

**JRF programme paper:  
Poverty and ethnicity**

# Experience of poverty and ethnicity in London

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This paper:

- examines the correlation between people from different ethnic backgrounds living in poverty;
- makes comparisons between the experience of people from the Bangladeshi, Somali and white British community living on a low income; and
- explores the key financial and social issues communities face in two London boroughs: Haringey and Tower Hamlets.

**The Joseph Rowntree Foundation (JRF) commissioned this paper as part of its programme on poverty and ethnicity which aims to understand the underlying reasons for variations in low income and deprivation among different ethnic groups in the UK and the problems caused. It also aims to contribute towards solutions to these problems.**

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This paper was commissioned to inform the work of the JRF poverty and ethnicity programme, which aims to understand the underlying reasons for variations in low income and deprivation among different ethnic groups in the UK and the problems caused. It also aims to contribute towards solutions to these problems.

The Joseph Rowntree Foundation has supported this project as part of its programme of research and innovative development projects, which it hopes will be of value to policy-makers, practitioners and service users. The facts presented and views expressed in this report are, however, those of the authors and not necessarily those of JRF.

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## Executive summary

This report is based on a study designed to explore 'difference' in the experience of poverty between ethnic groups. In exploring difference it is concerned with the commonality of experience between groups as well as difference, and the aim has been to explore how ethnicity, culture, religion and racial discrimination mediates, modifies or exacerbates the experience of poverty.

The study was carried out between April and June 2010, in two areas of London – the London borough of Haringey and the London borough of Tower Hamlets. These areas were chosen because of their demographics, with high levels of diversity and high levels of 'working-age economic inactivity' for ethnic minority groups. The project was commissioned as a preliminary study that would inform further research or action programmes to be undertaken in the future by JRF. We have focused on three ethnic groups (Somali, Bangladeshi and white British) in the two adjacent London boroughs of Tower Hamlets and Haringey. Eight focus groups were undertaken and these were structured primarily around ethnicity, gender and age.

All participants were selected on the basis that their income was below £15,000 a year and/or they were in receipt of benefits.

The report explores the experience of poverty among the different groups by exploring their responses in a number of key areas that were determined through preliminary work within the local community.

The primary areas for focus within the discussions were:

- living on a low income;
- cost of living;
- borrowing and debt;
- benefits and tax system;
- impact of low income on quality of life;
- experience of work and getting a job;
- experience of public services;
- education and skills;
- community life and culture;
- aspirations and the future.

This research provides some valuable insights into both the similarities of experience between people from Bangladeshi, Somali and white British groups and significant areas of difference. Similarities were centred on the effects on self-esteem, the difficulties with the benefit 'trap' and the lack of opportunities for employment and training.

It is evident that persistent survival on a low income has had an impact on the perceived opportunities for improvement in income and quality of life across the groups. The increased barriers to employment in the form of discrimination (real or perceived) are an additional factor in shaping perceptions and aspirations in the Bengali and Somali communities.

It is the case, however, that individuals within the groups were active agents in maximizing their resources. They were not simply languishing passively but were constantly weighing up the options of training, education, working and benefits, considering outgoings, (what they had to pay for food, bills, rent, childcare and remittances) and seeking opportunities.

Beyond these broad similarities of experience there are a range of examples that demonstrate the way in which ethnicity, religion and culture differentiate experiences of poverty. It was also very noticeable that factors such as age, gender, health and location played an important part in shaping disadvantage, alongside ethnicity and racial disadvantage and discrimination.

Within the study, a number of key areas were identified where cultural difference is a mediating factor in the experience of poverty. The obligation within Islam to provide charity and the expectations on families and individuals to support relatives through remittances was important. Patterns of borrowing and debt across ethnic groups were also different with Bengalis and Somalis relying more on community and family. Overall, the cultural differences relating to family and community were important factors in the different experience of poverty.

Each of the groups identified barriers in the areas of access to work, education and skills, access to public services and general well-being. These barriers were sometimes similar but there were distinctive differences. In education and work, language barriers were seen as important, aspirations were affected by culture and experience and there were problems associated with qualifications earned in other countries. Prejudice and discrimination were seen as continuing factors affecting both the Somali and Bangladeshi communities.

The evidence from the research highlights differences in patterns of disadvantage relating to ethnicity and other dimensions of identity. While the significance of these differences may vary considerably, the report concludes that the differences associated with ethnicity, gender, age and disability all have a bearing on the experience of poverty; they produce different barriers to opportunity in education and access to work and different barriers to the success of interventions by agencies to improve conditions or opportunities. It recommends that there is a need to develop a more comprehensive understanding of the way that specific barriers influence opportunity and outcome.

## Introduction

A question that is insufficiently addressed by existing research is whether the experience of poverty is affected by ethnicity. This study was designed to explore 'difference' in the experience of poverty between ethnic groups. In exploring difference we were concerned not just with difference but also with the commonality of experience and our aim has been to explore how ethnicity, culture, religion and racial discrimination mediates, modifies or exacerbates the experience of poverty.

There is clear and strong evidence that particular ethnic groups experience higher incidences of poverty. A Commission for Racial Equality report in 2007 (CRE, 2007) identified the poverty rates for children at 25 per cent for white children, 56 per cent for African children, 60 per cent for Pakistani children, and a shocking 72 per cent for Bangladeshi children.

A review by Lucinda Platt (Platt, 2007) in the same year reinforced these figures:

*All identified minority groups had higher than average rates of poverty. Rates of poverty were highest for Bangladeshis, Pakistanis and black Africans, reaching nearly two-thirds for Bangladeshis. Rates of poverty were also higher than average for Indian, Chinese and other minority group households.*

Unemployment and low income are obvious causes of poverty, and differences by ethnicity may account for some of the variations in poverty rates. Lucinda Platt (2007) points to an 'ethnic penalty' in employment and income. This is supported by a recent report, published by the Government Equality Office (Hills, *et al.*, 2010) based on extensive research on economic inequality from the London School of Economics.

*Inequalities in earnings and incomes are high in Britain, both compared with other industrialised countries, and compared with thirty years ago ... The large inequality growth between the late 1970s and early 1990s has not been reversed... despite the elimination and even reversal of the differences in educational qualifications that often explain employment rates and relative pay, significant differences remain between men and women and between ethnic groups. (Hills, *et al.*, pp.85)*

The National Audit Office (2008) and the National Employment Panel (2007) reports that the employment gap between minority ethnic communities and the rest of the population is approximately 15 per cent, only 1.3 per cent lower than in 1987. They estimate that the gap will take 25–30 years to eradicate if a radical plan is not implemented. Underlying this gap in employment lie continuing patterns of discrimination, which were highlighted by the Department of Work and Pensions report (Wood, *et al.*, 2009). This report was based on research in which candidates from different ethnicities applied in similar terms for the same jobs; this study clearly showed that employer discrimination is still rife.

However, even if employment rates were equalised there would be a need to address differentials in employment income:

*The high poverty rates experienced by most BME groups can only partly be accounted for by their generally lower work rates. In particular, just a third of the 'excess' poverty experienced by London's Pakistani and Bangladeshi populations can be accounted for by the much lower work rates among both men and women. Other factors such as low pay are critical. (Trust for London and New Policy Institute, 2010)*

Hills *et al* (2010) also comment on differences, ethnicity and low pay.

*Compared to a white British Christian man with the same qualifications, age and occupation, Pakistani and Bangladeshi Muslim men and black African Christian men receive pay 13–21 per cent lower ... differences in unemployment rates are as great for the 'second generation' as for those born outside the UK. Women from most ethno-religious backgrounds have hourly pay between a quarter and a third less than a white British Christian man with the same qualifications, age and occupation. (pp.18)*

Knowing that there are differentials in poverty, unemployment or low income rates does not tell us about all the root causes of those differentials, or how they impact on everyday life across different ethnic groups. This study explores how ethnicity relates to variations in the experience and managing living in poverty in London. Two areas highlighted by Lucinda Platt (2007) were:

- Understanding how poverty may have 'different meanings for those with different ethnic identities, and the implications of this'; and
- Understanding 'the role of social networks and ethnic capital (understood as the overall levels of ethnic group-specific resources within a group) in promoting (or inhibiting) upward mobility and life chances for minority groups'.

This study explores the first area and also has some findings in relation to the second area. The study was carried out between April and June 2010, in two areas of London – the London borough of Haringey and the London borough of Tower Hamlets. According to the Office for National Statistics figures published in August 2010 (ONS, 2010) the 'working age inactivity rate' for ethnic minority groups is nearly double that for white people. For both Tower Hamlets and Haringey the 'working age inactivity rate' is 21 per cent. For ethnic minority groups it is 38.5 in Tower Hamlets and 40.4 per cent in Haringey.

The work was commissioned by the Joseph Rowntree Foundation (JRF), and carried out as a collaboration between Equanomics UK, the Roots Research Centre and the Centre for Local Policy Studies at Edge Hill University. It forms part of a wider investigation undertaken by JRF including projects in Bradford and Scotland.

## Research methods

The project was designed to be a preliminary study that would inform further research or action programmes to be undertaken in the future by JRF. The geographical focus of the study was London and we have focused on three ethnic groups (Somali, Bangladeshi and white British) in the two adjacent London boroughs of Tower Hamlets and Haringey. By focusing the study across two London boroughs there is some variation in experience associated with the economic and social context and with prevailing patterns of governance. The differences between the two boroughs were examined before the research and were not considered to be a significant problem for the research design.

Bangladeshis were selected as one of the ethnic groups to participate in the study because of the high levels of poverty that have been revealed by earlier studies (Palmer and Kenway, 2007). As an ethnic group Bangladeshis have one of the highest levels of child poverty in the UK (Platt, 2007). Tower Hamlets provided a suitable context within which to explore differences in the experience of poverty because of its demographic structure. Thirty-seven per cent of the borough's total population are Asian in origin, but one sub-group, Bangladeshis, dominates this group. Nearly 66,000 (92 per cent) of the 72,000 Asian people living in Tower Hamlets are of Bangladeshi origin. This represents more than 43 per cent of all Bangladeshis living in London, and a quarter of the entire population of this group in England (Gardner, 1992).

Somalis were selected as a second minority ethnic group to participate in the study. Again, Lucinda Platt (2007) and the CRE report (2007) point to high levels of poverty amongst groups of African origin, such as the Somali community. The Somali community in the London borough of Haringey is one of the largest Somali populations in the UK and is characterised by recent growth in refugees and asylum seekers. There is also a large population of Somalis living in Tower Hamlets, which has a high proportion of younger Somali residents. The Somali community experiences high levels of poverty in both boroughs. Haringey provided a suitable context within which to explore the experiences of older members of the Somali community, and Tower Hamlets was used to investigate the younger population.

In order to explore difference in the experience of poverty the study has looked at the experience of white British people experiencing poverty. This study group was also drawn from the borough of Tower Hamlets where there is a high incidence of poverty amongst white British residents.

The overall aim of this study was exploratory; it was seeking to identify whether ethnicity has an effect on the experience of poverty. While individual experiences are important in this, our aim was to explore whether there were common experiences, rooted in culture, social processes and social institutions.

A research methodology based on focus groups was selected as the most appropriate tool for exploring the experience of poverty among the different groups. Focus groups provide a valuable tool for exploring group experiences through a deliberative process (Krueger and Casey, 2009; Stewart, *et al.*, 2007; Bennett and Roberts, 2004; Bickman and Rog, 1998). Interaction is a central feature of focus

groups (Kitzinger, 1994; 1995) and it is that interaction between people which can allow them to explore, evaluate, affirm or reject ideas on a group basis. In this sense, it was felt that focus groups would provide an optimum way of evaluating that data as part of a group experience, and this would be particularly valuable in working across a number of languages and cultures. It would also be particularly valuable for this study, where we were seeking to understand features and experiences that were part of a group experience of poverty and low income. A focus group approach provided advantages over a survey based on individual interviews for this particular study. Individual interviews would have lacked the dynamic of group working and it would have been a more costly and time-consuming method. While focus groups do not provide data that can be easily generalised, they can provide valuable insights into the way in which a group interprets and understands its experiences and, in dealing with a sensitive area such as poverty, the advantage of a focus group is that it can be empowering, giving confidence to participants and the opportunity to be better understood. It can work in the opposite way and be intimidating and great attention was paid in the planning process to reduce barriers to participation, through attention to language, effective facilitation and creating an atmosphere at the focus group events that was conducive to open discussion.

The selection of these groups was based upon a preliminary study of demography and factors that may affect the experience of poverty. The demographic profiles of each of the study groups showed marked differences and it was important to consider how these characteristics shape the experience of poverty. For instance, the white British population in both boroughs is an ageing population, while the Somali population, with more recent patterns of immigration, particularly in Tower Hamlets, tends to be younger with more children and a larger family size. A number of other characteristics were considered that may shape different experience. For example, disability; low pay/incapacity benefit; prison/criminal record; language; experience of social care; family/household characteristics; citizenship/status, but the scale of the study has meant that in practice these could not be examined in detail.

Homogeneity within focus groups is considered important in exploring shared experience (Krueger and Casey, 2009) and within the study we considered ethnicity, gender and age as factors in the selection of groups. We had initially considered the possibility of three age cohorts, but the ensuing multiplication of focus groups made this design untenable. Resources limited the research design, and the two primary criteria adopted in the selection of focus groups were ethnicity and gender. Age was, however, a consideration in the selection of participants and focus group facilitators were briefed to explore age-related issues during the focus group discussions. Some of the other characteristics identified above were also explored through the focus group discussions.

The overall research design was based on two processes of deliberation. The focus groups were the primary source and each focus group was addressed on a set of key questions that were determined in advance. The research questions were designed with the focus group facilitators (who were each the same ethnicity and gender as their group participants) and a stakeholder group. This group was an important feature of the research design. It consisted of representatives from Somali and Sylheti community organisations, other community organisations and public services (including local authorities and Jobcentre Plus) across the two boroughs.

This group, along with the group consisting of the facilitators and interpreters, formed a deliberative group integral to the design of the focus group and questions and also in the interpretation and understanding of the focus group outcomes. The stakeholder group met for two half-day meetings to consider the research design and reflect upon outcomes.

The profile of the focus groups was as follows.

Group	Location	Ethnic group	Gender	Other characteristics
1	Haringey	Somali	Male	35–70, first generation
2	Haringey	Somali	Female	35–70, first generation
3	Tower Hamlets	Somali	Male	23–49, (mixed but mainly first generation)
4	Tower Hamlets	Somali	Female	21–80, (mixed but mainly first generation)
4a (mini-group)	Tower Hamlets	Somali	Female	19–21 (second generation)
5	Tower Hamlets	Bangladeshi	Male	25–40 (second and third generation)
6	Tower Hamlets	Bangladeshi	Female	21–66, (first, second and third generation)
7	Tower Hamlets	White British	Male	37–66
8	Tower Hamlets	White British	Female	26–56

All participants were selected on the basis that their income was below £15,000 and/or they were in receipt of benefits.

All of the participants in the Bengali focus group were Sylheti speakers, a dialect from the north of Bangladesh. Sylheti speakers form the majority (95 per cent) of Bangladeshis in Britain (Kershen, 2005).

In the male white British focus group many of the participants had learning difficulties. Some, but not all, of the members of the white British female group were also suffering from learning difficulties, although to a lesser extent than the corresponding male group. This was due to the recruitment process. The primary route to recruitment was through a community centre which was primarily for vulnerable people. While the characteristics of the white British male group meant they were not representative of the range of experiences within these ethnic groups, they did represent distinctive experiences based on ethnicity, language, gender and mental health.

The identification of potential participants in the study was assisted by the development of close working relationships with community-based organisations

working in the two boroughs. These groups were further represented on the stakeholder group. The composition of the groups was based on population distributions and the demographics of the population in the boroughs. Our concern within the study was to explore the different experiences by ethnicity and not to compare the experience across London boroughs. Bengali participants were selected from Tower Hamlets because this was where the majority population were located. The decision to recruit Somalis from both boroughs was based on the demographic differences, mainly age and family size, between Somalis living in Haringey and Tower Hamlets.

An important consideration in the conduct of the focus groups is language in the development of socially shared knowledge (Markova, *et al.*, 2005). It was recognised that while most of the participants would speak English, this would mostly not be their first language. Conducting the focus groups in the first language of participants was considered important in encouraging the open conversation that characterises focus group work. However, the groups would be working across first and second generation residents and therefore we had to consider carefully the language of choice among the participating groups. Following consultations it was agreed that the Bengali groups would be facilitated in Bengali, the Somali groups would be facilitated in Somali and the white British groups in English. To ensure a flowing discussion in addition to the bi-lingual facilitator, the recording of the focus groups was undertaken by a bi-lingual interpreter. It became clear during the formation of the Bengali focus groups that the dominant language group was, in fact, Sylheti and not Bengali and, although participants could speak Bengali, it was decided that a new facilitator and bi-lingual note-taker would be appointed to conduct the focus group in Sylheti. Sensitivity to language was an important part of the research design and there has been a successful campaign within Tower Hamlets to establish Sylheti as a distinctive language group (Kershen, 2005)

Each of the focus groups was conducted over a three-hour period and questions were based on a common template that had been designed in consultation with the stakeholder group and the facilitators. The primary areas for focus within the discussions were:

- living on a low income;
- cost of living;
- borrowing and debt;
- benefits and tax system;
- impact of low income on quality of life;
- experience of work and getting a job;
- experience of public services;
- education and skills;
- community life and culture;
- aspirations and the future.

For this study we adopted a holistic and interpretive approach based on a review meeting conducted immediately following the focus group. This meeting used the observations made by the group to identify salient points from the discussion and reflect on areas of consensus or disagreement. In developing an understanding of the notes, this discussion formed a central part of the analysis. The research team

undertook an analysis that was concerned with identifying differences and commonalities between the groups and these findings were submitted to the stakeholder group for further discussion and interpretation. Through this approach we were able to explore the significance of differences and explore how the composition of the groups may have contributed to the outcomes.

## The experience of poverty

Our concern within the study has been to explore whether ethnicity has an impact on the experience of poverty. Here we set out some of the key findings from the research, identifying those areas where there was a strong commonality in the experiences across groups and then identifying areas of divergence or difference between the groups. The report sets out the findings under three main headings:

- money: Income, benefits and borrowing;
- education, skills and pathways to work;
- quality of life/public services and community.

### Money: Income, benefits and borrowing

Each focus group opened with questions around the experience of living on a low income and receiving benefits. While some respondents were working or had experience of paid work, people across the three communities felt cautious about having a low-wage job. They unanimously agreed that it was better to stay on benefits than work for little money. Budgeting to pay for expenses such as utility bills, food, clothes and travel was a daily issue for all participants whether they were on benefits or in work. However, cultural obligations, to give to charity and remittances overseas, were key differences in expenditure affecting the Bengali and Somali community respectively.

Debt and borrowing money was a major worry across the groups, with a heavy reliance on friends and family for financial support. However, within this area, divergence around ethnicity, gender and age was apparent within each community. For example, Somali men and younger white British and Bengali women were likely to use credit cards, whereas white British and Bengali men preferred to borrow from friends and family, mainly to avoid paying interest. On the other hand, older Somali women tended to use their own independent banking system, called Hagbad, and were responsible for household finances.

### *Low income and benefits*

Low income was a common factor for all participants and is a major determinant in the experience of poverty. All participants received less than £15,000 a year – less than the average British household income – and were in receipt of benefits. The majority of the participants were unemployed. However, although some had experienced work or were working part-time, it was felt that the alternative of having a low-wage job would not relieve their financial situation. This view corresponds with findings by the Department for Work and Pensions (Jones and Tracy, 2010) showing that paid employment is not necessarily seen as a guarantee of being able to escape poverty.

One participant summed up a view that was shared across the groups:

*It's best to stay on income support rather than getting a job with a low salary, then you have to stress about bills, rent, Council Tax bills and*

*sorting out other benefits. It can be very off-putting.* [Bengali woman living in Tower Hamlets, 34 years old]

The current level of income was thought across the groups to be insufficient and difficult to survive on because of high living costs. Participants said that they struggled to live on their weekly or monthly income and very often ran out of money before their next benefit or wage payment was due. Budgeting for cashflow was the biggest issue for all those interviewed, particularly for those who received their benefit money once a fortnight, but still needed to pay for their bills all at once.

The main costs identified as being too high and difficult to pay were: utility bills (such as gas, water and electricity), home maintenance and repairs (including replacing furniture and appliances and decorating), and transport (particularly for those who were unemployed and needed to travel for interviews or training). It was noted that to access the Jobcentre Plus (JCP) grants – available to help with travel costs for interviews – was often time-consuming and restrictive, so most participants did not bother applying.

There was some divergence in how the groups experienced living on a low income. A significant difference between the ethnic groups was the cultural expectations associated with charity (in the case of the Bengali participants) and family obligations (in the case of the Somali participants).

Some of the Bengali female participants expressed anxiety that their low income did not always permit them to give money to charity – something that is a requirement of being a Muslim. Some participants who were mothers also mentioned their concern of not having enough money to get their children married, an issue that was not raised by the white British or Somali interviewees.

The most notable and ethnically distinctive difference surrounding income was the area of remittances. All the Somali people interviewed mentioned having to send money back to Somalia every month – even though they were struggling on a low income themselves. For many, despite their sole income coming through benefits, they still were obligated to send back whatever money they could to relatives in their home country. A view that was reiterated within all four Somali groups was:

*It is stressful because while continuing to pay for living expenses here, most of us have family abroad who we try to support. Whatever we send, be it £30 or £50, it's almost always money we've borrowed, but people back home are depending on you, so you have no choice.* [Somali man living in Tower Hamlets, 35 years old]

Research by the Department for International Development (Chalmers and Hassan, 2008) highlights the extent to which remittance is affecting the Somali community. It found that 43 per cent of Somalis living in the UK remit more than 11 per cent of their income, and 68 per cent of all their remittances goes to family members in Somalia. Older members of the Bangladeshi community also mentioned remittances; however, younger (second or third generation) Bengali adults did not see it as a priority.

A further, possible area of divergence was in the perceived need for a car. This came up most evidently amongst the Bengali women. The younger mothers in the group cited the cost of a car as one of their major outgoings. When probed about this, each agreed that they had to have a car because of their children; they also expressed a general dislike for public transport and said that they felt safer in a car. The older Bengali members also added that they relied on their children to drive them when they needed to do their shopping. One mother commented:

*Having a car affects the budget, and without a car it's hard to travel with children, so to maintain things you need to cut the budget in other areas.* [Bengali woman living in Tower Hamlets, 36 years old]

Other Bengali women who were younger and not mothers did not comment on this.

Most of the white British participants said that they did not have a car, and many of the female Somali participants said that they could not drive. When the Somali male groups were probed about having a car one said:

*We don't all have cars because we need much bigger ones to accommodate all of our children, which makes it too costly. Our women generally do not drive – it is mainly something the man does in our culture.* [Somali man living in Tower Hamlets, 51 years old]

The focus on the need to have a car, particularly from the Bengali women, could also reflect underlying concerns raised in research by the Department for Transport (2010). It found that minority ethnic and faith communities were very concerned about racist attacks and all aspects of personal safety on the public transport network, including when walking or waiting at bus stops or in stations.

Overall, participants across all the groups were pessimistic about living on a low income. Most were despondent about their futures, as they saw no clear route to improving their situations. For example, most of the men in the white British group agreed that they were able to change nothing and would feel the same if nothing changed.

*Doing anything to improve your situation has the risk of you being penalised.* [White British man living in Tower Hamlets, 48 years old]

Two participants in the group did not fully agree with this point; one was younger and more hopeful of his future, another had children and felt that they had the potential and opportunities to do better.

A similar level of despondency towards surviving on a low income was expressed in the Somali and Bengali groups. One Bengali female concluded:

*In five years time I see myself in the same situation – it will always be hard to live in the UK because of how the system works – it's hard to get out of this income trap.* [Bengali woman living in Tower Hamlets, 36 years old]

That said, it was apparent across the groups that participants were striving to make the best of their situations, and balance their current incomes and benefits in the best ways possible. One male participant explained:

*It is crazy how we have to cover all these expenses on so little money, but we have no choice, we have to manage.* [Bengali man living in Tower Hamlets, 42 years old]

Where there were some apparent differences between the outgoing expenses of younger participants, or those who had no children, most were constantly calculating costs to cover rent, food, utilities, travel and so on. All the participants were aware of how additional expenditures, such as training courses or holidays, would greatly impact their budgets, so they had learned to juggle their money accordingly. As one white British female participant (aged 53) concluded: *'We are our own mini accountants'*.

### *Borrowing and debt*

Interviewees from all three communities expressed their worries about being in debt and spoke of often having to borrow money from a bank, a relative or from another source. This supports research by Mitchell *et al* (2005), highlighting the widespread concern about rising levels of debt, and the high proportion of people in poverty needing to borrow money in order to manage their expected consumption. Across the groups there was a shared view that there was not enough debt advice, or that communities were not fully informed on the options available to manage their money. Attitudes towards debt and borrowing did otherwise vary across ethnic groups, and between men and women in each community.

Many of the female Somali participants said that they borrowed money from friends and family. Within both the female Somali groups, the women said they were often responsible for the household finances. This was supported by some of the younger Somali participants who described how their mothers often paid for everything and sent money back home.

*My mother always takes care of the finances and gives me money when I need it. She sends money back to Somalia, pays the bills and does all the shopping for the house.* [Somali woman living in Tower Hamlets, 21 years old]

This also supports Mawhinney's (2010) observation that *'gender roles in African families often change when they come to the UK, with women taking more responsibility for family finances'*.

This serves to produce and reproduce gendered differences in that women are often responsible for managing finances when money and other resources are scarce (e.g. Brannen and Wilson, 1980).

Most of the older Somali women stated that they invested their money through their own independent (pyramid) banking system, known as Hagbad. This involves a number of women who form a group, each investing an equal amount of money. One

member is entrusted with all the money and each person receives the lump sum on a rotation basis. One participant summarised:

*The Hagbad system came about from the close relationships between members of our community; trust and the interdependence are fundamental to it. [Somali woman living in Haringey, 63 years old]*

Other patterns of difference in debt and borrowing were evident. Among the Bengali participants, most cited families as the main source for borrowing money. When probed about this, the majority said it was to avoid interest rates and higher costs. Some of the younger Bengali males also added that it was often 'too much hassle' to borrow money from a bank. Research by Mawhinney (2010) also suggests that within ethnic minority communities, Bangladeshis prefer to borrow informally from friends and family and others in the community, due to reasons such as language barriers, distrust, and negative experiences of other credit sources. Although these reasons were not explicitly stated within the Bengali groups, language barriers were clearly an issue for some of the older female members. One male participant also commented:

*Families are very inter-dependent and supportive. It's better to borrow from them as banks are less reliable and charge interest. [Bengali man living in Tower Hamlets, 30 years old]*

While families were a source of assistance among the white British respondents, they expressed a greater reluctance to turn to family for borrowing money. Both the male and female participants referred to 'friends' as their first port of call for financial loans, as it was 'easier'. One participant stated:

*I know my mum would help me out in times of trouble, but I don't want to have to keep asking her for money, that's why I'd rather ask my friends for help first. [White British woman living in Tower Hamlets, 26 years old]*

There were participants that said they had no problem asking their parents for money, although most agreed that friends were generally easier. Some of the female participants also said that they had taken out bank loans to pay for larger items, such as washing machines and ovens. However, they had always struggled to pay them back due to high interest charges.

Credit cards and bank debt were more common among men within the Somali community and among the younger women from the Bengali and white British groups. In general, the white British men and Somali women did not believe that credit cards or bank debts were a problem. However, the Bengali and white British women felt that they were. Most of the Somali men were in agreement when one participant concluded:

*A lot of people live with debt. So many Somali -owned businesses have gone under because customers cannot afford to pay what they owe. Another issue is that someone will borrow a small amount from the bank; later they find that they cannot afford to repay the loan and then many become black listed. [Somali man living in Haringey, 49 years old]*

## Education, skills and pathways to work

Lack of qualifications and education were generally seen as barriers to employment. However, the cost of courses as well as the need for relevant work experience was seen as a major obstacle for everyone. This was particularly stressed within the female Bengali group, which notably placed more emphasis on experience over education than any other group.

Further cultural differences emerged during discussions around accessing jobs. The male Bengali and Somali participants cited discrimination – because of their ethnicity and faith – as a barrier, and also stressed that menial low-wage jobs were the only options readily available to them. Furthermore, language and insufficient references were a particular problem for the Somali community, as well as the lack of ethnic representation in services such as Jobcentre Plus. In contrast, the white British men indicated that their physical and mental health problems were preventing them from working, while the white British women highlighted their anxiety about going back to work and not knowing whether they would be financially better off if they did.

### *Education and skills*

Many participants were unemployed and had low or no qualifications. Younger (second or third generation) members from each group were more likely to have GCSEs or above. Across the communities there was recognition that the lack of qualifications and skills were a barrier to finding work. This corroborates research by the Joseph Rowntree Foundation (Hanley, 2009), suggesting that those with a limited education and lack of skills are at risk of suffering recurrent poverty, including single parents, the unemployed, economically inactive and skilled manual and lower-skilled workers.

There was agreement across the board that education and training could be beneficial for increasing employment opportunities, but it was often seen as being too costly. It was considered better to be on benefits than pay for training and education, which might not lead to anything other than a low-paid job. Participants from the Somali and Bengali male groups felt very strongly about this, and cited examples of people in their community who had completed training programmes – mainly organised through Jobcentre Plus (JCP) – which had ‘led nowhere’ and did not help them to secure a well-paid job. Many of them also commented that it was much harder for them to get high-paid employment. One participant highlighted a view shared across the male Bengali and Somali groups when he said:

*Most of the jobs that are easily available for us are menial low-wage ones, which are hard to accept if you want a decent career and future. [Somali man living in Tower Hamlets, 32 years old]*

Participants within each group acknowledged that a lack of qualifications acted as a barrier to finding appropriate work. There was particular agreement in the white British, Somali and male Bengali groups that education was important, however this was generally followed by a statement on how work experience was as, if not more, beneficial.

There was less agreement about the benefits of education within the female Bengali group. When asked their thoughts on gaining qualifications one participant said that they were only useful if they improved language proficiency to help in their everyday life. Some of the women did not respond at all to the question and the others agreed with the view that experience was what mattered most.

*To get a job, employers look at more practical skills than education and certificates! [Bengali woman living in Tower Hamlets, 37 years old]*

This view has been found in research by Aston *et al* (2007), which suggests that some Bangladeshi women may have a more negative attitude towards education based on having no qualifications themselves, bad experiences at school and/or very traditional parents who did not think that education for a woman was important.

A further insight comes from Rahman (2007). He points to aspirational differences in the Bengali community, and suggests that people from the rural Sylheti region tend to attach different values to education from urban Bengalis and Indians. This is mainly due to the region being rooted in agriculture and subsistence, and therefore people placing less value on educational aspirations. It is important to note here that although the Bengali groups were all Sylheti-speaking, this regional inference was not addressed or openly discussed within the focus groups.

In contrast to the Bengali group, the Somali participants, particularly parents, did place a high value on education, especially for their children, as they believed it would strongly improve their work prospects and future. However, some of the women expressed a lack of faith in the British education system to deliver it, and felt that extra tuition for their children was therefore needed. This was highlighted by the younger (second generation) participants.

*I know a lot of parents that will send their kids to after-school classes, which help prepare them for exams. They are not cheap, but they will find the money from somewhere as they want their children to progress and they realise that education is the best way for that. [Somali woman living in Tower Hamlets, 19 years old]*

Most of the members of the white British groups agreed that it was worth investing time in education. Many of the younger male and female members, as well as those with children, stated that they would like to pursue further education. The cost of courses, however, was cited by both white British groups as being a major problem and a reason why many people were reluctant to pursue it. Many were in agreement when one participant commented:

*Cost is a significant barrier to pursuing education. On top of that, courses that provide the basic level of skills training are cheaper than higher levels of skills training. This can create a barrier to opportunity and progression, as financial situations may not allow a person to undertake the training. [White British woman living in Tower Hamlets, 35 years old]*

## *Finding work*

Mothers in all of the groups said that finding a job with flexible hours was a major issue. The Somali participants, who tended to have larger families, particularly stressed this point.

Participants from each community also highlighted that the mechanisms in place to bridge the unemployed back into work, e.g. through training, were not felt to be of any value. Voluntary work was generally seen as a better solution. However, many said that even though they would like to participate, they did not have enough information about voluntary opportunities available in their area.

A key area of difference between the Bengali and Somali groups compared with the white British was the topic of discrimination. Although most cited lack of qualifications, experience and references as a barrier to work, the Bengali and Somali participants (males in particular) highlighted that their religious appearance or ethnicity was often a bigger obstacle. The main references and examples given here were related to having an obviously Muslim name, wearing a headscarf (hijab) or having a long beard. As one participant explained:

*I know that my beard and the way that I dress [Islamically] can put employers off. [Bengali man living in Tower Hamlets, 38 years old]*

While this statement was not contested by the other Bengali male participants, it was noted that those who were not Islamic in their appearance, (i.e. they did not have a beard or wear Islamic dress), did not contribute further to this part of the discussion. This highlighted the greater level of discrimination some fellow Muslims face solely on their physical appearance.

As the group explored the issue of discrimination within the Somali groups, a member of the male Somali group recounted his son's experience.

*My son wanted to become a pilot and applied to study aeronautics at university. He applied and his application was accepted. When he wanted to start he was told the course was full. There is no doubt that he was refused because his name is Abdirahman Mohamed. They remembered the Twin Towers and rejected him, if his name was John or Steven he would have been accepted. He later changed his ambition and is now studying petroleum engineering at the University of Edinburgh. [Somali man living in Haringey, 63 years old]*

In response to this example, there was general agreement within the group that these kinds of incidents, although considered uncommon, affected aspirations within the Somali community, causing members to be more 'realistic' about the opportunities available to them.

Similarly, in the male Bengali group, some of the participants said that the indirect discrimination they felt – because they had Muslim names or were Islamic in their appearance – meant that they were apprehensive about applying for certain jobs, as they felt there would be an immediate bias against them. A similar view to this was

expressed by some of the female Somali and Bengali participants who wore headscarves (hijab).

However, there were also feelings from the Somali interviewees that Asian people were more likely to get jobs over members of their own community. Both Somali and Bengali male participants also believed that newer migrant communities were getting priority over jobs. The younger Bengali men expressed particular concern over recent eastern European members 'taking their chances' of getting paid work. One male participant summed up the general feeling of the Bengali group.

*Times have changed due to the economic crisis, there are fewer jobs out there and there's also greater competition for jobs, because we're competing against people who have come from eastern Europe. They are making our lives even more difficult. [Bengali man living in Tower Hamlets, 23 years old]*

The white British groups did not express any particular views about other ethnic groups getting jobs more easily. However, one participant in the male group spoke about his frustration at the number of non-English speaking people in the care service. This view was affirmed by the rest of the group (who all had considerable experience of health and care services):

*Now most of the people that I have to deal with to help look after my wife [who needs a care worker] cannot speak English very well. This is a real problem for me as it is hard to communicate with them and it makes the whole process so much harder to deal with. [White British man living in Tower Hamlets, 53 years old]*

### *The route into work*

The barriers to obtaining work that were identified varied considerably across the groups.

The female Somali participants generally felt that Jobcentre Plus was putting too much pressure on them to find work which they found exceptionally difficult to manage with their large families and number of children. They also expressed anxiety about the conflict between setting an example to their children by working, and staying at home to raise them in the best way possible.

*There's a big drive to push mothers with young kids into jobs. They're given appointments at the JCP, even though the staff knows there are no jobs for them. Yet they still bully the women and make them feel worthless because they're in receipt of benefits. Most mothers want to raise their children as well as find work, so their life wasn't restricted to just their home and children. But it's difficult. [Somali woman living in Haringey, 40 years old]*

This view was also reiterated by the mothers in the Bengali and white British groups, and accords with earlier research (Aston, *et al.*, 2007), which found that most women across communities would rather not work or study when their children were very

young, so they could devote their attention to their families. Furthermore, women who wanted to return to work after having children usually wanted to work part-time.

A major factor affecting the (first generation) Somali males in finding work was not having their qualifications gained in Somalia recognised in the UK. Some of the older interviewees were highly qualified, (for example one was a mechanical engineer, another a zoologist in Somalia). However, they all highlighted their struggle to transfer their skills to similar jobs in Britain.

Other research shows that the problem of qualifications gained outside the UK widely affects the Somali community. '*Somalis constantly express frustration that [their education] is not recognised, and point to the under-utilisation of their professional skills – doctors driving minicabs, teachers unemployed.*' (Harris, 2004, pp. 39).

One of the Somali members spoke about an organisation that helped with this issue of having overseas qualifications recognised, much to the surprise of the rest of the participants, who were unaware that it existed.

*Our community is better off with qualifications than without, but it's still difficult. Praxis is great. I know a lady who was a qualified midwife in Somalia, she had a hard time getting work and with the help of Praxis she's now working at The Royal London Hospital. But it's a single organisation and not big enough to help everybody. [Somali woman living in Tower Hamlets, 45 years old]*

Location was singled out as a barrier for Somali men from Haringey. Many of the participants who were actively looking for work commented that they felt 'stuck' trying to find work in their local area, due to transport being so costly. When probed on this a few members said that even though they were willing to take a job within London, they felt that the pay needed to be substantial to cover the extra travel expenses, otherwise it would be pointless.

*'Unfortunately also the locality, whether you're in Haringey or Enfield, it's also another disadvantage. Look at the cost of transportation! It's impossible to manage. [Somali man living in Haringey, 42 years old]*

Another participant then added:

*Transport for a week is £16 or £18; what will that person have to eat, once they've counted the cost of travel? [Somali man living in Haringey, 37 years old]*

Somali male participants from Tower Hamlets particularly stressed the need for more work experience opportunities. They all agreed that this was a key barrier preventing them from getting work, despite having completed training courses or gaining qualifications. On top of that, it was felt that increased access to work experience opportunities, even voluntary work, could improve their chances of getting references – a major obstacle they cited to holding them back from securing full-time employment:

*The practical problem we face in our community is that you need a reference and have to prove you have work experience to show your suitability for a job. Many of us don't have that. It's not access to benefits that's the issue; it's the accessibility to employment. If people can find and secure work they won't turn to welfare benefits. [Somali man living in Haringey, 39 years old]*

The Somali men in the Tower Hamlets group also stressed the need for greater Somali representation in key services such as Jobcentre Plus, in order to help them find jobs. Many felt that having greater representation within recruitment services would offer much needed support, advice and guidance to help members of the community get back into work.

*You do not see Somalis working in recruitment agencies or the JCP, there's no one available to help facilitate work. There are no Somalis in the most important public service agencies, which makes it difficult especially for those people who do not understand the language. [Somali man, living in Tower Hamlets, 31 years old]*

The Somali participants were particularly aware of public perceptions of their community, as well as cultural and linguistic barriers preventing them from finding work. Women in the focus groups particularly stressed this point. One commented:

*The media has stereotyped our community as being useless, but we also have a wall of fear that needs to be shattered. We need to be empowered and seek support. It's really daunting if you have language difficulties to go into a new workplace and stick out like a sore thumb. What would be really ideal is if you could go into work while being trained. [Somali woman living in Tower Hamlets, 33 years old]*

The group discussion echoes Chalmers and Hassan (2008), who have identified distinct barriers to Somalis entering the labour market. They include poor literacy and language skills, immigration status, racism, and problems converting professional qualifications gained elsewhere.

All the Bengali female interviewees noted the issue of transport as a barrier to work. This was again in (earlier) reference to their preference in using a car rather than public transport, and the increasing number of 'car free zones', which could thus prevent them driving to work. The mothers in the group also cited the cost of childcare as an issue preventing them from working. It was referred to as too high for them to afford – particularly for those with more than one child – and they could not rely on family to do it for them on a full-time basis.

Other barriers around working for the female Bengali participants included: language (for the older participants), low salaries and uncertainty as to whether they would actually be better off in paid work. This last point led to a lengthy discussion within the group about there being no point in working for a low wage. Two of the older members described how they had worked in a factory, and although they were happy to be doing something, the money did not make them much better off than being on benefits. One of the younger members then added:

*It's best to stay on Income Support rather than getting a job with a low salary, then you have to stress about bills, rent, council tax and sorting out other benefits. It can be very offputting. [Bengali woman living in Tower Hamlets, 35 years old]*

The examples given by the Bengali women of working in low wage jobs, or not working at all, are reflected in other research. Bagguley and Hussain (2007) confirm that south Asian women, especially Bangladeshi women, still remain among the most excluded and lowest-paid sections of the labour force. Evidence from the Department for Communities and Local Government (2009) also suggests that Bangladeshis in England experience disproportionately high rates of unemployment when looking for work, as well as high rates of economic inactivity. Moreover, Bangladeshi women have lower participation in the formal labour market than women from any other major ethnic group in the UK.

The male Bengali participants also discussed the problem of only being able to access low-wage jobs. Both the younger and older members in the group strongly expressed their desire to work, as long as the salary was 'above the minimum'. Some also mentioned their lack of qualifications as being a problem to accessing work, alongside finding opportunities that matched their skills and interests. Many were in agreement following this participant's statement:

*Having a job would bring a massive change to my life and give me hope for the future, but decent jobs are hard to find and without a reasonable wage there would be no point. [Bengali man living in Tower Hamlets, 27 years old]*

Of the white British participants, many of the women spoke about losing their confidence after being out of work for so long. There was also anxiety and fear around how their income would be affected if they started working. Those that were younger expressed concern over the way Jobcentre Plus operates, and examples were given about benefit cuts when a person was working part-time.

*I work on Saturdays for three hours. I thought I should inform Jobcentre Plus, and they stopped my Income Support. I don't know why. But I had a direct debit coming out on the day that my Income Support was being put into my account, so then I got myself into debt. [White British woman living in Tower Hamlets, 31 years old]*

In response to the example above, many participants argued that this should not have happened and were shocked that it did. It was clear from the reactions that there was lack of clarity or assurance within the group about procedures relating to part-time work and benefits.

The white British male participants cited various barriers that were preventing them from finding work. The main one focused on physical and mental disabilities, which many of them were suffering from. This subsequently affected their confidence, ability to do further training and gain relevant work experience to improve their chances of finding work. A few of the participants agreed with the view:

*Being able to keep up with the pace of every day and getting up every morning is hard for some people. With a disability and no experience you are even more restricted, so there is no point to even do training. [White British man living in Tower Hamlets, 43 years old]*

Unlike the white British groups, the Somali and Bengali participants, most notably the men, were more in favour and more aware of self-employment. They had more experience of self-employment and knew more examples of it. This is consistent with research by the Department for Business Enterprise and Regulatory Reform (2008), which indicates that the self-employment rate of ethnic groups is increasing at a faster rate than for the white British, and other white groups. Barnes and Taylor (2006) also highlight that within ethnic minorities, some men are more likely to enter self-employment as they see it as a way of avoiding discrimination and low earnings.

### **Quality of life/public services and community**

The focus groups closed with discussions around the ways in which living on a low income affected participant's quality of life, their interaction with public services and their community. Overall, living in poverty was described as a negative experience by all three communities, and 'stress' was cited as the major by-product of it. However, methods to deal with the pressures of living on a low income differed greatly across the groups. The Somali participants highlighted the increasing mental and physical problems associated with khat (the legal stimulant widely used within the community), whereas the white British groups spoke about regular use of anti-depressants. All three communities noted that their health was also affected by poor diet and their inability to afford regular healthy balanced meals.

Language was a key barrier affecting the Somali and older Bengali participants' interaction with public services. Overall, participants suffered from a lack of awareness of the services available to them. The refuge the Bengali and Somali community sought within their (Muslim) faith and culture was also evident. Despite some distinctions between younger (second and third generation) members, their ethnicity and religion provided support and a strong sense of community, however, with it came the risk of segregation from other communities. On the other hand, the white British groups expressed a weaker sense of belonging, no religious affiliations and feelings of isolation within a community where they felt like a minority.

### *Well-being and health*

Overall, feelings about living in poverty were fairly homogenous across communities. Participants within each group felt negatively about living on a low income, describing it as both restrictive and degrading. Many were grateful that the welfare system offered financial support, but they also described living in poverty as a trap that it was often impossible to escape from.

One white British participant was very explicit about how being on benefits made her feel.

*Being on benefits is miserable and embarrassing. You feel non-existent and a burden. You live from day-to-day and spend your life waiting for your benefit. [White British woman living in Tower Hamlets, 53 years old]*

Other members across the groups also highlighted how being on benefits affected their sense of self-worth. This experience of low self-esteem chimes with recent research by Oxfam (Cochrane, 2010, pp.1) which highlights the negative attitude many people have towards those on benefits: *'Public attitudes prevail that people on low incomes – and particularly those on benefits – are "scroungers" who are to blame for their own poverty.'*

All the groups identified stress as a major problem, and linked it to illness and, sometimes, drug use. Many explained that the pressures of living on a low income led to nervous tension and depression. However, methods to deal with stress differed within each ethnic group.

### **Drugs**

A significant problem identified solely within the Somali groups was the use of khat, especially among men. Khat is the Somali name for a type of leaf that is a (legal) stimulant when chewed in large quantities. Many participants explained that usage had increased due to stress and joblessness, but the side effects were extremely detrimental. Most participants in both the male and female groups said that they thought khat should be made illegal, as it often leads to family breakdown. It also causes mental health and behavioural problems, as it affects sleeping patterns and can be hallucinogenic. There was much agreement on the view:

*If we women had the power, we'd have banned khat long ago because it has paralysed our men. If a mother has been chewing all night she can't get up in the morning to care for her children. It's a problem for individuals and families alike. I'd tell the government to ban it. [Somali woman living in Haringey, 40 years old]*

Evidence from the Home Office (Patel and Murray, 2005) suggests that khat is widely used in the UK, and that it induces sleeping difficulties, paranoia and mood swings.

However, some older men and women contested the view that khat should be made illegal. One older woman was met with much opposition in the group when she said:

*I don't have a problem with it. I enjoy taking it, it helps me to relax and de-stress. [Somali woman living in Haringey, 70 years old]*

Another male participant highlighted the problem if khat was made illegal:

*Men come to the UK as providers for their families, but they've found it difficult to find work, lost their status as the family's provider and so it's a lot easier to turn to khat as it distracts you from that. I think we need to ask ourselves, is khat the problem or a symptom of a much larger problem. Banning it may not achieve the desired outcome; we don't want*

*to criminalise the community, we need to focus on cause.* [Somali man living in Tower Hamlets, 42 years old)

This view met with much agreement within the group. Many of the Somali men reiterated that it was hard for them to not be able to work and have to stay at home. It made them feel useless, and khat was a method of escapism. The prevalence of khat as a form of escape among male Somalis was identified by a number of Somali women as a factor in family breakdown. They had separated from their partners, because the men could no longer provide, and they felt that they were better off managing on their own.

Among the Bengali participants the concerns regarding drugs were different. They were mostly concerned with illegal drug-taking among the young. Although many members within the group refused to comment on this issue, one of the female Bengali participants said:

*Children who are involved in illegal activities like selling drugs, stealing, fighting, are mostly from low-income families or suffering from poverty. You see it all around you, and it's not going to improve in this economic climate.* [Bengali woman living in Tower Hamlets, 36 years old)

Unlike the Bengali or Somali groups, the older white British participants highlighted that anti-depressants were easily prescribed and widely used to cope with stress. Although many members within the group refused to comment on this issue, one of the female white British participants said:

*I was on anti-depressants for two years, and the first time that somebody asked why I was on them was when I went to hospital. The doctor gave it and I took it, but when the psychiatrist asked me why I was taking it I couldn't tell her.* [White British woman living in Tower Hamlets, 55 years old)

It was also noted within the male white British group that most of the participants were smokers. When probed about this, respondents said that they had been for a long time and that it did help to calm them down. Research by Bobak *et al* (1998) highlights the association between poverty and tobacco use, and indicates that smoking is more common among poor men (variously defined by income, education, occupation, or social class).

### **Diet**

A health problem identified by all the groups was poor diet and the inability to afford healthier food, like fresh fruit and vegetables, on a regular basis. This point was reiterated in each group, usually in response to the type of food that they could afford to buy. The following point summarised the general feeling:

*I would love to be able to afford fresh fish, I know it is good for me and my family, but how can I afford that on a regular basis with so many mouths to feed and very little income? The problem is that most of the good food they tell you to eat is so expensive.* [Somali man living in Haringey, 42 years old]

The responses echo findings in other research by the Food Standards Agency (Nelson, *et al.*, 2007) that the poorest households are unable to afford to eat balanced meals.

Furthermore, there were references made by a number of the Somali participants that because they are unable to buy healthier food, and often had to settle for cheap supermarket deals, weight gain and obesity was becoming an increasing problem within the community. One participant also added that this was not going to improve if members were also doing less and less exercise.

### **Housing**

Both the Somali and Bengali participants identified housing conditions as another major problem. Respondents felt that their health was suffering as a consequence of poor conditions, such as damp and overcrowding. However, apprehension was expressed from both sides that one community was more likely to be housed quicker than the other. Many members of the group were in agreement when one participant commented:

*There is so much discrimination you'd think that there is social engineering to ensure that Somalis are left to live in substandard accommodation. [Somali man living in Haringey, 53 years old]*

### **Exercise**

The Somali female participants, particularly those in Haringey, expressed problems with accessing leisure centres and exercise facilities. This was due to high costs and the lack of women-only days – an important requirement due to cultural/faith reasons. There was much agreement with the following point:

*We don't do exercise, take part in sports activities or go to the leisure centre because there are no female-only centres in this area and we are limited by our income. Everything costs money. Our income only stretches to the necessities; luxuries like going on holiday are also out of the question. All these things in an ideal world would be good for your health but you have to make do. [Somali woman living in Haringey, 43 years old]*

Both younger and older participants within the white British female group said that they felt it was difficult for those on a low income to access exercise facilities. All the participants cited the gym as too expensive, and there was no mention of using a leisure centre and other lower-cost classes. The mothers in the group said that activities for children were quite expensive, and there was general agreement in the group when one member said that 'leisure facilities in Tower Hamlets were more expensive than other London boroughs'.

### **Relationships**

Separation and divorce also appeared to be common among many female Somali members. This was associated with the pressures of joblessness, low pay and stress. Some suggested this was also a result of husbands/partners not providing for the family (due to unemployment for example) or playing an equal role in the household.

Another issue that some of the Somali men mentioned was post-natal depression. It was highlighted by some members that this was an increasing problem among Somali women in Britain, and something that men were not used to dealing with, as it rarely occurred in Somalia. Many of the Somali women reported that this was mainly due to the high stress levels they were experiencing. Some said that it was also a result of the big cultural shift from the system of care (through the community) that they were used to in Somalia. One participant explained that:

*When a woman has had a baby in Somalia, she does not leave the house for 40 days. She is looked after and cared for by family and friends in the community. [Somali woman living in Tower Hamlets, 52 years old]*

Another member in the group added:

*Here in the UK that is not possible, the day after a baby is born, life carries on as normal. [Somali woman living in Tower Hamlets, 38 years old]*

Across the groups, all the participants who were parents said that they were under added pressure by not being able to afford material items for their children. There was also concern expressed across the groups that not being able to meet their children's demands potentially had a big effect on their psyche. As one participant concluded:

*Nowadays children demand things that parents on a low income can't afford, like mobile phones, computer games etc. By not being able to buy those things for our children, they can start to think we don't love them any more and then start to show challenging behaviour. This also leads to them engaging in inappropriate activities like selling drugs or running away from home. [Bengali woman living in Tower Hamlets, 36 years old]*

## *Public services*

All participants had been in regular contact with public services, although experiences varied. A number of people across the groups expressed an overall dissatisfaction with the health service, particularly the treatment given by doctors, who have a limited time to treat patients.

A shared area of concern for both the Bengali and Somali interviewees were housing services. Most lived in council housing or housing association property and felt that language barriers prevented them from communicating effectively with service staff. This generally led to housing conditions worsening and problems not being dealt with on time.

*In Tower Hamlets there is a high rate of health problems because of overcrowding and bad housing conditions. It's even harder if you can't communicate properly with services. [Bengali woman living in Tower Hamlets, 40 years old]*

Rutter and Latorre (2009) suggest that the Somali-born community in the UK has a very high uptake of social housing. Jones and Tracy (2010) also found a lower understanding of the eligibility criteria for benefits among ethnic minority groups than the majority ethnic group.

There were some quite different concerns that were identified among the groups. Most of the Somali participants were negative towards, and mistrustful of, the health service. Complaints were made about the lack of skilled interpreters in hospitals, surgeries etc, and severe cases of misdiagnosis because of this. Many also felt that due to appointments having strict time constraints, they were not able to spend enough time with their GPs to communicate properly with them and ensure that their problems were effectively dealt with.

*There have been occasions where I am certain that the GP hasn't properly understood my problem and I've been sent on my way with a prescription for Paracetamol in my hands. This is all caused by not speaking the language. Interpreters are costly so they don't want to hire them. You're then told to bring someone along to help but that's not always possible. [Somali woman living in Haringey, 57 years old]*

Most of the Somali women, particularly those that struggled with speaking English, concurred with this example.

Older members of the Bengali community also felt that language and interpretation were key problems preventing them from effectively engaging with public services. However, there was also some criticism from the female participants on the professionalism of the Bengali staff employed in public services. There was no disagreement when one member commented:

*The government should provide customer care training to staff working at places like the DSS, where staff are so unhelpful. Most of the staff in public services in Tower Hamlets were employed because of their Bengali language skills, but they are not actually using these skills and helping those they're meant to be. [Bengali woman living in Tower Hamlets, 42 years old]*

An interesting point observed within the Bengali and Somali groups was around how they received information about public services. Overall, participants said that it was mainly through word of mouth. They tended to not read leaflets or booklets, thus highlighting a preference for more oral or visually dominant communication. This would especially be the case for older members who suffer from poor literacy skills.

White British respondents spoke of a general lack of awareness and knowledge of public services. Many of the male participants who were suffering from mental health problems showed a great lack of confidence in social services, particularly with regards to care services for vulnerable adults. There was anxiety expressed about the quality of care staff, with some participants mentioning that care staff did not always have a good level of English.

*If you have got two arms and two legs you can't get a social worker! If you do get a carer, then a lot of the time they are not from this country and you struggle to communicate with them. [White British man living in Tower Hamlets, 43 years old]*

This association with social services corresponds with work by Cunningham and Cunningham (2008) which highlights that poverty and contact with social services are strongly linked, and one can easily lead to the other. For example, if you are living in poverty you are more likely to be unemployed, socially isolated and living on a low income. These factors often lead to problems such as family break-up and poor health, which in turn increase the likelihood of being in contact with social services.

### *Community*

The meaning of 'community' differed for the different ethnic groups. For the Bengali and Somali participants, community referred more to other people from their home country, as opposed to people who lived in their area. The white British groups viewed community in relation to their neighbours or their borough as a whole.

There were more commonalities between the Bengali and Somali participants with regards to community and the importance of culture and faith. Unlike the white British respondents, both groups spoke about the benefits of being within a community and how it contributed to their sense of belonging. They also underlined how their culture and Muslim faith determined how they conducted themselves and how it influenced the way they lived their lives.

In particular, older Somali participants discussed how their culture and Islam played an important part in their lives, and how it fostered altruistic values and support. Sharing a common language was also seen as contributing to a tight-knit community, but some mentioned that this also encouraged a sense of isolation from the wider society and lack of integration. The Somali women in the Haringey group felt that:

*Our faith is the foundation which we build our lives on and we try to practice it in most aspects of our lives. It helps us to be good members of our community and be neighbourly, but at the same time, some people can see it as a reason to isolate yourself. [Somali woman living in Haringey, 50 years old]*

Similarly, the Bangladeshi interviewees said their culture and religion (Islam) were strong factors in their lives and influenced how they acted/interacted on a daily basis.

*Our religion and culture are very important to our identity. Faith gives you strength to overcome any obstacles that come your way and helps to make you a better person. We teach our children about our religion and culture, so they will respect others and have good manners, but it is more difficult when they are born here and also feel very British. [Bengali man living in Tower Hamlets, 40 years old]*

Some of the Bengali female participants expressed a sense of isolation; feeling that people in the Bengali community only think about themselves. One participant in particular stated:

*Even though most of the population in Tower Hamlets is Bengali, I feel that they socialise less outside of their families. There is less community involvement and people in the area only really think about themselves.*  
[Bengali woman living in Tower Hamlets, 36 years old]

This view was not echoed in the male Bengali group; however, when probed, one younger male participant commented that men could place more importance on the community as Bengali women were more culturally restricted and tended to spend more time in the home.

Another commonality between the Bengali and Somali groups was an anxiety towards bringing their children up in a western environment, and the children not retaining their cultural values. Both communities saw change between generations, with a growing gap and sometimes conflict between the more westernised youth and their elders as a problem. The younger members acknowledged the point.

*I think if you're from two places or have two different sides to your identity, your family life and your life outside your home can be difficult to reconcile. A lot of younger Somalis have moved towards the British identity more. You can have a parent who's very Somali and a child who's very British. Some parents and their kids can be poles apart and both are finding it very hard. It's difficult to be two things at once.* [Somali female, living in Tower Hamlets, 21 years old]

The white British participants differed greatly from the other two groups with regards to their views on community, culture and faith. Little emphasis was placed on this part of the discussion, and participants expressed a weak sense of belonging to their surroundings. Religion was not picked up by any member as being an important factor and the topic was quickly brushed over. Both the male and female participants expressed a strong sense of cultural isolation – highlighted because they felt like a minority in Tower Hamlets and had little communication with the other ethnic groups in their area. One participant stated:

*I'm not being racist, but there are mostly Asians in my area. There's sort of a barrier and I don't know how to break it down. Our way of life is different from theirs, and we are a minority here.* [White British man living in Tower Hamlets, 50 years old]

The white British members expressed strong links with the nuclear family, but said that they valued friends more highly. This was because they did not want to 'burden' their family, who (for some) did not live locally. The participants that were mothers of older children also expressed a sense of isolation. Most felt that as there were fewer free activities for older children, they tended to stay at home more and therefore socialised less with other mothers/people in the community. As one member concluded:

*Life can be very isolating. It was worse once my kids went to school, as I didn't have the same number of free activities to go to, which is where I used to socialise with other mothers. [White British woman living in Tower Hamlets, 38 years old]*

Research from the Barrow Cadbury Trust (Cangiano, 2009) suggests that the white working class are struggling to deal with the recession, due to a lack of a civil society and community structures (such as church and youth groups).

The white British males said that their local day centres were an important part of their lives and a way to mix with other people. Many appeared very isolated from both family and neighbours, with some saying that they avoided being in a relationship/living with a partner, as it led to loss of or reduction in their benefits.

*The government won't let us have relationships. If I have a partner, and have her live with me, I'll lose benefits, so I'll have to live on my own. [White British man living in Tower Hamlets, 47 years old]*

The fact that most of the white British males were suffering from mental health issues had a great impact on their views in this part of the discussion. They also therefore tended to rely more heavily on the day centres for support, and were also more restricted on interacting with other people/communities than any other group.

## Conclusions and recommendations

This research provides some valuable insights into both the similarities and significant differences in the experience of poverty and low income between people from Bangladeshi, Somali and white British groups. At a broad level all of the participants experienced these conditions as degrading or damaging to their self-esteem. Each group identified problems with the benefit system and expressed concern with the difficulties that they encountered and there were similar concerns across the three ethnic groups about the barriers which prevented them from gaining employment and higher income. The 'benefits trap', the lack of employment opportunities, low pay and the lack of training opportunities were common problems.

It is evident that persistent survival on a low income has had an impact on the perceived opportunities for improvement in both income and quality of life across the groups. The increased barriers to employment in the form of discrimination (real or perceived) are an additional factor in shaping perceptions and aspirations in the Bengali and Somali communities.

However, it was also quite evident that all groups were active agents in maximising their resources. They were not simply languishing passively in poverty. For example most used some form of cost-benefit analysis to evaluate choices and were constantly weighing up the options of training, education, working and benefits, considering outgoings, (what they had to pay for food, bills, rent, childcare and remittances) and seeking opportunities.

Behind these broad similarities of experience the research also shows difference – there are clear examples of the way in which ethnicity, religion and culture differentiate the experience of poverty. In addition, it was clear that factors such as age, gender, health and location played an important part in shaping disadvantage, alongside ethnicity, racial disadvantage and racial discrimination.

There was little question, for example, about the strain that living on low incomes puts on families and relationships across ethnicities. White British men, for example, reported that they were wary of getting into long-term relationships because of the effects on benefits. Somali men and women also expressed the stress living on a low income put on their families, and many of the mothers in the group were single and bringing up their children on their own. This was not the case for the Bengali females; however, the Bengali participants that were parents all described the family pressures they faced trying to cover their expenses on a day-to-day basis.

In dealing with the stresses and strains of living on a low income, ethnicity did appear to influence choices of coping strategies. For example, the white British men and women spoke more of taking anti-depressants. White British groups and some Bangladeshi women also expressed feelings of social isolation. The mothers, in particular, explained that this was made worse because of expensive childcare and recreational activity costs, which meant they were often forced to stay at home, which in turn created further family tensions.

Many Somali women also said that they were restricted in a similar way, but close relationships in the community and outside the family offered an outlet, and played

an important role in how they managed with the stress of living on very low incomes. For them, khat was the key issue, and main substance, that members of the Somali community (particularly the men) turned to for stress relief. Many commented that its wide usage was leading to family breakdown and further mental health problems, and there were fears expressed that younger members were also starting to be influenced by it.

Living on a low income in the UK for first generation migrants also tended to bring changes to gender roles. This was most evidently the case for the Somali men, who were used to being the providers, while the women looked after the house and children. However, with many men unemployed and disproportionately using khat to cope with their sense of emasculation, responsibilities and money management were subsequently relinquished to the women.

The evidence from this and other research highlights differences in patterns of disadvantage relating to ethnicity and other dimensions of identity. This is helpful, not in order to label organisations or individual practitioners as discriminatory or racist, but rather to highlight the way that systems, whether they be public policy, economic processes (such as the labour market) or social processes, can contain unrecognised conditions that produce discrimination and exclusion.

The significance of these differences may vary considerably and the research has not been designed to measure this. However, we can conclude from the research that differences associated with ethnicity, gender, age and disability all have a bearing on the experience of poverty; produce different barriers to opportunity in education and access to work; and different barriers to the success of interventions by agencies to improve conditions or opportunities. We conclude that difference matters in the way it affects the experience of poverty and the potential routes out of poverty. A recommendation arising from this general conclusion is that there is a need to develop a more comprehensive understanding of the way that specific barriers influence opportunity and outcome. Further research would be valuable in clarifying both mechanisms that sustain poverty among some ethnic minorities and policy solutions that could ameliorate them. Below we identify some of the key issues that merit further consideration.

**Income and obligations:** For the Somali groups, expectations associated with family, culture and interdependency means that household income may be reduced by as much as 11 per cent by remittances to relatives in Somalia. For the Somali and Bangladeshi communities the obligations under Islamic tradition to provide charity, called *zakat*, can have a further impact on resources. These payments, which may be seen as obligatory within these communities, may have a significant impact on household income.

**Debt and borrowing:** There are some distinctive differences in the patterns of debt and borrowing. The need to borrow money to meet needs arises across the three ethnic groups but there are different patterns of borrowing with Bengalis and Somalis relying more heavily on family and community resources.

**Education and skills:** There are a number of common barriers here in terms of access to skills and courses, namely the cost of courses and anxiety about whether

they will lead to employment. Also, for the non-English speaking Somali and Bangladeshi people, there are language barriers. However, there are important differences identified, particularly in relation to Bengali women from the Sylhet region, where aspirations towards education and qualifications were lower. Low expectations and aspirations was a feature of sections of the white British groups, particularly for people with a disability and older participants. For Somali males the problems often arose because their qualifications and skills were not being recognised, rather than from low aspirations.

**Obtaining work:** Each of the groups cited different barriers in their attempts to obtain work, for example language (for the older Somali and Bengali participants), lack of references (particularly for the male Somalis), lack of experience, qualifications and childcare costs. Anxiety, however, was expressed across the board about going back to work after a long time and having a low-paid job. Prejudice and discrimination were also key problems for Bengali and Somali men seeking work.

**Well-being:** Stress was commonly cited across all the groups as a threat to health and well-being. Key cultural differences occurred in the ways of tackling the problem, with khat representing a serious problem for the Somali community and anti-depressants for the white British. Not being able to afford a healthy balanced diet and access to exercise were also factors affecting the health of all communities, with issues such as obesity becoming a bigger problem, particularly for the Somali community.

**Quality of life:** The experience of living in poverty was negative for all communities concerned. There were commonalities evident across in the general description of the 'embarrassing' and 'degrading' nature of claiming benefits. However, differences emerged in the way groups deal with the situation in practice and how they remain positive about the future. The (Muslim) religion of the Somali and Bengali groups, alongside their cultural – more collective – sense of community provided a sense of support and reassurance that was not evident within the white British groups, who expressed a greater sense of isolation.

Further research into the differences identified within the study could improve our understanding of the relationship between poverty and ethnicity by:

- providing a better understanding of poverty and the way it affects different social groups from particular ethnic/cultural backgrounds (and more widely in relation to gender, disability, age and other social categories) and whether these differences produce greater hardship;
- developing understanding of why particular groups experience greater levels of poverty and social exclusion than others;
- helping to develop strategies that address the barriers experienced by different ethnic groups;
- understanding the barriers that may be produced by policy and practice if difference is ignored;
- identifying areas to improve understanding of barriers and impact.

In addition to these general conclusions and recommendations, specific recommendations for agencies are set out below.

## **Recommendations for agencies**

1. The recruitment and professional training of Bengali and Somali interpreters needs to be reviewed in both Haringey and Tower Hamlets – particularly within the health service. A bigger drive to train and recruit more Somali people in key services could help to overcome cultural and linguistic barriers that are an increasing problem, and help to create more positive role models within the community. Lessons must be also learned from feedback from the Bengali community who said that it is not enough to just have representatives from the same background. They need to be well-trained and properly supported in order to ensure that the community receives a good quality and professional service.
2. Agencies involved in benefits, training and employment services should bring an understanding of the experiences of poverty, low income and unemployment experienced by different ethnic groups into policy and practice.
3. There needs to be some creative attention to breaking the cycle of ‘resignation’ to life on benefits which is also sceptical of the worth of education or training. This will involve a more detailed examination of what is available, at what cost and with what benefit. People need to have the evidence of affordability and success as well as the opportunities, and encouragement.
4. The emotional/psychological effects of unemployment, together with anxieties about going back to work should be addressed more effectively by services such as Jobcentre Plus through greater understanding of the specific impact on different groups.
5. The issue of khat needs to be further examined, particularly the effects it is having on mental health and family breakdown within the Somali community. Younger people need to be educated on prevention to ensure they do not follow older members of the community and take up the habit.
6. Organisations such as Praxis should be better marketed to the Somali community, to highlight how their qualifications can be used in the UK.
7. Jobcentre Plus should work more closely with community centres and review the training opportunities offered to people, ensuring that they match their skills and are linked more strongly to better quality employment opportunities
8. Promotion of any service or advice channel should aim to be use visual or oral methods, to improve communication, particularly within the Bengali and Somali community.

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