Recommendations

Future work should avoid repeating past mistakes. The legacy of past government regeneration schemes and their continuing failure to deliver for BME organisations is apparent from the responses in the questionnaire that formed part of this study. This is also acknowledged in the *Improving the prospects of people living in areas of multiple deprivation in England* report, published by ODPM in January 2005. The report states that: ‘the system for delivering government support to deprived areas, such as regeneration programmes and area-based initiatives, is failing to support deprived areas effectively’.

Although there is strong ministerial support for bringing the wider third sector into the mainstream of public sector commissioning, the reality of this actually happening is a long way away, according to the first piece of meaningful research in the area that was published in February 2008. The Improvement and Development Agency examined the attitudes and perceptions of commissioners and third sector organisations about working together. Its findings are unequivocal and match many of those found in this study. “A lot of local authorities say they involve third sector organisations in consultation about service planning, but how much is meaningful involvement?” Many felt it was just a tick box exercise. This was echoed by 51% of respondents in this study.

Although government has made commitments to revising the methods of consulting people and to investing in research to better understand the most effective methods of consulting with a range of organisations, it is important that a strong message from the sector, including the BME VCS, is made to ensure that the mistakes of the past are not repeated in the future.

### Learning from other areas

It is important that any research to support the setting up of a regional BME VCS practitioners’ network includes making contact with the following regional networks to identify good practice working and learn from their experiences:

- MENTER is the East of England BME Network and exists to develop the BME sector in

the priority areas of infrastructure support, health, education, employment, training, arts, culture, leisure and sport, to promote race equality and advocate for the sector.

- MiNet (Minority Network) was set up in 1999 as the London Black, Asian and minority ethnic (BAME) strand of the Cabinet Office funded regional third sector infrastructure network. MiNet is a network of other regional BAME VCS infrastructure networks. It has been facilitated and hosted on behalf of London’s BAME third sector by ROTA since 2002.
- One North West is the regional network for the BME VCS in the North West of England. Supported by a strategic grant from the Home Office Active Communities Unit and by the European Social Fund, One North West is working for the benefit of the BME VCS across the five sub-regions of Greater Manchester, Cheshire, Lancashire, Cumbria and Merseyside.
- Voice East Midlands is an infrastructure support organisation for the sub-regional and front line organisations in the East Midlands. Its aim is to enable the East Midlands BME VCS to influence the regional agenda for the benefit of BME organisations and communities.
- The BME VCS Regional Panel works to empower the BME VCS across Yorkshire and the Humber by raising its voice at the regional level and by developing effective linkages.
- BSWN is the BME network for the South West of England. It provides access to information on policy and funding programmes and aims to unlock further funds for the sector and advocate effectively at a regional level, ensuring that the sector is consulted and recognised. It also looks to increase the effectiveness of the sector through the provision of advice, information, training, representation, publications and development services.
- BECON is the BME voluntary and community organisations’ network for the North East. Its work includes promoting, supporting and providing information and training opportunities to the BME voluntary and community sector in the North East, facilitating BME groups to network, support each other, share experiences and resources, and influence decision-makers









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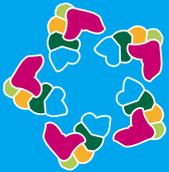
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