

Black and Minority Ethnic Children and Young People Draft Action Plan

Consultation Document

2011-2014



INTRODUCTION

The Sub Group for Black and Minority Ethnic (BME) children and young reports to and is mandated by the Children and Young People's Strategic Partnership (CYPSP). The Sub Group has been charged by the CYPSP with drawing up a plan for integrated commissioning of supports and services for BME children and young people that will improve their outcomes. The work is Northern Ireland wide. Membership of the Group consists of representatives from the Statutory, Voluntary and Community sectors. Current membership can be found at Appendix A. The participation of young carers and their families in all stages of this process is paramount.

The following draft action plan sets out how the Sub Group for BME children and young people will contribute towards the implementation of the Northern Ireland Children and Young People's Plan 2011-2014. The draft plan includes the priorities that need to be taken forward to improve the six high level outcomes for BME children and young people.

This draft action plan should be read in conjunction with the overall NI Children and Young People's Plan. This overall plan sets out that all CYPSP planning work will contribute towards a shift to early intervention, and to integration of resources from all possible sources in order to improve outcomes for children and young people.

This action plan is one document in the suite of action plans, which, together, make up the NI Children and Young People's Plan. The Sub Group for BME children and young people will collaborate with the other Regional Sub Groups, the CYPSP Groups and the 5 Outcomes groups in order to implement the overall Plan, under the leadership of the CYPSP.

The Plan is therefore a live document – at any one time the latest version of the overall Plan and the Action Plans of all of the planning groups will be available on our website, at www.cypsp.org

The term 'Black and Minority Ethnic' refers to settled BME communities, Travellers, Roma, refugees, asylum seekers, migrant worker communities (including undocumented people), unaccompanied children and children of mixed parentage. The term 'settled' in the above context means communities which have been in Northern Ireland for some decades, in contrast to migrant worker communities, which are more recently established'

The Sub Group has identified a range of quantitative information. Given the range of indicators that could be used for any outcome, the Sub Group has decided to prioritise a number of key indicators that will enable them to monitor progress against the outcomes over time. The quantitative indicators are either, currently collected and available to the Sub Group, or identified by the group as not readily available but useful information that they wish to collect as part of their ongoing work.

The Sub Group is aware that the timeframe for the action plan is 2011-2014. Through an extensive outcomes based planning process, the group has identified many key issues for children and young people. However given the short time frame, many of the actions are short term and realistic in nature, with a view to address long term issues.



Outcome

Healthy

We want the same positive emotional and physical health and wellbeing for all BME children and young people, as the best of their peers

What do we know about children and young people...

Quantitative Information

- Rates of immunisations among BME children and young people
- Number of BME children and young people who are obese
- Number of BME parents who breastfeed
- Number of parents smoking during pregnancy
- Number of BME children and young people registered with a dentist
- In 2011, 10,933 BME individuals registered for GP health cards, of which 2,159 were under 18 years of age (NISRA 2012)

Qualitative Information

- BME children, young people and parents have identified mental health as a significant problem. This is associated with social isolation, language and culture as a barrier, and the difficulty in accessing appropriate services, all of which impacts on self-esteem. Conversely children and young people have identified that participation in social activities makes them feel good. BME families often experience difficulty accessing interpreting and advocacy services and sometimes rely on the children and young people to interpret.
- Further, BME communities experience high suicide levels, particularly in Polish, Lithuanian, Portuguese and Traveller communities. Adult male suicides in Traveller communities are reported to be six times higher than the general population and this has an adverse effect on

children and young people.

- Children and young people also identified lack of exercise, healthy eating and drugs and alcohol as issues for them.
- Ad hoc evidence from the community suggests that still births among BME families is an issue with initial figures suggesting that rates of still birth are double that of the indigenous population
- BME parents have outlined the difficulties they have faced in accessing GP's and dentists due to delays in interpreting services, long waiting times and expenses associated with dentist appointments in particular. They also felt that services could be more culturally aware, understanding the impact of the language barrier, for example.

What we will do

- We will promote the mental health and well being of BME children and young people
- We will ensure support for children, young people and families to access services that are culturally aware and appropriate

Outcome: <i>Healthy</i>					
Actions:	Implementation Milestones	Lead person/other groups	What difference will it make to children and young people	Other outcomes	By when
Promote mental health and emotional wellbeing	Identify models of good practice locally, nationally and internationally for: <ul style="list-style-type: none"> mentoring programmes programmes on cultural confidence and competence programmes on BME youth engagement and integration 	CYPSP BME Sub Group	The mental health and emotional wellbeing of BME children and young people will be improved as they will have the opportunity to access robust supports aimed at addressing social isolation and strengthening cultural identity and integration	ELA, CPCS, LSRR	2014
	Develop local pilots and promote mainstreaming of evidence-based programmes	CYPSP BME Sub Group			2014
	Promote awareness of right to request and be offered	CYPSP BME Sub			2014

Support to access services and that are culturally aware and appropriate	interpreting services	Group			
	Further develop and promote information and signposting on available services	CYPSP BME Sub Group			2014
	Develop and promote a regional programme of raising cultural awareness, building on existing good practice	CYPSP BME Sub Group	Children and young people will benefit from a service or support that is more sensitive to their culture, including the use of interpreters, and therefore achieve greater benefit from these services to allow them and their families to be healthy, both physically and mentally	LSRR, EEEW	2014
	Encourage Trusts to establish diverse health and social care teams based on models in England and in partnership with community and voluntary sectors	CYPSP BME Sub Group			2014
Identify sources of research to explore the issue of stillbirths further	CYPSP BME Sub Group	2014			

Outcome

Enjoying, learning and achieving

All BME children and young people are welcomed and supported to learn and achieve in a context that reflects their cultural identity

What do we know about children and young people...

Quantitative Information

- % of BME children and young people making successful transition
- % of BME children and young people achieving essential skills
- Rates of attendance among BME children and young people compared to the rest of the population
- 5.4% of BME young people left school with no formal qualifications and 5.4% with no GCSE's. This is compared to the 1.8% and 2.2% of the indigenous population respectively.
- 42% of BME 16 yr olds in Northern Ireland (of 452 surveyed) have been the victim of racist bullying and harassment (NCB NI & ARK YLT 2010)

Qualitative Information

- BME children and young people have the right to an education that is sensitive to their individual needs. There is a risk of low expectations of BME children and young people in schools. They have the same right to pastoral care that is afforded to their peers, in a culturally competent environment, free from bullying, prejudice and discrimination. Some BME children and young people report that sometimes they cannot keep up at school and sometimes are not encouraged to do so
- Parents have reported that cultural difference is not always reflected or acknowledged in the NI curriculum. They feel that cultural awareness should be promoted and respected in schools - sometimes children and young people are discouraged from speaking their first language. This is echoed by some children and young people

who feel left behind because their English may not be as good. Some children and young people feel that speaking their own language sometimes or feeling more welcome would help them in a school environment.

- BME parents have raised concerns that BME children and young people are not accessing mainstream out-of-school activities which are important for learning and skills development
- The parents of BME children and young people often lack an understanding of the educational system and culture in Northern Ireland. Some parents feel they receive poor communication from schools, which is often compounded by language difficulties and a lack of essential skills. This has an adverse effect on the educational outcomes for children and young people. In addition, it is known that when parents are learning, children and young people perform better in education.

What we will do

- We will promote whole school inter- cultural awareness and competence
- We will promote greater parental engagement with education to enable parents to support the education of their children
- We will ensure that BME children and young people have the same access as their peers to activities based in schools, out of schools and in the community

Outcome: <i>Enjoying, learning and achieving</i>					
Actions:	Implementation Milestones	Lead person/other groups	What difference will it make to children and young people	Other outcomes	By when
Promote whole school inter-cultural awareness and competence	Promote knowledge of intercultural competence in initial teacher training and continuous professional development for educational staff, including the specific rights of BME children and young people based on the Council of Europe's Framework for Inter-	CYPSP BME Sub Group	BME children and young people will benefit from educational settings that are more responsive, affording them the same pastoral care as their peers and improving their educational outcomes	H, LSS, EEEW, CPCS, LSRR	2014

<p>Promote parental engagement with education</p>	<p>Cultural Competence. Use to promote in educational and non educational settings and recommend its use by the Education and Training Inspectorate</p> <p>Identify existing parental engagement programmes which involve BME parents and promote good practice regionally</p>	<p>CYPSP BME Sub Group</p>	<p>Provides the opportunity for parents to become more engaged with education and have an understanding of the educational system. This will positively impact on the educational outcomes of children and young people</p>	<p>H, LSRR, CPCS</p>	<p>2014</p>
<p>Ensure access to activities in schools, out of schools and in the community</p>	<p>Identify and promote models of good practice for engaging BME children and young people in out-of-school activities</p>	<p>CYPSP BME Sub Group</p>	<p>Children and young people will benefit more from opportunities to access out of school activities which in turn will promote the 'enjoying' aspect of learning and achieving</p>	<p>H, CPCS, LSRR</p>	<p>2014</p>

Outcome

Living in safety and with stability

All BME children and young people experience safety, a sense of belonging and a life free from racial harassment

What do we know about children and young people...

Quantitative Information

- In 2009/2010 there were 1,812 incidents of domestic violence among BME families (NI Policing Board 2011)
- There are 143 BME children and young people with 'Looked After' status (March 2012, DSF)
- BME children, young people and families were victims of a total of 531 separate incidents of crime with a racist motivation (NISRA 2012)

Qualitative Information

- Children and young people from BME communities have reported a range of incidents that threatened their safety, including racism. Children and young people need to feel safe and secure. This means living free from fear of prejudice, racial bullying and harassment. Furthermore, the extent of racial harassment varies depending on where the child or young person lives. The issue is exacerbated by underreporting by children and young people who perceive it as normal, are unsure how to report it, or feel that reporting it would increase their vulnerability. BME parents report that this issue is particularly pertinent in schools; however BME children and young people also face intimidation outside of school.
- Children and young people should feel safe and

be free from the negative impact of domestic violence and hidden harm. This is particularly an issue for the Traveller community. Those families with no access to public funds have no access to refuges/hostels which leaves the victim of domestic violence and their children vulnerable.

- The United Nations Convention on the Rights of the Child has identified BME and Looked After Children as being particularly vulnerable. Children and young people need to feel secure in an environment that is culturally familiar to them. Article 30 of the UNCRC states: *"In those states in which ethnic, religious or linguistic minorities or persons of indigenous origin exist, a child belonging to such a minority or who is indigenous shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practice his or her own religion, or to use his or her own language"*. When considering foster care placements, there should be more consideration given to BME children and young people being placed with families that are familiar to them, if they are placed at all.

What we will do

- The issue of bullying and harassment is widely recognised. We will ensure that the issue of racial bullying and harassment is recognised as equally important by linking with ongoing work addressing this issue. We will also ensure children and young people understand that this is not acceptable and know how to report issues.
- We will promote the need for family support that emphasises the secure environment that children and young people have a right to. This covers the issue of LAC, domestic violence, positive parenting and hidden harm.

Outcome: <i>Living in safety and with stability</i>					
Actions:	Implementation Milestones	Lead person/other groups	What difference will it make to children and young people	Other outcomes	By when
Ensure the importance of racial bullying and harassment is recognised	Work with the following organisations to fight hate crime: Human Rights Commission, PSNI, Community Safety Partnerships (PSCPs), Anti Social Behavioural Forums	CYPSP BME Sub Group	Ensure that the issues raised by BME children and young people are reflected in forums that are working to address issues of racial bullying and harassment. This	H, EEEW, LSRR	2014

<p>Promote family support to ensure a more secure environment</p>	<p>Cohesion, Sharing and Integration Strategy, and NSPCC and Northern Ireland Anti Bullying Forum to tackle racial bullying in and outside schools</p> <p>Identify models of good practice locally and internationally for supporting Looked After BME children and young people (in partnership with CYPSP LAC/16+ sub group, Domestic and Sexual Violence sub group and with PSNI Intervention Programme)</p>	<p>CYPSP BME Sub Group</p>	<p>will help to create an environment for children and young people that is free from racism and harassment</p> <p>Provide opportunities for BME children and young people to have a more secure family environment, free from domestic and sexual violence and in line their rights as outlined in the UNCRC</p>	<p>H, EEEW, LSRR</p>	<p>2014</p>
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Outcome

Experiencing economic and environmental wellbeing

All BME children and young people enjoy a safe, healthy, and inclusive environment free from poverty regardless of parental legal status or ethnic identity

What do we know about children and young people...

Quantitative Information

- Rate of unemployment among BME families compared to their settled peers
- % of BME children registered in early years facilities

Qualitative Information

- Parents raised the issue of housing for some BME children and young people including cramped, poor conditions, sometimes in unsafe areas. It has been reported that some BME families are indirectly limited in their choice of housing, often allocated housing in certain areas or excluded from others based on existing populations in that area.
- Some BME children and young people experience differential treatment in accessing employment. This is particularly true given high levels of youth unemployment.
- BME parents have reported the barriers they experience in accessing employment, particularly because of language. BME families are more likely to be affected by poverty which in turn impacts on children and young people.

This is particularly a problem for those who do not have access to public funds. There is a risk that the proposed Welfare Reform will adversely impact on BME families.

- BME parents reported difficulties accessing affordable childcare. This limits the economic opportunities of BME families, negatively impacting on children and young people who would benefit from inclusion opportunities at an early age.

What we will do

- We will explore the issue of housing for BME families and of greater flexibility in housing allocations
- We will ensure advocacy and support for BME families which is important for all outcomes, but particularly to support families in accessing support, including childcare support and BME children and young people and families to access employment

Outcome: <i>Experiencing economic and environmental wellbeing</i>					
Actions:	Implementation Milestones	Lead person/other groups	What difference will it make to children and young people	Other outcomes	By when
We will explore the issues of housing for BME families	Further develop information and signposting to housing services for BME families	CYPSP BME Sub Group	Children and young people will be able to live in appropriate housing that is safer, less cramped and in better conditions and in appropriate areas	LSS, LSRR	2014
	Feed into Northern Ireland Housing Executive Selection Scheme Process	CYPSP BME Sub Group			
	Feed into Strategic Migrant Partnership Implementation Group	CYPSP BME Sub Group			
	Feed into ongoing work on Traveller's needs assessments	CYPSP BME Sub Group			

<p>Ensure advocacy and support for BME children, young people and families</p>	<p>Identify good practice and promote advocacy and support programmes for BME families</p> <p>Liaise with economy and employment sub group of Strategic Migrant Partnership to ensure BME families with children are supported into employment</p> <p>Promote and support community development approaches with BME communities</p> <p>Work with Childcare Partnerships to support BME parents into employment</p>	<p>CYPSP BME Sub Group</p> <p>CYPSP BME Sub Group</p> <p>CYPSP BME Sub Group</p> <p>CYPSP BME Sub Group</p>	<p>This will help ensure that BME families are supported to receive the help they are entitled to and also that young people and families are supported into employment. Children and young people accessing early years will also benefit from integration from an early age</p>	<p>H, LSRR</p>	<p>2014</p>
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Outcome

Contributing positively to community and society

All BME children and young people are seen and heard in all decision making and other societal roles

What do we know about children and young people...

Quantitative Information

- No of BME children and young people accessing volunteering activities (survey)

Qualitative Information

- In order to have a sense of belonging in the wider community and the confidence to contribute, BME children and young people need to be confident in their own culture and also see their own culture reflected in their community. Parents report a lack of volunteering opportunities or lack of information on how to access them. Some children and young people have expressed their wish to be more involved in community activities. Conversely, those who are involved have expressed the benefits of it. The visibility of BME volunteers in mainstream activities is vital as other BME children and young people will come forward when they see their own community and identity represented i.e. they need to see BME role models involved in volunteering.
- Parents have also reported that there are not enough opportunities for BME children, young people and

families to express their views and opinions in decision-making processes that affect them.

- The UN Committee on UNCRC has raised concerns about negative public attitudes towards children and young people, even in the media, This is exacerbated for BME children and young people who have said they are often seen as 'threatening' to communities.

What we will do

- We will support the participation of children and young people in volunteering and participation in communities and ensure their participation in decision making
- Work with regional and local media to portray positive messages and cultural awareness of BME children, young people and families

Outcome: <i>Contributing positively to community and society</i>					
Actions:	Implementation Milestones	Lead person/other groups	What difference will it make to children and young people	Other outcomes	By when
Support the participation and volunteering of children and young people	Identify good practice and promote single cultural identity activities for BME children and young people	CYPSP BME Sub Group	Children and young people will benefit from more cultural confidence and better integration. They will have more opportunities to have their voice heard and participate in decision making processes	H, ELA, LSS, EEEW, LSRR	2014
	Identify and promote good practice participation programmes for BME children, young people and their families	CYPSP BME Sub Group			2014
	Provide opportunities for BME children, young people and their families to participate in leadership training	CYPSP BME Sub Group			2014
	Work in partnership to Ethnic Youth Forums to promote the above actions	CYPSP BME Sub Group			2014

<p>Media work to promote positive messages and cultural awareness</p>	<p>Conduct advocacy work with local media to encourage them to raise awareness and promote positive attitudes to BME children and young people</p>	<p>CYPSP BME Sub Group</p>	<p>Change in cultural attitudes as positive messages of the contributions of children and young people are promoted. In turn, children and young people will benefit from a society that is more culturally aware</p>	<p>H, ELA, LSS, EEEW, LSRR</p>	<p>2014</p>
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Outcome

Living in a society which respects their rights

All BME children and young people know and understand their rights and can reasonably expect that their rights are respected, protected and fulfilled.

What do we know about children and young people...

Quantitative Information

- Number of BME children and young people who are aware of their rights (survey)
- Estimated that there are currently 9,484 (2.95% of 322,019) children and young people being of ethnicities other than white (DE March 2012)

Qualitative Information

- BME children and young people face additional barriers in their host society as they are often unknown to public services. In line with a Human Rights Based Approach (HRBA), any budgeting and commissioning decisions should be based on improving the outcomes for BME children and young people using the UNCRC and associated treaties as a framework for doing so.
- Furthermore, the UNCRC outlines the expectation to disaggregate information for BME children, young people and families.
- The additional rights of BME children and young people outlined in the UNCRC should also be upheld. Parents have reported the importance BME children, young people and their families should be aware of these rights so that they are empowered to act in the best interests of them.

Children and young people have reported not knowing what their rights are. Furthermore BME children, young people and families are entitled to interact with staff in agencies who equally understand these rights and the particular challenges that some BME children, young people and families present.

What we will do

- We will promote the understanding of the rights of BME children and young people and the importance of a rights based approach among organisations, staff and BME children, young people and families
- We will develop a robust integrated information system for BME children and young people in line with the UNCR

Outcome: <i>Living in a society which respects their rights</i>					
Actions:	Implementation Milestones	Lead person/other groups	What difference will it make to children and young people	Other outcomes	By when
Promote the rights of BME children and young people and the importance of a rights-based approach	Provide further training on Human Rights, Equality and Race Awareness for staff	PHA	Ensure that staff are aware of the rights of BME children and young people and are encouraged to act consistently with them, to ensure better outcomes.	H, ELA, LSS, EEEW, CPCS	2014
	Use baseline surveys to identify the level of cultural competence within organisations (similar to schools) and monitor	CYPSP BME Sub Group			2014
	Review the Human Rights Commission Civil Service Programme for Training. Ensure Human Rights, equality and race awareness included in ongoing development programme for members of the CYPSP and its sub groups.	CYPSP BME Sub Group			2014

We will develop an robust integrated information system for BME children and young people in line with the UNCRC	Provide further training and awareness raising for staff involved in settings used by BME children and young people	CYPSP BME Sub Group	The development of robust information systems will ensure that BME children and young people will be beneficiaries of more informed planning processes that can lead to improvements against all the outcomes, in line with the recommendations of UNCRC.	H, ELA, LSS, EEEW, CPCS	2014
	Update the PHA Health Intelligence Briefing on ethnic minorities with information from the 2011 census	CYPSP BME Sub Group			2014
	Strengthen recording of ethnic identity in information systems in line with UNCRC requirements, as part of ongoing Ethnic Monitoring work	CYPSP BME Sub Group			2014
	Evaluate the information model used for Southern Area Action for Travellers (SAAT) for its potential to adapt regionally for all BME groups	CYPSP BME Sub Group			2014

Appendix A: Membership of the CYPSP BME Sub Group

Co-Chairs of Black and Minority Ethnic Sub Group- Leslie Boydell, Associate Medical Director for Public Health, BHSCT and rotation of Co-Chair every 6 months between Eileen Chan-Hu, Chinese Welfare Association and Paul Yam, Director, Wah Hep Chinese Community Association			
Statutory Sector		Community/Voluntary/BME Sector	
Public Health Agency	Elaine O'Doherty, Health and Social Wellbeing Manager	Safe and Well Project	Lisa Moore, Project Mana
Education and Library Boards	Mary Yarr, Regional Advisor for Inclusion and Diversity Service, NEELB	Craigavon Inter Cultural Programme	Stephen Smith, Chairperson
Health and Social Care Trusts	Leslie Boydell, Associate Medical Director for Public Health, BHSCT	Chinese Welfare Association	Eileen Chan-Hu, Director
	Fergal O'Brien, Promoting Health and Wellbeing Manager SHSCT	Wah Hep Chinese Community Association	Paul Yam, Director
	Tommy Boyle, Children's Service Manager, BHSCT	Bryson Multi-Cultural Resource Centre	Dawn Thompson, Assistant Director of Children's Services
Northern Ireland Housing Executive	Colm McQuillan, Assistant Director	Belong	Deirdre McAliskey, Project Manager
SOLACE	Justyna McCabe, Challenge of Change Project, Newry and Mourne District Council		
<i>In Attendance</i>	<i>Maurice Leeson</i> <i>Andrew Hawthorne</i>	<i>Children's Services Planning, HSCB</i>	

CONSULTATION RESPONSE FORM

We would be very interested in your feedback on these initial priority areas as set out above. These will inform the action plan for the BME Children and Young People Sub Group. It is important to us to hear what you have to say about what the Group has planned to address for children and young people with disabilities across Northern Ireland.

We are happy to receive comments in any format. If you require this document in an alternative format (such as large print, Braille, disk, audio file, audio cassette, easy read or in minority languages to meet the needs of those not fluent in English please contact us at the details provided below.

Please return your response by TUESDAY 2nd April 2013 to:

**Andrew Hawthorne
Children and Young People's Strategic Partnership
Health and Social Care Board
12-22 Linenhall St.
Belfast
BT2 8BS
Telephone: 028 90553979**

Email: Andrew.hawthorne@hscni.net

Thank you very much for your response

YOUR CONTACT DETAILS

NAME (if wishing to provide)

ADDRESS

(if wishing to provide)

TELEPHONE:

(if wishing to provide)

EMAIL

(if wishing to provide)

Text Phone:

Please select one:

I am responding from an organisation

I am responding on behalf of myself as a parent

I am responding on behalf of myself as a child or young person

I am responding on behalf of a group of children / young people