

THE STATE OF THE BME SECTOR IN THE NORTH EAST (2004)

1. BECON

In 1999, the BECON project was established with funding from the Active Communities Unit (ACU/Home Office) as one of 18 regional networks. BECON had rapidly evolved by 2001 - BECON had become its own accountable body, a company limited by guarantee and a registered charity.

BECON's remit is to encourage participation and develop the networks and the capacity of Black Minority Ethnic (BME) community groups and organisations in the North East region.

BECON is committed to:

- Challenging oppression, racism and the exclusion of black people
- Creating and developing an infrastructure for BME groups in the North East region and unlocking funding for the sector.
- Promoting, supporting and increasing the effectiveness of the voluntary sector in each area through the provision of information, advice, training, publication and development services
- Supporting BME voluntary and community groups to network, support each other, share experiences and resources, and influence decision making policy.

"Becon's definition of Black is a political one, which emphasises the common experiences and common determination of people of Asian, African and African Caribbean origin".

2. RATIONALE FOR THE SURVEY

Several recent studies of BME groups in the North East have been conducted (see Prevatt Goldstein, et al, 1991; WEA, 2001; BECON, 2003; Northern Rock Foundation, 2003). All the studies have identified similar issues (which are discussed at length in the findings section) but they have been constrained by focusing on sub-regional areas with limited sample sizes and by focusing on BME communities as a whole rather than just voluntary and community activity.

Therefore, in March 2004 BECON decided to conduct a region wide survey to collate all existing information about BME groups in the North East region. The aim of the survey was to show the strengths of the BME sector and also to signpost future challenges for the wider BME community. The study also provided a comprehensive and up to date directory of BME groups in the North East of England.

3. METHODOLOGY

3.1 Information gathering phase

As a first step in the research process, a consultation process was undertaken to identify BME groups in all areas of the North East region. This involved telephone interviews with support workers and BME community activists in all areas of the region. A subsequent step involved collating all available mapping studies conducted in the last few years in the North East region.

3.2 Questionnaire

A self-completion questionnaire was either sent out or personally distributed (by the BECON development workers) to 103 groups who were identified in the initial data-gathering phase. Some of the groups were already members of the BECON network but several of the groups were formed very recently and are therefore new to the network. The questionnaire was split into sections relating to:

- Contact details / Organisational details
- Staffing / Funding
- Facilities/ Service provision
- Involvement in Partnership
- Information and advice requirements from BECON

The questionnaire was designed in order to collect quantitative and qualitative data about the organisation, their activities and their future training and development requirements. (A copy of the questionnaire can be found in Appendix 1 of the full report). In keeping with current codes of good practice for working with BME organisations, the research team attempted to be as inclusive as possible in engaging the broadest possible spectrum of interest within the North East BME community, including women's groups, gay and lesbian groups, youth groups, disabled groups, older people's groups, etc.

3.3 Response rate

By the end of July 2004, 74 usable questionnaires had been returned from an initial mail out to 103 groups, which is a response rate of 72%, an extremely high response rate for a survey of this nature.

3.4 Data Analysis

The questionnaires were analysed using the SPSS statistical software package, Access and Excel to provide comprehensive and reliable quantitative data. The report also contains a comprehensive literature review of all relevant government publications, policy documents and academic reports relating to the contribution of the BME voluntary and community sector.

4. FINDINGS

The following findings have been distilled from the research programme:

- Nationally the BME community represents around 6.7% of the total population of the UK. The BME community is currently about 2.6% of the total population of the North East but it is growing annually.
- Latest census figures indicate there are strong and significant BME communities in the North East. Nearly 34,000 people from BME communities live in Tyne and Wear alone.
- Ethnic minority disadvantage cuts across all areas of deprivation. Ethnic minority groups are more likely than the rest of the population to live in poor areas, be unemployed, have low incomes, live in poor housing, have poor health and be the victims of crime.
- The proportion of people from different BME communities having a household income of less 50% of the national average are 34% of Chinese people, 40% of African Caribbean and Indian people and over 80% of Pakistani and Bangladeshi people. These figures compare to 28% for England and Wales as a whole
- BME voluntary and community groups provide a crucial empowering and representational role for the BME community, enabling capacity building, civic engagement, combating social exclusion and tackling issues like discrimination and racism.
- The high proportion of BME groups that have not been in existence for a significant length of time (30% under 2 years old and 51% under 7 years old) suggest there may be a need for a high degree of policy assistance and support in order to maintain their existence and eventually allow the organisations to grow and prosper.
- 82% of BME groups in the survey rely on volunteers to run and maintain their organisation. Therefore, the research shows volunteers play a crucial part in the continued vibrancy of the BME sector in the North East.
- BME groups survive on very meagre incomes 28% of respondent groups had an income of less than £5,000 per annum and 42% of respondents survive on an income of less than £20,000 per annum. With incomes at this level it is unsurprising that a large percentage of BME groups do not have paid staff.
- The Northern Rock Foundation (2003:7) report illustrates the problem for BME groups stating, "*Lack of premises is perhaps the most pressing need for most BME groups...however, the difficulty that they face is accessing capital and structural funds to enable them to acquire and maintain premises...with the result that the sector is mostly dependant on short-lived project funding for survival*"

- Almost half (49%) of respondents received funding from Local Authorities. Other significant funders include the Community Foundation which funds 43% of groups, the Community Fund supports 32% of groups and individual donations and sponsorship, which helps to fund 30% of the BME groups in our survey.
- The majority of the voluntary and community sector is facing financial hardship and growing demands on their stretched resources. However, this problem of a lack of resources and rapidly growing demand seems to be especially pronounced amongst the BME community and voluntary sector. The Northern Rock Foundation Report (2003:6) states "*The BME voluntary sector in the region is very under resourced in terms of premises, funding, staffing & time*".
- Our results show that whilst there is a high level of volunteering BME participation in formal structures remains limited. BME groups have a patchy level of involvement and representation in partnership working. In Business, Sports and most significantly Sub-regional partnerships BME groups are significantly under represented and have no real voice. In other areas (LSP's, Childcare & Health) BME groups appear to have become more engaged in the partnerships process. This finding is supported by research conducted in Sunderland and Hartlepool (BECON 2003; WEA, 2001; Northern Rock Foundation, 2003)
- Only 30% of BME groups in the North East are aware of the national compact between the government and the BME voluntary and community sector.
- There is an obvious demand for training opportunities for BME groups in Management Training, Fundraising and Sports Coaching. The majority (58%) of BME organisations do not have a training budget.
- 49% of respondents (36 groups) said the premises they owned or used had access for people with disabilities. Therefore, more than half of BME groups do not have access for disabled members.

5. CONCLUSIONS

The BME sector is vibrant in the North East but relies heavily on the good will of volunteers. A lack of funding for paid staff and premises are a serious concern for the continued vibrancy of the BME voluntary and community sector in the North East.

BME groups currently receive funding from a relatively limited number of funders. The pressure on these limited funding streams will be intensified as SRB funding is phased out, with more groups competing for an ever-decreasing pot of money. Policymakers must ensure that BME groups are not squeezed out in this competitive battle for funding.

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