



Equalities Gathering Health and Wellbeing



This project is part funded by the EU Asylum, Migration and Integration Fund. Making management of migration flows more efficient across the European Union.

Section 1 Event Details



Event Title	Equalities Gathering – Health and Wellbeing
Event organised by	Equalities Integration Officer
Event Venue	Calton Heritage Learning Centre, Glasgow
Event Date	Saturday 17th August 2019
Event Start – End times	10.00 – 3.30pm



Section 2 Event Agenda

Time	Activity	Outcome
9.00 – 10.00 1 hour	Set up	Signs for outside Reg table, ready Refreshments ready Table discussion materials ready Equalities Mon. Box ready
10.00 – 10.30 30 mins	Registration	Welcome folk. People know how crèche works People allocated interpreters Photo permissions info rcvd People get info on NS in own languages & EMon. form
10.30 – 10.40 10 mins	Welcome/ Housekeeping/ Intro – H (community rep) What the Equalities Gatherings are Aims of Equalities Gatherings Good and safe communication today	People informed about whole project People informed about Aims People aware of conduct and values
10.40 – 10.50 10 mins	Meet someone new	Energise the room Participants get used to talking to others
11.05 – 11.20 10 mins + 5 mins set up	Presentation – A. (community rep)	People learn about working group's responses on health & wellbeing and are inspired for following conversations
11.20 – 11.35 10 mins + 5 mins set up	Presentation – New Scots	People understand key NS actions on health and wellbeing
11.40 – 11.50 10 mins	Instructions for table groups Time for people to move to tables	People hopefully seated OK!
12.00 – 1.00 1 hour 30 mins – 1st obj 30 mins – 2nd obj	Discussion 4 tables Could change depending on numbers/ interest of themes	People get their views about health & wellbeing heard and recorded People make recommendations
1.00 – 2.00 1 hour	LUNCH + Collation of small group discussions – prep key points on Powerpoint + Services reps prepare their info & set up	Summary of feedback ready for 2pm Services rep clear on role

Section 2

Event Agenda continued

Time	Activity	Outcome
2.00 – 2.10 10 mins	Summary Key points raised from AM discussions	People understand key points People know that New Scots will take points and feed back by October 5
2.10 – 3.10pm 1 hour	Services information discussions Input from agency for 20 mins, move round 3 times	People informed about purpose of various education and equalities services People know how to access them/know how to help others access them
3.10 – 3.30pm 20 mins	Evaluation	Data gathered on how well event met aims
3.30 – 4pm 30 mins	Tidy Up	

Section 3

Attendees

Total number of attendees

44 (32 refugee community members)

Identify organisations attending in an official capacity

- Scottish Refugee Council
- Glasgow Disability Alliance
- Sahileya
- Scottish Government

Identify 'groups' contributing to the event

Two independent childminders, Küche caterers, Thenue Housing venue

Identify refugee groups from geographic areas

Glasgow

“People got lots of useful info from visiting agencies that they can use straightaway.”

Section 4

Event Reporting

At registration: copies of the following were handed to attendees: New Scots Refugee Integration Strategy summary available in different languages; 'easy read' versions we had created of Employability & Welfare objectives; copies of the guidelines for communicating at the event in English, French and Arabic (translations by refugee working group members), agendas.

The Equalities Gathering on Health and Wellbeing aimed to:

- Bring together refugee representatives to identify and analyse their collective issues and priorities for change for health and well-being.
- Bring together refugees and other third sector/ community organisations to learn from each other's experiences and explore possibilities for working together.
- Enable equalities groups to meet and get to know policy makers and service providers involved the New Scots Integration Strategy.

Summary of the outcomes decided by the refugee working group (members all represent one or more equality group) who co-designed the format and agenda for the Gatherings:

- Learn what New Scots Strategy is and what it is doing.
- Speak up and get my opinions heard and understood.
- Meet people and make new connections.
- Get useful information and services.
- Feel welcomed and respected.

H. from the refugee-led working group opened the event. He gave housekeeping information, presented the background to the Equalities Gatherings project, explained the purpose of the event and presented the guidelines for communicating positively and safely that the working group had developed. A. from the refugee working group then gave a presentation on the group's collective views and analysis on each of the equalities groups' views on Health and Wellbeing in order to stimulate ideas for the attendees before discussion.

Georgia, policy officer at Scottish Government, provided an overview of the work of the Strategy. Discussion group tables were divided into equalities groups that people felt comfortable identifying with: women; LGBT; older and disabled people. Attendees went to the themed table of their choice. Scottish Refugee Council staff facilitators took objectives in turn and asked discussion groups to select two or three of the Health and Wellbeing objectives that interested them the most to discuss: 1) Are these the right actions? If not, why not? 2) Advice you would give New Scots 3) Questions/comments.

After lunch, the Equalities Integration Officer and one of Scottish Refugee Council's Community Development Officers presented a summary of the key views and recommendations. Following this, Sahileya and Glasgow Disability Alliance set up information sessions on their services. Participants moved freely between them for information and discussion.

“Women and disabled people in particular recommend that New Scots review existing written information on health rights and services to make it more accessible.”

Section 5

Key messages/outcomes

Based on event discussions and the collective analysis of the refugee working group.

Refugees and asylum seekers are able to look after and improve own health and wellbeing.

- New Scots needs to make food poverty its first priority when addressing the mental and physical health needs of refugees and asylum seekers. Access to healthy and affordable food underpins any action people can take themselves to look after their own health and wellbeing. It is recommended to connect with wider policy and campaigns on food poverty to increase the impact made in this area. Some teenagers underlined healthy eating as crucial for keeping up with others at school, where they already felt disadvantaged.
- Women, older and disabled people (in particular) value the role that certain services currently play in helping them access healthcare and understand health rights, in particular refugee Housing Providers and Health Visitors. Support and train these services in refugee and asylum seekers' issues and experiences to help these groups access and understand health rights more effectively.
- Women and disabled people in particular recommend that New Scots review existing written information on health rights and services to make it more accessible. They requested more information in plain English, Easy Read and images for those who do not read or who have visual impairments. They need information in community languages spoken in communities that are long established and still populous in Scotland but who are now not always addressed (e.g. Urdu, French, Swahili). Services working with women who arrive through Family Reunion should develop processes to ensure women receive and understand the information.

People have positive experiences from using health and social care services. Their dignity is respected.

- Disabled and older asylum seekers recommend that health and social care services provide clearer guidance on rights and entitlements that specifically or especially affect disabled and older asylum seekers. Some disabled people receive the information but some do not. Older people

often rely on third-hand information from friends. Knowledge about these rights would help them to stay autonomous and look after their own mental health and avoid isolation.

- All equalities groups recommend that services must make it easier to access and understand complaints procedures. This is important as some GPs have misunderstood people or not been compassionate. Consider how language barriers and sensitive/stigmatised health issues specific to different equalities identities can make it difficult to complain. Currently there is not enough information on how to complain and there is sometimes the perception that reception desks discourage this.
- A key message for training: All services need to treat the whole person and consider all circumstances (not just health) when providing healthcare or advice. This includes understanding experiences of poverty but also respecting strengths.

Services are more responsive to the needs of refugees and asylum seekers

- Health services must ensure that the interpreters they hire are properly trained in specialist health and disability terminology. Ensure that interpreters maintain and renew this knowledge, for poor interpretation means poor health and anxiety for disabled people.
- All equalities groups present agree that trauma-informed practice and training for healthcare and non-healthcare services is crucial. LGBT people and disabled people emphasise privacy on health issues. For example, housing providers must know that entering someone's house without warning makes can trigger recall of trauma.
- LGBT people recommend that housing providers work in partnership with LGBT health organisations to assess the impact of a house on a person's health and safety.

Section 6

Event evaluation

Staff and volunteer debriefs

What went well?

- Improved and more diverse turnout – especially disabled and older people.
- Clear collective positions from the working group – new, unexplored recommendations around food poverty.
- Glasgow Disability Alliance reported that they recruited new members who are now engaging with services.
- Agencies reported that they communicated new equalities ideas to groups unaware of their work, and had some challenging but productive conversations.
- Agencies reported that they were able to speak one to one with people to deepen their understanding of some of the experiences raised with certain equalities groups.
- People seemed to engage well in the small discussion groups and facilitators had no problems eliciting ideas.

What did not go well/what could be done differently?

No representatives from New Scots Strategy themed groups or specific health agencies. New Scots and healthcare reps who could not attend fed back that this was because the event date fell on a weekend summer holiday date and the notice (two weeks) was too short. This meant that there was no one in the New Scots health themed group to provide input.

- Need to avoid all summer dates because this is a recurring issue.
- Prioritise discussions with senior Scottish Refugee Council staff to get support from New Scots representatives.

Review target evaluation method – people marked all categories as 'great'. A lack of understanding may have discouraged people from leaving comments with more qualitative feedback.

“Health services must ensure that the interpreters they hire are properly trained in specialist health and disability terminology.”

Section 7 Attendee Evaluation

We did not use the target evaluation this time (as per recommendation in Equalities Gathering 2 report). We used more targeted questions to try to elicit more specific comments in the feedback.

What did you like? Why?

“Good meeting. I am hoping that my concerns are heard and a change to take place. I hope to have more group sessions like this.”

“It was a good session. I learned and gained knowledge. It made me feel good to share my concerns”

“All the topics were really good because people give many ideas and advice especially on getting into the colleges and getting employment”

“Educative, informative, well-co-ordinated, welcoming”

“The discussion was very interesting and information. Also enjoyed x’s talk, very informative [New Scots input]”

“Interaction, clarity, team discussion”

What I like: all the topics were good, place was accessible, school, college & university – the topics well explained

“Well organised I loved: discussion, meeting organisations, the food was yummy”

What was the most useful/interesting part of the day?

“Group discussion, report of the discussion”

“Tables discussions and presentations”

“Qualification point [recognition of qualifications] – who can provide it”

What did you not like? Why?

“Food”

“Kids’ table was in the same place where the discussions and presentations took place”

What do we need to do to make these events better?

“Very informative workshop. I think more open debates on Education for Asylum seekers/refugee and more engagement needed”

“Need a suitable place for kids to enjoy their time without disturbing the event.”

“People felt that they were listened to – they felt that they were recognised.”

Section 8 Actual Expenditure

Please detail actual expenditure against the budget you produced for the event and highlight any discrepancies.

	Estimated cost	Actual cost
Event: Venue	£300.00	£224.00
Event: Refugee travel	£135.00	£168.00 ¹
Event: Catering	£400.00	£285.00 ²
Event: Interpreters	£200.00	£270.00 ³
Event: Childcare	£120.00	£90.00
Refugee prep workshops: Catering	£266.00	£336.60 ⁴
Refugee prep workshops: Childcare	£90.00	£55.00
Refugee prep workshops: Travel	£184.00	£66.80
Materials/stationery	0	£0 ⁵
Staff travel	0	£46.80 ⁶
TOTAL		£1661.79

Notes

1. More people with mobility issues – taxis
2. Cheaper caterer found
3. More interpreter demand
4. More workshops needed due to agenda, more participants
5. Used materials from previous event
6. EIO transporting heavy items to and from event – taxi. Reduced from event 1 as some help from other cars.



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SCOTTISH FAITHS
ACTION FOR REFUGEES