



**Consultation Feedback Report 2 of 3:  
Views of Roma Parents and Asylum Seekers  
on the  
BME Children and Young People Draft Action  
Plan  
(with a focus on OUTCOMES)**

**Parenting Forum  
25 and 26 March 2013  
(Clarification provided 170613)**

## Introduction

For the first time in Northern Ireland, all of the main agencies for children and families, have agreed to work together on a plan to improve the lives of all children who live here. This multi-agency group is known as the Children and Young People's Strategic Partnership (CYPSP). The CYPSP structure incorporates a number of sub-groups, one of which is the Black and Minority Ethnic (BME) Sub Group. The term BME is described as "settled BME communities, Travellers, Roma, refugees, asylum seekers, migrant worker communities (including undocumented people), unaccompanied children and children of mixed parentage" ([www.cypsp.org](http://www.cypsp.org)).

The BME Sub Group consists of a range of representatives from community, voluntary and statutory agencies. The aim of this group is to improve the lives of BME children and young people. In order to achieve this aim, the BME Sub Group has agreed to:

- "plan what needs to change to address the rights and needs of BME children and young people and improve their outcomes, focussing on those issues that must be addressed at a Northern Ireland level.
- produce an action plan that will set out what it will do to ensure that the outcomes for BME children and young people are improved.
- decide on a set of indicators which will be used to measure how well BME children and young people are doing in Northern Ireland over time. This will help the Sub Group know if its joint work is changing the lives of BME children and young people for the better.
- work closely with the Outcomes Groups to ensure that outcomes for BME children and young people are addressed at local level as well as at Northern Ireland level" ([www.cypsp.org/bme](http://www.cypsp.org/bme)).

The CYPSP identified that the new plan for improving children's lives through better outcomes for children should incorporate meaningful engagement and participation by children, young people, their families and other stakeholders involved in the lives of the children and young people in Northern Ireland:

**"children, young people, families and communities will be enabled to participate in the planning process. Listening to [them] is key to understanding what works well".**

## **The Parenting Forum**

The Parenting Forum, a project within Parenting NI, was asked to develop a model that would facilitate and support parents from across Northern Ireland to become involved in the planning process. As a partnership organisation, the Parenting Forum has over 1,500 individual parents and family support organisations on its membership list.

The Parenting Forum also has considerable experience in carrying out numerous consultations throughout Northern Ireland and is well placed to carry out real and meaningful consultations with parents within an agreed frame-work. As the groups of parents come from a range of diverse backgrounds and include parents of children with special needs, Parenting NI is also in a position to offer additional support structures to assist parents to be actively involved in the participation process.

## **The Participation Process**

As agreed with the Children and Young People's Strategic Partnership, Parenting Forum has recruited a group of parents from across Northern Ireland to sit on the Regional BME Parents Reference Group. The aim of the Parents Reference Group is to act in a consultative role in responding to any documentation, plans or initiatives as directed by the BME Sub Group.

The Parenting Forum have also undertaken to consult with identified groups of parents who are experiencing specific circumstances and may not be able to participate in the Regional BME Parents Reference Group. The Parenting Forum undertook two additional consultations – one with a group of Roma Parents and the other with a group of Asylum Seekers. Consultation with parents requires highly skilled and experienced facilitators who are capable of working sensitively with diverse groups. A Parenting NI Facilitator worked closely with interpreters who were familiar to the parents. Parents clearly valued the opportunity to be consulted on the draft Action Plan and readily contributed their views and their experiences.

Parents who participated in these additional ad-hoc consultations expressed interest in knowing what would happen to the information obtained and how it might be used to improve the lives of children. It is hoped to be able to accommodate this interest and to facilitate the involvement of representatives from these two specific BME communities into the wider Regional Parents Reference Group. If this is not feasible for practical reasons, alternative arrangements should be considered in order to develop rapport with both groups to ensure their important views and insights continue to contribute to the CYPSP process.

### **Consultation Methodology**

A facilitation pack was designed to reflect both the needs of the BME Sub Group for feedback on the proposed Action Plan and consideration of the circumstances of the parents which included the need for information to be made as accessible as possible. For this reason, this consultation focused on obtaining parental views about improving lives of their children rather than detailed consideration of the proposed actions and milestones. The facilitation pack incorporated a brief overview which provided parents with the context and rationale behind the CYPSP and the planning framework. This overview was translated by the interpreters.

A focus group approach was used as the data gathering method because it brought parents together in an informal way which enabled them to share their experiences and their opinions. Parents worked together using guided handouts which sought their opinions on each of the better outcomes for children:

Parents were asked “When you think about each of these six ‘outcomes’ in relation to your own family experience of living in Northern Ireland ...

- what is good?
- not so good?
- and what needs to change in order to improve the lives of your children ?”

Information about each Outcome was outlined by the Facilitator. Interpreters were asked to pose the associated questions, and responses were verbally translated and conveyed in English to the Facilitator who recorded notes. Both the Facilitator and the Interpreters worked together to ensure that all parents were able to fully participate in the consultation. Encouragement and reassurance was given to parents that information shared would be treated in confidence and that report back mechanisms would not include names or personal details.

Data collected during the focus group session was collated using a qualitative content analysis approach.

### **Parent Profile**

Nine Roma Parents and three Asylum seekers were involved in this consultation and this group had children who were aged between 9 months old and 17 years old including children with additional needs. All participants lived in urban areas.

### **The Report**

Feedback from parents has been summarised and presented using a visually accessible format developed by the Parenting Forum.

### **A note about the findings**






Parental opinions, experiences and suggestions provide a rich source of data. Qualitative information obtained from parents can enhance the statistical service level data and evidence based research available for planning purposes. This triangulated approach helps to ensure that outcomes based planning is based on robust and comprehensive information.

Comments made by parents (both positive and negative), have been incorporated into this report and submitted to the BME Sub-Group as part of the CYPSP planning process. The role of the Parenting NI Facilitator is to report issues raised by parents, not to resolve specific problems identified. However, if appropriate, parents may be signposted to a suitable source of support.






Parenting NI Facilitators will not share contact details relating to individual examples given by parents, except in relation to child protection concerns.

Anonymised, experiential accounts, shared in good faith by parents, may provide opportunities to understand where systems can be improved at policy, strategic or practice level, to ensure better outcomes for all children.

## Outcome 1 - Healthy

 	 <p><b>Good</b></p> <p>Asylum seekers – have appreciation of available services. Identified that access to interpreters was an important aspect of accessing health services.</p> <p>A newly opened clinic is available for Roma children.</p>
 <p><b>Not so good</b></p> <p>Romany families find it difficult to access health services - cannot register with a GP as they do not have residence status/National Insurance numbers. Some families have to go back to Romania for health care of serious conditions Due to lack of access to GP and primary care services, often attend A&amp;E in the Royal for basic health care concerns; and sometime Roma families experience negative attitudes from A&amp;E staff. As A&amp;E waiting times can be so long, in cases where Roma families are very concerned about apparent urgent health issues, they sometimes resort to calling an ambulance in order to get more timely help. Antenatal care – scans via Royal but have to pay for delivery of baby Can register new baby for three years, but not other children. Asylum seekers sometimes find difficulty in obtaining a GP appointment and have experienced long waiting times for specialist treatment.</p>	 <p><b>Suggestions</b></p> <ul style="list-style-type: none"> <li>• Roma families need universal access to health services which is currently not available to them. They are aware that attending A&amp;E, and calling an ambulance is not the most effective use of health services and would prefer to be able to access a GP in the first instance.</li> <li>• Better access to interpreters, particularly those who have knowledge of health terminology and conditions; Roma families would particularly appreciate access to Romany interpreter as sometimes experience negative attitudes from non Romany interpreters</li> <li>• Staff training in cultural awareness</li> <li>• Sensitivity and specialist support required for BME families who have experienced distress/trauma related to their previous circumstances</li> </ul>

## Outcome 2 - Enjoying, Learning and Achieving

 	 <p><b>Good</b></p> <p>Experience of primary school is good – families felt that they were facilitated to ensure that their children could attend primary school. Help with uniforms, transport etc Children have ambitions and parents are proud of them and want to support them to achieve their potential. Some families had initially thought that a Roma specific school would be good in order to reduce experience of bullying, however parents can see that children are learning more in an integrated environment.</p>
 <p><b>Not so good</b></p> <p>More difficult for children to attend secondary schooling – families unable</p>	 <p><b>Suggestions</b></p> <p>Need practical and financial help to deal with main</p>



to cover costs.  
Need money for transport, uniforms etc – have to access charity to cover basics  
No access to free school meals because family not on benefits – not registered – not able to access benefits  
Some families were promised travel cards but this has not materialised  
Bullying at second level schools – some parents prefer children to stay at home rather than be subject to this level of bullying

impediments to attending secondary school – families not able to pay for necessities including transport; racist bullying appears to be a barrier for some children

Additional English learning opportunities for students and their parents

### Outcome 3 - Experiencing economic and environmental wellbeing



Good

Unlike Romany families, asylum seekers can access some benefits.

Much appreciation for organisations that help such as Bryson House.



### Not so good

Have not got enough money to live on – often do not have enough for food. (One seller of Big Issue had only obtained £1.30 after being on street all day)

No access to labour market - cannot earn money unless self employed. Exploitation by others into low wage situations which are sometimes abusive

No qualifications – many Romany parents illiterate in own language

Living in areas with mainly student accommodation – not really suitable for families; No access to play areas; children play on street/roads; Overcrowding – many families living together due to financial problems

Some asylum seekers are homeless – have nowhere to stay



### Suggestions

Want right to work – but do not have this right under current legislation

Access to information about work/training opportunities






Need for access to housing suitable for families

Need to help asylum seekers who are homeless

Access to play areas for children

Help for adults to improve English language skills

## **Outcome 4 - Contributing positively to community and society**

		 <p>Good</p>
 <p>Not so good</p>		 <p>Suggestions</p> <p>Following apparent distress among parents when discussing the previous item on economic wellbeing, it was considered to be inappropriate to ask families how they or their children could contribute positively to community and society, given their current non-resident status and in the words of one parent who was experiencing exploitive working conditions: 'you work all day and you are still unable to put enough food on the table for your children'</p> <p>The question could be explored in more detail at a future meeting.</p>

## Outcome 5 - Living in safety and with stability



Good

Both Romany parents and Asylum seekers said that although they were experiencing difficulties and distress, it was often better than their situation in their countries of origin where they experienced persecution and life threatening situations.

Asylum seekers felt that most people in Northern Ireland were kind.



Not so good

Consensus that level of concern often depends on area that you are living in.

Many of the Romany parents and their children have experienced racial harassment and abuse in Northern Ireland including attacks on homes, physical assaults, bullying and verbal abuse. Families have huge fear of being attacked in their homes and on the streets. One parent said 'I don't even feel safe as an adult'. Families were worried about children in unsupervised situations. One mother became upset as she recalled: 'they ran after my daughter coming home from school' (aged 12 years)

In relation to contacting the police, there was mixed reactions. Some parents found police helpful; others had negative experiences and some were afraid of the police, perhaps related to experiences with police in their country of origin. Families did not know of anyone who had brought a case of racial attack to justice, and tended to drop cases out of fear of retaliation.



Suggestions

Primary schools have very caring systems, with good communication with parents: however this does not seem to be the same in secondary schools, where there was no follow up in relation to bullying situations – bullying seems to be particularly problematic at secondary level. Need to improve this system so that children feel safe.

Need to deal with level of racism in communities so that all families can feel safe.

Need to feel confident in policing and legal systems.

## Outcome 6 - Living in a society which respects children's rights



Good

Parents thought that a human rights approach for everyone including children was positive.

Some parents thought that some but not all children are living with respect for their rights.

Not so good



Suggestions

There was a general consensus that there is hope in Northern Ireland for a society which respects children's rights.

