

Housing, Race & Community Cohesion

Final Report for Liverpool City Council

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Introduction

The multi-cultural nature of Liverpool is very evident. An influx of new and emerging BME communities coupled with a settled 'traditional' BME community has greatly changed the ethnic landscape of the city. The integration of these communities is an essential pre-requisite to a healthy and vibrant city. However, little is known about the extent to which community cohesion exists at the neighbourhood level and how this can be supported by service providers. At the same time, the BME community has specific housing needs relating to their culture, customs and traditions and given the dynamism within this community, it is important to identify how these housing needs have changed over time. Equally important, is understanding why members of the BME community are less satisfied with their housing, neighbourhood and services generally than their White British counterparts. These three issues, community cohesion, housing needs and satisfaction levels are inextricably linked and represent a significant challenge for service providers.

Liverpool City Council commissioned the Salford Housing and Urban Studies Unit at the University of Salford to undertake a project to examine these three issues. A review of existing secondary evidence and new empirical research was undertaken to respond to the project objectives which were:

- To investigate reasons for the difference in satisfaction levels between BME and non-BME residents in Liverpool (taking account of satisfaction with property-related services such as repairs and housing management) and issues associated with the immediate neighbourhood, such as sense of place, community cohesion and experiences of accessing local services; and
- To document the housing needs and aspirations of the BME community, both in terms of the social and private sectors, including an assessment of the barriers (actual and perceived) to accessing appropriate housing within the city.

A Project Steering Group was established, consisting of representatives of the City Council and the voluntary and community sector to oversee the work and development of the project.

This report details the findings from this review. The first section details the methodology adopted for the study. Section 2 provides a review of existing information relevant to these issues, drawing on local, regional and national literature. This is followed by a summary of the main issues identified via the empirical research (Section 3), followed by the final section (4) which considers some conclusions to the work.

Section 1: Methodology

Introduction

There already exists a wealth of information relating to the housing needs of the BME community at the local, regional and national level and that much of this information would be relevant to the Liverpool BME community, it was agreed with the project Steering Group that an initial review of this information would be undertaken. The primary aim of this background review was to:

- Identify information that could be applied to the Liverpool BME context;
- Document any elements of good practice derived from the literature review; and
- Identify any gaps in knowledge with the subsequent development of a Liverpool specific primary research programme to address these gaps.

Empirical research elements

On the basis of the literature review, a research programme was identified. However, over the course of the project the decision was made to undertake personal interviews with 'host' community households (both BME and White British) rather than use focus group discussions. The mystery shopper element of the project was not implemented. The main empirical research elements of the project that were implemented are detailed below:

- **Consultation with Liverpool City Council staff** – This consisted of an email-based survey of council staff which was distributed internally. The issues addressed included: their experience of working with BME communities; the nature of the engagement with those communities; awareness of culturally sensitive services provided internally and by external partners; views on the housing needs and experiences of the BME community in relation to the social housing and private rented sectors; and perceptions of community integration and sense of belonging. A total of 24 staff members responded from different departments within the council and representing different levels of seniority. The findings report and associated questionnaire can be found in **Appendix A**.
- **Consultation with the voluntary and community sector** – a self completion questionnaire was sent by either post or mail to 75 organisations who initially responded positively to a request to participate in the study. The survey sought information on the following: the nature of the organisation and the main BME groups that they catered for; their views on the housing experiences and needs of the BME community; views on the accessibility of the social rented and private rented sectors; views on the nature of community integration; and views on the BME community's level of satisfaction with their home and local services. Disappointingly, only 8 completed questionnaires were returned. The findings report and associated questionnaire can be found in **Appendix B**.

- **Consultation with local Registered Social Landlords (RSLs)** - again a questionnaire was sent to identify contacts within RSLs operating within Liverpool. They were asked to comment upon the following: how their organisation engaged with the BME community; their views on the housing experiences and needs of these communities; their perception of BME levels of satisfaction with their home and local area; and their assessment of community integration and sense of belonging. Seven RSLs completed the questionnaire. The findings report and associated questionnaire can be found in **Appendix C**.
- **An interview survey with members of the established community in Liverpool** – 200 personal interviews were undertaken with those community members who had been living in their local areas for 10 or more years. Respondents were from a range of ethnic backgrounds including White British and various postcode areas from across the City. Information was sought on: personal and household details; their perception of the extent of inward migration of new communities; experience and views of community integration; views on personal safety; level of satisfaction with the local area; and views and experience of community tensions and problems. The findings report and associated questionnaire can be found in **Appendix D**.
- **A postal survey of the BME residents** – this involved gaining the co-operation of the third sector to distribute self completion questions to their clients who were from a BME background. Reimbursement of administrative and postage costs was offered. While some of the organisations were very pro-active, others were less so due to existing work pressures. In total 148 completed questionnaires were returned. The findings report and associated questionnaire can be found in **Appendix E**.

Section 2: Review of Existing Information

Introduction

In the UK, the proportion of the population which is White British has fallen. It is argued that this fall in population is likely to continue as the White British population is getting older and, therefore, has a slower growth rate, but also due to migration (Housing Corporation and CIH, 2008). On the other hand, the BME population is increasing. The ONS 'experimental statistics' for England estimate that the BME population in England has increased by 23% since the 2001 Census.

It needs to be recognised that the term 'BME population' hides a diversity of different communities. This includes British BME populations; for example, Black British, Asian British and Gypsy and Traveller communities. However, it also includes foreign nationals; for example, asylum seekers and refugees, overseas students, and those identified as 'migrant workers', particularly from Central and Eastern Europe. The difficulties of calculating the scale of migration are widely acknowledged and there is no all inclusive dataset providing information. However, it is recognised that there is now a more diverse mix of people from a wider range of countries, particularly over the last decade¹.

This review outlines what is currently known about the BME communities in Liverpool. It draws upon a range of data sources. The purpose of this report is to highlight what information is already available in relation to specific communities, but also highlight the gaps in the knowledge where additional information is required. The report focuses specifically on housing and related needs; however, it will also cover wider issues in relation to service provision and community cohesion where information is available. Before looking specifically at Liverpool, it begins with a brief overview of the findings of selected previous studies carried out with BME communities across the UK.

Lessons from BME studies across the UK

This initial section considers the literature from three perspectives. First, the evidence concerning the housing circumstances, needs and aspirations of the BME community, drawing on the 2001 Census and studies from elsewhere across the country and second, the issue of community cohesion and integration between different communities and third, the acknowledged lower satisfaction levels of the BME community (compared with their White British counterparts) concerning both the housing services received from social housing landlords and views of their locality and the services available

¹ Housing Quality Network (2010) *Research into the housing support needs of vulnerable people from Black and Minority Ethnic communities in Liverpool*, York: HQN.

Housing circumstances of the BME community

According to the 2001 Census there are significant differences in the tenure of various ethnic groups (Harrison and Phillips 2003). 70% of the White community are home owners compared with 20% who live in social housing and 10% who rent privately. There are also more owner occupiers among Indians (81%) with just 8% in social housing and 11% in the private rental sector. Owner occupiers are also more prevalent in the Pakistani/Bangladeshi community (60%) with 26% in social housing and 14% renting privately. However, among the black population there was a greater likelihood that they would be in social housing (49%) with 39% owner occupiers and 12% in the private rental sector. Those categorised as 'Other' were more often owner occupiers (46%) with 29% in social housing and 25% renting privately.

With regards to housing conditions, the Pakistani/Bangladeshi community were most likely to be judged to be living in poor housing (34.8%) followed by Other (24.1%), Black (22.9%), Indian (18.6%) and White (13.7%). Similarly for those judged to be living in poor living conditions: Pakistani/Bangladeshi (29.8%), Other (20.1%), Black (17.6%), Indian (11.9%) and White (6%).

The Pakistani/Bangladeshi community were also most likely to be dissatisfied with their home (41.7%), followed by Indian (33.2%), Other (23.6%), Black (19.1%) and White (10.7%). However, those who wished to move were most often found among the Other group (74%), followed by Pakistani/Bangladeshi (52.1%), Black (51.8%), Indian (45.5%) and finally White (34.8%).

In terms of finance, there were also differences between the groups with regard to the average weekly income (based on those of the head of household and partner). The Other group had the highest income (£549), followed by Indian (£505), White (£488), Black (£355) and Pakistani/Bangladeshi (£296).

While in the past, studies have identified owner occupation as the most common tenure of BME communities (Housing Corporation and CIH, 2008), more recent research has highlighted the importance of the private rented sector for BME households (Scullion and Morris, 2010). Studies highlight, however, that the propensity to enter socially rented accommodation is high amongst nearly all BME populations (Markkanen, 2009).

Research carried out with BME communities across Dorset highlighted there was evidence of a lack of awareness of various housing related services ranging from housing registers to services specifically for vulnerable people (for example, those experiencing mental health problems, drug and alcohol misuse, and homelessness). There is a strong tendency for people to find out about different services through their social networks (i.e. through friends and family). This reliance on more 'informal' means of information, however, could result in miscommunication or misinformation about options and entitlements. A study of BME communities in Bournemouth suggested that accessibility of information was a major barrier to the exploration and take-up of services (Manda Glenn Research & Consultancy, 2006). When providing information, however, there is a need to take into account the diversity of communities, recognising that the needs of asylum seekers and refugees, migrant workers, overseas students and British BME communities may differ (Scullion and Morris, 2010).

Past debates in relation to BME communities have discussed the issue of whether or not separate services are required for particular communities. Recent research carried out in Dorset, however, suggested an overall view that BME households do not want separate or specific provision, which can actually add to the sense of separation or isolation. What this study found was that there was a need to ensure that existing services promote their services better to BME communities, making better use of existing BME networks, community development work, newsletters, language schools, etc. and ensuring that information is disseminated as widely and accessibly as possible.

There is evidence from recent research that BME households are increasingly willing and even keen to move away from traditional BME areas 'ethnic enclaves' and this has been found to be particularly the case among younger BME people. Initial examination of the impact of choice-based lettings suggests that BME households are more likely than White households to move within social housing to a different district when offered the opportunity. However, White areas or those with a reputation for racist harassment are not regarded as safe by BME households and are therefore seen as undesirable. This inevitably restricts the location choice of BME households and is an important consideration that needs to be taken seriously by housing providers (Markkanen, 2009).

Community cohesion and tensions between traditional BME and new migrant communities

The new 'super-diversity' within Britain's population has raised the question of how the three elements of the 'neighbourhood mix' (long established White and BME, and new migrant communities) interact (Perry 2008). Studies in community cohesion tend to focus primarily on the relationships between the White British majority and the ethnic minorities as a collective, or alternatively, upon a mix of all ethnic groups together. Studies concentrating solely on the relationships between the traditional BME community and the new migrant community are unfortunately less common and therefore it is somewhat more complex to identify the nature of this relationship with any precision. However, there have been a small number of local projects undertaken and it will be possible to gather from these some insights into this phenomenon.

New patterns of racial prejudice and hostility between settled Asian and Caribbean communities and the new ethnic minorities are believed to be representative of the long-term communities' resentment of the increased competition for 'race equality' resources (CLGC 2008). Many new migrants move into areas adjacent to those occupied by the last wave of immigrants and settled migrants can resent new arrivals as they perceive them to have not worked as hard as they have. A 2007 MORI poll found that 47% of Asians agreed that there were too many migrants in Britain.

One of the issues around which these tensions emerge is housing. Deprivation and poor housing conditions already exist in neighbourhoods with large concentrations of long-established ethnic minority communities but they have received the new migrant communities into those neighbourhoods too (Perry 2008). While some of the long-term residents may be welcoming (in this instance of new Somali migrants) others believed that the newcomers were getting better housing opportunities (Hudson et al. 2007). This study also discovered limited social interaction between traditional BME and the newly arrived Somalis, but age and gender were factors too: younger people were more likely to have

more mixed social networks while among the Somali community men tend to mix more than women due to experiencing fewer language problems.

Furthermore, research has shown the prejudices which exist between the traditional and new BME communities. For example, a number of myths, rumours and misconceptions were found to circulate within all communities such as the redirection of resources in schools being focused on non-English speaking pupils resulting in a poorer overall performance for other pupils (iCoCo 2006). New migrants were also perceived to receive preferential access with regard to social housing and prepared to work for lower wages than other local job seekers. However, it is important to distinguish between 'authentic' and 'imagined' causes of these tensions.

Lodhi (2007) suggests that there are underlying structural causes for these conflicts such as poor housing, poverty and government policy. Sometimes grievances may be 'authentic' and stemming from perceived inequity or preferential treatment. At other times perceptions may be due to misinformation or misunderstanding based on 'imagined' causes such as geography, fear of the other, or cultural prejudice. In Ealing, for example, South Asian communities of Sikh and Muslim, Hindu Indian and Pakistanis lived in relative harmony but the arrival of new Somali refugees has strained relationships. Somalis were angered when they were blamed for a rise in street crime.

Phillips and Harrison (2009) in examining the history of tackling BME housing segregation in Britain suggest that recent research in Oldham and Rochdale shows that there are a number of perceived obstacles to greater ethnic mixing at the neighbourhood level encapsulated in discussions about feelings of safety and belonging.

Research which has looked into the impact on community cohesion of new European communities has found more mixed results (Markova and Black 2007). The study compared long-standing communities (roughly half White and half BME) with new European communities and found that both agreed that their neighbourhood was a place where people got on well together, although only a small proportion of these (20%) said it was a place where people would help each other. They also found that new migrants were less likely to talk to their neighbours but both traditional and new communities reported high levels of social interaction with people from other ethnic groups as well as each other.

A recent study of the Muslim community in East and Central Salford (Steele, 2010) highlights many of these misunderstandings and sense of suspicion between the more established community (both BME and White British) and the new Muslim community groups (predominantly asylum seekers and refugees). The study focused on a range of community cohesion indicators, with the main findings being:

- The new Muslim communities were less likely than the established communities to express a sense of belonging to their immediate neighbourhood and scored lower on a number of related national indicators, such as the extent to which people from different backgrounds get on well together;

- The new communities experienced relatively high levels of racism and hate crime, with the perpetrators being from a range of BME backgrounds and the White British community. However, they had very little awareness of hate crime reporting or support structures. This contributed to a heightened sense of fear of being a victim of such crimes (not just a repeat victim);
- There was a recognised lack of appreciation of different cultures living in close proximity and this had led to a degree of suspicion and the ‘avoidance’ of people from different cultural or religious backgrounds. The request for the development of a range of multi-cultural community events to redress this lack of awareness was a significant message of the report;
- Where social networks had been developed these were based primarily on religious groupings with little social contact with people with different religious beliefs or cultural backgrounds. This contributed to a sense of isolation among some of the new Muslim communities, living in parts of the City where there were very few Muslims and a lack of culturally appropriate venues (e.g. halal food shops and mosques);
- The new Muslim communities were less tolerant of some of the neighbourhood problems than those from other BME communities or the White community (based on the 2008 Place Survey) and this was particularly the case in relation to drunk and rowdy behaviour; and
- The study highlights the desire for a significant proportion of the new Muslim groups to move to areas of the City or to other boroughs where there is an established Muslim community or where other people from their own ethnic background live.

In conclusion, from the limited research undertaken elsewhere in the country it can be confirmed that there is a significant degree of tension between traditional and newly arrived ethnic minority migrant groups, and that the source of the tension is likely to be the increased competition for the finite resources that are available and accessible to these communities, the main one of which appears to be housing. Although there is evidence that there is an existing level of cohesion between these different groups, problems have often occurred and been exacerbated by misconceptions and prejudices held by some ethnic groups towards others.

BME dissatisfaction with social housing

In relation to social housing tenants, Housing Corporation (2008) research has revealed a number of key drivers for BME satisfaction. These can be summarised as follows:

- Repairs and maintenance: though this is an issue that affects all ethnicities Asians will do more of their own repairs which is symptomatic of the group to disengage from the landlord, while black tenants have higher expectations and are more likely to push their case;
- Younger tenants tend to be more dissatisfied regardless of ethnicity (there are usually more younger people among BME tenants than non-BME which brings satisfaction levels down);

- BME tenants require more space for men and women to be segregated and with adequately ventilated kitchens;
- Greater importance is placed on community networks so perceived dilution of communities is more important for influencing satisfaction for BME than for White groups;
- BME tenants have stronger aspirations for ownership and a desire for more choice and mobility which may influence perceptions of social housing;
- Language barriers;
- A preference for face-to-face contact rather than telephone;
- A preference for contact with a 'senior' person;
- BME tenants may lack understanding of their HA which results in unrealistic expectations; and
- Cultural insensitivities on behalf of HA employees (e.g. not removing shoes when in house, not understanding that some women cannot admit a male workman).

One housing association which has received higher rates of satisfaction for BME residents than non-BME residents is Gallions Housing Association in London and the South East (Audit Commission 2007). Their strengths have been identified as follows:

- They have both a board and resident board members who are representative of the resident population;
- They offer comprehensive training for board members, involve residents and staff;
- Translation and interpretation services are well promoted;
- Steps have been taken to involve diverse groups;
- They retain good information on the communication needs of residents; and
- They have a high level of letting to new BME communities.

The 2008 tenant satisfaction survey of Ashiana Housing Association tenants (Steele, 2008) found that the BME tenants (who formed the majority of tenants) were less satisfied with a range of services than non-BME tenants. The difference in satisfaction level was particularly evident in relation to the repairs and maintenance service. Further qualitative research with the BME tenants to identify the reasons for the lower level of satisfaction with this service found that BME tenants had a misunderstanding of the nature of the service. While the association had a number of repair categories (e.g. emergency, urgent and non-urgent) which had associated timescales for any repair work being completed, these were not recognised by the tenants themselves who had very different opinions and generally regarded all repairs as being either an emergency or urgent repair. Despite the details of the different categories of repair being explained in the Tenants Handbook, only one third of all BME tenants acknowledged having read this and only a small proportion of these could recall reading information about the repairs and maintenance service. On the basis of the findings from the qualitative research the Association developed a communications strategy for tenants around the repairs and maintenance service. The tenant satisfaction survey undertaken in 2009 revealed that although the level of satisfaction among the BME tenants

with the repairs service had increased over the period, it was still slightly below that of the non-BME tenants.

Differences in opinion have also been noted among BME and non-BME residents according to recent Place Surveys, however, these differences have not been uniform in terms of different geographical areas and across the different issues addressed by the survey. The Place Survey commissioned in Greater Manchester which covered all ten local authorities showed that the level of satisfaction/agreement with particular issues varied according to locality. One possible explanation for this was that the level of satisfaction is higher in areas where there is a relatively large concentration of the BME community and where a range of support structures have been established (e.g. access to appropriate shops, mosques, community venues catering specifically for these BME groups and community support and advocacy organisations).

Exploring the BME community in Liverpool

This section draws on a range of local research reports and statistical evidence to identify what is known about the BME community in Liverpool.

2001 Census

The Census identified 8.2% of population being from BME background². The non-White population was identified as constituting 5.7% of the population³. The breakdown of the BME population in the 2001 Census is recorded as follows: Mixed 1.8%; Asian/Asian British 1.1%; Black/Black British 1.2%; Chinese or other 1.6%; and Other 0.4%. This excludes White Irish and Other White. Given that the Census is pre-2004, it excludes the largest arrival of BME communities from Central and Eastern Europe. It is generally accepted that the 2001 Census no longer represents a reliable indicator of both the size or composition of the BME community.

The Office of National Statistics experimental statistics from mid-2004 suggest that 8% of Liverpool's population were from BME backgrounds⁴. This percentage was highest amongst the City & North and Central wards (15% and 13% respectively).

It has been suggested that the BME population increased to 10.7% in 2005 (an increase of 28.1% from the 2001 figure)⁵.

Asylum seekers and refugees

In 2000 Liverpool was chosen as a dispersal area by NASS (National Asylum Support Service - now under the UKBA). This was due to the wide availability of social housing. Now, Liverpool is the initial accommodation centre for asylum seekers in the North West with a contract from the Home Office to provide supported accommodation. At the end of 2009 there were

² Housing Quality Network (2010) *Research into the housing support needs of vulnerable people from Black and Minority Ethnic communities in Liverpool*, York: HQN.

³ Liverpool Primary Care Trust (undated) *Key Demographic and Health Statistics*.

⁴ Liverpool Primary Care Trust (undated) *Key Demographic and Health Statistics*.

⁵ Housing Quality Network (2010) *Research into the housing support needs of vulnerable people from Black and Minority Ethnic communities in Liverpool*, York: HQN.

25 asylum seekers living on subsistence only support and 1,375 asylum seekers in supported accommodation in Liverpool (information from the ICAR (Information Centre about Asylum and Refugees) website: <http://www.icar.org.uk/?lid=12258>).

Liverpool is home to a number of more recent refugee populations as is shown by the presence of Congolese, Iranian and Kurdish led RCOs. There is a Chinese refugee presence which joins the long established Chinese community. In addition, there are communities of refugees from Sri Lanka, Sierra Leone, Chad, Bangladesh, Somalia, Iraq and Kosovo.

BME homelessness

BME homelessness is often less visible than White homelessness with fewer BME people sleeping rough on the streets or using emergency accommodation. However, nationally, BME homeless is acknowledged to be on the increase. Compared with England as a whole, Liverpool has fewer applicants accepted as homeless among the White community, similar proportions of Black or Black British, fewer from the Asian community but a higher proportion of those from the Chinese or other ethnic group (Q1-Q3 2009/10) which is likely to reflect the local BME composition.

Between 2009/10 the number of asylum seekers/refugees presenting as homeless was 170 with 6 individuals presenting in April 2009, 11 in May 2009 and increasing to 27 and 32 in February and March 2010 respectively. The main ethnic groups presenting were the Black Africans, followed by Asian Other, those from any other racial group and the Chinese.

Summary of research/surveys carried out in Liverpool

The Housing Quality Network (2010) report on vulnerable BME people in Liverpool⁶

- Housing Quality Network (2010) highlights that integration is an issue – BME communities concentrated in particular areas with reluctance to move outside these areas. New arrivals (not exclusively asylum seekers) are being housed in the North of the City, in areas not traditionally home to ‘visible’ minorities.⁷ This could have potential consequences for community cohesion.
- This study did not involve primary research with BME communities – it recommends that this needs to be done to supplement information they have.

Fordham Research (2007) Housing Needs Assessment⁸

- Suggests that 6.3% of households in Liverpool are headed by someone who describes themselves as non-White (equates to 12,314 households).

⁶ Housing Quality Network (2010) *Research into the housing support needs of vulnerable people from Black and Minority Ethnic communities in Liverpool*, York: HQN.

⁷ Housing Quality Network (2010) *Research into the housing support needs of vulnerable people from Black and Minority Ethnic communities in Liverpool*, York: HQN.

⁸ Fordham Research (2007) *Housing Needs Assessment*, for Liverpool City Council, London: Fordham Research.

- Black African was the largest proportion of their sample (44.8%) – nearly two thirds of these were West African countries (i.e. Nigeria). Following Black African, South Asian respondents featured, particularly Indian and Pakistani.
- Housing – BME households more likely to be in rented accommodation. Similar to SHUSU study, Central and Eastern European (CEE) migrants overwhelmingly in private rented sector.
- BME households more likely to be living in unsuitable housing (again, CEE migrants featured most prominently in this).
- BME households more likely to have moved in last two years – CEE migrants and Sub-Saharan African group most likely to have moved.
- Community cohesion – 26% considered themselves to be victims of crime or bullying due to ethnicity/religion. South Asians experienced highest levels of crime or bullying, followed by African Caribbean. Pakistani households experienced high levels of perceived ethnic/religious bullying or crime.

Equality Impact Assessment – Norris Green Re-development (Former Boot Estate).

The EIA highlights the potential for discrimination in relation to the lack of integration for BME and Faith/Belief and goes on to suggest that this is a wider issue for Liverpool as a whole in that there is a lack of mobility across the City for certain groups, including BME residents. The report suggests that a number of reasons could underline this such as low rates of customer satisfaction and heinous hate crimes. The report advocates the need for further research into the causes and effect of this.

Housing Association Tenant Satisfaction Survey

Analysis of the findings from the tenant STATUS surveys for seven housing associations in Liverpool (LHT, Cobalt, Cosmopolitan, LMH, Pine Court, Plus Dane and Riverside) reveals some interesting differences in satisfaction between BME and non-BME tenants. However, it should be noted that the latest surveys were undertaken in different years (between 2007 and 2009) and analysis was not always disaggregated by ethnicity, although in some cases the difference between BME and non-BME can be inferred on the basis of the non-BME and overall satisfaction figures. The findings show:

- In relation to the overall level of satisfaction with the landlord, BME tenants from six of the seven associations had a lower level of satisfaction than the non-BME tenants – the exception was Pine Court where the level of satisfaction was the same for BME and non-BME tenants;
- Across all seven associations a greater proportion of non-BME than BME tenants were satisfied with the overall quality of their home;
- While in the case of LHT, Cobalt, LMH and Plus Dane, a lower level of satisfaction was recorded by the BME tenants with the repairs and maintenance service, BME tenants of the remaining three associations were more satisfied with this service than the non-BME tenants; and
- BME tenants of LHT, LMH, Pine Court and Riverside were less satisfied with the opportunities for participation/views being taken into account than the non-BME

tenants. In terms of those from Cobalt and Cosmopolitan a higher level of satisfaction was recorded among the BME tenants: in the case of those at Pine Court the level of satisfaction between BME and non-BME tenants was the same.

Looking specifically at the detail of recent STATUS surveys of two of these associations:

Liverpool Mutual Home STATUS Survey (December 2009)⁹

- 6.4% of sample were BME households. Respondents mainly three groups – mixed; Asian/Asian British; and Black/Black British (the latter being the largest in the sample).
- Different ethnicities living in different areas – West had higher proportion of BME households (almost one in five respondents).
- BME households' lower levels of satisfaction with:
 - Landlord (58.4%, compared to 75.6% overall);
 - LMH taking views into account (51.7% compared to 68.0%); and
 - Repairs and maintenance (55.3% compared to 69.6%).
- The survey recommended that reasons for lower levels of satisfaction were explored in greater detail through qualitative interviews with tenants.

Plus Housing Group STATUS survey (2008)¹⁰

- As above, BME households expressed lower levels of satisfaction (along with families and younger residents). Satisfaction related to landlord, quality of home, etc. They suggested this could be attributed to higher expectations in relation to service provision.
- BME tenants (along with younger people) most likely to want to move.

Liverpool City Council Place Survey (2009)

- Interestingly, BME residents (along with older people) more likely to feel that they could influence decisions affecting their local area.
- BME residents also more likely to rate Criminal Justice System as effective.
- 43% had experienced physical or verbal abuse because of their ethnicity; however, just 11 BME respondents had reported their experience.

LHT BME satisfaction report (2008)¹¹

- Again, lower levels of satisfaction amongst BME tenants (20% difference) – however, in one district (South) satisfaction was low amongst *all* respondents which related to area rather than ethnicity.

⁹ Liverpool Mutual Homes (2009) *Liverpool Mutual Homes Status Survey Findings*, Full report December 2009.

¹⁰ bmg research (2008) *Customer Satisfaction Survey – STATUS 2008*, prepared for Plus Housing Group.

¹¹ Richmond, N. (2008) *BME satisfaction*, research report for LHT.

- Overall satisfaction lower for all factors (landlord, conditions, value for money, repairs, etc), with exception of neighbourhood – BME slightly higher than White British.
- Raised cultural issues in relation to dissatisfaction – rather than issues with the specific services provided (again, this related to differences in expectations).
- Interviews across South district – dissatisfaction influenced by quality and type of property (race and ethnicity does not appear to be a factor in lower satisfaction levels – although this seems to contradict some of the comments about cultural expectations).
- Interestingly, despite low satisfaction with properties in the South, it is a preferred area of choice (issue around social networks).
- Expectations raised again – many properties meet Decent Homes Standards, but there is still dissatisfaction.

Migrant Workers in Liverpool: A Study of A8 and A2 Nationals (2009)¹²

It is recognised that migrants from the EU accession countries have dominated arrivals to the UK in recent years. A number of local authorities across the UK have undertaken studies focusing on the needs and experiences of these communities. In 2009, Liverpool carried out a similar study, which included looking at employment, accommodation, access to services and community cohesion. The study identified a diversity of CEE migrants in Liverpool, including Roma communities (particularly from the Czech Republic and Slovakia).

Accommodation

- With regards to accommodation experiences, in line with studies carried out in other areas of the UK, there was a dominance of the private rented sector (73% of respondents).
- There was evidence of HMOs in Liverpool, with people sharing bedrooms with non-family members.
- The study highlighted homelessness amongst CEE communities, with some living in hostel accommodation (particularly Romanian nationals) and a number of others referring to experiences of hidden homelessness.
- The study revealed a growing preference for socially rented accommodation amongst CEE migrants.
- The ways forward outlined in this report for Liverpool City Council were:
 - To ensure greater enforcement of accommodation standards in relation to the private rented sector;
 - To collect further information about CEE migrants whose accommodation is tied to their employment, particularly that provided by an agent; and
 - To collect more in-depth information in relation to homelessness (street and hidden) amongst CEE migrants, including causes and pathways out.

¹² Scullion, L. and Morris, G. (2009) *Migrant workers in Liverpool: A study of A8 and A2 nationals*, Salford: University of Salford.

Community cohesion

- The study found that 23% of the sample had experienced hate crime since living in Liverpool. This percentage was higher amongst Roma communities. It needs to be recognised that Roma have been identified as the most vulnerable and deprived ethnic group within Europe. Prior to 2004, Roma from Central and Eastern Europe may have come to the UK as asylum seekers rather than labour migrants – they therefore have different reasons for migration beyond economic factors.
- The ways forward outlined in this report for Liverpool City Council were:
 - To explore what prevents people from reporting hate crime, focusing on differences between different communities;
 - To provide more resources to strengthen current initiatives which promote interaction between migrants and indigenous communities; and
 - Explore the possibility of developing community resources to incorporate a wider range of nationalities.

Merseyside Gypsy and Traveller Accommodation Needs Assessment

In 2007 the University of Salford carried out the Merseyside (Liverpool, Knowsley, Sefton and Wirral) GTAA.

Liverpool has one authorised Gypsy and Traveller site owned by Liverpool City Council and managed by a dedicated site manager. 24 interviews were carried out with Gypsies and Travellers in Liverpool (10 on the socially rented site, 2 unauthorised encampments and 12 people living in bricks and mortar). The number of people currently living in bricks and mortar was currently unknown. One observable change in Liverpool over the last five years was that households involved in unauthorised encampments were often relatives of the residents of the local authority site.

The survey of Gypsies and Travellers identified some of the important characteristics of the local population:

- Household size is significantly larger than in the settled/non-Traveller population at 4 persons across the whole sample;
- A significant minority of the sample (18%) were households over 60 years of age;
- Young families are the predominant household type in the Study Area as a whole (Merseyside). There are more couples in bricks and mortar housing than on site based accommodation – these couples tend to be older at 60+ years;
- More than half of respondents felt they were ‘local’ to the area they were residing in. ‘Family connections’ was the main reason given when respondents were asked why they were living where they were; and

- The local population consists almost entirely of Irish Travellers (60%) and Romany Gypsies (English) (31%) with much smaller numbers of others who described themselves as Welsh Gypsies/ Travellers, Scottish Gypsies/Travellers or the more generic Traveller.

The GTAA found that there had been no change in the number of pitches on the local authority site over the past 5 years. Current provision was 14 pitches; however, the GTAA indicated the need for 14 additional pitches between 2007 – 2016 to accommodate household growth, overcrowding, etc. This was subsequently amended by the CLG partial review of the Regional Spatial Strategy to 15 permanent and 5 transit pitches.

Interviews in Liverpool highlighted good practice with regards to community engagement, with specific reference to the role of the Traveller Education Service and Irish Community Care Merseyside, who engage Gypsy and Traveller children in local activities.

Discussion

This section will discuss the extent to which the information available on the BME community in Liverpool enables an informed appreciation of their needs. It focuses on three areas of interest: the housing situation, needs and aspirations of established and new BME communities; the impact of greater ethnic and cultural diversity on community cohesion; and differential satisfaction levels between BME residents (including social housing tenants) and White communities.

The housing needs of traditional BME communities

The BME community can be differentiated on a number of levels including ethnicity, religion, culture. In the context of this research a distinction is drawn between those BME communities who have been settled within the UK for a relatively long period of time, having arrived in this country during the 1950s and 1960s and corresponding to the more established BME community and the more recent arrivals, including asylum seekers and refugees and migrant workers, such as those from Central and Eastern Europe, which are referred collectively as the 'new' BME communities. The needs of the established communities have been well documented nationally and research undertaken in different parts of the country confirms that while the scale of need and issues associated with location may differ, there is a general consensus that the needs of the different communities are well established. Furthermore, it is generally accepted that these established BME communities have developed their own strategies and mechanisms for articulating their housing needs and aspirations and a range of support structures have been developed within their own communities (e.g. culturally specific shops, community venues and support groups etc.). Also, housing providers have been pro-active in their engagement with these communities to enable their needs to be identified and addressed. This is not to say, however, that their housing needs are insignificant but rather that the relevant housing providers are aware of and responding to these.

In view of the above, it is advocated that additional research focuses on accessing housing both within the social rented and private rented sectors and, where possible, particular emphasis should be given to engaging with the 'new' and emerging rather than traditional BME communities.

A rather different picture emerges in relation to new BME communities, especially those comprised of asylum seekers and refugees. Given their relatively recent arrival to this country and Liverpool there is little available empirical evidence on their housing needs and aspirations. An important element is their reputed lack of awareness of their housing options, especially once they have been granted leave to remain in this country, and their presentation as potentially homeless to the local authority. This is an area which does require further exploration through empirical research to identify how awareness of housing and associated options can be improved among this group.

The impact of greater ethnic and cultural diversity on community cohesion

There is little national or local research that has explicitly focused on inter-ethnic and cultural relationships at the local level and the impact of this on community cohesion. This issue warrants further investigation as it can significantly restrict the mobility of different BME groups across the City and their associated housing choices. The proposed research needs to be multi-dimensional, examining the barriers to greater community cohesion between the newer BME communities, the more established BME communities and the White community.

Differential satisfaction levels

While there is widespread acknowledgement that satisfaction levels among the BME community both in terms of residents of an area (via the Place Survey) and social housing tenants (STATUS and similar surveys) are generally lower than their White counterparts, there is little agreement on explanations for this. The limited good practice among either the social housing sector or local authorities offers little insight into how to address this issue. Furthermore, the lack of an informed understanding of the reasons impacts on the degree of housing choice and mobility of the BME community within the City and offers no clear strategic steer on how to respond to this dilemma. It is advocated, therefore, that empirical work is undertaken to provide an insight into the reasons behind why BME residents and social housing tenants tend to be less satisfied.

Proposed methodology

In view of the 'information gaps' identified above, we propose a series of related empirical studies to inform the future development of the Councils Housing Strategy which are detailed below:

Element 1: Engagement with stakeholder and service providers

We propose consulting with a range of key stakeholders concerning their views on the satisfaction levels of the BME community as well as the housing needs and aspirations of the newly settled BME community in the following way:

- **Internal LCC staff** – we propose to issue an internet-based pro forma which will seek their views on these issues. Staff with either direct contact with local BME communities or who provide local services will be asked to participate. We would want to be inclusive in our approach rather than focusing on staff within the housing

management function as those from, for example, community development, asylum seeker and refugee teams, community cushion, supporting people etc can add an important dimension to the study. We would anticipate approximately 50-75 staff being asked to participate;

- **Voluntary and community sector** – we would send a pro forma to a range of organisations providing services to the BME community in Liverpool, about their perceptions of the issues around levels of satisfaction, community integration, sense of belonging and housing experiences, needs and aspirations of the BME community; and
- **Registered Social Landlords** – a questionnaire would be distributed to RSLs with stock within Liverpool. The method of distribution could either be postal or email-based. The pro forma would collect information about their BME customers in terms of relative size of different community groups, the characteristics of those registered for re-housing and their views on the range and type of culturally specific services they provide, examples of good practice and perceptions of barriers to accessing housing. We will also consult with this group about satisfaction levels among their BME and non-BME clients and the strategies they have adopted to minimise this difference between these two groups. We would look to undertake in-depth interviews with key staff from this sector to examine in more detail some of the issues (for example around unique approaches to providing culturally sensitive services or local good practice).

Element 2: Engagement with the BME community

This would involve direct consultation with the BME community and we would suggest a range of complementary methods to achieve this:

- **Distribution of a pro forma via the voluntary and community sector to BME clients/contact** – we would develop a self-completion questionnaire which would be distributed to known contacts within the ‘new’ BME community as well as being available to be completed as and when people access the services (i.e. when BME people drop-in). This will focus upon the issues around: experience of accessing housing and related services, current housing and associated experiences, housing needs and aspirations and degree of community integration and sense of place. This will provide some relevant baseline information. We would look to distribute between 1,500 and 2,000 questionnaires;
- As part of this exercise, we will also develop a short pro forma that could be distributed to a geographically targeted ‘host’ non-BME community, specifically looking at their views on the issues of recent inward migration and settle patterns of the BME community and community integration and cohesion. We anticipate distributing around 500 of those;
- **Focus groups with members of the BME community** – we would look to hold eight focus groups with BME community. The main focus will be around ‘new and emerging’ community groups and around the issues associated with satisfaction levels. One of the focus groups would look specifically at satisfaction levels among BME social housing tenants and participants would be recruited via the relevant organisations. The remaining seven focus groups would be specific to individual

community groups and is likely to include: recent migrant workers; new communities, such as Somalis, Iranians and

Iraqis etc. The assistance of the voluntary and community sector would be sought in the recruitment of participants. Incentives would be offered to ensure their participation; and

- **BME mystery shoppers** – we feel that this is a useful mechanism for identifying any issues around equality of access to local services and in particular, ‘validating’ potential claims made by service providers regarding the provision of culturally sensitive services. We anticipate 10 mystery shopping case studies.

Section 3: Discussion of Research Findings

Introduction

This third section considers the collective findings from the empirical research undertaken in terms of the following issues: housing needs and aspirations (focusing on needs and access to housing as well as tenure aspirations); community integration and cohesion (looking specifically at the dynamic nature of the BME community, views on the area and community tension); and differential satisfaction levels (including method of assessment, service standards and issues which impact on satisfaction levels). Each of these are considered in turn.

A. Housing needs & aspirations

This initial section considers the evidence from the consultation exercise concerning the housing needs and aspirations of the BME community in Liverpool. Initially, the emphasis is upon the current housing needs of the community, followed by a discussion of the barriers to accessing social and private rented housing within the city from the point of view of both the community and professional. Information is also reported here on the housing aspirations of the BME community.

Housing needs

All BME communities experience similar housing needs to a greater or less extent and the evidence collected for this study suggests that around one third of all BME households have a housing need which is currently not being met by their current accommodation. Some of the most evident housing needs are:

- Poor housing conditions – the evidence from both the community and the organisations consulted confirms that some BME households were living in properties which are in poor condition. Those in the social and privately rented sectors experienced similar problems in terms of property repairs not being undertaken, damp and mould and inadequate heating. It was suggested that some private sector landlords were charging only nominal rents for their properties which were sub-standard but many of these tenants are not aware of their rights; and
- Overcrowding – many in the BME community themselves recognise that they are living in overcrowded conditions, for example, one third of private renters were critical of the size of their home. The lack of larger properties among the social housing stock was seen as a particular problem among service providers, especially in terms of responding to the needs of some of the newer communities, such as Somalis, Afghanis, Iraqis and Iranians.

The survey of a sample of BME residents from across Liverpool highlighted some of the housing needs experienced by the community:

- Four out of ten of the social renters were critical about the condition of their home, particularly in terms of the level of warmth, presence of damp and outstanding

repairs. One of the main complaints for many tenants was that repairs had been promised by the landlord but had not been done:

'Housing stated that it would be suitable to live in and that the repairs would be done and it wasn't. I wouldn't have let pigs live in it, it was dirty and had mess in it.'

- Three out of ten of those renting privately were also critical of the condition of their property, while around one third felt that their home was too small. The issue of overcrowding among the BME community was one which was commented upon by a number of those consulted, particularly in relation to the larger families from the Somali and Arabic communities; and
- There was also found to be a lack of support provided to BME households when they moved into their accommodation, especially when they were not familiar with the area or had no existing social networks there: 30% of BME households were critical of the support they had received to help them move into their new home.

Social housing sector – barriers to access

A number of specific issues were identified from the various sources in relation to the perceived barriers to accessing housing in the social rented sector. First, the issue of actual awareness of services was identified with Council staff particularly highlighting this as an issue:

'Often communities are not aware that a service exists or where it is located.'

Second language was seen as a barrier to accessing services for some communities, especially the white minority groups from central and Eastern Europe, Roma and asylum seekers and refugees:

'People whose first language is not English have problems.'

'I've been working with the asylum seekers and refugees and in housing. They have got a communication problem (lack of English language) and problems understanding how the English system works and how to access it.'

This is coupled with a general lack of appreciation of the process of applying for social housing, especially in terms of the choice based lettings system, again a particular issue for refugees and EU migrant communities

This general lack of awareness of the social housing sector should be seen within the wider context of a general lack of earnestness of services locally. This was an issue noted by the council staff who felt that BME residents experienced problems accessing other services within the city, such as welfare benefits advice, education, ESOL and interpretation services

Third the long waiting lists, reflective of the popularity of some areas within the city but the lack of available suitable properties. Slightly more than one fifth of the BME survey respondents were critical of the length of time they had had to wait before they were offered their current home:

'I've been on the waiting list for too long - it took 5 years to get a house.'

The choice of properties is a significant factor with less than half of those currently renting in the social housing sector being positive about this issue (46.5%) while 38.4% were critical, although the different ethnic groups had slightly different views on this issue with the Asian group being much more positive about the choice of properties available than the Black, Other or Mixed ethnic groups. The size and condition of the properties offered were seen as the major issues impacting on choice and in some cases it was suggested that the properties that they were offered were not suitable but felt that they had to accept it:

'I waited almost four years to be rehoused. All my bids were rejected and at last I was granted a very poor house;'

The issue was also raised by the voluntary sector that the high priority given by the local authority to those who could demonstrate a local connection to the area disadvantaged many of the BME community who had only recently settled in the area.

Concerns were also raised about the insensitivity of the allocations approach by some social housing providers, especially around vulnerability including cultural and social issues and financial exclusion, which resulted in an inappropriate property being allocated, primarily associated with the location of the property:

'An individual BME member refused a property in a predominantly White area as he felt he was unsafe;'

Only a minority of those consulted could offer any good practice examples in terms of responding to the housing needs or barriers of accessibility of the social housing sector, including the provision of a Somali floating support service, the provision of a translator at the initial home viewing visit and staff training around equality and diversity.

A number of solutions to redress the barriers which restricted access to the social housing sector were identified:

- A more targeted approach to engagement with BME communities to identify their specific housing needs and issues which impact on their access to housing services;
- More publicity disseminated at the local community level about the range of housing options available and how to access such housing. The importance of providing information in relevant minority languages or via bi-lingual staff, such as community development or outreach workers, was regarded as an important consideration;
- A greater emphasis among the social housing sector for sharing information about specific BME community groups in terms of their vulnerabilities, as well as more staff training on these issues;
- More impartial housing advice and advocacy service to ensure that BME people are fully aware of the housing options available to them especially in light of the long waiting lists for local authority housing;

- A greater emphasis upon translating information both in terms of how to access information, including the choice based lettings system, as well as once a property has been let (for example translating tenancy agreements or utilising the services of bi-lingual staff);
- Greater sensitivity in the allocation of housing recognising the importance of cultural and social factors which could impact on their sense of personal safety and sense of belonging. At the same time, avoiding the creation of BME enclaves with particular areas being associated with specific ethnic groups but rather creating areas which are more culturally and ethnically diverse and less exclusive;
- Greater awareness among social housing providers of the consequences for both the individual BME households and the wider community of living in unsuitable housing due to the condition, size or location of the property; and
- More targeted support by housing providers to BME households when they first move into their property and especially when they move to an area where they have few or no social support networks.

Private rented sector

A range of issues were identified as restricting access to the private rented sector within the city for the BME community, with some of these being in common with the social rented sector. Certainly, the lack of awareness of this sector and the properties available was seen as a significant barrier as is the limited choice of good quality, appropriate properties in preferred areas: one fifth of the private renters were critical of the choice of properties available. The condition of some of the properties was also found to be an issue (30.0% were dissatisfied with the condition of their home). In addition, a number of other issues were cited which were specific to this sector. First the requirement by many private sector landlords for a deposit and references which some BME households found prohibitive:

'The BME group usually fail to provide the landlord with a guarantor and have to pay around £300 for a credit check and the administrative fee, one months rent as a deposit and one months rent in advance. This could add up to £1,000...'

Second, the lack of appreciation among some BME households of their rights as private sector tenants (due to language problems in understanding the tenancy agreement) resulting in their potential exploitation by the landlord (particularly relevant among the EU migrant worker group) and then remaining in unsuitable accommodation, reluctant to complain, as a consequence of them not knowing their rights.

Third, the reluctance of some private landlords to maintain their properties in a suitable state of repair on the premise that BME households are prepared to accept such accommodation at a reduced rent level, notwithstanding the detrimental impact of poor house conditions on an individuals physical and mental health. It has been suggested that some landlords actively targeted the BME community with their poorer quality accommodation

'Private landlords are less willing to rent good properties to foreigners. They are prepared to give BME people the worst housing where conditions are very poor.'

Fourth, a lack of cultural understanding of some BME groups by landlords leading to strained relationship between the landlord and the tenant.

The following proposals were identified to address the above issues:

- The provision of more tailored legal advice to the BME community about renting in the private sector, how to find suitable accommodation, their rights as a tenant and ensuring equitable treatment from their landlord;
- Encouragement of the use of Language Line or a similar interpretation service by private landlords to help them fully explain the terms of their tenancy or the adoption of a standard agreement by all private sector landlords which could be made available in different languages;
- The availability of a rent deposit scheme which clients can have access to when they are unable to afford to pay the rent deposit themselves;
- Greater monitoring of the private rented sector in terms of both the condition of the properties and the attitudes of landlords;
- The development of a landlord-tenant consultative forum to discuss issues pertaining to both parties and to identify good practice within the sector;
- The vesting of all private sector landlords and the production of a comprehensive list of such landlords within specific areas of the city, distinguishing the type of properties available and who are they are targeted at (e.g. students, families etc.); and
- The greater enforcement of HMOs to ensure that they are of an appropriate standard and not overcrowded.

What the research evidence also reveals is a general lack of appreciation by service providers generally of the issues faced by BME residents and communities generally in terms of accessing housing and related services, a direct consequence of limited information about the issues of these groups. This is in part, a reflection of the approach adopted by some organisations to engaging with these groups. On the one hand, it has been suggested that some communities are perceived as being 'hard to engage' and as such their needs and experiences go undocumented while the minority view is that the lack of BME service recipients is a reflection of a lack of need for a particular service. Where engagement with the BME community does occur, this is often seen as simply a performance management tool rather than the information collected being used to inform service development: the relatively large number of Council staff who were unaware of how the feedback from BME customers was utilised reinforces this point. The adoption of generic engagement techniques with all customers highlights the lack of appreciation of some of the issues faced by sections of the BME community, emphasising the lack of appreciation of the barriers which restrict access to services and information generally for this community.

Housing aspirations

Poor or sub-standard housing and a dislike for the area were found to be two of the primary reasons why there was a desire to move home among some households within the BME community. The evidence collected suggests that around three out of ten (29.5%) were looking to move home within the next three years with those in the social rented and private rented sector (45.8% and 39.1% respectively) being the most likely to want to move home.

There was a general preference for either buying their own home or renting from a housing association: the former was the main preference among the Asian community while the latter was favoured by the Black and Other ethnic groups. What is particularly interesting is that there is a degree of 'tenure mis-match' evident in the findings. For example, only 13.3% of those who currently own their home would want to purchase their next property, the majority preferring to rent from a housing association. Similarly, only one fifth of current tenants of Liverpool Mutual Homes (former Liverpool City Council Housing) who envisaged moving would expect to remain in this tenure with four out of ten of this group preferring rent from an RSL. What should be noted is that only one individual (2.3%) expressed a preference for renting privately. Half of the current private renters and four out of ten of those renting from a housing association would be interested in home ownership. The issue of affordability was seen as a major obstacle among those who currently rented and who did not express an interest in buying their own home.

The findings suggest, therefore, that a significant number of the BME community are currently living in a tenure which is not their tenure of choice and this is particularly noticeable in relation to those currently renting privately. This would tend to further reinforce the findings above concerning the lack of awareness of the range of housing options available, difficulties to accessing social rented housing and therefore, a reliance on the private rented sector. The issue of accessibility was a universal issue and not restricted to those living in particular parts of the City.

B. Community integration and cohesion

Introduction

A number of factors influence the level of community cohesion in the community including, the dynamic nature of the community in a locality, views on the area, and community tensions. Each of these will be examined in turn in light of the research findings.

The dynamic nature of the community

Within specific areas within the city (most notably the L4/5, L6/7 and L8 postcode areas) the perception was that there had been an increase in the inward migration of different community groups within the neighbourhood. The consequences of this migration were also identified in terms of the perception that there were too many people from other countries coming into the area (27.5%), the belief that these 'new' communities did not understand the customs and practices of those communities already living in the neighbourhood (31.5%) and a significant minority did not feel that there was a good mix of people in the area or were unsure. At the same time, however, only a tiny minority felt that these new communities caused problems for those already living in the neighbourhood. The lack of

mutual respect and consideration between the different communities was felt to be a problem (41.5%).

Hence, the arrival and settlement of new community groups within parts of Liverpool was not seen as a particular concern, rather it was the lack of respect and consideration between different ethnic and community groups.

Views on the area

The level of satisfaction with the local area was high (over 70%) among those members of the community, both BME and White British, while similarly larger numbers felt either settled (71.3%) or a sense of belonging to their immediate area (66.7%). The more positive views were most likely to be recorded among those living in the L4/5 rather than the remaining postcode areas. Positive views were related to a sense of familiarity with the area, proximity to facilities and services; and the closeness of family, friends and own community. In contrast, those who were critical of their local area tended to feel socially and culturally isolated with minimal social support networks. The evidence from the resident consultation reveals that while some BME households had extensive social networks others did not: 19.9% never or very infrequently met up with family members, 28.6% never or very rarely met up with neighbours and only a small group met up with people from outside the area. There was also found to be a relationship between the level of satisfaction with the area and associated sense of being settled/belonging and sense of personal safety. While only around one in twenty of those consulted felt unsafe in their local area during the day, this figure increases to 27.5% during the evening with anti-social behaviour such as gangs of youths, drunkenness and drug taking being seen as the most serious problems.

Community tensions

There is evidence from both the residents and some of the professionals consulted that tension between different community groups exist within some areas of Liverpool. However, the nature of these tensions was found to be complex, arising due to different issues and involving different groups. Tensions within specific ethnic community groups was reported (for example the Somali community, based on political/tribal allegiances); between communities with similar circumstances (Polish and Russians) between different BME groups (for example Black Africans and Asians) and between BME groups and the White British. A common issue identified was that among the White British, young people were seen as the main antagonists.

Interestingly only a tiny minority suggested that such tensions were between existing and new or emerging communities and this was borne out by the resident research. These tensions manifested themselves in a number of ways, such as verbal abuse and particularly name calling (racist) rather than actual physical abuse as well as other forms of antisocial behaviour. The race hate crime statistics for Liverpool for the period 1 June 2010 to 31 May 2011 suggest a total of 666 recorded incidences with those from Asian background most likely to be the victims and this level has remained relatively constant over the last three years (640 in 2008/9 and 669 in 2009/10). However, according to the findings from this research these figures vastly under-estimate the true extent of this problem. Among the BME community surveyed, 44.5% had been a victim of a hate crime and racism, ranging from 60% of those from a Mixed ethnic background, 40.0% of the Asian group and smaller

numbers of those from the Black and Other community groups. One of the consequences of this high level of direct experience of racism/hate crime is the impact on an individual's perception of being a victim of this crime: 86.2% of those who had not previously experienced this were fearful of being a victim in the future.

The reported reasons for such community tensions at the local level were quite varied and while some were related to specific communities, others were more general.

Increased competition for finite resources. The examples quoted here were employment, welfare benefits and housing. Certain communities were seen as either taking jobs away from local people (such as EU migrant workers) or receiving assistance to access employment opportunities which other communities did not have access to. At the same time, those unable to secure themselves employment became frustrated, directing their grievances at other communities. In terms of housing this was generally the social housing sector and again the issue revolved around the perceived preferential treatment of some community groups at the expense of others:

'Some people from different countries getting better things that we don't get. For the houses, they are the first on the list and the same for benefits as well.'

A second reason related to differences in skin colour suggesting that those community groups who were most dissimilar were likely to be targeted. This might explain why the proportion of White minority groups who were either the victim of race hate crime according to the official statistics for Liverpool or reported being a victim was lower than that noted for the remaining ethnic groups. Being physically different meant that some groups were more likely to be targeted for racist abuse than those who physically conformed to the acceptable norm. It should be noted that this issue was seen as being exclusively a White versus BME issue rather than an issue among different BME communities. Similarly, it was reported to be more of a problem in predominantly White areas where there is a low BME presence than those characterised as being ethnically diverse:

'Some people, especially with dark skin meet with racism and dirty looks from people who live in Liverpool (locals).'

Third, language was identified as a reason for tensions between ethnic groups and particularly the difficulty experienced by some groups and individuals with the English language.

Fourth, the variety of different cultures, customs and traditions which exist but which are not fully understood by the different communities and are open to misinterpretation, suspicion and ridicule.

Finally, a sense of cultural and social isolation among some BME households or an avoidance of places where certain ethnic groups congregate and hence, resulting in a degree of self-imposed isolation:

'Some people don't like people from Afghanistan and Pakistan and so they don't go out as much and feel trapped.'

A number of suggestions were proposed to support the integration of different BME groups at a local level and alleviate inter-community tensions:

- An emphasis upon educating all communities about each other and confronting some of the stereotypes and misconceptions associated with particular communities. It was suggested that local schools had a role to play in ensuring that school children from a young age are exposed to positive messages about multi-culturalism:

'More understanding of other people's beliefs and culture will help people get on well together;'

- The provision of more community facilities which are open to people from all ethnic groups, such as community centres, youth clubs, neighbourhood watch with the emphasis being on developing social places where people can meet:

'There should be social places where people can meet and get to know one another;'

- The development of community-based initiatives which encourage participation from among the different community groups, such as 'cultural and food themed activities,' events similar to the Africans Day in Sefton, meet the neighbours and summer fairs;
- Greater access to ESOL and other English language courses at the local level which would reduce the communication problems between people from different communities:

'Local people will be more communicative if they know people from other countries will understand what they say;'

- Locally-based initiatives which engender a collective sense of pride in the area and community and instil a greater sense of community spirit;
- Local initiatives which emphasise the different skills and experiences from among the various community groups and how these can be utilised for the benefit of the community as a whole;
- A greater emphasis upon tackling race hate crime and anti-social behaviour at the local level;
- The development of local employment initiatives and greater access to more appropriate housing; and
- The development of support for new communities and households moving in to an area and particularly acquainting them with the customs and practices of the community groups already living in the area:

'People coming to this country must have an understanding of the law, traditions and customs.'

Despite the acknowledgement that certain areas of Liverpool experience inter-community tensions in different forms manifested primarily through verbal abuse and racist remarks, there is still a positive view of the area overall, coupled with the general feeling of belonging and being settled. Community tensions were found to be related to perceived structural inequalities, ignorance, the lack of social engagement and general social and cultural isolation. Proposals for combatting community tensions was generally through the development of initiatives and associated support which facilitated greater community

interaction, as well as the more practical solutions of addressing the level of race hate crime, anti-social behaviour and poor English language skills.

C. Differential satisfaction levels:

Introduction

This part considers the findings from the consultation exercise in terms of potential explanations as to why BME communities are less satisfied with both their housing (focusing on the socially rented and private rented sectors) and their local area. As the background section has highlighted there is a great deal of evidence that differential satisfaction levels between different groups, notably White British and BME, does exist at the local, regional and national level. However, it should also be noted that in many cases (both in terms of tenant satisfaction surveys and area 'place' surveys there has been no disaggregation of the finding according to ethnicity and therefore our understanding of this potential difference in views is not comprehensive. Furthermore, where this disaggregation has been undertaken it has been on the basis of distinguishing between the White British and BME residents/tenants and although further disaggregation of the BME group according to ethnicity could reveal important differences this has usually proved problematic due to the limited sample sizes involved. Hence, we are left with a very general view which groups all ethnic groups together, yet the findings from this consultation exercise suggest that, at least, according to some of the 'professional' respondents (RSLs, Council staff and the voluntary sectors), some notable differences exist across the BME community.

This section will document the potential reasons why such differences in satisfaction levels between the BME community and the White British exist looking at this issue from first, the social housing sector, then the private rented sector and thirdly, the local area.

Discussion of the social rented housing sector will examine the following factors: the method of assessment; awareness of service standards; level of service expectation; the wider experience of disadvantage; and the impact of the locality. Suggestions for potential ways to redress this difference in satisfaction levels will also be alluded to.

Method of assessment

The most commonly used method of undertaking tenant satisfaction surveys is postal, primarily on the basis of cost. However, as noted above, this form of engagement is likely to be problematic for some BME tenants whose first language is not English: while the option of having the survey form translated is offered, this is rarely taken up by tenants and the forms are not routinely translated into the appropriate minority languages. Hence, the use of postal surveys is likely to disengage some BME tenants as well as reinforce their view that their landlords and other service providers do not fully appreciate the needs of this section of the community by the use of more traditional and formalised engagement techniques (as noted above). Certainly, the STATUS requirement for housing landlords to implement postal surveys to ensure appropriate benchmarking has been replaced by the revised STAR consultation document produced by HouseMark which recognises the need for social housing landlords to be flexible in the way they implement satisfaction surveys to reflect both the needs of their tenants and the organisation. Hence, the current methods used for

measuring tenant satisfaction may act as a barrier to gaining a more comprehensive appreciation of the level of understanding among BME tenants with those who might be potentially less positive actively engaging with the process. Unfortunately, little follow-up work has been undertaken to ascertain whether those BME tenants who respond to postal satisfaction surveys are materially different in their views to those who do not.

Awareness of service standards

It is suggested by some of the stakeholders consulted that a contributing factor to the differential satisfaction levels between BME and White British tenants is due to a lack of awareness on the part of the former of the type and nature of the services that should be provided by the landlord. This is explained on the basis that many BME tenants are not fully conversant with the details of their tenant handbook, primarily due to language difficulties and as such, their perception of what service they should receive is based on ill-founded assumptions and anecdotal evidence from family and friends who may be tenants of other landlords. As one of the voluntary groups noted:

'If you don't know what you are supposed to receive you tend to think you'll receive everything.'

Hence, when a service does not live up to their expectations, they may be potentially critical.

Level of service expectation

A further contributing factor is likely to be high expectations of the service they receive, based on either an 'aspiration' of the sector derived from their previous experience especially in comparison with the private rented sector. The perception that the service is 'free' in that they do not pay directly for a particular services and the view that a social housing landlord will look after all their needs could mean that they have high expectations of the service.

The wider experience of disadvantage

A number of commentators have alluded to the influence of the wider experience of BME communities to their level of satisfaction with their landlord. A sense of inequality and disadvantage in other areas of their lives, such as difficulties accessing some services and their experience of using these could colour their views of their landlord in that BME tenants may perceive, based on general experience, that other communities, most notably the White British, receive preferential treatment.

The impact of the locality

Experience of and attitudes towards their local area or neighbourhood has also been identified as a factor which can influence tenant's views on a whole range of issues. A negative experience of an area can be due to a number of factors: a sense of necessity to move to an area which was not their preference to secure suitable accommodation which can leave them feeling socially and culturally isolated; a general lack of knowledge of the local area and the services and facilities available; the level of anti-social behaviour and hate

crime and a more general sense of not belonging. One of the voluntary groups suggested the following:

'Historically there has been a ghetto mentality of providers who are reluctant to expand and give greater choice of areas to the BME community. They are all 'placed' in the same area which leads them to think that they are not receiving the same services as those in other areas.'

The evidence would suggest then that a combination of factors including a lack of understanding of the services they should receive, aspirationally high expectations of their landlord, a wider sense of injustice and their experiences of their local area all contribute to a greater or lesser extent to the lower levels of satisfaction recorded among the BME social housing tenants.

A number of proposals were put forward to address this issue. First, an assessment of the most appropriate methods for canvassing the views of BME tenants. Research undertaken by one RSL found a preference for the use of more personalised one to one mechanism where the staff member is known to the individual BME tenant and where there is an existing relationship. This further reinforces the need for a range of methods for measuring tenants' levels of satisfaction appropriate to specific groups of tenants. Second, there is felt to be a need for social housing landlords to have a greater understanding of their BME tenants, their needs and aspirations. One proposal is for greater interrogation of customer profiling information which could assist with this, together with more direct contact with the tenants themselves. Third, a number of potential initiatives which can be grouped under the general heading of 'cultural awareness' and include, for example: the recruitment of BME people to work within the organisation and the involvement of BME tenants within the management structure of the organisation (e.g. as Board Members, advisory panels of similar forums), making the organisation more multi-cultural and reflective of their customer base; greater cultural sensitivity around services provision, such as recognising that some BME women do not want to have male contractors working on their properties; and a greater appreciation of the diversity that exists among their BME tenant group in terms of ethnicity, language, culture beliefs and traditions, hence moving away from a generic view of the BME community.

At the same time it must be noted that the issue of lower satisfaction levels among social housing tenants is not necessarily an issue that all social housing landlords either acknowledge or feel compelled to address. One of the RLSs consulted admitted that the relatively low number of BME tenants led them to conclude that any associated satisfaction level figures were not considered to be statistically reliable and therefore did not warrant investigation. Equally, the suggestion that all BME social housing tenants were less satisfied with the service received was also questioned with one voluntary group suggesting that there was no evidence that the Polish community was less satisfied than the White British.

Section 4: Concluding Comments and Recommendations

Introduction

This final section draws together the main themes and issues arising from the research study and provide a number of recommendations under the following three headings: housing needs and aspirations; community integration and cohesion; and differential satisfaction levels. It should be noted that addressing the issues experienced by the BME community in Liverpool will require a multi-agency approach drawing on the resources and expertise across the statutory and voluntary/community sectors. In this way, the recommendations identified below should be seen within this context.

1. Housing needs and aspirations

Both the background literature and the empirical data from Liverpool reveal that BME communities have a range of unmet housing needs, including: issues associated with the poor condition of some of the properties in the social and private rented sector: overcrowding due to the unavailability of appropriate sized housing within the preferred areas of residence; and issues associated with living in areas where they would not choose to live (such as cultural isolation and an absence of social support networks). These issues are particularly relevant to the new and emerging communities (comprised primarily, but not exclusively of EU migrant workers and asylum seekers and refugees). In contrast, the more established communities appear, over time, to have become familiar with their housing options and have been able to articulate their needs: this has not been the case among those who have settled in the area more recently.

These are issues which some housing providers appear to be aware of while others have only a limited understanding. This in part is likely to be a reflection of the type of engagement practices currently deployed with the BME community which, where they exist, tend to be generic in nature and not necessarily reflective of the needs of the diverse BME community. Equally, it could also reflect a lack of appreciation of the true extent of the diversity of the BME community that exists in local neighbourhoods and some of the comments made by service providers during the consultation exercise would seem to support this.

A recurring theme noted throughout the research is the problematic access to both the social and private rented sectors in Liverpool for some BME groups and households. Access to both tenures is restricted due to a number of common factors: lack of awareness of the sector generally and the process of securing accommodation; language problems; the quality of the accommodation on offer; and location. In addition, access to the social rented sector is limited due to the long waiting lists, while within the private sector, the role of landlords and their exclusionary practices (e.g. requiring rent deposits and references) and general landlord-tenant relations were highlighted as particular issues in this tenure.

The extent to which BME households are in some form of housing need and being unaware of the range of housing options open to them is highlighted by the proportion who, intending to move to another property, would wish to 'switch tenure' suggesting that a significant number of BME households are not living in their tenure of choice. Home ownership has been identified as an important aspiration of some BME communities yet

affordability is a key barrier to entering this tenure. Similarly, other specific tenure preferences associated with individual BME communities has also been recognised. However, securing the tenure of preference has alluded many in the community who instead find themselves living in a tenure of 'necessity'.

A number of recommendations are identified to address the above issues:

- Greater dissemination at the community level of information (in appropriate languages and formats) regarding the full range of local housing options available and how to access such housing;
- Social housing agencies should be encouraged to share information about specific BME community groups and their needs especially around vulnerabilities, with training to enable staff to identify and respond to these vulnerabilities;
- Greater emphasis upon the provision of a housing advice and advocacy service to ensure that the BME communities are fully aware of their housing options;
- Greater recognition by social housing providers in the allocation of housing of the vulnerabilities of some BME households associated with cultural and social isolation and financial exclusion;
- More targeted support to be provided to BME households when they first move to a new property/area, especially when they lack existing social networks within the locality, to facilitate greater mobility among the BME community across the City;
- The provision of different models of home ownership (e.g. shared ownership, rent to buy) which enables BME households to access this tenure which would otherwise not be affordable;
- The provision of more tailored legal advice concerning tenants' rights within the private sector;
- Encourage all private sector landlords to adopt a common tenancy agreement which could be translated into a range of minority languages;
- The provision of a rent deposit scheme for households experiencing financial hardship. This is regarded as good practice and has been established by a number of local authorities in the North West;
- Greater monitoring of the standard of property within the private rented sector and, where necessary, undertake enforcement action to ensure that properties meet minimum standards;
- The development of a landlord-tenant consultative forum to discuss issues relating to both parties and to identify good practice within the sector;
- The development of a directory of private sector landlords and their respective properties across the City as a resource available to both individuals and

advice/support agencies. A similar resource was developed by a London authority in response to the lack of awareness of housing within the private sector among refugees; and

- The greater enforcement of HMOS to ensure that they are of an appropriate standard and not overcrowded;

2. Community integration and cohesion

The level of community integration in a neighbourhood is influenced by a number of factors, including; the composition and dynamism of the community (for example the level of inward migration and distinguishing between those areas where there is a large or small degree of ethnic diversity); general views of the area (in terms of level of deprivation and access to services); a sense of belonging (not just related to length of residency but also a sense of community spirit); and the nature and type of support networks. Those areas which are characterised as constituting the poorer parts of the city, where there is a noticeable influx of new communities in the neighbourhood; where there is a diverse range of ethnic groups; but where there is a lack of access to good quality housing, local employment and community venues, would seem to be more likely to experience community tensions. However, at the same time, this type of community tension was also found to exist in neighbourhoods where there is a large White British community and a small BME presence.

The complexity of the nature of community tensions that exist in the neighbourhoods has also been highlighted in the research. To qualify such tensions along White British versus BME community lines would be to grossly oversimplify the issue. Evidence was found of tensions within specific ethnic groups, between groups from similar cultural backgrounds and between members of the established and 'new' community groups. Equally complex are the reasons for such tensions, which range from: perceived structural inequalities associated with differential access to housing, employment and support services, and linguistic and cultural differences to issues associated with the colour of a person's skin. Yet, these tensions manifest in similar ways, most notably forms of verbal abuse and intimidation. The official level of race hate crime recorded by Citysafe is extremely likely to be an under-estimation of the true extent of the problem. While the communities themselves are all too aware of the tensions that exist within their neighbourhood, this level of awareness among service providers was less evident. Again, the lack of direct engagement with these communities at the local level would possibly explain this lack of awareness.

The communities themselves have a very clear understanding of how these community tensions and inter-ethnic relations should be addressed, focusing on the provision of community facilities and activities which encourage people from different backgrounds to come together and share experiences. They also recognise the importance of education especially among school children to ensure that only positive images of multi-culturalism are explored within the school setting. This is possibly a reflection of the widespread recognition that many of the tensions that exist within the community involve young people. From a professional perspective, the issue of responding to these tensions is largely at the level of addressing the structural inequalities, improving access to housing and developing employment initiatives, although at the same time, recognising the potential contribution of organised activities designed to unite the community in a collective sense of pride in the

area and facilitating an understanding of how different groups within the community, based on their skills and expertise, can contribute to a more cohesive community.

Specific recommendations arising out of the research include:

- Developing approaches within the school setting for confronting and challenging the stereotypes and misconceptions associated with particular communities, emphasising the positive nature of multi-culturalism;
- Ensuring that existing community facilities are accessible to all community groups or the development of additional community venues if none locally exist;
- The development of a range of community-based initiatives which encourage participation by people from a range of community backgrounds, for example cultural and food themed events, which expose the participants to different cultures;
- The development of locally-based initiatives which engender a sense of pride in the local area across all communities and a greater sense of community spirit;
- An audit of the skills and experiences of people from the different communities and identify ways that these can be used (e.g. skill-exchange) for the benefit of the community;
- The development of local employment initiatives targeted specifically at the young unemployed; and
- A more targeted response to race hate crime and anti-social behaviour by the relevant agencies and the provision of appropriate support to those who wish to report such incidences or are a victim of such crime/anti-social behaviour.

3. Differential satisfaction levels

The explanation for the lower levels of satisfaction among the BME community with their home, their neighbourhood and services generally was, where acknowledged to be an issue of concern, found to be potentially related to a wide range of factors. In terms of their home and associated housing management services, satisfaction levels were influenced by the degree of awareness of the service standard, service expectations and aspirations (often unrealistic) and general experience of wider disadvantage. Similarly, satisfaction with their immediate area was informed by their general view of the area, actual and perceived access to services, facilities and amenities, their housing situation and the degree to which they felt settled in the area (taking account of issues such as cultural and social support networks, community tensions and issues of personal safety). However, what is not clear from the research is the relative influence of each of these different factors, although this is likely to vary considerably according to ethnic grouping. Unfortunately, however, few satisfaction studies have disaggregated the findings according to individual ethnic groups and so we are left with a very generalised picture which assumes a high degree of commonality on this issue across the different BME communities. There is some evidence presented here that that is not necessarily the case.

The following recommendations are advocated:

- The development of a range of methods for assessing satisfaction among BME housing tenants, informed by the consultation preferences of the BME communities themselves;
- Social housing providers develop a range of mechanisms for capturing information about satisfaction with services (e.g. at the point of service delivery, such as repairs) rather than relying solely on annual satisfaction surveys;
- Greater emphasis is given by social housing agencies to reviewing their satisfaction information within the context of the customer profiling/insight information held to determine patterns of satisfaction based on household or similar characteristics; and
- Greater attention is given by social housing landlords to ensuring that they fully appreciate the multi-cultural nature of their client base (e.g. through the recruitment of BME staff, targeted publicity and cultural awareness training).

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Appendix A: Review of Consultation with Liverpool City Council Staff

Introduction

As part of the consultation exercise for the project, Liverpool City Council staff were invited to complete a pro forma distributed by the internal email system. A total of 24 completed pro formas were returned, distributed across the various Council departments/section in the following way: Public Protection & Healthy Homes – Environmental Health (9); Housing and Business Strategy (5), ECHG (5), Supported Housing (3) Supporting People Business Unit (1) and Citysafe (1).

All but one of the staff members worked directly with members of the BME community and, while in most cases the service provided was not specific to the BME community, in the case of those working with the Gypsy and traveller community and the management of the Migration Impact fund for Liverpool's newest communities, the service was targeted to particular sections of the BME community.

Around half of the respondents undertook front-line roles while the remainder were either team managers or responsible for strategy.

Working with BME communities

It is interesting to note that 16 of the 24 staff did not feel that any of the local BME groups experienced difficulties in accessing any of the services provided by the Council. In contrast, among the 8 who felt that there were access issues, the majority referred to either an awareness that such services existed or a language barrier in terms of accessing the service:

'Often communities are not aware that a service exists or where it is located.'

This was found to be particularly relevant among the EU migrant workers, Roma and asylum seekers and refugees although the issue of language was not seen as being specific to these groups:

'People whose first language is not English have problems.'

'Problems accessing welfare benefits, access to GP services – language is a major problem here.'

Two of the staff also made reference to some Council staff not responding to the cultural needs of the individual in an appropriate way or indeed recognising the importance of these cultural needs:

'... sometimes they face the difficulty of having their cultural needs recognised or addressed.'

It was also suggested that some staff mis-directed some BME individuals to specific services on the pretext that the mainstream services did not cater for their needs – this leads to confusion among the BME community and reveals a lack of appreciation of some staff of the nature of mainstream services. The availability of 'specialist' services catering

predominantly for the BME community adds an additional element of complexity of this understanding.

An equivalent number of staff (8) also felt that BME groups experienced difficulties in accessing services provided by other agencies within the City. The most commonly referred to were: welfare benefits advice (knowledge of entitlement among some of the BME groups was reported to be very low); housing (especially the social housing application process and the choice based lettings system as well as understanding the different rented tenure);

'I have been working with asylum seekers and refugees and in housing. They have got communication problems (lack of English language) and problems understanding how the English system works and how to access it.'

Education, especially nursery places for young children (again due to lack of awareness); and ESOL classes or interpretation services (in the former cases due to being oversubscribed and the latter, levels of awareness and the availability of language specialists from their own community).

It was also suggested that the lack of access to services by some of the BME communities was the result of an un-proactive approach by some agencies to engage with these communities as well as a lack of appreciation of the diverse and inclusive nature of the BME community:

'Sometimes communities are labelled as 'hard to reach' and little effort is made to engage them. Some communities are not recognised as being BME or 'ethnic' so their needs go unmet. Services do not often audit which communities have had services and which have not and these then get lost within the general statistic of BME.'

Among those who reported that the BME community did not experience problems accessing services within the City made an illuminating comment:

'I assume that they have not got problems as I don't know that we ever receive referrals from some organisations.'

This viewpoint was further expanded upon by another respondent who suggested that:

'We understand that some of the BME community do not access some of the services in the community as presumably they don't need them.'

A group of nine staff either commented that their department or section did not collect feedback on the views of BME communities about the services they provided or were unaware of what type of feedback took place. One of this group suggested that feedback which was specific to the BME community was not necessary:

'If there are consultation methods I don't use them because every customer is treated equally by me. We are not advised to record whether a customer is Black, White, Asian or otherwise, because it shouldn't matter. All groups contain humans and that is the group I am interested in helping.'

In contrast, 15 respondents did allude to feedback being collected. In most cases the type of feedback mechanism was formal, such as the use of satisfaction questionnaires:

'We only receive feedback about our service through our satisfaction surveys completed at the end of their support from us.'

'Tenants and resident surveys.'

One of the staff made reference to a large number of engagement exercises designed to gauge the views of customers on different aspects of the service, although without exception they all tended to revolve around very formalised methods.

A small minority used a range of techniques including one to one meetings and focus discussion groups, although the emphasis very much tended to be on the more formal engagement methods.

What is evident is that most of the above departments/sections do not use different engagement techniques for different customer segments but adopt a more generic approach. This is particularly notable from the comments from two staff who made reference to sending out letters to all service users:

'We send out letters to all of the service users requesting feedback.'

Neither indicated whether such letters were translated into the relevant minority languages.

Two staff suggested that they used more informal methods of engagement, such as coffee mornings and drop in sessions as a means of collecting the views and experiences of service users.

Finally, the comment from one staff member is particularly interesting in that it suggests a lack of appreciation of the purpose of collecting feedback from customers:

'Our department collates testimonials from clients who are happy with the outcome received and services provided, however, a different department collates the information on the feedback and the views received.'

Eight of the staff did feel that the current consultation methods could be improved. Suggested improvements tended to centre around formal engagement, particularly through the use of surveys, on a more frequent basis:

'We need more of the same.'

'We could introduce a formal annual or quarterly consultation by questionnaire.'

'Surveys into the BME groups/communities.'

In contrast, there was some recognition by three of the staff that there was a need to reassess the type of engagement methods used suggesting an understanding that the generic application of particular engagement methods to all customer groups was not necessarily the most appropriate approach:

'We have found it difficult to try and engage with BME groups. I would suggest that the Council employs someone to act as a co-ordinator working with services and BME groups, providing BME groups with information and introducing them to services.'

'We could use texting as a means of consultation as most service users have access to mobile phones and it's a cheaper form of consultation.'

'We need more discussion with BME representatives to make sure that we meet their needs.'

Culturally sensitive services

Eleven of the 24 staff commented that they were aware of services that were provided by the City Council which they felt were particularly culturally sensitive to the needs of BME groups/individuals. In six such cases reference was made to specific initiatives directed at the BME community, for example, supported housing schemes specifically for this community, the Ethnic Minority Employability Project, the Somali and Yemeni Project, Asylum Refugee Resettlement Team and the Community Languages project. The remainder of the group of 11 tended to site more general services, such as homeless and housing options, Benefits Maximisation Team, Housing Strategy and Revenue and Benefits. However, what is interesting is that in most cases, cultural sensitivity was largely associated with the provision of interpretation and translation services:

'I am aware that many departments within the council provide interpreters who are sensitive to the client's needs surrounding their ethnicity.'

'We have access to translators and interpreters and this service has made every effort to reach ethnic minorities, for example, we held events at the Pakistani Community Centre and we were able to reach ethnic groups using the Mosque.'

Only three staff members could provide specific examples where the service provided was culturally sensitive, the first citing the frozen meals delivery service which supports the dietary requirements of different ethnic groups and the in-house family homeless hostels which have separate kitchen areas for Muslim families. The second made the following comment:

'The service I provide to customers will always take into account any cultural beliefs or practices. For example, respecting certain religious festivals, such as Ramadan, Diwali and Eid and not sending important correspondence close to these religious festival dates. If I believe an occupier is Muslim, I always ask them if they would like me to take off my shoes and I would always take care not to walk on their prayer mats.'

The third staff member suggested that financial loans to the BME community were provided in a culturally sensitive way:

'We provide loans which are Sharia compliant.'

With regard to staff's knowledge of external agencies which provide culturally sensitive services to the BME community, a minority responded positively, although in the main they tended either to cite specific projects targeted at the BME community, such as PSS gateway which provides support to the Somali community and Pagoda Centre which operates an advice centre/luncheon club for the Chinese community, or suggested projects/organisations that employed staff directly from the BME community:

'They have trained staff from the BME community who are aware of the issues facing the BME community and have the knowledge, skills and ability to provide that sensitive service.'

'MFRS FAIR project, PCT Engagement Team – they are drawn from some of the communities concerned.'

At the same time, there was still evidence among some of the staff that their understanding of cultural sensitivity was related to the provision of translation and interpretations services, exemplified by the following quotation:

'Merseyside Fire and Rescue Service has a bi-lingual fire-safety team who visit people's homes to advise on fire safety.'

Housing experience - social rented sector

The majority of staff (18) either felt that that BME groups did not experience problems accessing social rented housing within the City or were unsure. Among those who felt that such problems did exist, the main barrier was seen to be lack of English language skills:

'Language is a problem, being understood and understanding what is available.'

'Difficulties with accessing interpreters and translation services often presents a barrier to BME people accessing services and/or information.'

In addition, individual BME groups were identified as having specific problems: A8 and A2 migrants and the Somali community with the need for larger properties which were often in short supply and the Gypsy and Traveller families with the lack of culturally appropriate housing:

'A8 and A2 experience lack of understanding of what housing is available and some housing providers do not understand the rights of eligibility of A8 and A2 citizens.'

'I feel Somali groups have great difficulties in housing due to large families which housing associations find difficult to house so as not to create an overcrowding issue. Most properties allocated to Somali families are too small to house a family.'

'Gypsy and Traveller families have particular problems accessing social rented housing in terms of the lack of availability. What exists often does not meet their culturally preferred needs. There are only 14 designated plots to house Gypsy and Traveller families in the whole of Liverpool. RSLs do not provide any designated provision.'

A number of proposals were suggested to address the issue of problematic access to the social housing sector, as noted below:

- Greater emphasis by housing organisations on identifying the specific needs of the various BME communities and identifying the most relevant properties and support to meet these needs;
- RSLs to have a more pro-active approach to the Gypsy and Traveller community by agreeing to designate provision, with the City Council agreeing to provide transit provision;
- Wide dissemination of information on a local basis within community areas and in appropriate minority languages on the nature of social housing and how to access this sector;
- The provision of on-going training for front-line staff around cultural and ethnic diversity:
'Better trained, informed front-line housing staff;'
- A greater emphasis upon a pro-active approach to engaging with existing BME forums; and
- The development of a welcome pack targeted specific at new communities.

Around one quarter of the staff surveyed also felt that those from the BME community who accessed social rented housing experienced problems in terms of: overcrowding;

'Many BME groups have large families and the properties re: RSLs and the Council are not big enough to accommodate large families. Some RSLs have merged two houses to ensure that they meet the needs of large families but this is costly and if the family moves away they may not be able to rehouse a family in the property. In October 2011 the problem for larger families will increase with the changes to housing benefit, i.e. reduced benefits and payments will not exceed anything larger than four bedrooms.'

'Overcrowding due to the lack of larger properties, especially among the Somalis, Afghanis, Iraqis and Iranians.'

The allocation of properties in areas which are unsuitable for some BME groups due to issues of social and cultural isolation and personal safety on the basis of the availability of suitable housing:

'I believe some ethnic groups are placed in properties in inadequate areas simply because the properties are big and can accommodate their needs. However, they are isolated in a predominantly White area and may experience racial abuse because of their isolation;' and

Actual use of the properties, based on culture and lifestyle, which can lead to health problems:

'Somali and other Black African groups have a propensity for having mould growth in the bathroom and bedroom due to lack of using the windows or trickle vents and having the heating on all the time.'

Only three staff members could offer suggestions to respond to these problems. One, in direct reference to the comment about regarding the use of the dwelling and the lack of ventilation, reported that a pamphlet was being produced to be disseminated to the BME community; the second felt that there was a need to ensure more balanced communities both in terms of the availability of private and social rented accommodation and the ethnic mix of the area;

'Housing officers need to play a bigger part in knowing more about the areas that BME groups are placed in to create harmony and to ensure those groups do not feel socially isolated.'

And the third made reference to the need for a city-wide cohesion strategy and the development of a localised forum and activities which bring different cultures together on a regular basis and which is adequately funded.

Housing experience - private rented sector

Eight staff also acknowledged that members of the BME communities experienced problems accessing the private rented sector. Part of these problems related to a lack of awareness of what housing was available and how the private sector works, the requirement for a large deposit and references, the limited availability of suitable housing in the preferred areas of choice; the poor condition of some properties; and a general lack of understanding of their rights (primarily due to language barriers). One staff also felt that some private sector landlords were not prepared to rent their properties to some community groups while another suggested that some specific BME groups (A8 and A2) were actively sought as they could be financially exploited, again a consequence of them not being fully aware of their rights as a private sector tenant. The following quotations illustrate these points:

'There is a lack of understanding of how the private rented sector works. There are also problems of getting the money together for deposits as well as language barriers.'

'Large families have a problem as there is a limited number of houses available. Also the majority of private rented properties are not in areas that BME groups wish to live.'

'I have encountered a Polish client who due to language difficulties was unable to understand the tenancy agreement and no one was able to interpret for him.'

'The relationship between the landlord and the tenant is often strained due to cultural issues and a lack of understanding from both parties.'

'The sector is too expensive and some BME people can only afford to live in sub-standard property which is ultimately not good for their health and mental wellbeing.'

Suggestions for addressing these problems included the following:

- The use of Language Line or a similar interpretation/translation service by private sector landlords to help fully explain the terms of the tenancy agreement;
- Greater enforcement of HMOs to ensure that they are of an appropriate standard and not overcrowded;
- The development of a database of landlords who are sensitive to the needs of specific BME groups and their needs;
- Development of a private landlord and tenant consultation forum to discuss issues pertaining to both parties and to identify good practice;
- Adoption of a standard tenancy agreement by all private sector landlords which could be translated into the relevant minority languages; and
- A greater emphasis upon monitoring the private rented sector in terms of both the condition of the properties and the attitudes of the landlords.

Eight staff members contended that those living in the private sector experienced particular problems, including:

- Poor housing conditions and the lack of repairs by the landlord:
'Damp disrepair is an issue for all groups as I find that many BME groups accept the property as it is just so they can move in quickly. However, I feel landlords are then slow at addressing the repair issues since they have moved in;'
'Some private rented properties are in poor condition and very difficult to get the landlord to carry out the much needed repair works;'
'From our experience, BME groups can be in private properties that are in need of repair and sometimes overcrowding. It is not one specific group;'
- Levels of overcrowding:
'Overcrowding by young Asian families, Chinese students and Eastern European migrant workers;'
- The exploitation of some BME groups, most notably A8 and A2 migrants who have little awareness of their rights:
'A8 and A2 citizens are being exploited in the private rented sector: HMO situations, unlawful deductions from wages, unsanitary housing etc;' and

- Limited availability of good quality private rented housing in BME areas which means that many households are unable to find alternative accommodation if their current housing is unsuitable.

At the same time, some of the staff indicated that some of these issues, especially the poor condition of some properties and overcrowding, were relevant to all community groups and not just those from a BME background.

In terms of responding to these issues, the minority view was that there was little that could be done as it was the decision of the household to live in unsuitable housing:

'Nothing – they choose to live like this because it makes the accommodation cheaper.'

However, in contrast, the remaining staff put forward a range of potential solutions, including:

- Greater accountability of landlords for the condition of their properties and the monitoring of this by the Council:
'Landlords should sign an additional slip for the tenant before the tenant signs for the property. This could be legally binding to ensure that even if the tenant moves in immediately with outstanding repair issues the landlord will have a timescale to complete the repairs or the tenant is not legally bound by their tenancy agreement;'
- The provision of more social housing to reduce the reliance on the private rented sector;
- Greater access to translation services so that the households are aware of their rights:
'Information to empower citizens as to their rights;'
- The establishment of landlord and tenant forums which meet regularly; and
- Consultation with private landlords on a city wide cohesion strategy with the potential contribution from private landlords on cohesion policy and strategy.

With regard to unmet need of the BME communities, 9 staff provided examples of the type of needs that they were aware of:

- Access to properties in their preferred choice of area within the City;
- Greater access to information regarding housing options for specific sections of the BME community, most notably young offenders released from custody, young people leaving care;
- The needs of the household based on specific cultural traditions:
'Cultures which encourage arranged marriages are excluded as predominantly young men are asked to apply for a 1 bedroom property which isn't sustainable as in the near future they need family accommodation;'
- The needs of homeless A8 and A2 migrant workers who have been on the Worker Registration Scheme for less than 12 months and are therefore, not entitled to assistance;

- The needs of some larger/extended BME families generally and particularly those with disabled family members who require accessible housing:

'There is a demand for larger properties for those who live with grandparents and also those who have many children. There needs to be more accommodation built tackling this need as this is what leads to overcrowding in other properties;'

'The requirement for larger homes, 4 bed and above in the areas requested;'

'Primarily the Black and Asian communities who have traditionally large families. Therefore, they are not able to live together in one household. Often they will remain in an overcrowded house for a number of years while they are on the waiting list for a larger dwelling. There is a distinct shortage of larger houses available for these families which makes the problem worse;'
- The older BME members who require smaller accessible properties close to their community and facilities but who are often forced to live in unsuitable housing due to the lack of this type of housing; and
- The needs of particular faith groups in terms of the design and facilities within their home:

'Muslim families often prefer to have floor level toilets particularly for ablution for a prayer;'

Six staff acknowledged that there were housing-related support needs among BME groups and individuals which were not currently being addressed, including:

- The need for greater support directed at the more vulnerable BME households who may have limited awareness of their housing options:

'There needs to be more support in place for those vulnerable BME groups who may think that this is their only option and stay in unsuitable accommodation;'

'It may be useful to have more specific floating support providers, such as a Somalia floating support service and it would be helpful for the landlord to recognise this;'
- Support for young BME people leaving care; and
- The need for more translation services.

Staff were also given the opportunity to mention other issues concerning the housing and related needs of the BME community in Liverpool. Just two comments were recorded:

'Poor housing conditions, overcrowding, lack of knowledge of and access to local services are both a problem for the BME community and the wider community as tensions soon become apparent.'

'It is difficult to know where to direct resources when there are limited resources available.'

Community integration and sense of belonging

Seven staff members felt that BME groups or individuals did not experience any problems in settling into their local area and while another felt that such problems did exist, they commented that this was not the case in Liverpool. The type of problems noted to have been experienced included; language and general communication difficulties '*especially by Arabic and Somali communities*'; a sense of isolation coupled with a lack of knowledge of local services; a lack of employment opportunities; a sense of being '*not welcome*' by the wider community (an experience noted explicitly by some from the Gypsy and Traveller community); direct experience of racism ('*between White and Asians*' and '*towards A8 and A2 groups*'); and cultural differences and traditions among different community groups.

The type of initiatives which were identified to support BME groups and individuals moving to a new area included self-help groups established by particularly communities themselves (e.g. the Somali community in L8) and support provided by community/voluntary groups (for example the Irish Community Care provide advice to the Gypsy and Traveller community); and floating support services provided by a number of housing associations.

The type of further support that it was felt could be offered to new individuals/groups to settle into an area, although only 5 staff offered suggestions, included: the development of a welcome pack which was designed for specific community groups written in the appropriate minority language and detailing local services/groups; greater emphasis upon existing communities supporting new arrivals within their own community; and the provision of more information about services available locally.

Eight respondents reported that they were aware of tensions or problems that had occurred between different community groups. Two suggested the Somali community, one mentioning internal tensions and the second to tensions between the Somali community and other BME groups. Another commented generally that there were tensions between communities living in North and South Liverpool – '*which has hindered cohesion and integration of newly arrived communities*'; tensions between the 'settled' community and the Gypsy and Traveller community especially around the siting of encampments; and conflict between the White British and those from Central and Eastern Europe (Lithuanian, Latvian and Polish). One of the group felt that the underlying cause was levels of employment and poverty, while a second felt that some White communities felt 'under attack' from new BME community groups. The main areas where tensions were noted were: L8, Speke, South Liverpool generally and '*areas with a large White community and a small BME presence.*'

Of those who offered a view (9 in total), opinion was divided about whether there had been an increase or decrease in the level of tension/conflict between different community groups over the last three years. Those who felt that there had been an increase related this to the greater diversity of 'new' communities in Liverpool than previously or the down turn in the economy, resulting in greater competition between individuals from the different communities for jobs, housing and other services.

The types of suggestions put forward to promote community integration included:

- Greater attention to inter-cultural work at the local community level;
- BME groups sharing specific facilities and locations within the City on a regular basis and not just for annual festivals throughout the year;
- Encourage sense of pride by all community members in the local area;
- Tackle problems of racism and abuse; and
- Development of employment opportunities and access to decent housing.

Finally, respondents were given the opportunity to identify three key messages that they would wish to convey to the Council about the current issues facing BME communities or individuals living in Liverpool. While a range of answers were noted, three dominant themes emerged:

1. Recognise the problems associated with the current methods for working/engaging with the BME communities and develop more appropriate techniques based on the requirements of the communities themselves;
2. Tackle the underlying causes of community tensions within local communities, such as an insufficient number of jobs, access to appropriate housing and access to local services; and
3. Promote multi-culturalism within Liverpool more widely as being beneficial for all communities – this should be the Unique Selling Point (USP) for Liverpool.

Other comments included: making equality and cultural diversity training obligatory across all sectors and all services; the provision of larger and better housing to respond to the housing needs of particular communities; responding to the level of racism and hate crime in some areas of the City; development of information at a local level about housing options; recognise the future potential problems of encouraging communities to live in particular areas, either through social housing allocation processes or the targeted funding of or support for local community groups/services/facilities.

BME level of satisfaction

A group of 12 offered suggestions as to why they felt that BME communities were sometimes less satisfied with their housing, other local services and the area where they live than the White British community. In terms of their housing, it was suggested that some in the BME community had high expectations which may not be met by their current housing, expectations derived from their previous housing experiences in either their home country or through renting in the private sector in Liverpool (and then moving to social housing) or awareness of the housing situation of family and friends. The following quotation illustrates these points:

'Many of the BME groups have come from countries where they have experienced a very high standard of living associated with their professions and class. They are offered properties which do not equate to their 'normal standards' but which are acceptable by the White British.'

'I feel that certain groups have higher expectations than other groups.'

'They may have friends, colleagues or neighbours who have the same landlord or type of housing but a better quality of living accommodation or their friends in a neighbouring authority may have much better housing than them.'

More specifically, in terms of service they receive from their social housing landlord, this differential level of satisfaction was explained in the following way: the perception that the services are 'free' and therefore they expect them to be of a high standard; a lack of clarity about the scope and nature of a particular service (for example they may not fully understand their tenant handbook if it is not translated into their minority language); and a general perception that other households and communities require preferential treatment by their landlord, based on their experiences in the community generally and therefore, leads them to be less satisfied:

'It might be because of language difficulties or because some of these people have a perception that they are marginalised.'

'Due to past racist experiences they are likely to be more sceptical and suspicious of housing providers.'

Different expectations of services among different community groups:

'I feel that certain groups have higher expectations than others.'

Views about why some BME people might be less satisfied with their local area were equally wide ranging. It was suggested that some BME households live in areas which can be characterised as impoverished and/or where they feel culturally and socially isolated and this will impact on their opinion about the area. Equally, it was proposed that a lack of knowledge and awareness of local services could lead to lower levels of satisfaction:

'They may feel more isolated which would affect their view of the area and they may have a lack of knowledge about agencies and/or a language barrier affecting their ability to liaise with other agencies.'

'Gypsies and Travellers have often complained that they are put in industrial areas away from the local amenities.'

It was also commented that there is often less engagement by service providers with BME communities or that engagement practices do not reflect the local population and they feel excluded from such opportunities and hence become critical of services which are available as they are not regarded as being reflective of the needs of the particular BME community.

Few examples of good practice approaches adopted by either the Council or local housing associations to address the lower levels of satisfaction were identified. One related to the use of a Gypsy and Traveller site management good practice guide and a second involved the emphasis that some housing associations give to equality and cultural diversity training for its staff. Other examples included: the employment of BME staff, especially those working at the front-line; and the deployment of dedicated staff to work with particular communities,

such as the dedicated asylum team of the homelessness service and the Gypsy and Traveller liaison officer.

Proposal for increasing the level of satisfaction with their homes, local services and the area generally included the following: convening regular meetings with the different BME communities to examine grievances and concerns; task community groups with identifying more precisely why BME people are less satisfied, tackle these issues and thus increase satisfaction levels; involve/employ more front-line BME staff; ensuring that BME communities are not treated differently to the White British (being positive discrimination); and greater attention given to educating the white communities about the benefits of living in a multi-ethnic community:

'White communities need to be more educated through the media and made aware of the positives of welcoming BME individuals and communities.'

Liverpool Housing, Race, and Community Cohesion Study
Liverpool City Council staff survey

Dear Staff Member

The Salford Housing and Urban Studies Unit (SHUSU) at the University of Salford has been commissioned by Liverpool City Council to undertake some research around the housing and related issues facing the Black and Minority Ethnic (BME) communities (also known as BRM – Black and Racial Minorities). BME is taken to include anyone from a non-White British background, including those of mixed heritage, Gypsies and Travellers, and migrant workers from Central and Eastern Europe.

As part of the programme of research, we are interested in gathering the views of a range of stakeholders concerning the issues facing by the BME community. We have developed the pro forma below to collect information from staff employed by Liverpool City Council who have direct contact with members of BME communities within the City or whose work supports these groups. We do hope that you can spare the time to complete the questionnaire which should take between 10-15 minutes. All the information provided will be ***treated as confidential*** and will not be passed on to a third party and will not be seen by Liverpool City Council. The findings from this and the other research elements will inform the future development of the Council’s Housing Strategy.

The completed questionnaire can either be returned by email to: [XXXX](#) or alternatively by use of the FREEPOST label attached. The deadline for receipt of the completed questionnaire is **XXXXX**.

We greatly appreciate your co-operation.

Yours sincerely

Professor Andy Steele
Research Director

Respondent name: _____

Job title: _____

Department/Section: _____

Please briefly describe how your role involves contact with or working on behalf of BME groups and individuals within the City: _____

Section 1: Working with the BME communities

Q1. Which are the main ethnic and/or national groups that you work with?

Q2. Are you aware of any BME groups which experience difficulties in accessing services provided by the City Council?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q3. If **YES**, which groups and which services?

Q4. Are you aware of any BME groups which experience difficulties in accessing services provided by other agencies within the City?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q5. If **YES**, how have you been made aware of this?

Q6. If **YES**, which groups and which services?

Q7. Does your department/section collect feedback on the views of BME communities about the services they use?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q8. If YES, please describe the main consultation methods used?

Q9. Do you feel that the current consultation methods could be improved?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q10. If YES, what improvements would you suggest?

Q11. Are you aware of any services provided by the City Council which you feel are particularly culturally sensitive to the needs of BME groups/individuals?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q12. If YES, which services and in what ways are they culturally sensitive?

Q13. Are you aware of any services provided by external agencies which you feel are particularly culturally sensitive to the needs of BME groups/individuals?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q14. If **YES**, which services and in what ways are they culturally sensitive?

Section 2: Housing experiences and needs of BME communities

This section focuses on access to and experience of housing within the City.

Q15. Do particular BME groups or individuals experience problems in accessing social rented housing?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q16. If **YES**, what type of problems are experienced and by which particular ethnic groups/individuals?

Q17. What additional support or help could be developed to ensure greater access to social housing?

Q18. Do particular BME groups or individuals experience problems in accessing the private rented sector?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q19. If **YES**, what type of problems are experienced and by which particular ethnic groups/individuals?

Q20. What additional support or help could be developed to ensure greater access to the private rented sector?

Q21. Do particular BME groups or individuals experience specific problems with their housing in the social rented sector (e.g. overcrowding, poor property conditions, inappropriate location etc.)?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q22. What type of problems are experienced and by which particular groups?

Q23. What could be done to respond to these problems?

Q24. Do particular BME groups or individuals experience specific problems with their housing in the private rented sector (e.g. overcrowding poor property conditions, inappropriate location etc.)?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q25. What type of problems are experienced and by which particular groups?

Q26. What could be done to respond to these problems?

Q27. Do you feel that particular BME groups and individuals have housing needs which are currently not being met by housing providers in the City?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q28. If **YES**, what are they needs and which particular BME groups are affected?

Q29. Are there any housing-related support needs among BME groups/individuals which are not currently addressed by service providers?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q30. If **YES**, what are these needs?

Q31. Are there any other comments you would like concerning your views on the housing experiences and needs of BME groups and individuals living in Liverpool?

Section 3: BME levels of satisfaction with their home and local area

Both local and national research has shown that members of BME communities are sometimes less satisfied with their housing, the other local services that they receive and the area where they live than members of the White British community.

Q32. Why do you think that members of BME communities tend to be less positive about these issues than the White British Community?

Q33. Are you aware of any 'good practice' employed by either the City Council, housing associations or other service providers which have tried to increase the level of satisfaction with these issues among BME communities?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q34. If YES, please describe the 'good practice' and indicate which service/s this applies to?

Q35. What do you think could be done to increase the level of satisfaction with these issues among BME communities?

Section 4: Community integration and sense of belonging

This section looks at the extent to which BME groups and individuals feel part of the wider community

Q36. Are you aware of any problems that BME groups or individuals experience in settling into their local area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q37. If YES, what type of problems are experienced and by which particular ethnic groups/individuals?

Q38. Are you aware of any initiative or support that is provided to BME groups or individuals to help them settle into their local area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q39. If YES, please describe the initiative/type of support and which agency provides it?

Q40. What could be further done to assist BME groups and individuals to help them settle into their local area?

Q41. Are you aware of any tensions or problems that exist between different ethnic groups living in the same area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q42. If **YES**, what type of tensions or problems have occurred and between which community groups? If possible, please outline specific examples?

Q43. Are these tensions/problems more evident in particular parts of the City?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q44. If **YES**, which parts of the City and why?

Q45. Overall, over the last three years, would you say that the extent of tensions/problems between different community groups has:

Increased	Decreased	Remained the same	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q46. What could be done to promote community integration of the different BME groups/individuals within specific local areas?

Section 5: Final comments

Q47. What are the three key messages that you would like to tell Liverpool City Council about the current issues facing the BME communities/individuals living in Liverpool?

1.

2.

3.

Q48. Please feel free to make any additional comments below

Thank you for taking the time to complete this pro forma.

Appendix B: Review of Consultation with Voluntary Sector

Introduction

As part of the study, a wide range of voluntary and community organisations were approached to participate by providing their views on the issues facing the BME communities in Liverpool. A self-completion questionnaire was sent either by post or email to over 75 agencies who responded positively to an initial email seeking their agreement to participate. However, only a very low proportion completed and returned the questionnaire despite numerous requests by the research team. Direct contact with some of those organisations who did not respond identified the lack of resources and time to complete the pro forma as the main reason for their non-response.

Eight completed forms were returned. While two of the responding organisations provided services which were not exclusive to the BME community, the remainder were either advocates for or provided advice and information to particular BME groups, such as the Irish, Polish, and Arabic and more generally, Black women.

Services provided

With the exception of two organisations which provided direct housing to members of the BME community, the remainder either provided a direct service, such as housing related support, or information, advice and support on a range of issues, including employment and skill enhancement, access to education, debt counselling and referral to health services. While the majority of the organisations (6) provided services across the City as a whole, the remaining two tended to work exclusively in Liverpool 8 and Liverpool South Central.

The main BME group which were targeted were: the Yemeni community; Irish Travellers, Black British, Somali, Iranian, Sudanese, Kurdish, Irish, Pakistani, Turkish, Black Caribbean, Indian, Polish and those from the other EU accession countries and refugees from all over the world.

With regard to the respondents' views on whether particular BME communities were under-represented among the users of their services, two of the eight suggested that this was the case referring in the first instance to the Roma community and secondly, to migrant workers from Eastern European countries.

Housing experiences and needs of the BME community

All but two of the group suggested that particular BME groups or individuals experienced problems in accessing social rented housing. While in the majority of cases this negative experience was relayed directly by the client to the organisation, in other cases the organisation became aware of the issue via a support worker or the equivalent.

The type of problems experienced in terms of the social housing sector included the following:

- Long waiting list for local authority housing where there is a high priority given to local residences which disadvantages many in the BME community who may have been living in the area for a short duration;
- The level of vulnerability experienced by some BME individuals (e.g. financial exclusion, cultural and social) is not adequately recognised by some of the social housing providers which results in an inappropriate property being allocated (in terms of the type of property or its location) and the applicant rejecting the property or leaving the property shortly after they have moved in:

'An individual BME member refused a property in a predominantly White area as he felt he was unsafe;'

- Language problems and a general lack of appreciation of the process of applying for social housing – found to be a particular issue among some of the refugee communities and the EU migrants:

'The type of problems that are experienced are not knowing what services are available, staff not being aware of the barriers that the community face and also difficulty in understanding particular accents;' and

- The reluctance of housing associations to accept applications from refugees who have no recourse to public funds and therefore unable to claim Housing Benefit.

Suggested proposals for responding or alleviating these access problems encompassed the following:

- Greater emphasis upon training and information sharing among social housing agencies about specific BME groups and especially around some of the vulnerabilities experienced – particular emphasis was given to understanding mental issues among the community;
- More impartial housing advice and advocacy service to ensure that BME people are fully aware of the housing options available to them especially in view of the long waiting lists for local authority housing;
- A greater emphasis upon translating information both in terms of information about the social housing sector and the information provided once a property has been secured (i.e. tenancy agreements) and the employment of bi-lingual staff:

'Who can support the client and ensure that communications are effective and clear;'

- The establishment of a fund to assist those who have no recourse to public finances to enable them to access social housing; and
- Greater sensitivity in the allocation of housing to BME members, recognising the importance of cultural and social factors which could impact on their sense of personal safety and community.

Those who move into the social housing sector also experience problems associated with: poor housing conditions; inappropriate locations; and overcrowding, exemplified by the following quotations:

'Landlords are charging nominal rent for housing in poor condition, often conditions which are almost uninhabitable and no repairs are provided. The issues include damp, black mould, roofing and heating problems in addition to gas pipes and electrical faults. The landlords know that their tenants are unaware of their rights and have low expectations. The language barrier is a particular problem.'

'All BME groups experience problems with regard to areas of choice. They are mainly offered L8 properties, the very area they have experienced difficulties in.'

'Inappropriate locations, overcrowding and poor property conditions – these are the common problems experienced.'

The respondents cited quite specific proposals which it was felt could address these issues. These included:

- An emphasis upon allocating properties to members of the BME community on a more geographically dispersed basis ensuring that the resulting 'communities' were more diverse and less exclusive. At the same time, it was recognised that allocating BME households a property within a predominantly White area would be problematic and so there needed to be a degree of sensitivity in the allocation process to ensure that the prospective tenants felt comfortable in whichever area the property was located in. An associated point was the need to make the choice based letting system *'more accessible and easier to understand'* with the point being made that it was often confusing when applicants initially accessed a property pro-forma, especially if the individual was already renting from an RSL;
- Greater awareness among housing providers of the impact of living in a 'poor' environment on an individuals' mental health, categorised in this sense in terms of one where the tenant/applicant felt culturally and socially isolated;
- Greater attention to the size of the property being allocated and the corresponding needs of the household. In some cases, the house was too small for the needs of the households but with a large garden:

'Make the landlords aware that it would be more beneficial for more bedrooms rather than a garden so big: it is 150% bigger than the house in some cases;' and

- More targeted support by housing providers to BME households when they first move into a property and especially those who move into an area where they have few or no existing social networks.

Five of the respondents also reported that members of the BME community experienced problems accessing the private rented sector. Again, most of the agencies become aware of such issues from feedback from their clients:

'From discussions with community members in a group and one-to-one setting.'

The type of problems experienced included:

- A lack of knowledge of what is available in the sector which often results in people accepting properties which are either unsuitable for them or in areas where they feel insecure;
- The requirement of rent deposits in advance and in some cases, additional expenses relating to a credit check and associated administrative fees:

'Finding private rented accommodation is the biggest worry for the BME community in Liverpool, especially among asylum seekers who receive a positive decision from the Home Office and have to move from their NASS accommodation within 28 days. The BME group usually fail to provide the landlord with a guarantor and have to pay around £300 for a credit check and the administrative fee, one month rent as a deposit and one month rent in advance. This could add up to over £1,000 for someone who is not working or earning even the minimum wage – it is extremely unlikely that any of our clients would have this amount of money;'

- The quality of the accommodation is sometimes sub-standard, but faced with a lack of choice, many BME people are reluctant to complain or look elsewhere; and
- A lack of awareness of some tenants of private landlords regarding their rights:

'The rights of private tenants need to be made clearer and more accessible.'

In response, a range of measures were proposed including:

- The availability of more advice on renting in the private sector, how to find accommodation, the rights of tenants and how to ensure equitable treatment:

'Impartial advice services to provide support to find suitable accommodation and deal with the issues relating to private landlords. More information to make people aware of their rights and how to obtain fair treatment;'

- The vetting of all private sector landlords and the production of a comprehensive list of such landlords within each part of the City, distinguishing the type of housing available (for example student accommodation versus general housing) and whether or not the landlord is prepared to accept people on Housing Benefit; and
- A rent-deposit scheme which clients can have access to when they are unable to pay the deposit themselves:

'A deposit scheme for those waiting for benefits to be processed.'

Private sector tenants were also noted to experience problems, although in many cases these were deemed to be similar to those in social housing:

- Living in areas with a low BME presence:

'Overcrowding and generally poor conditions are common issues for the BME groups. Also, other issues around some BME people only being able to rent housing in areas where there are no mixed communities, where people are not used to seeing people from ethnic backgrounds. People from ethnic backgrounds can experience racism and abuse from the locals;' and

- The reluctance of some private sector landlords to only rent the more 'hard to let' properties and those in relatively poor condition to people from the BME community:

'Private landlords are less willing to rent good properties to foreigners. They are prepared to give BME people the worst housing where the conditions are very poor.'

'Landlords do not maintain the health and safety of the property and there are issues with damp.'

Opinion was divided as to whether the housing problems experienced among the BME groups were area specific or reflected the situation across Liverpool. Those who worked on a more local basis tended to suggest that they were either unsure about this issue, or felt that the problems experienced were more acute within their target areas, notably Liverpool South Central, Speke and *'historic areas such as the North of the City'*. Others, who worked more generally, felt that the problems were evident across the City, although there was a degree of variability in experience depending upon location and the degree of ethnic diversity within the area.

All of the respondents contended that there were housing needs among the BME community which were currently not being met. These identified unmet needs largely reflected the nature of the service provided and the characteristics of the client group, for example:

'There needs to be more supported accommodation of self-contained flats for vulnerable black adults.'

'There needs to be more work done with the Irish Traveller community in terms of providing transit sites. There also needs to be more awareness training for front-line staff about the needs of both the Irish and Irish Traveller communities and that they are the largest ethnic group in Merseyside.'

'Language is a significant barrier for a number of BME groups and for many, bi-lingual support is central to support services.'

'Providing support to find properties for refugees who receive a positive decision from the Home Office to stay in the country and who need to leave their NASS accommodation within 28 days.'

'Provide support for the Somali community, those from the EU accession countries and other BME communities to find properties which meet their needs in a safe place and good condition.'

Community integration

The general view (5) was that problems were experienced by BME groups or individuals in terms of settling into a local area and evidence of this experience generally came from clients themselves, community volunteers or in one case, parents of local school children. The main problems were seen to be:

- A prior lack of knowledge of the area and sense of 'disorientation' with many unaware of where to access everyday services such as post offices, local schools, employment agencies and welfare advice;
- Experience of racism and abuse as 'outsiders' moving into an area and further complicated by language barriers:
'Integration can be hard sometimes where there is a language barrier. In some cases Polish families become targeted by youths;' and
- A sense of cultural and social isolation with some BME households moving into areas within the City where there exist few people from their own community.

The majority of the agencies also felt that tensions or problems did exist between ethnic groups living in the same area. It was reported that in some cases the tensions were within individual communities, based on political or tribal allegiances with the Somali and Yemeni communities being specifically identified. Other examples provided included tensions between those from Central and Eastern Europe (between the Polish and Russians in Speke) and between the former and the Roma community; between the Black community (no specific group was identified) and the White community, with particular emphasis upon the White youth. One of the group felt that some of the problems were more likely to exist between those 'new' community groups who had recently settled in Liverpool and the more established BME community. In this way, tensions were noted between the Somali community and other Black African and Black Caribbean groups who had a much longer history of living in Liverpool.

The suggestions about how to support the integration of different BME communities/individuals within the specific areas were quite wide ranging and included:

- A greater emphasis upon educating all communities about each other and confronting some of the stereotypes and myths associated with particular groups (for example the EU migrant workers taking jobs from local people). It was felt that local schools had a role to play in ensuring that pupils from a young age were exposed to positive messages about the different cultures and communities living in their local area;
- The organisation of local events which encouraged members of the different communities to participate:
'... cultural and food themed activities. This will enable them to communicate with each other and get to know each other better, sharing information and experiences;'
- Initiatives which encouraged local people from all communities to informally get to know one another, such as *'meet the neighbours and summer fairs'*; and

- Greater recognition among all residents that individuals from the different communities have different skills and experiences which can be harnessed for the benefit of the community as a whole. The idea of undertaking a community skills audit was suggested to identify the range of community 'assets' and examine how these could be mobilised.

Level of satisfaction with home and local services

In response to the statement 'both local and national research has shown that members of the BME communities are sometimes less satisfied with their housing, the other services they receive and the area where they live than the White British community and question 'Why do you think this is the case;' a range of answers were noted. Two of the respondents felt that BME households' overall less positive attitude to services (both in terms of their home and the area) was due to their general dissatisfaction with the area where they lived, associated with concerns about their personal safety and sense of being in a 'ghetto':

'Historically, there has been a ghetto mentality of providers who are reluctant to expand and give greater choice of areas to the BME community – they are all 'placed' in the same area which leads them to think that they are not receiving the same services as those in other areas.'

'Generally, the areas where BME communities live tend to be ignored in favour of the more affluent areas: the BME communities have little access to advocacy services.'

Another respondent felt that some in the BME community had high expectations of social housing providers which were not then met. These raised expectations were often based on a perception that social housing providers looked after their tenants in every respect '*this is why many BME people would favour being a social housing tenant*'.

A third reason given and similar to that above, was that many BME tenants whose first language is not English have a poor understanding of their tenancy agreement and as such are ill-informed about the services that they should receive and as such, they feel less satisfied than other community groups:

'If you don't know what you are supposed to receive you tend to think you'll receive everything.'

A fourth respondent remarked that it was likely that some within the BME community, having experienced disadvantage in other areas of their lives, come to assume that they are automatically disadvantaged when it comes to receiving housing and other services.

One respondent also commented that the lower level of satisfaction was particularly likely to be a consequence of living in the private rented sector:

'Private landlords often take advantage of the BME communities and provide them with poor accommodation and in bad areas, knowing that they don't know their rights and what to expect in the UK. Also, English language barriers prevent them from explaining their situation to service providers. The lack of knowledge of the local

area is also likely to be a factor as well as not knowing what services are available for them to tackle these issues.'

Finally, one of the participants felt that their client group, notably the Polish, were generally very positive about the services they received and therefore questioned the findings regarding differential satisfaction levels:

'Most Polish people are very positive about their housing, especially those who rent via the housing associations. They are happy with the standard and praise all the help received.'

Additional issues

Finally, respondents were given the opportunity to identify three key messages that they would want conveyed to the City Council about the current issues facing BME communities/individuals in Liverpool. Collectively, the most common three issues reported were:

- Better communication between all community groups, facilitated by a greater appreciation of the different cultures associated with the different ethnic groups through education and opportunities for socialisation and additional minority language provision in terms of interpretation and translation services;
- Greater attention by housing and related housing providers to ensure that all communities are aware of the range of housing options available in the City and equally, that both social and private sector tenants are fully conversant with their rights and responsibilities as tenants; and
- The development of a more culturally sensitive approach to the allocation of properties to BME households to ensure that local communities are balanced and diverse but avoiding the sense of isolation that some BME households feel moving into an area where there are few people from their own community. At the same time, there is a need to tackle some of the underlying social issues which can act as a catalyst for community tensions, such as high unemployment the lack of suitable accommodation and high levels of anti-social behaviour.

Liverpool Housing, Race, and Community Cohesion Study
Voluntary and Community Sector Survey

Dear Colleague

The Salford Housing and Urban Studies Unit (SHUSU) at the University of Salford has been commissioned by Liverpool City Council to undertake some research around the housing and related issues facing the Black and Minority Ethnic (BME) communities (also known as BRM – Black and Racial Minorities). BME is taken to include anyone from a non-White British background, including those of mixed heritage, Gypsies and Travellers, and migrant workers from Central and Eastern Europe.

As part of the programme of research, we are interested in gathering the views of a range of stakeholders concerning the issues facing BME communities. We have developed the pro forma below to collect information from voluntary and community agencies who work directly with BME clients or groups within the City. We do hope that you can spare the time to complete the questionnaire which should take between 10-15 minutes. All the information provided will be ***treated as confidential*** and will not be passed on to a third party. The findings from this and the other research elements will inform the future development of the Council's Housing Strategy.

The completed questionnaire can either be returned by email to: [XXXX](#) or alternatively by use of the FREEPOST label attached. The deadline for receipt of the completed questionnaire is **XXXX**.

We greatly appreciate your co-operation.

Yours sincerely

Professor Andy Steele
Research Director

Respondent name: _____

Organisation: _____

Address of organisation: _____

Postcode: _____

Telephone number: _____

Fax number: _____

Email: _____

Section 1: Working with BME communities

Q1. Do you currently provide services or support to BME communities in Liverpool?

Yes

No

Q2. What are the main types of services/support that you provide to BME clients?

Q3. Which are the main ethnic and/or national groups that use the services you provide?

Q4. Are there any BME groups which are under-represented among the users of your service?

Yes

No

Don't know

Q5. If **YES**, which groups?

Q6. Which areas of the City of Liverpool does your organisation mainly cover?

1. Across the whole of the City

2. Specific areas of the City (please list opposite)

1.

2.

3.

Section 2: Housing experiences and needs of BME communities

This section focuses on access to and experience of housing within the City.

Q7. Do particular BME groups or individuals experience problems in accessing social rented housing (i.e. housing provided by the Council or Registered Social Landlords)?

Yes

No

Don't know

Q8. If **YES**, how have you been made aware of this?

Q9. If **YES**, what type of problems are experienced and by which particular ethnic groups/individuals?

Q10. What additional support or help could be developed to ensure greater access to social housing?

Q11. Do particular BME groups or individuals experience problems in accessing the private rented sector?

Yes

No

Don't know

Q12. If **YES**, how have you been made aware of this?

Q13. If **YES**, what type of problems are experienced and by which particular ethnic groups/individuals?

Q14. What additional support or help could be developed to ensure greater access to the private rented sector?

Q15. Do particular BME groups or individuals experience specific problems with their housing in the social rented sector (e.g. overcrowding poor property conditions, inappropriate location etc.)?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q16. What type of problems are experienced and by which particular groups?

Q17. How have you been made aware of this?

Q18. What could be done to respond to these problems?

Q19. Do particular BME groups or individuals experience specific problems with their housing in the private rented sector (e.g. overcrowding poor property conditions, inappropriate location etc.)?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q20. If **YES**, How have you been made aware of this?

Q21. What type of problems are experienced and by which particular groups?

Q22. What could be done to respond to these problems?

Q23. Are the housing experiences of the BME communities more likely to be problematic in particular parts of the City?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q24. If **YES**, which parts of the City and why?

Q25. Do you feel that particular BME groups or individuals have housing needs which are currently not being addressed by housing providers in the City?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q26. If **YES**, how have you been made aware of this?

Q27. If **YES**, what are their needs and which particular BME groups are affected?

Section 3: BME levels of satisfaction with their home and local area

Both local and national research has shown that members of BME communities are sometimes less satisfied with their housing, the other local services that they receive and the area where they live than members of the White British community.

Q28. Why do you think that members of the BME communities tend to be less positive about these issues than the White British Community?

Q29. What do you think could be done to increase the level of satisfaction with these issues among the BME communities?

Section 4: Community integration and sense of belonging

This section looks at the extent to which BME groups and individuals feel part of the wider community

Q30. Are you aware of any problems that BME groups or individuals experience in settling into their local area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q31. If YES, how have you been made aware of this?

Q32. If YES, what type of problems and which BME groups experience them?

Q33. Are you aware of any tensions or problems that exist between different ethnic groups living in the same area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q34. If **YES**, how have you been made aware of this?

Q35. If **YES**, what type of tensions or problems have occurred and between which community groups?

Q36. What could be done to support the integration of the different BME groups/individuals within specific local areas?

Section 5: Final comments

Q37. What are the three key messages that you would like to tell Liverpool City Council about the current issues facing the BME communities/individuals living in Liverpool?

1.

2.

3.

Q38. Please feel free to make any additional comments below

Thank you for taking the time to complete this pro forma.

Appendix C: Review of Consultation with Registered Social Landlords

Introduction

An email based survey was sent out to identify contacts within the 12 Registered Social Landlords with the largest proportion of stock in Liverpool. Seven RSLs with housing stock in Liverpool responded to the survey. The volume of stock varied across the RSLs: the volume of general needs housing ranged from as few as 1 to as many as 14,248; the number of sheltered support properties ranged from 46 to 721; and the volume of supported housing units ranged from 106 to 879.

The proportion of BME tenants varied across RSLs too: one provides housing for just one BME person and another has 15% BME tenants. Among these tenants were a wide range of nationalities and ethnic backgrounds, including Irish, Pakistani, Black British, East European, Somali, Yemeni, Chinese, British African, White Other, Mixed Other, Bangladeshi, Polish, Kurdish, French, Hindi, Spanish, German, Punjabi, and Russian. Similarly, the proportion of re-lets to BME tenants ranged from 0% in one RSL to as high as 15.4% in another.

The housing stock of the RSLs is located across numerous postcodes but mainly, in L3, L5, L6, L7, L8, L12, L15, L17, L19, and L24. A couple of landlords manage properties in other areas of Liverpool. Additionally, one RSL targets a specific type of BME household for their housing stock: they have three properties which are retained for the City Council to house refugees and asylum seekers.

Working with BME communities

Five RSLs operate a housing waiting list, and the proportion of BME people on the list ranges across landlords from 0% to 17%. Four respondents believe that BME groups are under represented among their existing tenants; these groups include Chinese, Asian, and Black British tenants. None of the RSLs believe there are any over represented BME groups among their tenants.

Three RSLs provide housing-related services or support to members of the BME communities to access and maintain their tenancies. These services include provision of an onsite Scheme Manager, floating support for Somali tenants, welfare benefits advice service and debt advice agency, translation and interpretation services, a partnership with Amadudu (women's refuge) for re-housing need, and tenancy support for all tenants on request.

Three RSLs have undertaken research to identify BME needs. One RSL employed MCV (Merseyside Community Voice) to explore why satisfaction levels are lower among BME tenants. Another undertook some research but it yielded limited findings. Some RSLs learn more about the needs of the BME community through membership of wider community groups and forums such as Liverpool First for Housing subgroups, the New Communities Forum, and the Council's Citysafe Team.

Housing experiences and needs of BME communities

Overcrowding, being asked to leave by family or friends, and wanting independent accommodation are the main reasons for re-housing BME tenants. Additionally, one RSL observed an increase in re-lets to Eastern European tenants: they are moving to areas to take up job opportunities.

Two RSLs find that BME groups and individuals experience problems or barriers in accessing housing. Tenants let landlords know about these problems via the tenant survey, discussing them with reception staff and Neighbourhood Officers, and through the Equality Impact Assessment carried out on letting services. BME tenants experience language-related problems – one RSL finds this is particularly true for Somali, Yemeni, and Eastern European communities. Prospective BME tenants can find the application process and methods of allocation confusing, and some RSLs find that BME tenants are less likely to want to live in north Liverpool. Additionally, there have been reports from BME people of racial harassment in their neighbourhoods.

Three RSLs provide support to BME communities to ensure greater access to housing. One held a conference at the Chinese Community Centre and another has a surgery at the Somali Women's Group. Other landlords attend forums and committees for ethnic and national groups, too. They also support BME tenants by providing translation and interpretation services, as well as assisting with applications.

Respondents suggested a range of options to ensure greater access to housing for BME people. Some RSLs require more information about their customers. Some would like to have closer working arrangements and partnerships with BME groups, and would perhaps benefit from more BME staff, too. One RSL suggested rolling out surgeries across the city to offer re-housing advice and promote services, generally. However, another landlord tried local surgery provision in the past and found the service was not well used. Promotion of housing services could be increased though, especially 'Propertypool', the city-wide RSL letting scheme.

Four respondents agreed that some parts of the city are more popular among BME communities for re-housing. These are typically the L6, L7, L8, and L15 areas: they are popular choices for re-housing because the BME community there is longstanding. Four RSLs also identified areas that are less popular among the BME community: Norris Green, Speke, Shorefields, Kensington, Anfield, and the north of the city. These areas are predominantly populated by White families.

Two RSLs provide culturally specific services for BME tenants. One offers a Somali floating support service, and another landlord tailors their repair service to be respectful of cultural differences and not impinge on the culture of the household.

Five RSLs described 'good practice' in their organisation in responding to the housing needs of the BME communities. One RSL said that BME applicants get a home visit prior to going to Allocation Committee so their circumstances can be checked and a home visit report produced. Several RSLs referred to the use of translation and interpretation services such as producing pre-translated information or providing an interpreter at a home viewing. Some have engaged in development work with community groups and they have provided

sponsorship for them, too. One landlord has a team which does not arrange improvement works or visits on Fridays due to religious beliefs and custom. Staff training was identified as important for good practice by another respondent. Finally, one example was of an RSLs project partnership with Merseyside Police in encouraging victims to give evidence during anti-social behaviour and hate crime cases and this eases the distress of giving evidence in court.

None of the RSLs are aware of any needs that are not being addressed by the housing providers. However, one commented on the shortage of larger houses and the absence of any plans to increase the size of homes. Another suggested that the lack of awareness of any other housing need is a knowledge gap that could be filled by further research.

BME levels of satisfaction with their home and local area

Four RSLs have found their BME tenants to be less satisfied with housing services than their White tenants. However, landlords have undertaken a number of measures to address this. One found in their research that BME tenants prefer face-to-face communication with a housing officer (with whom they can get to know and form a relationship with) rather than using a call centre. Their tenants would also like to see a greater proportion of BME people among the RSLs staff as well as their contractors. They want the housing provider to encourage BME job applicants and trainees and they want them to consider resurfacing surgeries too. Another RSL runs equality focus groups, profiles their tenants to look at their different needs, works with advocates and support groups to understand barriers, has executive and Board level champions for equality and diversity, and enacts a service improvement plan in relation to these issues. One RSL is not concerned about BME satisfaction levels being less because most of their tenants are younger and so less likely to be satisfied anyway. And because their total number of BME tenants is low, the figures cannot be considered statistically reliable. Another RSL carries out targeted consultations with BME groups.

RSLs quoted a number of reasons why their BME tenants are less positive. Communication is a key issue: BME have less face-to-face contact and many also face a language barrier. BME tenants also tend to live in south Liverpool which is an area that has older stock and more flats, where it is harder to make contact with people. Cultural issues can be a factor because some BME women do not want to have male contractors working on their properties.

RSLs suggested a number of measures which can increase the levels of satisfaction among BME tenants. They could make more use of the cultural centres and drop-in places relevant to the BME community. They could engage different communities instead of trying to engage with BME as a single group and more work could be done building relationships with housing officers. However, one RSL suggested that effective communication can only be established over a long period of time as trust develops between the communities and the housing providers and if appropriate consultation mechanisms are in place.

Community cohesion and sense of belonging

Only one RSL is aware of problems that the BME community has in settling into a community. They have been working with new BME groups to address this issue and have found that the main problem is around perceived hate crime targeting.

Half of the landlords do provide support to new tenants and half said that they did not. The kind of support offered includes referral to the tenancy support team if more help is needed with particular housing problems or if tenants felt vulnerable in a particular area. One RSL also lets student accommodation and decided, because a high proportion of their intake was from the Chinese community, they would provide translations of key information and interpreters for meetings.

RSLs were split in their awareness of tensions and problems between different ethnic groups living in the same area. Some examples highlighted were anecdotal evidence in the Edge Hill/Wavertree/ Lawrence Road areas of the city where people are not getting on with Roma people who are supposedly drinking and being noisy into the night. The landlord, though, cannot be sure of these claims or even that the group concerned are Roma people. Another RSL said there are tensions between two different Somali communities based on historical tribal divisions and cultural differences. A third example was that Eastern European communities are targeted for “taking jobs”.

RSLs suggest a number of ideas that would help support the integration of the different BME groups/individuals within specific local areas. They could hold local meetings and events that would celebrate diversity. They could also provide community buddies to work with new residents. Landlords could also facilitate local events for all people, provide ongoing tenancy support and, as one respondent suggested, allow for the voluntary integration of different ethnic groups rather than attempt to enforce it.

Finally, respondents suggested a number of key messages that they believe need to be passed on to Liverpool City Council regarding the housing and community issues for BME people. These are as follows:

- A poster campaign to educate people on the effects of racism is needed;
- A citywide approach to tackling misconceptions about BME groups may be effective in tackling hate crime;
- More diversity events are needed to celebrate all cultures and should be run at local level;
- A directory of services and support groups could be published for all communities and direct tenants to the most appropriate service or group;
- BME residents in one scheme are working together to share experiences and create a sustainable community; residents groups have been established and community days organised as a result;
- Good practice from housing providers should be shared between all;

- Attempts could be made to target allocations specifically at BME groups; however, this can be difficult due to the choice based lettings system where people bid for properties via Property Pool;
- Greater co-ordination between landlords will identify reasons for lower satisfaction among BME tenants and how to respond to these issues;
- A climate that would enable large numbers of BME residents to relocate to the north area of the city needs to be developed;
- Understanding why some areas of the city are under represented by BME communities, and widening the range of cultural and community facilities from the traditional L8 area, may increase representation in other areas; and
- Further research will assist identification of BME issues.

Liverpool Housing, Race, and Community Cohesion Study
Registered Social Landlords Survey

Dear Colleague

The Salford Housing and Urban Studies Unit (SHUSU) at the University of Salford has been commissioned by Liverpool City Council to undertake some research around the housing and related issues facing the Black and Minority Ethnic (BME) communities (also known as BRM – Black and Racial Minorities). BME is taken to include anyone from a non-White British background, including those of mixed heritage, Gypsies and Travellers, and migrant workers from Central and Eastern Europe.

As part of the programme of research, we are interested in gathering the views of a range of stakeholders concerning the issues facing by the BME community. We have developed the pro forma below to collect information from Registered Social Landlords who provide housing and related services to the BME communities within the City. We do hope that you can spare the time to complete the questionnaire which should take between 10-15 minutes. All the information provided will be ***treated as confidential*** and will not be passed on to a third party. The findings from this and the other research elements will inform the future development of the Council's Housing Strategy.

The completed questionnaire can either be returned by email to: **XXXX** or alternatively by use of the FREEPOST label attached. The deadline for receipt of the completed questionnaire is **XXXX**.

We greatly appreciate your co-operation.

Yours sincerely

Professor Andy Steele
Research Director

Respondent name: _____

Job title: _____

Organisation: _____

Address of organisation: _____

Postcode: _____

Telephone number: _____

Fax number: _____

Email: _____

Q1. How many properties does the organisation own or manage in Liverpool? Please break down into general needs, sheltered, and supported.

Q2. What percentage of properties are currently occupied by members of the BME communities?

Q3. Please list the main ethnic groups/nationalities or languages spoken that you house:

Q4. In the last 12 months what percentage of re-lets have been to members of the BME communities?

Q5. Where is the majority of your housing stock in Liverpool located (please give postcode areas if possible)?

Q6. Do you provide housing which is targeted at specific types of BME households?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Q7. If **YES**, which types of households?

Section 1: Working with BME communities

Q8. Do you operate your own housing waiting list?

Yes

No

Q9. If **YES**, what proportion of those on the housing waiting list are from a BME background?

Q10. Are there any particular BME groups which you feel are under-represented among your existing tenants or applicants?

Yes

No

Don't know

Q11. If **YES**, which groups and why do you think this is the case?

Q12. Are there any particular BME groups which you feel are over-represented among your existing tenants or applicants?

Yes

No

Don't know

Q13. If **YES**, which groups and why do you think this is the case?

Q14. Do you currently provide housing-related services or support to members of the BME communities to access and maintain their tenancies?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q15. What are the main types of services/support that you provide?

Q16. As an organisation do you undertake any community-based research to identify the housing needs of BME communities?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q17. If YES, please describe:

Section 2: Housing experiences and needs of BME communities

This section focuses on access to and experience of housing within the City.

Q18. What are the main reasons for re-housing among the BME communities?

Q19. Do particular BME groups or individuals experience problems or barriers in accessing your housing?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q20. If YES, how have you been made aware of this?

Q21. If YES, what type of problems or barriers are experienced and by which particular ethnic groups/individuals?

Q22. Does the organisation provide advice or support directed at BME communities to ensure greater access to housing?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q23. If YES, what type of advice or support does the organisation provide?

Q24. What else do you feel could be done to ensure greater access to your housing?

Q25. Are there certain parts of the City which are more popular than others among re-housing applicants from BME communities?

Yes No Don't know

Q26. If YES, which areas and why?

Q27. Are there certain parts of the City which are less popular than others among re-housing applicants from BME communities?

Yes No Don't know

Q28. If YES, which areas and why?

Q29. Does your organisation provide any culturally specific services directed at BME communities?

Yes No Don't know

Q30. If YES, please provide details of the services

Q31. Can you tell us of any good practice within your organisation in responding to the housing needs of BME communities in Liverpool?

Yes No Don't know

Q32. If YES, please describe the nature of the 'good practice.'

Q33. Do you feel that particular BME groups or individuals have housing needs which are currently not being addressed by housing providers in the City?

Yes No Don't know

Q34. If YES, what are they needs and which particular BME groups are affected?

Section 3: BME levels of satisfaction with their home and local area

Both local and national research has shown that members of BME communities are sometimes less satisfied with their housing, the other local services that they receive and the area where they live than members of the White British community.

Q35. Has your organisation found that satisfaction levels among BME communities are lower than that recorded among the White British?

Yes No Don't know

Q36. If **YES**, how has your organisation responded to this difference in satisfaction levels?

Q37. Why do you think that members of BME communities tend to be less positive about these issues than the White British Community?

Q38. What do you think could be done to increase the level of satisfaction with these issues among the BME communities?

Section 4: Community integration and sense of belonging

This section looks at the extent to which BME groups and individuals feel part of the wider community

Q39. Are you aware of any problems that BME groups or individuals experience in settling into their local area?

Yes No Don't know

Q40. If **YES**, what type of problems and which BME groups experience them?

Q41. Does the organisation provide any specific types of support or help for new tenants from BME communities to settle into an area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q42. If YES, what types of support or help is provided?

Q43. Are you aware of any tensions or problems that exist between different ethnic groups living in the same area?

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q44. If YES, what type of tensions or problems have occurred and between which community groups?

Q45. What could be done to support the integration of the different BME groups/individuals within specific local areas?

Section 5: Final comments

Q46. What are the three key messages that you would like to tell Liverpool City Council about the current issues facing the BME communities/individuals living in Liverpool?

1. _____

2. _____

3. _____

Q47. Please feel free to make any additional comments below

Thank you for taking the time to complete this pro forma.

Appendix D: Report on the Findings from the BME Resident Survey

Introduction

Contact was made with a wide range of voluntary and community organisations based in Liverpool to gain their co-operation in distributing a self-completion questionnaire to their membership who could be identified as being from a Black and Minority Ethnic (BME) background. Response to this request was variable with some organisations not having access to a membership list while others were unable to identify the ethnicity of their customers. In some cases a financial incentive was offered to cover any administrative and postage costs associated with distributing the questionnaires. Copies of cover letters, the self-completion questionnaire and return free post envelopes were sent out to those organisations who did agree to collaborate. A total of 148 completed questionnaires were received.

It should be noted that the sample was self-selecting in that SHUSU had no direct control over which community members were contacted by the organisations, nor how representative their customers were in terms of ethnic background or housing circumstance. This needs to be borne in mind in reviewing the findings from the survey reported below.

The table below highlights the range of ethnic groups who participated in the study, using the 2001 Census classification of ethnicity. It reveals that the largest group (32.5%) described themselves as Black Africans followed by 19.7% who referred to themselves as Other and 10.3% who were from a mixed White and Black Caribbean heritage.

Table 1: Ethnicity of respondent

Ethnicity	No.	%
White British	2	1.7
White Irish	1	0.9
Other White	5	4.3
Mixed White & Black Caribbean	12	10.3
Mixed White & Black African	4	3.4
Other Mixed	4	3.4
Indian	1	0.9
Pakistani	2	1.7
Bangladeshi	1	0.9
Other Asian	8	6.8
Black Caribbean	9	7.7
Black African	38	32.5
Other Black	3	2.6
Chinese	4	3.4
Other	23	19.7
Total	117	100.0

Excludes 31 missing cases

For the purposes of further analysis of the survey findings, the ethnicity data has been grouped into four categories: Mixed (those of mixed ethnicity accounting for 17.1%); Asian (including Indian, Bangladeshi, Pakistani and Asian Other – 10.3%); Black (Caribbean, African and Black Other – 42.8%); and Other (White British, White Irish, White Other, Chinese and

Other – 29.9%) although this latter category does include respondents from a very diverse range of communities.

Section 1: Respondent and household characteristics

Introduction

This initial section provides information about those who responded to the questionnaire and their households, including the respondents gender, age and religious beliefs.

Gender and age

Slightly more than half the respondents were male (54.5%) ranging widely across the four ethnic groups from 64.4% (Black) to 30.0% (Mixed).

Table 2: Gender of respondent

Gender	No.	%
Male	78	54.5
Female	65	45.5
Total	143	100.0

Excludes 5 missing cases

The largest proportion of respondents were in the age range 45-54 (28.9%), followed by 17.6% aged 55-64 and then those aged 25-34 (16.2%). Those in the youngest age group (18-24) accounted for 12.0% and 11.2% were aged 65 or over. The Asian group tended to be young with the majority below the age of 34 contrasting with both the Mixed group with the largest proportion being 45-64 and the Other group of who one out of five were aged 65 or over.

Table 3: Age of respondent

Age	No.	%
18 – 24	17	12.0
25 – 34	23	16.2
35 – 44	20	14.1
45 – 54	41	28.9
55 - 64	25	17.6
65 – 74	9	6.3
75 or over	7	4.9
Total	142	100.0

Excludes 6 missing cases

Household composition

One quarter (24.6%) were from households with two parents and one or more children, households containing more than one family unit accounted for 16.7% and single person households represented 25.3%. The smallest group were single parent families (8.7%). Two parent families were a particular feature among the Other ethnic group, multiple households

tended to be Asian while one parent families were noted among the Mixed group and single person households were most likely to be from the Black community.

Table 4: Household composition

Composition	No.	%
One adult under 60	22	15.9
One adult aged 60 or over	13	9.4
Two adults, both under 60	14	10.1
Two adults, one over 60	4	2.9
Three or more adults	15	10.9
1 parent family with children	12	8.7
2 parent family with children	34	24.6
More than one family unit	23	16.7
Other	1	0.7
Total	138	100.0

Excludes 10 missing cases

Religious beliefs

Half of the respondents were Muslims (49.7%), 20.3% were Christians and smaller numbers held other religious beliefs: 7.7% had no religious affiliation and 4.9% preferred not to provide this information.

Table 5: Religious beliefs

Religion	No.	%
None	11	7.7
Christian	29	20.3
Buddhist	7	4.9
Hindu	4	2.8
Jewish	4	2.8
Muslim	71	49.7
Sikh	4	2.8
Other religion	6	4.2
Prefer not to say	7	4.9
Total	143	100.0

Excludes 5 missing cases

Sexual orientation

Three-quarters of the sample were heterosexual (76.5%); 16.2% declined to provide this information.

Table 6: Sexual orientation of the respondent

Sexual orientation	No.	%
Heterosexual	104	76.5
Gay woman	1	0.7
Bisexual	1	0.7
Other	8	5.9
Prefer not to say	22	16.2
Total	136	100.0

Excludes 12 missing cases

Ten of the respondents described themselves as being transgender. This is a larger proportion than might be expected and could be due to a lack of understanding of the question.

Table 7: Transgender

View	No.	%
Yes	10	7.6
No	121	92.4
Total	131	100.0

Excludes 17 missing cases

Health status

Slightly more than one quarter (27.9%) referred to either themselves or a member of their family having a long-term health problem or disability. The prevalence of ill-health was highest among the Asian group and lowest among the Black respondents.

Table 8: Evidence of long-term health problem

View	No.	%
Yes	39	27.9
No	98	70.0
Don't know	3	2.1
Total	140	100.0

Excludes 8 missing cases

Length of residency

The largest proportion of the respondents (29.8%) had lived in Liverpool for 21 or more years, followed by 27.7% who referred to 6-10 years. In contrast, 4.3% had moved to the City within the last 12 months. The more established residents tended to be from the Asian community while the largest proportion of the Mixed group had been living in Liverpool for less than 10 years and for the Black residents, for a period of between 10-15 years.

Table 9: Length of time lived in Liverpool

Length of time	No.	%
Less than 12 months	6	4.3
1-2 yrs	8	5.7
3- 5 yrs	12	8.5
6-10 yrs	39	27.7
11-15 yrs	15	10.6
16-20 yrs	18	12.8
21+ yrs	42	29.8
Don't know / can't remember	1	0.7
Total	141	100.0

Excludes 7 missing cases

With regards to the length of time respondents had been living at their current property, the largest group, equating to slightly more than one third (34.0%) referred to a time period of between 6-10 years, with smaller numbers citing 3-5 years (15.0%) and 16-20 years. In contrast, 7.5% mentioned 21 or more years and 8.8% had moved into their current property within the last 12 months.

The largest proportion of each of the four ethnic groups referred to a period of 6-10 years, ranging from 50.0% (Mixed), 34.0% (Black) to 33.3% (Asian) and 31.4% (Other). In addition, while 20.0% of the Mixed group had moved into their property within the last 12 months this compares with none of those from the Asian group. Similarly, 16.7% of the Asian households had lived at their present home for 21 or more years compared with just 2.9% of those from the Other group.

Table 10: Length of time in current home

Length of time	No.	%
Less than 12 months	13	8.8
1-2 yrs	16	10.9
3- 5 yrs	22	15.0
6-10 yrs	50	34.0
11-15 yrs	16	10.9
16-20 yrs	17	11.6
21+ yrs	11	7.5
Don't know / can't remember	2	1.4
Total	147	100.0

Excludes 1 missing case

Current tenure

Slightly more than half the group (51.4%) reported renting their home from a Housing Association and a further 16.9% rented from the Council or equivalent. A slightly smaller number (15.5%) rented from a private landlord. The proportion of home owners was smaller (9.5%).

With the exception of the Other group (8.6%), around one quarter of the Mixed, Asian and Black respondents lived in a Council property. The Black group were the most likely to rent from a Housing Association (56.0%) and the Other group were the least likely (40.0%). While

25.7% of the Other group were home owners, this compares with 8.0% of the Black respondents.

Table 11: Tenure of current home

Tenure	No.	%
Rent from Council	25	16.9
Rent from a Housing Association	76	51.4
Rent from a private landlord	23	15.5
Owned outright (no mortgage)	4	2.7
Owned (with a mortgage)	10	6.8
Staying with family/friends	10	6.8
Other	-	-
Total	148	100.0

Those renting in the social housing sector were asked to indicate their level of satisfaction with a number of aspects, such as the length of time they had to wait before being offered their current home and the condition of their property.

Six out of ten (62.5%) were positive about the length of time they had had to wait before being offered their current home: 22.9% were dissatisfied. Across the four ethnic groups the proportion who were satisfied ranged from 100.0% (Asian) and 81.2% (Other) to 74.4% (Black) and 53.9% (Mixed). Those from the Mixed ethnic group were the most critical (15.4%).

Those who were dissatisfied were asked to comment on their reasons for this. Typical comments include:

'I've been on the waiting list for too long – it took 5 years to get a house.'

'The system for allocating properties is flawed. I lost 2 properties because of it and only got this one because my local councillor intervened on my behalf.'

'I waited almost 4 years to be rehoused. All my bids were rejected and at last I was granted a very poor house.'

'I wasn't given a choice of housing, then after 9 years they gave us a new house.'

Respondents were less positive about the choice of houses available (46.5%) with 38.4% being negative. While all those of the Asian group who rented a social housing property were positive (100.0%) as were 63.7% of the Black group, this compares with 46.7% of the Other ethnic group and just 14.4% of the Mixed group. Slightly less than half of this latter ethnic group (46.2%) were dissatisfied which compared with none of those from the Asian community.

The following remarks were noted among those who were critical:

'The initial properties offered were either too small or inappropriate as I was in the basement and didn't feel secure enough.'

'My choices weren't respected.'

'With four grown up children living with me, 2 living rooms would have been great but I needed to accept this one.'

Two-thirds (67.0%) were positive about the area where they lived: 23.6% were dissatisfied. The Asian respondents were the most positive (87.5%) while the Mixed group were the least positive (61.6%). None of the Asian respondents were critical compared with 12.4% of the Black group.

Typical negative comments about the area included:

'All the houses nearby are empty and boarded up.'

'Kensington is a very poor area.'

'The area I live in was once a community: the street of all nationalities. Now it's derelict and in very bad condition. The community is now not balanced.'

Less than half (47.1%) were satisfied with the support they had received to help them to move into their current home and 30.6% were critical. While 80.0% of the Other group were positive about the support received, this compares with a figure of 23.1% among the Mixed ethnic group and the same proportion were dissatisfied (23.1%), compared with none of the Asians who were critical:

'Got no support moving in. I had to arrange everything.'

Less than half the group were also positive about the condition of their home (49.4%) with a slightly smaller number (41.6%) being dissatisfied. While 75.0% of the Other group were complimentary this compares with 30.8% of the Mixed ethnic group with 53.9% of these being critical: the comparable proportion among the Asian group was 12.5%. A range of comments were reported among those who were negative including:

'The Council never did the repairs/renovations as promised, just offered this house. This house is not fit for purpose, cold, damp walls etc.'

'Every time you want repairs or upgrading you are told it is not possible because the property is listed. The window frames are falling apart and it is cold in winter but double glazing can't be put in because it is listed.'

'Housing stated that it would be suitable to live in and that the repairs would be done and it wasn't. I wouldn't have let pigs live in it, it was dirty and had mess in the property.'

'I am very dissatisfied with the condition of my home because it is very, very cold and nobody will take care of it. It is costing me a lot to keep it warm.'

'The house was in poor condition when we moved in. The toilet didn't work and no central heating.'

'The condition, considering it was a new build, was poor. For example, the floorboards and skirting don't meet, door handles are ill fitted, ill fitted doors, draughts come through the house, ill fitted windows.'

Respondents tended to be more positive about the extent to which they lived close to other members of their own ethnic group with 65.1% being positive contrasting with 23.3% who were dissatisfied. Across the four ethnic groups the proportion who were positive ranged from 87.5% (Asian) to 41.7% (Mixed) and 25.0% of the latter group were critical compared with none of the Asian respondents.

Analysis of the data also shows that half of those from the Mixed and Other ethnic groups (50.0% and 54.3% respectively) were not positive about any of the 6 features compared with 25.0% of the Asians and 22.0% of the Black group. Similarly, while none of the Mixed group were positive about all six features, this compares with 33.3% of the Asian respondents, 28.0% of the Black group and 20.0% of those in the Other category.

Table 12: Level of satisfaction with renting from the Council or HA

	Very satisfied		Satisfied		Neither		Dissatisfied		Very dissatisfied		Don't know	
	No	%	No	%	No	%	No	%	No	%	No	%
The length of time you waited before you were offered your current home	32	33.3	28	29.2	13	13.5	12	12.5	10	10.4	1	1.0
The choice of properties available to you	22	25.6	18	20.9	12	14.0	21	24.4	12	14.0	1	1.2
The area your home is located in	29	34.1	28	32.9	8	9.4	14	16.5	6	7.1	-	-
The support you received to help you move into your current home	18	21.2	22	25.9	18	21.2	16	18.8	10	11.8	1	1.2
The condition of your home	22	24.7	22	24.7	8	9.0	25	28.1	12	13.5	-	-
Closeness to other members of your ethnic group/community	30	34.9	26	30.2	10	11.6	14	16.3	6	7.0	-	-

The table below considers the level of satisfaction among the private renters in relation to seven features, such as the size of their home and closeness to local facilities. It should be noted that the sample size here is much smaller than that for the social housing questions.

Half the private renters were positive about the choice of properties available in this sector: 22.7% were critical. In relation to the area where their home was located 71.4% were either very satisfied or satisfied and 19.1% were critical. More than half (61.9%) were positive about the size of their home contrasting with 33.3% who were critical.

Six out of ten were positive about the condition of their home: half this figure (30.0%) were negative. A slightly smaller group (52.4%) were positive about the facilities within their home while 28.6% were dissatisfied with this aspect of their home. As regards to being close to other members of their own ethnic group/community, seven out of ten (76.2%) were

positive which compares with 23.8% who were critical. Some of the Black community made particular comments about this:

'It's near my local church, the Black community and ethnic restaurants.'

'It's multi-cultural.'

Finally, 76.2% were satisfied with how close they lived to local facilities, such as shops and a place of worship: 19.1% were critical.

Table 13: Level of satisfaction with renting from a private landlord

	Very satisfied		Satisfied		Neither		Dissatisfied		Very dissatisfied		Don't know	
	No	%	No	%	No	%	No	%	No	%	No	%
The choice of properties available in the private rented sector	6	27.3	5	22.7	5	22.7	2	9.1	3	13.6	1	4.5
The area your home is located in	8	38.1	7	33.3	2	9.5	1	4.8	3	14.3	-	-
The size of your home	7	33.3	6	28.6	1	4.8	3	14.3	4	19.0	-	-
The condition of your home	6	30.0	6	30.0	2	10.0	3	15.0	3	15.0	-	-
The facilities available within your home	6	28.6	5	23.8	4	19.0	3	14.3	3	14.3	-	-
Closeness to other members of your ethnic group/community	9	42.9	7	33.3	-	-	2	9.5	3	14.3	-	-
Closeness to local facilities (such as shops, place of worship etc.)	8	38.1	8	38.1	1	4.8	1	4.8	3	14.3	-	-

Overall, 72.5% were very or fairly satisfied with their home as a place to live compared with 15.2% who were critical. The Asian respondents were the most positive (83.3%), followed by the Other group (77.4%) and then the Black respondents (76.6%) and contrasting with 52.6% of those from the Mixed ethnic group. This latter group were also the most negative (26.3%), contrasting with 6.4% of those from the Other group.

Table 14: Level of satisfaction with home as a place to live

View	No.	%
Very satisfied	37	26.8
Fairly satisfied	63	45.7
Neither	17	12.3
Fairly dissatisfied	14	10.1
Very dissatisfied	7	5.1
Total	138	100.0

Excludes 10 missing cases

Among those who were satisfied the following comments were recorded:

'There seems to be ghettos of groups, pockets of minority groups put together. This can lead to mistrust by other groups, also language skills do not improve as there's no mixing.'

'The area is full of people from my country. They always visit me and that interrupts my children's education.'

'Good neighbours and community,'

'Because it's a safe area.'

'I feel safe in the area and I can go out and leave my house and not worry.'

'It's a nice area.'

Comments about the size of their property were the following:

'The home is very small for us.'

'The house is small and cramped.'

'I would like to have two living rooms. In these new builds there is more garden space than living space.'

'It is quite small and as the rent is quite high it is difficult to change for a better and bigger house.'

The following points were noted about the condition of the property:

'When the last repair is completed, this property will become a comfortable, well completed, up to date stable home. Fire proof with safety, also secure facilities.'

'My home has been refurbished and is almost brand new compared to my neighbours.'

'It has all modern amenities.'

'Condition of house is good in general.'

The negative comments reported included:

'The standard is poor – too cold in winter.'

'It needs a lot of repair work and decoration, pipes leaking etc.'

'My home is very damp and has an on-going leak from the bathroom which is upstairs and the living room downstairs. If I could move soon, I would.'

As regards location, some of the more positive comments included:

'I'm close to the City Centre.'

'I live near the train station, bus stop, hospital and it's easy to get to the GP, supermarket, dentist etc.'

'It's in a good location, close to shops, schools, community centres and close to my work.'

Housing needs

Slightly more than one third felt that they had a housing need which was currently not being met by their current accommodation. This was more likely to reflect the views of the Mixed and Other ethnic groups (31.6% and 30.3% respectively than either the Black (25.5%) or Asian respondents (16.7%).

Those who had an unmet need were particularly likely to refer to receiving a poor repair service from their landlord (62.0% or 31 out of 50); followed by the need for a larger property (20.0% or 10), the need for adaptations to their property (8.0% or 4). Smaller numbers referred to need to move due to health reasons (4.0% or 2) and other reasons (6.0% or 3). Typical comments recorded included the following:

'I can only have one of my two children live with me as the property is too small.'

'I have problems with my legs and it is difficult to go upstairs.'

'I need to move to a bungalow for health reasons but I've been told I can't as my rent is at an unacceptable level of arrears.'

'The repairs take too long.'

'Very poor repairs. The landlord doesn't want to spend money.'

'Windows need repairing, the central heating is not hot and it's very cold.'

'We have researched it and discovered that this house needs over £60,000 worth of repairs/renovations to bring it up to living standards.'

Table 15: Housing needs not being met in your current home

View	No.	%
Yes	51	36.2
No	87	61.7
Don't know	3	2.1
Total	141	100.0

Excludes 7 missing cases

Future intentions

Around three out of ten (29.5%) indicated that they were looking to move home within the next three years and a small group (6.8%) were unsure. The potential mover group was more likely to comprise of those from the Mixed ethnic group (55.5%) compared with one third of the Asian and Black respondents and 25.7% of the Other group. In terms of tenure, 45.8% of current council tenants expect to move compared with 39.1% of those renting privately and 25.0% of those renting from a Housing Association or owner occupiers.

Table 16: Looking to move in the next 3 years

View	No.	%
Yes	43	29.5
No	93	63.7
Don't know	10	6.8
Total	146	100.0

Excludes 2 missing cases

The main reasons for wanting to move home were: the need for a bigger property (35.0% or 14 out of 40); a desire to move out of the area (17.5% or 7); due to their current home being in poor condition (15.0% or 6) and other issues, such as the desire for independence (7.5% or 3), looking to start a family (7.5% or 3) and health reasons (7.5% or 3). The following comments illustrate these points:

'As a young couple we need to move and settle so we can start a family.'

'..because of my health. I need a bathroom downstairs.'

'I need a bigger house and in better condition.'

'I need to be closer to the community area so I can socialise better rather than feeling lonely.'

'I would like to move to a bigger house because my flat is too small for 3 people.'

'I want a warm house.'

'I have been longing to move out of the area where I was born because I'm not happy. My son who is 12 is sometimes told to get back to his own country; he was born here.'

'My family needs to spread out in their own house. We need two living rooms.'

'I'm not satisfied with the house or the area.'

The potential movers were asked what tenure of property they would like if they moved. The two most popular tenures were buying their own home (34.1% or 15 out of 44) or renting from a housing association (34.1%) followed by renting from the Council (20.5%) with just 2.3% preferring to rent in the private sector. Some differences in tenure preferences was evident according to tenure. The Asian group were much more likely to suggest a preference for home ownership while the majority of the Black and Other ethnic

groups preferred renting from a Housing Association while the largest proportion of the Mixed respondents referred to renting from the Council.

It is also interesting to note that only 13.3% of current home owners would want to purchase their next home – the majority would want to rent from a housing association. Similarly, only one fifth of current council tenants would want to remain living in this tenure – 4/10 would prefer to rent from a housing association. In contrast, 4/10 of current housing association tenants would want to remain in this tenure and the same proportion would want to move to a council property.

Table 17: Tenure preference

	No.	%
To buy own home	15	34.1
To rent from the Council	9	20.5
To rent from a Housing Association	15	34.1
To rent from a private landlord	1	2.3
Other	4	9.1
Total	44	100.0

Excludes 3 missing cases

Despite the comments made above which relates specifically to those looking to move, when the question was asked if current renters (both social and private) would be interested in buying their own home, 40.9% stated that they would and a further 8.3% were unsure. While four out of ten of those currently in the social housing sector would want to become home owners, the figure among the private renters was slightly higher at 5 out of 10. Those most likely to want to move into home ownership were from the Black community (56.5%) contrasting with 36.3% of the Asian group.

Table 18: Interested in home ownership

View	No.	%
Yes	54	40.9
No	67	50.8
Don't know	11	8.3
Total	132	100.0

Excludes 5 missing cases

Those who did not wish to become home owners tended to suggest that this was due to affordability (62.0%) rather than being happy living where they were (24.3%), no desire to own their own home (8.5%) or some other reason.

Table 19: Reason not interested in home ownership

Reason	No.	%
I am happy renting my home at the moment	36	24.3
Don't want to own my own home	6	8.5
Can't afford to buy my own home	44	62.0
No suitable properties to buy where I want to live	2	2.8
Other	3	4.2

Views on the neighbourhood

Slightly less than eight out of ten (78.3%) were either very or fairly satisfied with their local area as a place to live while around one out of ten (9.5%) were negative. While the Black respondents tended to be the most positive (88.0%), followed by the Other group (85.7%) and then the Asians (75.0%) this compares with 63.2% of the Mixed ethnic group and indeed 20.1% of this latter group were dissatisfied which contrasts with 2.9% of the Other group.

Table 20: Level of satisfaction with local area as a place to live

View	No.	%
Very satisfied	48	32.7
Fairly satisfied	67	45.6
Neither	18	12.2
Fairly dissatisfied	9	6.1
Very dissatisfied	5	3.4
Total	147	100.0

Excludes 1 missing case

Attachment to the neighbourhood

Respondents were asked about how strongly they felt they belonged to their immediate area. As the table below reveals, 27.2% reported feeling very strong and a further 39.5% suggested fairly strong. In contrast, one fifth (21.1%) felt neutral and 12.2% did not feel that they actually belonged. Views on this issue were not directly related to the length of time they had been living in their neighbourhood. In terms of ethnicity, however, the Mixed ethnic group and those in the Other group were the most likely to be neutral or feel that they did not belong (36.8% and 40.0% respectively), contrasting with 23.8% of the Asian group and 26.0% of the Black group.

Table 21: Sense of belonging to immediate neighbourhood

View	No.	%
Very strongly	40	27.2
Fairly strongly	58	39.5
Neutral	31	21.1
Don't feel I belong here	18	12.2
Total	147	100.0

Excludes 1 missing case

Slightly less than half (48.9%) did feel settled in their area while 32.4% suggested that they were a 'little' settled and 11.5% not settled at all. Those who had been in the area for less than 2 years were only very slightly more likely not to feel settled compared with those who indicated a time frame of more than 10 years. Generally, ethnicity was not found to be an influential factor.

Table 22: Extent to which settled in area

View	No.	%
A lot	68	48.9
A little	45	32.4
Not at all	16	11.5
Don't know	10	7.2
Total	139	100.0

Excludes 9 missing cases

Those who felt settled in the area tended to refer to the area or community being good (31.3% or 23 out of 74), followed by having lived in the area either all their lives or for a long time (14.9% or 11) and the close proximity of family or friends (13.5% or 10). Access to local amenities and facilities was mentioned by a further six respondents (8.1%). In contrast, those who were negative tended to suggest that there was a lack of community spirit or they had little contact with other people in the area (9.5% or 7) and that it was a poor area (4.1% or 3). Some of the individual comments are noted below:

'I've been living in the area for the past 20 years and have lots of family and friends here.'

'I'm happy with the area, close to the shops and the mosque.'

'I know the people. I've been here for a couple of years and feel at home here.'

'If there is no alternative I can live here but can't settle because I don't feel a sense of belonging.'

'People around here are either drug dealers or think themselves too posh to speak to the Irish.'

'There is a good mix of BME people and I feel included.'

'There is no community feeling. People tend to keep themselves to themselves.'

'Where the community is I am happy because I can visit anyone and never feel alone, but the non Muslim neighbours I only say hello to.'

'There are lots of reasons why I'm not happy here racial harassment, ASB and also people keep blocking my drive way so that I can't come and go as I please.'

Social contacts

Respondents were asked to recount how often they met up with their friends, family not living with them and neighbours. In relation to friends, 27.5% stated that they met up with them every day while in contrast, 15.9% suggested either less than once a month or never. While 2.1% of the Black community hardly ever or never meet up with friends, the proportion increases to 11.8% among the Mixed ethnic group and 34.3% among the Other respondents.

While three out of ten (31.4%) met up with family members daily, 33.1% referred to meeting them weekly and 19.9% suggested either less than once a month or never. Nearly half of the Other group hardly ever or never meet up with family (48.5%), followed by 13.5% of the Black group and 6.2% of the Mixed ethnic group.

While over half (60.5%) met up with their neighbours daily or weekly, 28.6% either only met up with them less than once a month or never. Four out of ten of the Mixed ethnic group (40.0%) and 51.5% of those from the Other group never or hardly ever meet up with their neighbours. In contrast the proportion among the Black group was 18.9%.

Table 23: Frequency of meeting up

Frequency	Friends		Family		Neighbours	
	No.	%	No.	%	No.	%
Every day	38	27.5	38	31.4	43	36.1
Every week	62	44.9	40	33.1	29	24.4
Every month	15	10.9	15	12.4	7	5.9
Less than once a month	17	12.3	18	14.9	15	12.6
Never	5	3.6	6	5.0	19	16.0
Not applicable	1	0.7	4	3.3	6	5.0
Total	138	100.0	121	100.0	119	100.0

Slightly more than one out of ten (12.4%) did suggest that they met up with people from outside their area very often and 43.8% stated that this occurred quite often. In contrast, 37.2% rarely met up with such people and 6.6% suggested never.

Those from the Mixed and Other ethnic group were more likely to rarely or never meet up with people from outside their area (44.5% and 37.1%) compared with 35.5% of the Black respondents and 25.0% of the Asian group.

Table 24: How often do you meet up with people outside your local area?

View	No.	%
Very often	17	12.4
Quite often	60	43.8
Not very often	51	37.2
Never	9	6.6
Total	137	100.0

Excludes 10 missing cases

Cultural integration

The general view was that the majority of people agreed that their local area was a place where people from different backgrounds get on well together (72.1%) which compares with 11.5% who felt that this was not the case and a further 13.6% who were unsure. There is little difference in opinion on this issue according to ethnicity.

Those who felt that people did not necessarily get on well together referred to either negative views held by some sections of the community towards other cultures and the lack of interaction between residents from the different community groups, for example:

'Everyone keeps themselves to themselves. They are not very friendly.'

'In Arab culture the married women do not mix, they do not even open the door if someone knocks. Single women do talk and will interact.'

'People of different backgrounds don't always get on due to ignorance, not enough time in the day and not enough community meeting places.'

'In my opinion people are racist.'

'There is a certain snobbery and segregation that does exist. May not be visible to the naked eye but I can assure you it is there and lets not forget the race issues, it is there.'

'You can see and still feel that difference is there in terms of people's language, peer groups and associations.'

'The BNP has a small foothold close by, very worrying and it doesn't help people from different backgrounds to try and get on.'

Table 25: Extent agree or disagree that local area is a place where people from different backgrounds get on well together?

	No.	%
Definitely agree	64	45.7
Tend to agree	37	26.4
Tend to disagree	5	3.6
Definitely disagree	11	7.9
Don't know	19	13.6
Too few people in local area	2	1.4
Everyone is from the same background	2	1.4
Total	140	100.0

Excludes 7 missing cases

One fifth of the sample did feel that people not treating each other with respect and consideration in their local area was a very big problem and a further 7.0% felt that this was a fairly big problem. This compares with 21.0% who felt that it was not a problem at all. Those from the Mixed ethnic group were the most likely to suggest that this was a problem (35.0%), followed by the Asian respondents (33.4%) and contrasting with 22.0% of the Black group and 14.3% of those in the Other ethnic group.

Table 26: Extent of problem with people not treating each other with respect and consideration

	No.	%
A very big problem	28	19.6
A fairly big problem	10	7.0
Not a very big problem	52	36.4
Not a problem at all	30	21.0
Don't know/no opinion	23	16.1
Total	143	100.0

Excludes 5 missing cases

Community tensions

Slightly more than one fifth (22.1%) did feel that there are community tensions in their local neighbourhood between people of different ethnic groups. In contrast 61.4% felt that this was not the case. The existence of community tensions was more likely to be referred to by those from the Other ethnic group (25.7%) followed by the Asian and Black respondents (18.0% in each case) and then those from the Mixed ethnic group (10.0%).

The tensions were generally perceived to be between the White British and other community groups such as young Somali people:

‘Young members of the Somali community and members of the indigenous community seem not to mix very well.’

For others the problem was the White British generally:

‘British people through harassment and racism.’

‘English people.’

At the same time there was also some recognition that there were tensions between different BME groups:

‘Maybe there’s a bit of tension within the BME communities.’

‘Black people – mainly Black scousers and Somalis.’

‘Sometimes there is some conflict between Muslims and Blacks. The Muslims seem to think we should live in very poor housing have poor clothes and jobs. These Muslims also begrudge us having a laugh with our family and friends. They also give us nasty looks and try to push us off the pavement with their prams.’

‘Why are all the people from different ethnic background placed in L8? How do you expect them to integrate and adapt?’

‘Sometimes there are tensions between the Black people and those from Europe, especially over jobs.’

Table 27: Feel there are tensions with your local neighbourhood between people from different ethnic groups

View	No.	%
Yes	32	22.1
No	89	61.4
Don't know	24	16.6
Total	145	100.0

Excludes 3 missing cases

Personal safety

Around four out of ten (42.0%) felt very safe outside in their local area during the day and a further 26.8% felt fairly safe. In contrast, one fifth of the respondents (20.3%) suggested feeling either fairly or very unsafe. Feelings of safety were related to gender with a greater proportion of men feeling unsafe than women (24.0% and 16.9% respectively) and age, with the younger community members more likely to feel unsafe during the day than the older residents. For example, 28.6% of the 18-24 year olds and 33.3% of the 25-33 age group felt unsafe compared with around 15% of those aged 55 or older. Feelings of personal safety during the day tended not to be related to ethnicity

Smaller numbers tended to feel safe outside in their local area after dark 17.0% felt very safe and 25.9% fairly safe. This compares with 41.1% who felt unsafe. Those from the Asian community were the most likely to be fearful (55.5% and contrasting with 24.3% of the Black respondents) as were women (45.5% compared with 36.9% of men) and the younger age groups (54.8% of those under 35 compared with 35.0% of those aged 55 and over).

Table 28: Perception of personal safety when outside in your local area during the day and after dark

	During the day		During the night	
	No.	%	No.	%
Very safe	58	42.0	19	17.0
Fairly safe	37	26.8	29	25.9
Neither	11	8.0	11	9.8
Fairly unsafe	17	12.3	16	14.3
Very unsafe	11	8.0	30	26.8
Don't know	4	2.9	7	6.2
Total	138	100.0	112	100.0

Those who felt unsafe provided details of the areas in Liverpool where this was an issue for them and the type of problems they were aware of. Some of the respondents named specific areas or indeed roads/streets:

'Anfield – there's always shootings day and night by drug dealers.'

'Anfield – full of racism.'

'Bootle – there isn't many Black people.'

'Croxteth – drug addicts and racism.'

'Croxsteth – there are known to be drug gangs and shootings.'

'Dingle/Park Road – racial stabbings.'

'Kensington – drug problems, gangs, racism.'

'Norris Green – youth crime.'

'Toxteth – drugs and racism.'

While other respondents mentioned more general areas:

'L6 – many drunk people in the street at night and sometimes throughout the day – they scare me.'

At the same time, a minority of respondents mentioned that they were fearful when by themselves generally:

'Anywhere – I don't like to go out in the dark as I feel unsafe so I go by taxi. It's not too bad in the day as my neighbours are good.'

'Anywhere when I'm by myself. I worry because it's not safe when you're by yourself especially when it is dark.'

'Outside home area – it makes me nervous.'

A relatively large proportion of the sample (43.0%) reported either themselves or a member of their family having been burgled or experienced a similar crime against their property. The likelihood of experiencing this type of crime varied according to ethnicity: 50.0% of the Asian respondents had experienced it compared with those from the Mixed (40.0%), Black (38.8%) and Other (17.1%) ethnic groups. It was also more likely to be noted by men than women (52.6% and 30.8% respectively). Experience was not found to be related to the age of the respondent.

A smaller number (15.5%) reported that either themselves or a family member had been the victim of a crime against the person (e.g. mugging). Again, members of the Asian community were the most likely to be a victim of this type of crime (30.0%), followed by the Mixed group (25.0%), the Other group (14.3%) and then the Black community (10.2%). Men were also nearly twice as likely to be a victim than women (19.7% and 10.8% respectively). Age was not found to be a factor.

The largest proportion of respondents (44.5%) had been a victim of a hate crime/racism. Six out of ten of the Mixed group (60.0%) had been a victim of this type of crime, followed by 40.0% of the Asians, 38.8% of the Black group and 28.6% of those in the Other ethnic group. While 51.3% reported such an incident the equivalent figure among the women was 41.5%. The likelihood of being a victim of this type of crime was greatest among the 55-64 year olds (64.0%) and generally those older than 64 were less likely to be a victim of this crime than the younger age groups.

Finally, four out of ten (40.1%) had either themselves or members of their family had direct experience of anti-social behaviour. Those from the Mixed ethnic group were the most likely to experience anti-social behaviour (40.0%) followed by the Other group (31.4%), Asian respondents (30.0%) and latterly, those from the Black community (28.6%). For men the figure was 44.7% and women, 35.4%. Generally being a victim of anti-social behaviour was greater among the younger residents (46.1% of the under 34 year olds) than older ones (31.2% of those aged 65 or over).

Slightly more than one quarter of the sample were fearful of being a victim of a crime against their property (86% of this group or 32 out of 37 had not previously been a victim of this crime). Those who were fearful were more likely to be: from the Other group (37.1%) and contrasting with 20.0% of the Asian respondents; female as opposed to male (30.8% and 22.4% respectively); and from the younger age groups, for example 43.8% of the 18-24 year olds were fearful compared with 24.0% of those aged 55-64.

A similar proportion (27.0%) reported being fearful of a crime against their person (90.0% or 36 out of 40 had not previously been a victim of a mugging). Those who were fearful were particularly likely to be; from the Other ethnic group (40.0% as compared with 25.0% of the Asians); female rather than male (33.8% as compared with 23.1%); and from the younger age groups (47.1% of the 18-24 year olds compared with (23.0% of those aged 55-64).

Around one out of five (19.6%) were fearful of being subjected to hate crime/racism (86.2% or 25 out of 29 had not previously been a victim of this type of crime). Those who were the most fearful tended to be: from the Other ethnic group (31.4%) which compares with 8.3% among the Asian respondents; female as opposed to male (23.1% and 17.9% respectively); and in the younger age range (47.1% of the 18-24 year olds compared with 12.0% of those aged 55-64).

Finally, one quarter of the sample reported being fearful of being a victim of anti-social behaviour (88.9% or 32 out of 36 had not experienced this type of crime previously). Neither ethnicity nor age of respondent were influential in the extent to which respondents felt fearful of this crime, however, women were twice as likely to be fearful than men (33.8% as compared with 17.9% of men).

Table 29: Experience and fear of crimes

	Experienced		Fearful of	
	No.	%	No.	%
Crime against your property (e.g. burglary)	61	43.0	37	26.1
Crime against the person (e.g. mugging)	22	15.5	40	27.0
Hate crime/racism	66	44.5	29	19.6
Anti-social behaviour	57	40.1	36	24.3

Finally, respondents were asked to comment upon whether there were any other issues or problems affecting their local community and 27.5% felt that there were.

The type of problems mentioned included: the lack of employment opportunities in the area and specifically the link with anti-social behaviour (11 out of 33 mentioned this): ‘No employment for younger members of the community’, unemployment and poverty with too

many people on income support/benefits’, ‘not many programmes or help for young people and not many jobs or opportunities for young people or people from a BME background’: the issue of drugs (7) ‘drug and alcohol addiction’, ‘there is a bad problem with drug selling but this person has now been put in jail so the area is now safer, even for children to play out’; the general problem of anti-social behaviour in the area was also mentioned by six respondents: ‘the behaviour of some of the Somali youths’, ‘fighting between youths’, ‘youths causing damage to paint work/graffiti’; the level of crime generally (3) ‘there are issues with guns being shot in the area by Somalis and gang fights by the same people coming into our community from outside the area’; and a lack of facilities in the neighbourhood ‘Too many fast food shops, no walk-in health centre, no community cohesion.’

Table 30: Other issues affecting local community

View	No.	%
Yes	39	27.5
No	82	57.7
Don't know	21	14.8
Total	142	100.0

Excludes 6 missing cases

Liverpool Housing, Race, and Community Cohesion Study

Black and Minority Ethnic Resident survey

Dear Resident

The Salford Housing and Urban Studies Unit (SHUSU) at the University of Salford has been asked by Liverpool City Council to undertake some research around the housing and related issues facing the Black and Minority Ethnic (BME) communities (also known as BRM – Black and Racial Minorities) in Liverpool. BME is taken to include anyone from a non-White British background, including those of mixed heritage, Gypsies and Travellers and migrant workers from Central and Eastern Europe.

As part of this research, we are keen to gather the views of local BME residents. We are particularly interested in your views on accessing housing within the City, your experience of housing, any housing needs you may have together with your housing aspirations.

We do hope that you can spare the time to complete the questionnaire below which should take between 10-15 minutes. All the information provided will be ***treated as confidential*** and will not be passed on to a third party. All completed and returned questionnaires will be entered into a **PRIZE DRAW** to win **£100** of shopping vouchers.

The completed questionnaire can be returned in the FREEPOST envelope provided (no stamp is required). The deadline for receipt of the completed questionnaire is **XXXX**.

We greatly appreciate your co-operation.

Yours sincerely

Professor Andy Steele
Research Director

Section 1: Your Current Home

Q1. How long have you lived in Liverpool?

TICK ONE BOX ONLY ✓

- | | | | | | |
|---------------------|--------------------------|---------------------------|--------------------------|-------------|--------------------------|
| Less than 12 months | <input type="checkbox"/> | 1-2 years | <input type="checkbox"/> | 3-5 years | <input type="checkbox"/> |
| 6-10 years | <input type="checkbox"/> | 11-15 years | <input type="checkbox"/> | 16-20 years | <input type="checkbox"/> |
| 21 or more years | <input type="checkbox"/> | Don't know/can't remember | <input type="checkbox"/> | | |

Q2. How long have you lived in your current home?

TICK ONE BOX ONLY ✓

- | | | | | | |
|---------------------|--------------------------|---------------------------|--------------------------|-------------|--------------------------|
| Less than 12 months | <input type="checkbox"/> | 1-2 years | <input type="checkbox"/> | 3-5 years | <input type="checkbox"/> |
| 6-10 years | <input type="checkbox"/> | 11-15 years | <input type="checkbox"/> | 16-20 years | <input type="checkbox"/> |
| 21 or more years | <input type="checkbox"/> | Don't know/can't remember | <input type="checkbox"/> | | |

Q3. Is your current home:

TICK ONE BOX ONLY ✓

- Rented from the Council GO TO Q4
 - Rented from a Housing Association GO TO Q4
 - Rented from a private landlord GO TO Q6
 - Owned outright (without a mortgage) GO TO Q8
 - Owned (with a mortgage) GO TO Q8
 - Staying with family/friends GO TO Q8
 - Other (please explain below) GO TO Q8
-

ONLY ANSWER Q4 & Q5 IF YOU RENT FROM THE COUNCIL/HOUSING ASSOCIATION

Q4. From your experience how would you rate the following:

TICK ONE BOX ONLY FOR EACH OF THE FOLLOWING ✓

	Very satisfied	Satisfied	Neither	Dissatisfied	Very dissatisfied	Don't know
a) The length of time you waited before you were offered your current home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The choice of properties available to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The area your home is located in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The support you received to help you move into your current home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) The condition of your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Closeness to other members of your ethnic group/community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q5. If you are **dissatisfied** with any of the above, please give your reasons below:

NOW GO TO Q8

ONLY ANSWER Q6 & Q7 IF YOU RENT FROM A PRIVATE LANDLORD

Q6. From your experience how would you rate the following:

TICK ONE BOX ONLY FOR EACH OF THE FOLLOWING ✓

	Very satisfied	Satisfied	Neither	Dissatisfied	Very dissatisfied	Don't know
a) The choice of properties available in the private rented sector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The area your home is located in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The size of your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The condition of your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) The facilities available within your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Closeness to other members of your ethnic group/community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Closeness to local facilities (such as shops, place of worship etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q7. If you are **dissatisfied** with any of the above, please give your reasons below:

Q8. How satisfied or dissatisfied are you with your home as a place to live?

TICK ONE BOX ONLY ✓

Very satisfied	Fairly satisfied	Neither	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q9. Why do you say that? **Please explain below**

Q10. Do you have any housing needs which are not being met by your current home?

Yes	No	TICK ONE BOX ONLY ✓
<input type="checkbox"/>	<input type="checkbox"/>	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GO TO Q11	GO TO Q12	GO TO Q12

Q11. If **YES**, what are these needs? **Please write below**

Q12. Are you looking to move from your current home in the next 3 years?

Yes	No	TICK ONE BOX ONLY ✓
<input type="checkbox"/>	<input type="checkbox"/>	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GO TO Q13	GO TO Q15	GO TO Q15

Q13. If **YES**, why? **Please write below**

Q14. What tenure of property would you want?

TICK ONE BOX ONLY ✓		
To buy own home	<input type="checkbox"/>	To rent from the Council <input type="checkbox"/>
To rent from a housing association	<input type="checkbox"/>	To rent from a private landlord <input type="checkbox"/>
Other (please explain opposite)	<input type="checkbox"/>	<hr/>

Q15. If you are currently renting your home would you be interested in buying your own home?

Yes	No	TICK ONE BOX ONLY ✓
<input type="checkbox"/>	<input type="checkbox"/>	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GO TO Q17	GO TO Q16	GO TO Q17

Q16. If **NO**, why?

TICK ALL THAT APPLY ✓

I am happy renting my home at the moment

Don't want to own my own home

Can't afford to buy my own home

No suitable properties to buy where I want to live

Other (please explain opposite)

Section 2: Your Neighbourhood

Q17. Overall, how satisfied or dissatisfied are you with your local area as a place to live?

TICK ONE BOX ONLY ✓

Very satisfied

Fairly satisfied

Neither

Fairly dissatisfied

Very dissatisfied

Q18. How strongly do you feel you belong to your immediate neighbourhood?

TICK ONE BOX ONLY ✓

Very strongly

Fairly strongly

Neutral

Don't feel I belong here

Q19. To what extent do you feel that you have settled into this area?

TICK ONE BOX ONLY ✓

A lot

A little

Not at all

Don't know

Q20. Why do you say that? **Please write below**

Q21. How frequently would you say that you meet up with the following groups?

TICK ONE BOX FOR EACH ONLY ✓

	Every day	Every week	Every month	Less than once per month	Never	Not applicable
Friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family members not living with you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighbours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q22. How often do you meet up with people who live outside this local area?

TICK ONE BOX ONLY ✓

Very often	Quite often	Not very often	Never
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q23. To what extent do you agree or disagree that your local area is a place where people from different backgrounds get on well together?

TICK ONE BOX ONLY ✓

Definitely agree	<input type="checkbox"/>	GO TO Q25
Tend to agree	<input type="checkbox"/>	GO TO Q25
Tend to disagree	<input type="checkbox"/>	GO TO Q24
Definitely disagree	<input type="checkbox"/>	GO TO Q24
Don't know	<input type="checkbox"/>	GO TO Q25
Too few people in local area	<input type="checkbox"/>	GO TO Q25
Everyone is from the same background	<input type="checkbox"/>	GO TO Q25

Q24. If **DISAGREE**, why do you say that? **Please write below**

Q25. In your local area, how much of a problem do you think there is with people not treating each other with respect and consideration?

TICK ONE BOX ONLY ✓

- | | | | |
|------------------------|--------------------------|----------------------|--------------------------|
| A very big problem | <input type="checkbox"/> | A fairly big problem | <input type="checkbox"/> |
| Not a very big problem | <input type="checkbox"/> | Not a problem at all | <input type="checkbox"/> |
| Don't know/no opinion | <input type="checkbox"/> | | |

Q26. Do you feel there are tensions with your local neighbourhood between people from different ethnic groups?

TICK ONE BOX ONLY ✓

- | | | |
|--------------------------|--------------------------|--------------------------|
| Yes | No | Don't know |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| GO TO Q27 | GO TO Q28 | GO TO Q28 |

Q27. If **YES**, which ethnic groups? **Please write below**

Q28. How safe or unsafe do you feel when outside in your local area:

- a) during the day; and
b) after dark

TICK ONE BOX FOR EACH ONLY ✓

- | | a) During the day | b) After dark | |
|---------------|--------------------------|--------------------------|------------------|
| Very safe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q30 |
| Fairly safe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q30 |
| Neither | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q30 |
| Fairly unsafe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q29 |
| Very unsafe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q29 |
| Don't know | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q30 |

Q29. If **FAIRLY UNSAFE** or **VERY UNSAFE**, which areas are more unsafe and why do you say that?

PLEASE WRITE IN BELOW

Area unsafe

Reason why

1.

2.

3.

Q30. Have you or a member of your family experienced and/or are fearful of any of the following?

TICK ALL THAT APPLY ✓

	Experienced	Fearful of
Crime against your property (<i>e.g. burglary</i>)	<input type="checkbox"/>	<input type="checkbox"/>
Crime against the person (<i>e.g. mugging</i>)	<input type="checkbox"/>	<input type="checkbox"/>
Hate crime/racism	<input type="checkbox"/>	<input type="checkbox"/>
Anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>

Q31. Are there any other issues or problems which are affecting the local community?

TICK ONE BOX ONLY ✓

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GO TO Q32	GO TO Q33	GO TO Q33

Q32. If **YES**, what are they? **Please write below**

Section 3: About Yourself

Q33. Are you?

TICK ONE BOX ONLY ✓

- Male
- Female

Q34. How old are you?

TICK ONE BOX ONLY ✓

- | | | | | | |
|-----------|--------------------------|---------|--------------------------|---------|--------------------------|
| 18 - 24 | <input type="checkbox"/> | 25 - 34 | <input type="checkbox"/> | 35 - 44 | <input type="checkbox"/> |
| 45 - 54 | <input type="checkbox"/> | 55 - 64 | <input type="checkbox"/> | 65 - 74 | <input type="checkbox"/> |
| 75 & over | <input type="checkbox"/> | | | | |

Q35. How would you describe the composition of your household?

TICK ONE BOX ONLY ✓

- One adult under 60
- One adult aged 60 or over
- Two adults both under 60
- Two adults, at least one 60 or over
- Three or more adults (16 or over)
- 1-parent family with child/ren (at least one under 16)
- 2-parent family with child/ren (at least one under 16)
- More than one family unit
- Other (**please explain below**)

Q36. What is your religion?

TICK ONE BOX ONLY ✓

- | | | | |
|-------------------|--------------------------|--|--------------------------|
| None | <input type="checkbox"/> | Christian (<i>all denominations</i>) | <input type="checkbox"/> |
| Buddhist | <input type="checkbox"/> | Hindu | <input type="checkbox"/> |
| Jewish | <input type="checkbox"/> | Muslim | <input type="checkbox"/> |
| Sikh | <input type="checkbox"/> | Any other religion | <input type="checkbox"/> |
| Prefer not to say | <input type="checkbox"/> | | |

Q37. How would you describe your sexual orientation?

TICK ONE BOX ONLY ✓

- | | | | |
|--------------|--------------------------|-------------------|--------------------------|
| Heterosexual | <input type="checkbox"/> | Gay man | <input type="checkbox"/> |
| Gay woman | <input type="checkbox"/> | Bisexual | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | Prefer not to say | <input type="checkbox"/> |

Q38. Do you identify yourself as transgender?

For the purpose of this question “transgender” is defined as an individual who lives, or wants to live, in the gender opposite to that they were assigned at birth

TICK ONE BOX ONLY ✓

- | | | | |
|-----|--------------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

Q39. Does anyone in your household have any long-term illness, health problems or disability which limits their daily activities or the work they can do, including any problems which are due to old age?

TICK ONE BOX ONLY ✓

- | | | | | | |
|-----|--------------------------|----|--------------------------|------------|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|------------|--------------------------|

Q40. Any other comments? **Please write below**

Q41. To which of these groups do you consider you belong?

TICK ONE BOX ONLY ✓

White

- British
- Irish
- Any other White background
- (Please tick and write in opposite)**

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background
- (Please tick and write in opposite)**

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background
- (Please tick and write in opposite)**

Black or Black British

- Caribbean
- African
- Any other Black background
- (Please tick and write in opposite)**

Other

- Chinese
- Other
- (Please tick and write in opposite)**

Thank you

Appendix E: Report of the Findings from the Views of the Established Communities in Liverpool towards New & Emerging Communities

Introduction

Community interviewers were recruited and trained to identify individuals who had been living in their local area for a minimum of ten years and who would be regarded as representing the settled community. A total of 200 interviews from various locations across Liverpool were undertaken: the largest proportion of respondents (23.9%) being from the L6 postcode area, followed by 21.8% (L8), 18.6% (L7), 11.7% (L4), 9.0% (both L5 and L24) and smaller numbers from the L15 and L11 areas (4.8% and 1.1% respectively). To aid meaningful analysis of the data, the area data has been regrouped into four categories: L4/L5 (accounting for 20.7% of the sample); L6/L7 (42.6%); L8 (21.8%); and the remaining postcode areas have been grouped under ‘Other’ (14.9%).

In terms of the ethnicity of the respondent, 81.5% of the residents described themselves as White British with the remainder being from a BME background the largest proportion of whom were White Irish (equating to 4.0% of the sample), Black Africans (3.5%) and mixed White and Black African (2.0%) and Indian (2.0%). The data has been reclassified into two groups for further analysis: White British (81.5%) and BME (18.5%).

Table 1: Ethnicity of respondent

Ethnicity	No.	%
White British	163	81.5
White Irish	8	4.0
Other White	2	1.0
Mixed White Black Caribbean	1	0.5
Mixed White Black African	4	2.0
Other Mixed	3	1.5
Indian	4	2.0
Other Asian	1	0.5
Black Caribbean	2	1.0
Black African	7	3.5
Other Black	2	1.0
Other	3	1.5
Total	200	100.0

Looking specifically at the ethnic makeup of the different postcode areas, the table below shows that 96.4% of those from the Other areas were White British contrasting with 70.7% of those from L8. Hence, at least one quarter of those from L8 and L6/7 were from a BME background (29.3% and 25.0% respectively).

Table 2: Ethnic group by postcode area

Ethnic group	Postcode area							
	L4/L5		L6/L7		L8		Other	
	No.	%	No.	%	No.	%	No.	%
White British	35	89.7	60	75.0	29	70.7	27	96.4
BME	4	10.3	20	25.0	12	29.3	1	3.6
Total	39	20.7	80	42.6	41	21.8	28	14.9

The length of time the respondents had been living in their neighbourhood ranged from 6-10 years (24.0%) and 21 or more years (23.5%) to two or fewer years (1.5%). In addition, 20.0% reported having been born in the neighbourhood.

In terms of postcode area and length of residency in the neighbourhood:

- L4/5 – 28.2% were born in the area and 23.1% each referred to 21 or more years and 11-15 years: 2.6% had moved into the neighbourhood within the last 2 years;
- L6/7 – 7.5% were born in the neighbourhood, 25.0% had been living there for 6-10 years and 22.5% for 21 or more years: 2.4% mentioned less than 2 years;
- L8 – 39.0% were born in the area and 26.8% mentioned 6-10 years and 17.1% 11-15 years: none had been in the area for less than 2 years; and
- Other – 14.3% were born in the area and 39.3% had been living in the neighbourhood for 21 or more years with 28.6% referring to a time frame of between 6-10 years: none had been in the area for less than 2 years.

Table 3: Length of time lived in the neighbourhood

Length of time	No.	%
Less than 12 months	1	0.5
1-2 yrs	2	1.0
3- 5 yrs	6	3.0
6-10 yrs	48	24.0
11-15 yrs	30	15.0
16-20 yrs	22	11.0
21+ yrs	47	23.5
Born in the neighbourhood	40	20.0
Don't know / can't remember	4	2.0
Total	200	100.0

Section 1: Respondent and household characteristics

Introduction

This initial section provides demographic details about the respondent and their household.

Gender and age of respondent

Slightly more than half the sample as a whole were women.

Table 4: Gender of respondent

Gender	No.	%
Male	92	46.2
Female	107	53.7
Total	199	100.0

Excludes 1 missing value

The age profile of the sample was such that the largest group (23.9%) were aged 35-44, followed by 22.9% in the 45-54 age range. In contrast, 12.7% were aged 65 or over including 5.1% aged 75 or over: 8.6% were in the youngest age range 18-24.

Table 5: Age of respondent

Age	No.	%
18 – 24	17	8.6
25 – 34	33	16.8
35 – 44	47	23.9
45 – 54	45	22.9
55 - 64	29	14.7
65 – 74	15	7.6
75 or over	10	5.1
Total	196	100.0

Excludes 4 missing value

Household composition

Households with two adults and children accounted for 36.0% followed by 17.2% where the household consisted of two adults both under 60 years of age. Single person households equated to 22.7% with similar numbers of the respondents aged below 60 (11.6%) and 60 or over (11.1%).

Table 6: Household composition

Composition	No.	%
One adult under 60	23	11.6
One adult aged 60 or over	22	11.1
Two adults, both under 60	34	17.2
Two adults, one over 60	19	9.6
Three or more adults	1	0.5
1 parent family with children	4	2.0
2 parent family with children	71	36.0
More than one family unit	20	10.1
Other	3	1.5
Total	197	100.0

Excludes 3 missing value

Religion

While the vast majority (72.8%) were Christians, the sample also included Muslims (2.0%) and small numbers referring to other religious beliefs. A significant group (17.5%) reported having no religious beliefs and a small group (4.0%) declined to provide this information.

Table 7: Religious beliefs

Religion	No.	%
None	35	17.5
Christian	145	72.8
Buddhist	1	0.5
Jewish	1	0.5
Muslim	4	2.0
Sikh	1	0.5
Other religion	4	2.0
Prefer not to say	8	4.0
Total	199	100.0

Excludes 1 missing value

Sexuality

Slightly more than nine out of ten (92.2%) described themselves as heterosexual and 5.6% preferred not to answer this question. Just two people (1.1%) categorised themselves as being transgender.

Table 8: Sexual orientation

Sexual orientation	No.	%
Heterosexual	179	92.2
Gay woman	1	0.5
Bisexual	2	1.0
Other	1	0.5
Prefer not to say	11	5.6
Total	194	100.0

Excludes 6 missing value

Table 9: Transgender

Transgender	No.	%
Yes	2	1.1
No	191	98.9
Total	193	100.0

Excludes 7 missing value

Long-term health problem

Three out of ten of the respondents (30.3%) reported that at least one member of their household had a long-term health problem

Table 10: Household member with long term health problem

Long term health problem	No.	%
Yes	58	30.3
No	133	69.6
Total	191	100.0

Excludes 9 missing value

Section Two: About your neighbourhood and community

Introduction

This second section provides information about respondents' views of their neighbourhood.

Inward migration

Around eight out of ten (79.8%) reported noticing an increase in the number of people from other countries moving into the neighbourhood and a further 5.5% were unsure (see table) and this was more likely to be the view expressed among those from L6/7 (84.8%), Other areas (78.6%), followed by those from L8 (78.0%) and L4/5 (71.8%). One out of ten of those from the Other areas (10.7%) were unsure about this issue compared with 2.5% of those from L6/7.

Table 11: Noticed an increase in immigration in the neighbourhood

View	No.	%
Yes	159	79.8
No	29	14.5
Don't know	11	5.5
Total	199	100.0

Excludes 1 missing value

Those who felt that there had been an increase in inward migration were asked to comment upon which countries the new arrivals came from. By far the most common group identified were those from Eastern and Central Europe (A2 and A8 countries) which accounted for

67.8%. The second largest group included those from a wide range of individual countries as well as including comments such as ‘from all over’ (15.4%). Smaller numbers cited Black Africans (7.7%) and 3.5% specifically mentioned Somalis, Indians (3.5%) and Pakistanis (2.1%). By far the most common group among the migrant workers from the EU were the Polish, followed by the Czechs and then the Latvians.

Looking at the country of origin of the new immigrants according to postcode area:

- L4/5 – 65.4% from the EU, 15.4% were from other countries and 11.5% were Black Africans;
- L6/7 – 70.8% were from the EU A2 and A8 countries, 15.4% were from Other areas and 9.2% were Black African;
- L8 – this postcode area had the greatest diversity of countries represented – 48.3% were from the EU, 24.1% from Other areas, 13.8% Somali, 6.9% Pakistani, 3.4% both Indian and Black African; and
- Other – 87.8% were from the EU with much smaller numbers of Black Africans, Pakistanis and those from Other areas (4.3% in each case).

Community integration

Each respondent was presented with five statements and asked to indicate the extent to which they agreed or disagreed with each. In relation to the first statement ‘There are too many people from other countries moving into the area’, 27.5% said that they agreed compared with 36.4% who disagreed. The proportion from each postcode area who agreed that there were too many people from other countries living in their area ranged from 36.3% (L6/7) and 32.1% (L4/5) to 18.2% (Other) and 15.6% (L8). Furthermore, the White British were more likely to agree with this statement than the BME respondents (28.3% and 25.0% respectively). The longer the respondent had been living in the neighbourhood the more likely they were to feel that there were too many people from other countries moving into the area: 39.0% among those who had lived there for 21 or more years compared with 28.2% who mentioned 11-20 years and 19.0% 10 years or less.

Table 12: View on too many people from other countries moving to the area

View	No.	%
Strongly agree	13	8.1
Agree	31	19.4
Neither	50	31.4
Disagree	54	33.9
Strongly disagree	4	2.5
Don't know	7	4.4
Total	159	100.0

Excludes 41 missing value

The second statement was ‘People from other countries do not understand the customs and practices of people already living in the neighbourhood’ and slightly more than three out of ten (30.7%) agreed and a further 25.1% were unsure. Those from a BME background were the most likely to agree (37.5%) which compares with 29.1% among the White British sample

group. Those who agreed also included 40.6% of those from L8, 32.8% of the L6/7 residents, and 25.0% of those from L4/5 postcodes and latterly, 22.7% of those from Other areas. The more long-term residents were more likely to agree with this statements than those who had moved into the neighbourhood more recently: 31.4% among those who had lived there for 21 or more years, 30.7% 11-20 years and 21.7% among the less than 10 years.

Table 13: View on people from other countries do not understand the customs of those already in the neighbourhood

View	No.	%
Strongly agree	12	7.5
Agree	37	23.2
Neither	40	25.1
Disagree	39	24.5
Strongly disagree	5	3.1
Don't know	26	16.3
Total	159	100.0

Excludes 41 missing value

Slightly more than one third (35.1%) agreed that people from different countries do not mix well with people already living in the area: 23.8% were unsure. The BME respondents were more likely to agree with this statement than the White British (40.6% as compared with 33.9%). Those from L6/7 were also the most likely to agree, followed by smaller but similar proportions among those from L4/5 (28.6%), L8 (28.1%) and Other areas (27.3%). Again, the more established residents were more likely to agree than those who had been in the neighbourhood for a shorter period of time: 39.0% of those who referred to 21 or more years, 41.0% of those who cited 11-20 years and 21.7% of those who had lived there for less than 10 years.

Table 14: View on people from other countries not mixing with those already in the neighbourhood

View	No.	%
Strongly agree	13	8.1
Agree	43	27.0
Neither	38	23.8
Disagree	44	27.6
Strongly disagree	6	3.7
Don't know	15	9.4
Total	159	100.0

Excludes 41 missing values

At the same time, however, only 5.0% of the respondents agreed with the contention that people from other countries cause problems for people living in the neighbourhood. Among the White British 5.6% compared with 3.1% among the BME sample. The proportion from each postcode area who agreed ranged from 9.0% (L6/7) to 3.6% (L4/5), 3.1% (L8) and none of those from the Other areas. Views on this issue were not related to the length of time they had been living in the neighbourhood.

Table 15: View on people from other countries causing problems for those already in the neighbourhood

View	No.	%
Strongly agree	4	2.5
Agree	4	2.5
Neither	18	11.3
Disagree	80	50.6
Strongly disagree	32	20.2
Don't know	20	12.6
Total	158	100.0

Excludes 41 missing value

Similarly, the vast majority (67.6%) agreed with the statement that 'It is good to have a mix of people in the neighbourhood from different communities: just 1.2% disagreed, although 22.7% neither agreed nor disagreed. The BME respondents were much more likely to agree (87.5%) than the White British as were those from the L8 area (81.2%) followed by those from the Other areas (71.4%), L6/7 (70.1%) and contrasting with just 46.4% of those from the L4/5 postcodes. Those who had been living in the area for least amount of time (less than 10 years) were the most likely to disagree with this statement (76.0%) compared with 51.2% of those who had been resident for 11-20 years and 70.0% of the long-standing group (21 or more years).

Table 16: View on whether it is good to have a mix of people in the neighbourhood from different countries

View	No.	%
Strongly agree	26	16.4
Agree	81	51.2
Neither	36	22.7
Disagree	1	0.6
Strongly disagree	1	0.6
Don't know	13	8.2
Total	158	100.0

Excludes 41 missing value

The majority view was that the local area was a place where people from different backgrounds get on well together (58.5) while 16.5% felt that this was not the case and 22.5% were unsure. Length of time living in the neighbourhood was not found to be an influential factor, while the ethnicity of the respondent was: 67.6% of the BME group agreed that there was positive integration compared with 55.4% of the White British. Those who tended to be the most positive were also more likely to come from the L8 postcode area (70.7%) compared with 58.5% from L6/7, 57.2% (Other) and just 35.9% among those from L4/5.

Table 17: View on whether local area is a place where people from different backgrounds get on well together

View	No.	%
Definitely agree	23	11.5
Tend to agree	94	47.0
Tend to disagree	26	13.0
Definitely disagree	7	3.5
Don't know	45	22.5
Too few people in the area	5	2.5
Everyone is from the same background	-	-
Total	200	100.0

Slightly more than one fifth (22.5%) felt that there was a very big problem in their local area of people not treating each other with respect and consideration and a further 19.0% suggested that this was a fairly big problem. This contrasts with 37.0% who felt that it was not a very big problem and 11.5% who felt that it was not a problem at all.

Those from the L4/5 area were the most likely to suggest that this was a problem, followed by 42.9% of the Other area residents, 37.5% of those from L6/7 and 36.6% of the L8 group. It was also more likely to be seen as a problem among the White British respondents (43.0%) rather than the BME group (35.1%). It is also notable that 47.1% of those who had reported an increase in people from other countries coming to live in their neighbourhood also felt that the lack of mutual respect was an issue which compares with 13.7% who had not witnessed such inward migration.

Table 18: Problem with people not treating each other with respect and consideration

View	No.	%
A very big problem	45	22.5
A fairly big problem	38	19.0
Not a very big problem	74	37.0
Not a problem at all	23	11.5
Don't know / no opinion	20	10.0
Total	200	100.0

Personal safety

The majority of people (56.0%) reported feeling very safe outside in their local area during the daytime and a further 35.0% felt fairly safe. In contrast 5.0% reported feeling either very or fairly unsafe. The proportion of respondents from the different postcode areas of Liverpool who felt safe (very or fairly) ranged from 95.1% (L8) and 90.0% (L6/7) to 89.3% (Other) and 87.2% (L4/5). There was little difference in perception according to ethnicity (White British – 90.8% and BME – 91.1%) or gender (male – 90.2% and females – 91.6%).

Table 19: View on personal safety in the daytime

View	No.	%
Very safe	112	56.0
Fairly safe	70	35.0
Neither	8	4.0
Fairly unsafe	4	2.0
Very unsafe	6	3.0
Don't know	0	0.0
Total	200	100.0

A different picture emerges in relation to residents' feelings of safety outside in their area after dark: while the majority (60.5%) still felt very or fairly safe, 27.5% felt unsafe, including 18.0% who felt very unsafe. A slightly larger proportion of the White British felt unsafe (28.2%) compared with the BME sample group (24.3%).

Those from the L6/7 postcode area were much more likely to suggest that they felt unsafe at night (40.0%) compared with those from L4/5 (25.7%) and L8 (17.1%) and particularly contrasting with 10.7% of those from the Other areas. The issue of whether they had felt that there had been an increase in people from different countries coming to live in their neighbourhood was not influential with 27.7% who had witnessed an increase suggesting that they were fearful of being out at night compared with 27.5% who had not witnessed an increase. Women were more likely to feel unsafe at night than men (32.7% and 21.7% respectively).

Table 20: View on personal safety at night

View	No.	%
Very safe	47	23.5
Fairly safe	74	37.0
Neither	17	8.5
Fairly unsafe	19	9.5
Very unsafe	36	18.0
Don't know	7	3.5
Total	200	100.0

Those who reported feeling fairly or very unsafe in their local area were asked to indicate if there were any particular areas where they felt especially unsafe and the reasons for this. Those from the L4/5 postcode area tended to refer to specific streets and the more commonly referred to problems were around young people and gangs on the streets and issues of drugs and verbal abuse:

'Anfield, Breck Rd, Lower Breck Rd - gangs on streets, shouting, abuse, drug problems.'

'Breck Rd - groups of local youths on the streets, biting each other and drugs.'

'Breck Rd - I come home from work at 1am and don't feel safe because of the local gangs.'

'Wolton - drunk aggressive people walking out of the pubs, prostitution, drugs, gangs of youths.'

Other more general comments were made rather than being restricted to specific areas:

'Generally gangs on the streets.'

'Kids on bikes behave very badly, kicking stuff, breaking the windows, robbing cars, set houses on fire.'

Similarly, the majority of those from the L6/7 postcode area also tended to refer to specific streets/areas where they felt particularly unsafe with Sheil Road tended to be characterised as having problems with drugs, alcohol, and prostitution:

'Sheil Rd - Prostitution, drug problem.'

'Sheil Rd - Prostitution, drunken people and drug problems.'

'Sheil Road - Prostitution, drugs, robbery.'

The Kensington and Toxteth areas were also referred to by a small number of respondents:

'Kensington, Toxteth - gangs, drugs and crime.'

In addition, more general comments were made regarding the type of problems they experienced rather than referring to specific areas:

'All over - gangs on the street, youths.'

'Its young kids that are the problem, doesn't matter what nationality they are.'

Generally fewer respondents tended to cite areas in the L8 postcode area which they felt were unsafe (8 comments in total) compared with L4/5 (56) and L6/7 (29) and again, the general problems tended to be related to young people, nuisance and drugs:

'All L8 - after dark generally I don't feel safe, gangs of local boys causing problems.'

'All of L8 - ASB, drugs.'

'Granby St - Young people hanging around the streets with their dogs.'

'Toxteth - because the estate I live on is very unsafe with nasty people on it.'

Finally, five of those living in the Other areas identified locations where they felt unsafe and the areas for this:

'Generally L24 - groups of young kids behaving badly.'

'In town - scared of young gangs.'

'Shopping areas - Youths on streets and on drugs, they often provoke fights but they are young so you can't touch them.'

'Speke Park area - kids hanging around causing trouble.'

Respondents were asked to recount whether they or a member of their family had either personally experienced or witnessed any of the following: verbal abuse, physical abuse, anti-social behaviour (ASB) and racism or hate crime.

As the tables below show, one out of twenty (5.0%) had been verbally abused and 15.0% had witnessed this type of activity. Those who had experienced this problem were much more likely to be from the BME sample (21.6%) than White British (1.2%) and among those living in the L6/7 and L8 areas (7.5% and 7.3%) contrasting with none of those from the L4/5 area and be male (8.7% compared with 1.9% of females). With regard to those who had witnessed someone being verbally abused, they were twice as likely to be BME (24.3%) than White British (12.9%) and from L8 (19.5%), the Other areas (17.9%) and L6/7 (13.8%) than from the L4/5 postcode areas (10.3%).

Table 21: Experienced/witnessed verbal abuse

View	Experienced		Witnessed	
	No.	%	No.	%
Yes	10	5.0	30	15.0
No	190	95.0	170	85.0
Total	200	100.0	200	100.0

Two of the respondents (1.0%) had experienced physical abuse and 6.5% had witnessed such acts: there was little difference in views according to ethnicity or postcode area.

Table 22: Experienced/witnessed physical abuse

View	Experienced		Witnessed	
	No.	%	No.	%
Yes	2	1.0	13	6.5
No	198	99.0	187	93.5
Total	200	100.0	200	100.0

A small group (2.0%) had experienced ASB and nearly one out of ten (9.5%) has witnessed this type of behaviour. BME respondents were more likely to report to witnessing ASB than the White British (13.5% as compared with 8.6%) as were those from L8 (14.6%) contrasting with 5.1% of those living in the L4/5 area.

Table 23: Experienced/witnessed anti-social behaviour

View	Experienced		Witnessed	
	No.	%	No.	%
Yes	4	2.0	19	9.5
No	196	98.0	181	90.5
Total	200	100.0	200	100.0

While 3.0% had experienced racism or other hate crimes, 7.5% had witnessed them. The likelihood of witnessing such acts was much higher among the BME residents (18.9%) than the White British group (4.9%) and among those from L8 (14.6%) than the remaining areas and contrasting with none from the Other areas.

Table 24: Experienced/witnessed racism or hate crime

View	Experienced		Witnessed	
	No.	%	No.	%
Yes	6	3.0	15	7.5
No	194	97.0	185	92.5
Total	200	100.0	200	100.0

Those who had experienced or witnessed any of the problems listed were asked to describe what happened. In some cases, examples of verbal abuse directed at White Europeans was identified:

'Two Polish couples are treated appallingly from local youths - constantly swear at them.'

'One Czech family used to have a problem with local lads smashing their windows and calling them foreigners.'

'My neighbour from Latvia had their house broken into - house was trashed.'

'One of my neighbour's car has been burned out and she is from Poland. Her windows have been smashed and had eggs thrown at windows.'

At the same time, a number of comments were made about awareness of forms of verbal abuse directed at non white BME community from other countries:

'I heard kids calling Black people bad names.'

'Next door are from Kazakhstan and they have been shouted at because they asked kids to stop throwing balls into the window.'

'My neighbours are from Gambia and have loads of problems with local people especially young gangs. They call them bad names, throwing stones etc.'

'I witnessed and experienced most of it because I have dark skin and many times I've heard bad names being said behind my back.'

'Local children verbally abuse people from Pakistan.'

Other respondents referred to incidents of verbal abuse without identifying which particular section of the community was involved.

'Biting up, swearing at each other - local boys abuse those from other countries by swearing and telling them to go back to their own country.'

'Few local youths shouting at people from different countries.'

'I have heard people calling people from other countries bad names.'

'I have seen black and white verbally abused over their race.'

'I've witnessed people being called names in the streets and I have witnessed someone being attacked in the street.'

'I work in a primary school and I've heard kids calling kids from different countries bad names - that's the parents' fault.'

'Youths shouting and throwing stones at people from different countries using racist terms near my home.'

In two cases it was suggested that new arrivals in the community were the perpetrators, although in both suggest that their actions were as a result of a lack of appreciation of what is acceptable or unacceptable within the British culture:

'My neighbour's son had been naughty and our Polish neighbour smacked him in the face instead of reporting it to his parents, she says in Poland people can do it.'

'Polish neighbours parties and loud music.'

Satisfaction with the local area

The majority of those consulted (71.5%) were positive about their local area as a place to live with 23.0% being very satisfied and twice this figure (48.5%) being fairly satisfied. In contrast, 8.5% were fairly dissatisfied and 5.0% were very dissatisfied.

Table 25: Level of satisfaction with the local area

View	No.	%
Very satisfied	46	23.0
Fairly satisfied	97	48.5
Neither	30	15.0
Fairly dissatisfied	17	8.5
Very dissatisfied	10	5.0
Total	200	100.0

The White British were slightly more likely to be positive about their local area than the BME residents (72.4% and 67.5% respectively). The level of satisfaction was found to be particularly related to area with the proportion who were satisfied ranging from 98.3% (Other areas) and 82.9% (L8) to 67.5% (L6/7) and just over half of those from the L4/5 postcode area (53.8%).

Community tensions and problems

While 7 out of 10 (69.8%) did not feel that there were any tensions or problems towards people from different countries living in the neighbourhood, 15.0% felt that there were. This latter group was much more likely to be from the BME than White British community (27.8% and 12.3% respectively) and from the L6/7 postcode area (20.0%) and L4/5 (15.4%) than L8 (12.5%) or the Other areas (3.6%). Interestingly none of those who thought that there had been an increase in the number of people from other countries moving into the neighbourhood suggested that such tensions/problems existed compared with one fifth (19.0%) of those who had witnessed an increase in people settling in the area from other countries.

Table 26: Aware of racial tensions between groups in the neighbourhood

View	No.	%
Yes	30	15.0
No	137	69.8
Don't know	32	16.0
Total	199	100.0

Excludes 1 missing value

Those who felt that there were tensions or problems were asked to provide more details and 31 respondents did so. The largest proportion (9 out of 31) made reference to the new community groups taking the jobs and houses away from 'local' people and being seen as receiving preferential treatment by agencies. The following comments illustrate these points:

'Local people feel that people from other countries are taking their jobs and homes. This is not what I think but I know that that this is the feeling of others.'

'Problem with people who are thinking that people from other countries are taking their homes and jobs.'

'Some people from different countries getting better things that we don't get. For the houses, they are the first on the list and the same for benefits as well.'

Two of the group suggested that those from the new communities living in the area found it difficult to get jobs and that this was a source of tension:

'People from different countries have problems finding jobs.'

'Difficulties with finding a job.'

The second most common response (6) was that many of the new communities experienced racism:

'Problems with locals because of skin colour.'

'Some people being racist in Liverpool.'

'Some people, especially with dark skin meet with racism and dirty looks from people who live in Liverpool (locals).'

'Some people have problems because of their skin colour and they are abused in some areas of Liverpool.'

This was followed by 3 respondents who referred explicitly to verbal abuse:

'My polish neighbour had problems with local gangs (local kids shouting at him and calling him names). That was before, about 2-3 years ago, don't know about now.'

'I've heard people bad mouthing people from different countries. I know that some people don't like people from other countries.'

'Some people don't like people from other countries and they let them know that by being anti-social and calling them.'

Two respondents felt that the tensions/problems were due to language difficulties and particularly poor English language skills on the part of those newly settling into the area:

'A family with many children living in a small flat who couldn't speak any English. They were Slovakian Gypsies.'

'Language and communication problems.'

Another suggested that those from different countries often felt isolated:

'Some people don't like people from Afghanistan and Pakistan and so they don't go out as much and feel trapped.'

The lack of respect between the different community groups was also mentioned by one respondent:

'People don't treat people from different countries with respect, especially the kids.'

Finally, 7 respondents referred to other reasons, including:

'The Somali – mostly because they are arrogant.'

'Local people can sometimes be nasty in all areas of Liverpool.'

'The underlying problem is that there are new faces in the area and people don't like that.'

All respondents were asked to comment upon what they felt could be done to encourage people from different countries and backgrounds to get on well together in their neighbourhood. A total of 116 comments were noted and included a wide range of suggestions. The most popular view (42 respondents cited this) was to encourage all people in the neighbourhood to meet up and get to know one another:

'Let people mix with one another.'

'Neighbourhood meetings where members of the new community will be welcomed by their neighbours.'

'People should talk more to one another.'

'People should mix with one another.'

Of this group of 42, 20 made specific reference for the need to provide community activities which encouraged integration:

'We need some meeting places. There are no social clubs only pubs and they are full of drunk people.'

'Have special events to bring people together.'

'Hold meetings where we all come together where we can be more open and friendly towards people.'

'More events with the community and neighbours.'

'Neighbourhood Watch club should invite people from different countries to take part in it.'

'More social events like Africans Day in Sefton. Liverpool should organise yearly or more events for local people from different cultures.'

'There should be social places where people can meet and get to know one another.'

In terms of this latter point, nine respondents referred to the need for more community centres in their neighbourhood:

'Community centres where people can meet together with people from other countries.'

'More community centres and youth clubs.'

The second most common view expressed (8) was that it was felt to be important that the new arrival learnt English:

'They should be able to speak English.'

'Getting on with people would be easier if they could speak English.'

'English language. Life is better and easier for people on both sides. Local people will be more communicative if they know people from other countries will understand what they say.'

'The person who comes to this country should be able to speak the language.'

A further 7 respondents mentioned the need for a greater understanding of different cultures. In the main it was felt that local people should be encouraged to understand the culture and traditions of those people coming to live in the neighbourhood:

'More understanding of other people's beliefs and culture will help people get on well together.'

'We should be more understanding of other people's backgrounds and respect each others culture.'

'People should be more educated about different cultures.'

Two of the group of seven suggested that the onus should be on the new arrivals learning about the cultures and ways of local people:

'People should understand the customs and life styles of local people.'

'People coming to this country must have an understanding of the law, traditions and customs.'

The need to educate people, especially children and young people was cited by 7 respondents:

'Education is the problem. Local people should learn more about people from different countries and what new things they bring with them to the UK – new cultures, new languages, knowledge and good food.'

'I think children need to be educated about people from other countries and why they come to live in the UK. Maybe provide programmes and films about different lifestyles and situations in different countries to watch at school.'

'More education for young children in school.'

'Teach children about respect for people from different countries.'

'Teach young people at school about different countries.'

Six of the residents felt that it was important that people in the neighbourhood should be more neighbourly and friendly towards one another:

'If we open up we will be good neighbours.'

'Be a good neighbour. Trying speaking English slowly to help them learn.'

'Be helpful and friendly. I work in a hospital with Polish girls. We always treat each other with respect and I speak slow English so they can understand me. I'm happy to teach the girls English.'

'Being more friendly to people would encourage them to be more friendly back.'

A small minority (2) did suggest that there was a need to tackle some of the ASB and those individuals who caused problems in the neighbourhood:

'Get rid of the kids on drugs. They are often the biggest problem in the area and cause all kinds of problems – racism and hate crimes.'

'Get rid of the people on the estates who are being nasty.'

Finally, a sizable group felt that there was nothing that could be done. While for most of this group this comment related to the belief that it was a very difficult issue to tackle, a minority suggested that peoples' underlying prejudices will always remain:

'Nothing really: racism and hate is everyone's own decision. If someone doesn't like someone from another country then there is nothing that can be done. People from different countries should learn English.'

Nothing – it will never happen that these different people will ever get on well together.'

'We can't change people if they don't want to change the way that they think.'

Liverpool Housing, Race and Community Cohesion Study

Liverpool Host Community Questionnaire

Dear Resident

The Salford Housing and Urban Studies Unit (SHUSU) at the University of Salford has been asked by Liverpool City Council to undertake some research around residents' views of their local neighbourhood and how it is changing.

As part of this research, we are keen to gather the views of local people about what it is like to live in the area.

We do hope that you can spare the time to complete the questionnaire below which should take between 10-15 minutes. All the information provided will be ***treated as confidential*** and will not be passed on to a third party. All completed and returned questionnaires will be entered into a **PRIZE DRAW** to win **£100** of shopping vouchers.

The completed questionnaire can be returned in the FREEPOST envelope provided (no stamp is required). The deadline for receipt of the completed questionnaire is **XXXX**.

We greatly appreciate your co-operation.

Yours sincerely

Professor Andy Steele
Research Director

Section 1: About your neighbourhood and community

Q1. How long have you lived in this neighbourhood?

TICK ONE BOX ONLY ✓

- | | | | | | |
|---------------------|--------------------------|---------------------------|--------------------------|---------------------------|--------------------------|
| Less than 12 months | <input type="checkbox"/> | 1-2 years | <input type="checkbox"/> | 3-5 years | <input type="checkbox"/> |
| 6-10 years | <input type="checkbox"/> | 11-15 years | <input type="checkbox"/> | 16-20 years | <input type="checkbox"/> |
| 21 or more years | <input type="checkbox"/> | Born in the neighbourhood | <input type="checkbox"/> | Don't know/can't remember | <input type="checkbox"/> |

Q2. Overall, how satisfied or dissatisfied are you with your local area as a place to live?

TICK ONE BOX ONLY ✓

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very satisfied | Fairly satisfied | Neither | Fairly dissatisfied | Very dissatisfied |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Q3. Over the last three years have you seen an increase in people from other countries coming to live in the neighbourhood?

Yes

GO TO Q4

No

GO TO Q6

TICK ONE BOX ONLY ✓

Don't know

GO TO Q6

Q4. If **YES**, which countries do they come from? **Please write below**

Q5. If **YES**, to what extent do you agree or disagree with the following statements about these people from other countries moving into the neighbourhood

TICK ONE BOX ONLY FOR EACH OF THE FOLLOWING ✓

	Strongly agree	Agree	Neither	Disagree	Strongly disagree	Don't know
a) There are too many people from other countries moving into the area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) The people from other countries do not understand the customs and practices of people already living in the neighbourhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The people from other countries do not mix with people already living in the neighbourhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) The people from other countries cause problems for people already living in the neighbourhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) It is good to have a mix of people in the neighbourhood from different countries living in the neighbourhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q6. To what extent do you agree or disagree that your local area is a place where people from different backgrounds get on well together?

TICK ONE BOX ONLY ✓

- | | | | |
|--------------------------------------|--------------------------|------------------------------|--------------------------|
| Definitely agree | <input type="checkbox"/> | Tend to agree | <input type="checkbox"/> |
| Tend to disagree | <input type="checkbox"/> | Definitely disagree | <input type="checkbox"/> |
| Don't know | <input type="checkbox"/> | Too few people in local area | <input type="checkbox"/> |
| Everyone is from the same background | <input type="checkbox"/> | | |

Q7. In your local area, how much of a problem do you think there is with people not treating each other with respect and consideration?

TICK ONE BOX ONLY ✓

- | | | | |
|------------------------|--------------------------|----------------------|--------------------------|
| A very big problem | <input type="checkbox"/> | A fairly big problem | <input type="checkbox"/> |
| Not a very big problem | <input type="checkbox"/> | Not a problem at all | <input type="checkbox"/> |
| Don't know/no opinion | <input type="checkbox"/> | | |

Q8. How safe or unsafe do you feel when outside in your local area:

- a) during the day; and
- b) after dark

TICK ONE BOX FOR EACH ONLY ✓

- | | a) During the day | b) After dark | |
|---------------|--------------------------|--------------------------|------------------|
| Very safe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q10 |
| Fairly safe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q10 |
| Neither | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q10 |
| Fairly unsafe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q9 |
| Very unsafe | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q9 |
| Don't know | <input type="checkbox"/> | <input type="checkbox"/> | GO TO Q10 |

Q9. If **FAIRLY UNSAFE** or **VERY UNSAFE**, which areas are more unsafe and why do you say that?

PLEASE WRITE IN BELOW

Area unsafe	Reason why
1. _____	_____
2. _____	_____
3. _____	_____

Q10. Have you or a member of your family experienced and/or witnessed any of the following toward people from different countries in your neighbourhood?

	TICK ALL THAT APPLY ✓	
	Experienced	Witnessed
Verbal abuse	<input type="checkbox"/>	<input type="checkbox"/>
Physical abuse	<input type="checkbox"/>	<input type="checkbox"/>
Anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>
Racism or hate crime	<input type="checkbox"/>	<input type="checkbox"/>

Q11. If you have **TICKED ANY FOR Q10**, please describe what happened? **Please write below**

Q12. Are you aware of any specific tensions or problems towards people from different countries living in your neighbourhood?

TICK ONE BOX ONLY ✓		
Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GO TO Q13	GO TO Q14	GO TO Q14

Q13. If **YES**, what are these tensions or problems and which countries do the people involved come from? **Please write below**

Q14. What do you think could be done to encourage people from different countries and backgrounds to get on well together in your neighbourhood? **Please write below**

Section 2: About Yourself

Q15. Are you?

TICK ONE BOX ONLY ✓

Male

Female

Q16. How old are you?

TICK ONE BOX ONLY ✓

18 - 24

25 - 34

35 - 44

45 - 54

55 - 64

65 - 74

75 & over

Q17. How would you describe the composition of your household?

TICK ONE BOX ONLY ✓

One adult under 60

One adult aged 60 or over

Two adults both under 60

Two adults, at least one 60 or over

Three or more adults (16 or over)

1-parent family with child/ren (at least one under 16)

2-parent family with child/ren (at least one under 16)

More than one family unit

Other (**please explain below**)

Q18. What is your religion?

TICK ONE BOX ONLY ✓

None Christian (*all denominations*)

Buddhist Hindu

Jewish Muslim

Sikh Any other religion

Prefer not to say

Q19. How would you describe your sexual orientation?

TICK ONE BOX ONLY ✓

- | | | | |
|--------------|--------------------------|-------------------|--------------------------|
| Heterosexual | <input type="checkbox"/> | Gay man | <input type="checkbox"/> |
| Gay woman | <input type="checkbox"/> | Bisexual | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | Prefer not to say | <input type="checkbox"/> |

Q20. Do you identify yourself as transgender?

For the purpose of this question “transgender” is defined as an individual who lives, or wants to live, in the gender opposite to that they were assigned at birth

TICK ONE BOX ONLY ✓

- | | | | |
|-----|--------------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

Q21. Does anyone in your household have any long-term illness, health problems or disability which limits their daily activities or the work they can do, including any problems which are due to old age?

TICK ONE BOX ONLY ✓

- | | | | | | |
|-----|--------------------------|----|--------------------------|------------|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|------------|--------------------------|

Q22. Any other comments? **Please write below**

Q23. To which of these groups do you consider you belong?

TICK ONE BOX ONLY ✓

White

British

Irish

Any other White background

(Please tick and write in opposite)

Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background

(Please tick and write in opposite)

Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background

(Please tick and write in opposite)

Black or Black British

Caribbean

African

Any other Black background

(Please tick and write in opposite)

Other

Chinese

Other

(Please tick and write in opposite)

Thank you