



# **BME YOUNG GIRLS IN SWANSEA**

## **Exploratory Research Study**

### **Report**

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**Ethnic Youth Support Team**

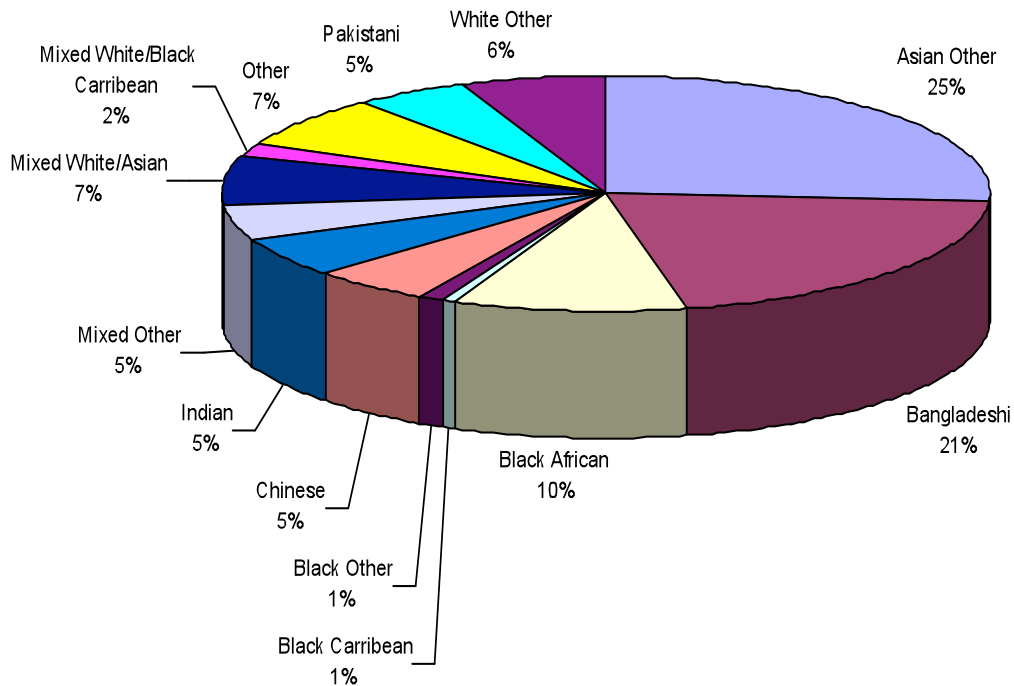
**June 2010**

## **Introduction**

This research was commissioned in 2009, by City & County of Swansea Children and Young People's Unit, a city which has become increasingly diverse over the last 5-10 years, in particular amongst its young people. A city-wide needs assessment identified that in Swansea in 2006 almost 10% of the school-age population in Swansea was from a non-white ethnic background, of which the largest group (1.5%) was of Bangladeshi origin (GHK, 2006). There are also increasing numbers of refugees and asylum seekers from African and Middle Eastern countries living in Swansea, as well as a significant number of economic migrants from the eastern European accession countries. Mid-2007 Census estimates set the percentage of ethnic minorities living in Swansea to be 3.3% or around 7,600 persons in total (ONS, 2010).

The chart below shows the breakdown in terms of ethnicity of Yr 11 school leavers in 2009.

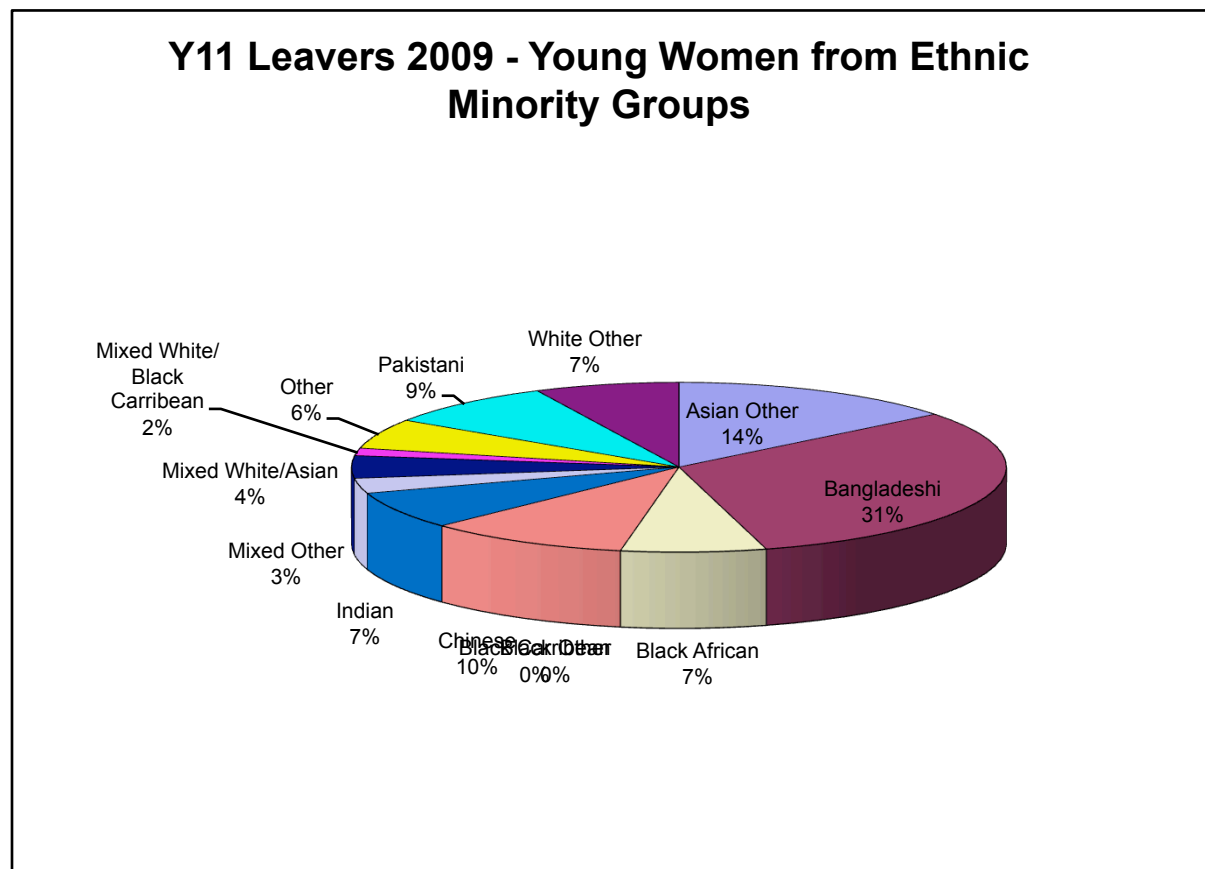
## Y11 Leavers 2009 - Young People from Ethnic Minority Groups



(Source: Careers Wales West Data 2010)

However, there is little formal research around the needs of this growing and diverse group, particularly in the local context. Since 2005, the Ethnic Youth Support Team has been providing a support and mentoring service to young ethnic minority males in Swansea, which was intended to fill an identified gap in provision for young ethnic minority boys. However, the success of this service has also served to highlight the relative dearth of services for young ethnic minority females. When this research was commissioned there was no targeted service for ethnic minority young females. Fortunately, since then, EYST have been able to expand their remit and have begun to deliver a service for young BME females. Much of the data presented within this report was captured before the EYST girls project began. However, we hope it still allows readers to understand the key issues faced by BME young females living in Swansea. The chart below shows the ethnic breakdown of the minority ethnic females leaving Yr 11

in 2009. One significant difference is the proportion of Bangladeshi females is 31%, as opposed to 21% of all ethnic minority pupils.

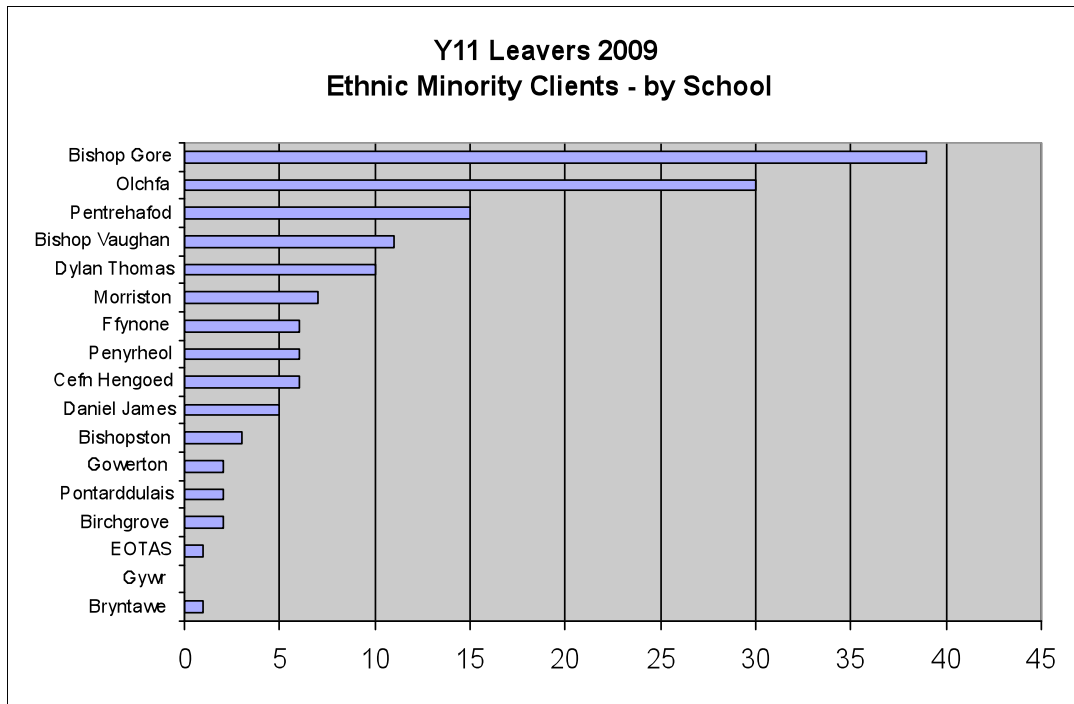


(Source: Careers Wales West Data, 2010)

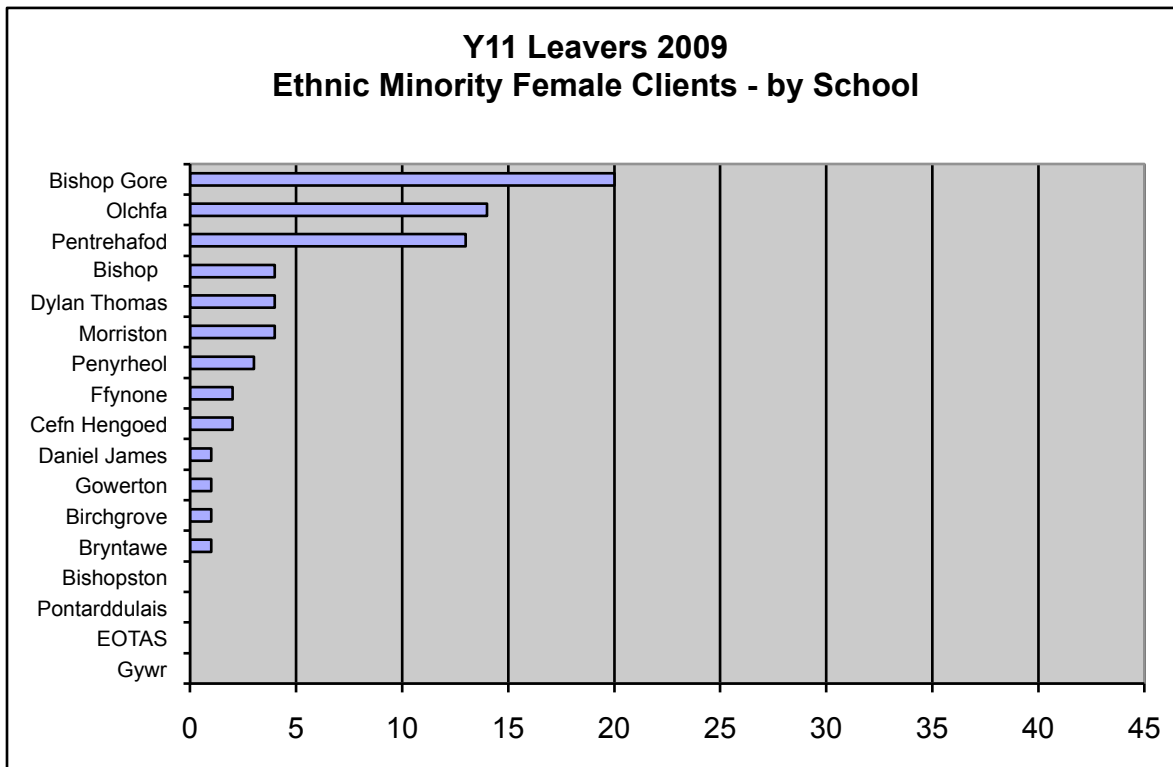
### **Aims and objectives of the research**

The aim of this research was to establish a baseline in terms of the size and composition of the minority ethnic girls' population in Swansea. It also aimed to identify the diverse needs of this group, both from the perspective of young ethnic minority girls themselves, and from the perspective of service providers and professionals. A further aim was to identify and map current provision for ethnic minority young girls in order to identify any gaps, and to identify any best practice examples.

The number of ethnic minority pupils from each school in Swansea is shown below:



The number of ethnic minority female pupils from each school in Swansea is shown below:



(Source, Careers Wales West, 2010)

## **Research design and methodology**

The research design consisted of:

- Literature review of existing relevant research and mapping exercise of current local provision
- Questionnaire and focus group interviews with young ethnic minority girls from different background
- Individual interviews with key service providers.

## Literature Review

Britain's increasingly diverse population, together with greater recognition of institutional racism and the need for culturally sensitive approaches to service provision has led to a plethora of research and activity highlighting the specific issues affecting the non-white black and minority ethnic (BME) population of the UK.

However, despite such action, which has been backed up by equality of opportunity legislation, evidence shows that BME people remain disadvantaged and fare significantly worse than their white counterparts, across the range of areas including education, health, employment, and housing. The challenge of integration and equality of opportunity remains unmet, and for many BME young people, social mobility is not happening at all, as they remain locked in the cycle of poor housing, poor education, poor employment and poor health, which their parents perhaps hoped to break out of.

However capturing 'ethnicity' has always been and remains a challenge for social researchers, as it is of course a social construct, rather than a biological 'fact', and ethnic categories used are not consistent over time or place. This, together with the relatively low numbers of ethnic minorities, especially in some parts of the UK, mean that any data which is collected may be too small to be statistically significant. These factors have contributed to a body of research which is heavily qualitative, localised, and exploratory. It has also, for the most part taken place outside of Wales.

This literature review has aimed to identify the most relevant work to this research - that is, any studies focusing on young females from minority ethnic backgrounds. The majority of research within Wales has tended to focus either on 'BME' or on Children/ Young People. There has also been much focus on one particular issue affecting BME women - that of Forced Marriage/ Domestic Violence.

Nonetheless, one of the areas for which the most robust research is available is in the area of educational performance of school children living in Wales. The evidence here shows a consistent and strong correlation between ethnicity and achievement, with BME young people overall consistently underachieving compared to their white counterparts (WAG, 2003).

*'This research study has found clear evidence of social and educational inequality between the different ethnic groups represented in schools in Wales. Though many of these inequalities are closely linked with socio-economic background and levels of education, they alone do not account for the attainment gap which is still significantly below that of national figures for most ethnic minority groups, and particularly for boys.'* (WAG, 2003)

The study also shows that ethnic minority girls outperform ethnic minority boys, but still do worse than girls overall. In line with other girls, ethnic minority girls do better in subjects like English, and worse in subjects like Maths and Science. Overall, the study shows that 47% of ethnic minority girls in Wales achieved 5 or more GCSEs Grade A\*-C, compared to 56% of all girls. However, this is compared to 45% of all boys, and 28% of ethnic minority boys who achieve this standard.

The research also shows that overall, the lowest achieving ethnic groups in Wales are the Somali and Yemeni groups, followed by Pakistani & Bangladeshi, then Black Caribbean. Indian & Chinese groups outperform all groups. However, there is still considerable variation by subject, key stage as well as gender, therefore the report authors urge against treating all 'BME' as a single homogenous group.

The other area in which there is a growing body of research focusing on BME communities, where research attention has been paid to issues such as: diet, nutrition, mortality & morbidity, mental health, sports participation, domestic violence, forced marriage, female genital mutilation, asylum seekers & refugee health. In Wales, a research network has been established –WEDHS (Wales Equality and Diversity Health & Social Care Research And Support Service). This network carried out a scoping study in 2005 to identify the health priorities of the BME health & social care voluntary sector, which concluded that:

*If we were to base the network's research agenda on the health priorities highlighted by the work of national BME health and social care voluntary organisations in Wales, they would be as follows:*

- Mental health*
- Drug and alcohol misuse*
- Children and chronic illnesses*
- The health needs of women (including those suffering from domestic violence)*
- Mainstreaming equality*
- BME community development*
- The health needs of asylum seekers and refugees*

*([http://www.wedhs.org.uk/pdf/About%20us\\_WEDHS%20Scoping%20study.pdf](http://www.wedhs.org.uk/pdf/About%20us_WEDHS%20Scoping%20study.pdf) Report submitted to: Wales Office of Research & Development, 2005)*

Within the above list, we can see identified the main issue which has been the focus of research on 'BME Females' – that of Domestic violence and included in this, the associated issues of forced marriage, honour-based killing and female genital mutilation.

Such has been the attention received by this issue, that even in Wales, we have seen the emergence and growth of specialist BME specific domestic violence organisations and refuges. The dilemmas of dealing with such a problem without stereotyping and criminalising communities has been highlighted by research recently, for example that carried out by Ravi Thiara (2005) Furthermore, while it is not clear that BME women suffer any higher levels of domestic abuse than other women, what is clear from research is that there are significant barriers to BME women reporting abuse, seeking or getting help.

*'The 2001 British Crime Survey (1 in 5 - 21% women and 1 in 10 men - 10%) pointed to little difference in the prevalence of DV by ethnicity (Walby and Allen, 2004). Knowledge and information, though still scant, of the needs of BME women and children has been generated by a few national studies and numerous pieces of local research.*

*Though BME women are just as likely as others to be victims, there are differences in how they respond to violence and how they are treated by services.*

*Research has highlighted the specific issues in relation to BME women pointing to their 'double victimisation' – the violence perpetrated by partners and family members and then the failure of services to provide appropriate support and interventions (Gill, 2004:466; Rai and Thiara, 1997). The failure to protect by agencies such as the police and health professionals along with the neglect by family members reinforces and perpetuates violence in women's lives.'*  
[http://www.cahr.uni-osnabrueck.de/reddot/Ravi\\_Thiara.pdf](http://www.cahr.uni-osnabrueck.de/reddot/Ravi_Thiara.pdf) .(Thiara, 2005)

Thiara's report also points out the various factors at play, including issues such as under-reporting; preference for culturally-specific services; language issues; the need for support at home, as an alternative to refuge; the need for advocacy with other services; mental health issues, and many more. On the issue of mental health, she states:

*The issue of mental health, especially high rates of self-harm and suicide, among Asian women has caused concern among specialist services for some years. Research in the UK – 6 studies show elevated rates of self-harm, particularly amongst Asian women under 30 (Merril and Owens 1986; Yazdani 1998; Soni-Raleigh 1996). A study by Bhugra et al., drawn from an A&E unit in West London, showed that young Asian women under 30 had rates of self-harm 2.5 times those of white women and 7 times those of Asian men. (Thiara, 2005)*

It is important to remember when discussing issues of domestic violence, forced marriage and BME women, that the large majority of cases involve women under the age of 30, and indeed most of them are closer to 16 than to 30. Thiara states that around 30% of the

approx 250 forced marriage cases dealt with by the Foreign & Commonwealth Office each year are children.

Two other key issues identified by Thiara which impact on BME women and domestic violence are the concept of 'Honour' and 'Shame', and their immigration status. She states that the impact of honour or family dishonour need to be properly understood by service providers in order to effectively help the victim. Regarding immigration status, she states that if a woman with insecure immigration status is without recourse to public funds, they can be excluded from existing support services, and service provider knowledge about a woman's rights in such cases is generally low.

One other area which has begun to receive attention is the levels of participation of young BME females in sports or leisure activities. One systematic review of the literature of BME communities in sport and physical recreation was undertaken by the Carnegie Institute at Leeds Metropolitan University (2009). This research highlighted three major factors impacting on BME participation in Sports, these being Socio-economic status, Racism and Lack of cultural understanding:

*'Socio-economic status has been demonstrated to be a major factor in the inclusion in, and exclusion from, regular and higher levels of sport participation. Being a member of a BME community is associated with higher incidences of disadvantage stemming from long-term unemployment, low income, poor living conditions and poor health, which act as material constraints on participation.'*

*Research demonstrates the damaging impact racism has on participation in sport by people from BME communities. Racial and ethnic barriers have been the focus of a small body of research that has considered the dynamics of ethnic differences and identities and relations in and through sport. It is generally agreed that the experiences of BME communities in sport are mediated by racism.*

*Evidence shows that a lack of cultural understanding and awareness of the needs of BME communities in sport and physical recreation, and, in some cases, a lack of consultation with BME communities in the development and provision of culturally-appropriate facilities and services can be a barrier to participation'*

<http://www.vagacms.co.uk/content/showcontent.aspx?contentid=1503>

The study also concluded that

*'Opportunities for women-only participation are identified as desirable, but there is a more ambivalent assessment of separate leagues for ethnic groups because they may frustrate the development of talent and progression. Clubs dominated by people from BME communities are often seen as being separate, even when they integrate a range of ethnicities. Nonetheless, the research evidence calls for targeted provision that is sensitive to the needs of BME communities, not just to secure increased participation in sport but also to promote community development.'*

*'The short-term nature of many projects is identified as a challenge to developing sustained participation never mind wider sporting and social impacts.'*

The study also makes 25 policy and practice recommendations, one of which is:

*'More research to explore the experiences of BME girls and young women'*

Another area in which lower rates of participation of BME young people has been identified is within youth provision. While no national studies exist, one review of youth services to BME young people commissioned by Newcastle's Play and Youth Service may provide useful insights for areas. The key findings from their research with young people and practitioners was as follows:

*From the extensive work we have carried out with practitioners and young people during this six-month-long review, these are our key findings:*

- *BME young people want to be involved in mixed provision. The young people who took part in the research were keen to access services that bring together both BME and white young people. However, many BME young people do not currently use mainstream provision because they perceive it as racist and inappropriate to their needs. Mainstream provision must be made accessible to BME groups.*
- *Young Asian girls require special consideration in the development of services. Cultural issues demand that separate single-gender provision is essential. Their communities need to be reassured that provision is safe and appropriate.*
- *The Play and Youth Service needs to direct a specific strategy for working with young asylum seekers and refugees. This needs to include specific services which recognise the complex issues that affect young asylum seekers and refugees. Language support and informal educational programmes are essential.*
- *More provision needs to be provided for BME young people in the East End of the city, including young asylum seekers and refugees.*
- *Racism and the experience of racial harassment have a detrimental effect on the activities in which BME young people engage. Although anti-racist training can address this in youth projects, on a wider city level, the Local Authority needs actively to challenge racist attitudes. This could be achieved through educational and awareness-raising programmes in schools and within the Council. Closer liaison with police and other services may help to form a coherent anti-racist strategy.*
- *Action needs to be taken to recruit and train more BME youth workers.*
- *Anti-racist training needs to be available for white youth workers in the city.*
- *There also needs to be training in racial awareness and methods for combating racism. These programmes need to be a regular part of training schedules, not just a one-off event.*
- *The experience of the young researchers has demonstrated that young people from a variety of different ethnic backgrounds can work together very effectively. The Play and Youth Service needs to find resources to fund this group and offer further training opportunities.*

## **Summary of Findings & Conclusion**

### **Focus Groups**

#### **Sample**

Five Focus Group Interviews were carried out in a mixture of school and community settings, interviewing a total of 44 young BME females aged between 11 and 25. School-based interviews were carried out during EYST's lunch-time drop in sessions, at which attendance is entirely voluntary. Community-based interviews were carried at EYST's Girls Drop In Centre. Figure 1 (below) shows the breakdown by ethnicity of the non-white Female population of Swansea, as estimated by the ONS' mid-2007 Population Estimate (2010). According to this source, the total non-white population of Swansea has increased

to around 3.3% or around 7,600 persons in total.

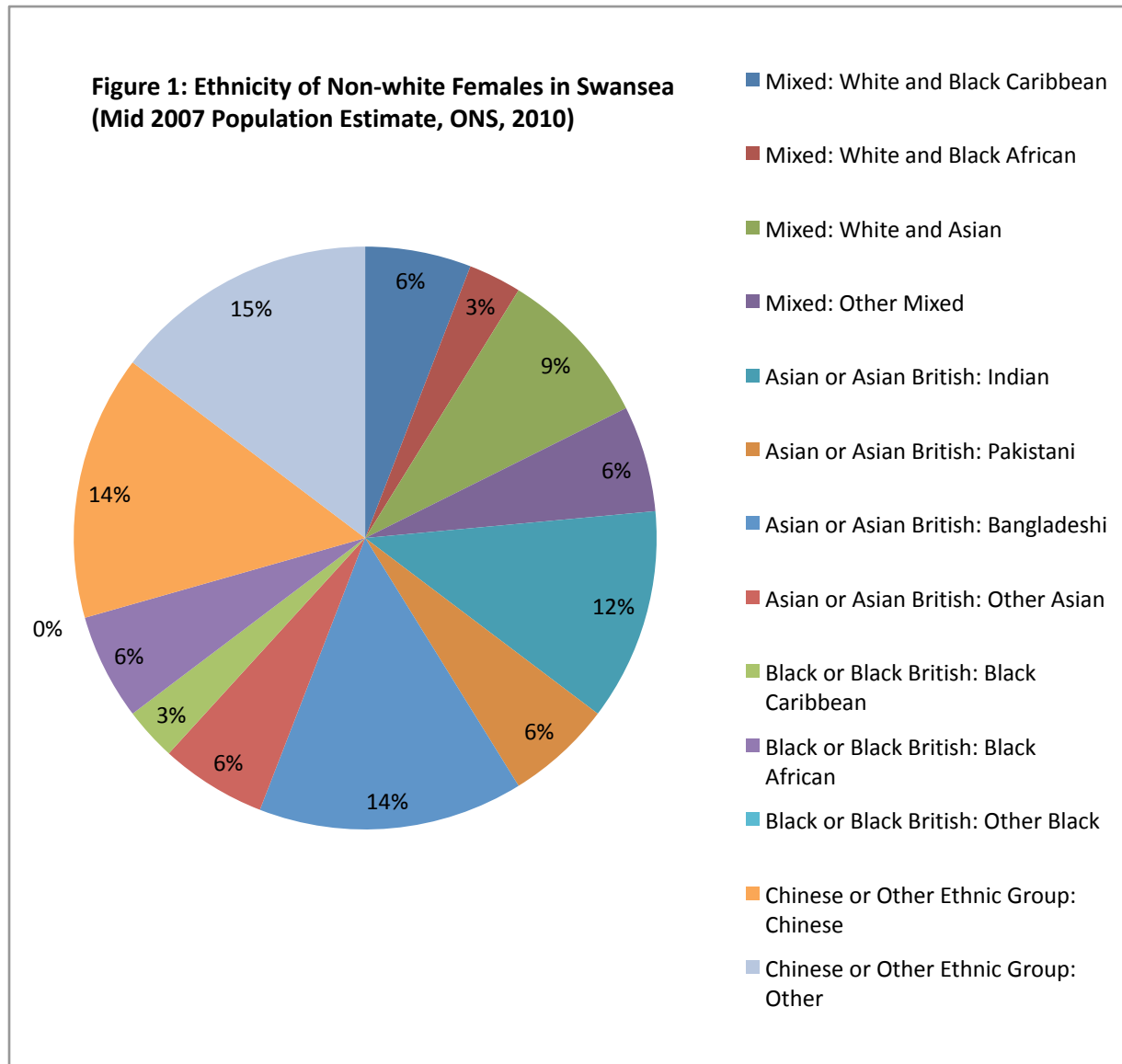


Figure 2 (below) shows the ethnicity of participants in the focus group interviews, with the largest group represented being Bangladeshi.

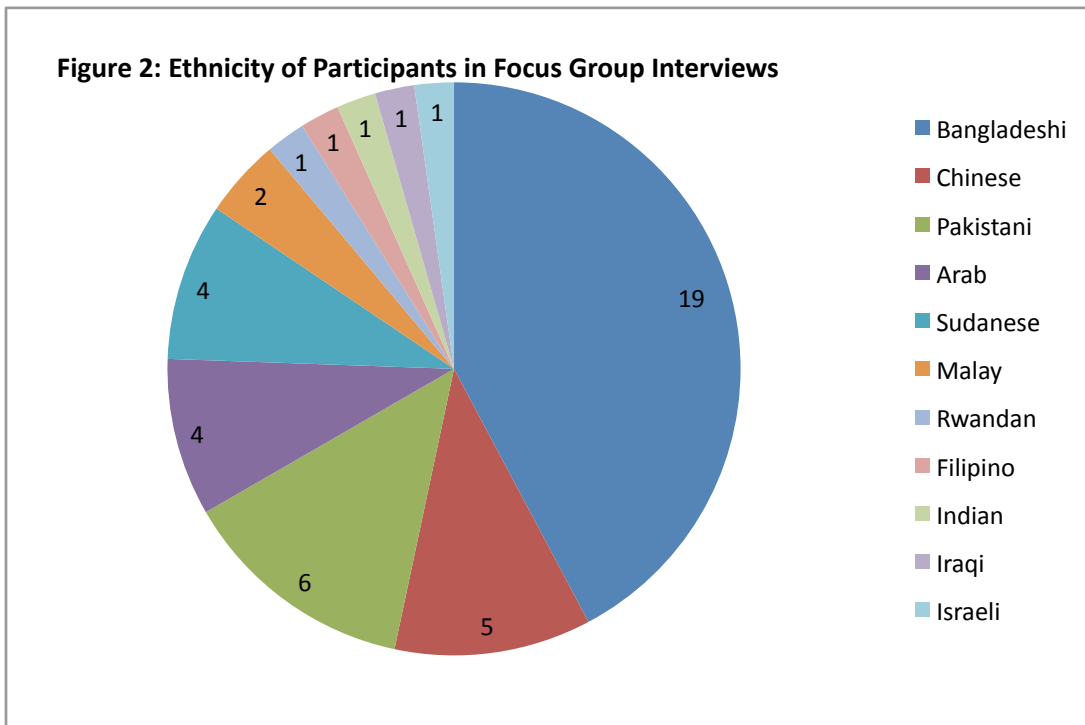
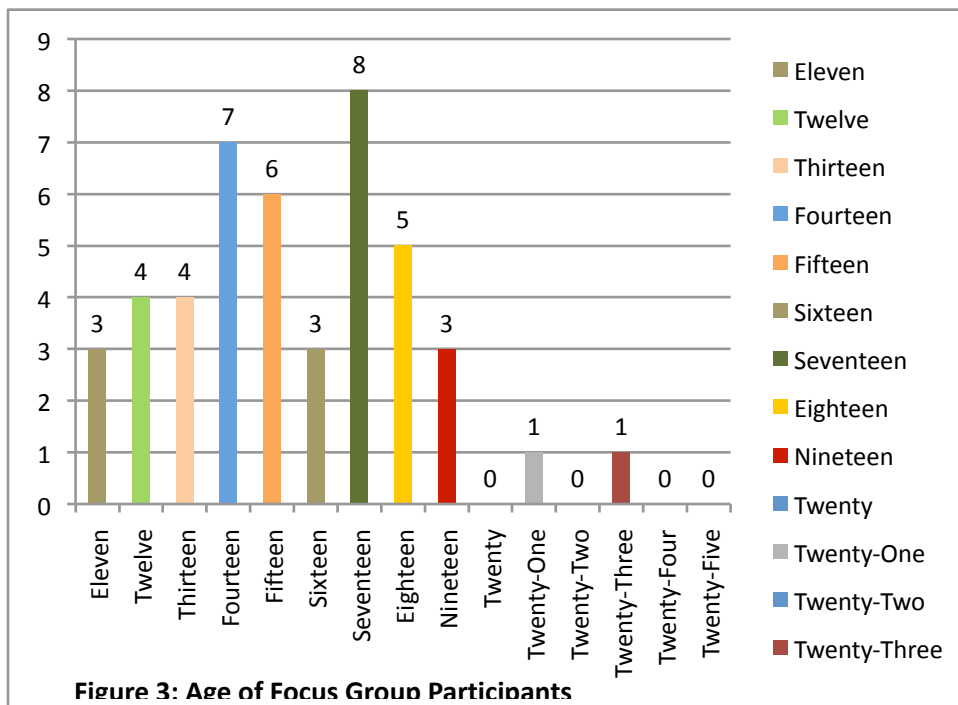


Figure 3 (below) shows the age of respondents, with the large majority of these being aged under twenty years.



### Key Findings

**What are the key issues affecting young BME females?**

Participants were asked to think of the biggest issues affecting young BME females.

These were written individually on post-it notes, before a group discussion. Initial 'Post-It' Note responses from two of the focus groups are shown below:

Focus Group 2	Focus Group 3
<p><i>"Friends"</i></p> <p><i>"Family"</i></p> <p><i>"Racism"</i></p> <p><i>"Smoking"</i></p> <p><i>"Drinking"</i></p> <p><i>"School"</i></p> <p><i>"Health"</i></p> <p><i>"More social encounters with ethnic groups (socialising)"</i></p> <p><i>"Nothing to do after school/ A place after school"</i></p> <p><i>"Racism"</i></p> <p><i>"Smoking"</i></p> <p><i>"Hairdressers (need special hairdressers for African hair)"</i></p> <p><i>"Racism"</i></p> <p><i>"Family"</i></p> <p><i>"Friends"</i></p> <p><i>"School"</i></p> <p><i>"Health"</i></p> <p><i>"Outdoor Activities"</i></p> <p><i>"No-one to talk to because you can't really talk to your family"</i></p> <p><i>"There's nothing for girls to do"</i></p> <p><i>"Nowhere to go"</i></p> <p><i>"Need a place to get together"</i></p> <p><i>"Racism"</i></p> <p><i>"Family problems"</i></p> <p><i>"Smoking"</i></p> <p><i>"Drugs"</i></p> <p><i>"Bullying"</i></p> <p><i>"Smoking"</i></p> <p><i>"Drinking"</i></p> <p><i>"Family"</i></p> <p><i>"Drugs"</i></p> <p><i>"Racism"</i></p> <p><i>"Bullying"</i></p> <p><i>"Outdoor Activities"</i></p> <p><i>"Extra Revision"</i></p>	<p><i>"Don't have friends – Bullying"</i></p> <p><i>"Racism in School"</i></p> <p><i>"Education – no understanding of some subjects – like English"</i></p> <p><i>"Racism"</i></p> <p><i>"Drugs &amp; Alcohol"</i></p> <p><i>"Smoking"</i></p> <p><i>"Teenage Pregnancy"</i></p> <p><i>"Homelessness"</i></p> <p><i>"Drinking"</i></p> <p><i>"Racism"</i></p> <p><i>"Racism"</i></p> <p><i>"Made fun of by bullies"</i></p> <p><i>"No youth club for girls"</i></p> <p><i>"Racism in school"</i></p> <p><i>"Having no friends"</i></p> <p><i>"Bullying"</i></p> <p><i>"Youth club"</i></p> <p><i>"Drinking"</i></p> <p><i>"Bullying"</i></p> <p><i>"No-one to talk to"</i></p> <p><i>"Nowhere to go"</i></p> <p><i>"Nowhere to hang around"</i></p> <p><i>"A lot of peer pressure"</i></p> <p><i>"Drugs"</i></p>

Within each group, these issues were then discussed and prioritised into the top four. The issues prioritised can be summarised as follows:

Focus Group 1	Focus Group 2	Focus Group 3	Focus Group 4	Focus Group 5	Focus Group 6
Racism/ Islamophobia	Racism/ Bullying	Racism/ Islamophobia	Racism/ Lack of Understanding	Racism/ Bullying	Racism/ Discrimination/ Islamophobia
Family/ Expectations	Family/ Tradition	Being Different/ Standing Out	Family Expectations	Family/ Tradition	Cultural conflict
Going out	Opportunities for socialising	Nowhere to go/ nothing to do	Socialising	Nowhere to go	Lack of places to go
Education/ Help in school	Health	Education	School issues	Language support	Careers Advice

It was noticeable that the issues raised were fairly uniform across the interviews undertaken. While Racism was the most frequently mentioned issue initially, after discussion, it was not prioritised as being the most important issue. The issue rated as having the biggest impact was the perceived conflict between the more traditional cultural expectations of them from their families, and the expectations of schools, peers and wider society. Other key themes were the barriers to accessing mainstream social and leisure activities, as well as the lack of more accessible opportunities to engage in health and fitness. A final theme was specifically around a perceived lack of cultural understanding from schools and careers advisors which in many cases was felt to compound their own parents' lack of awareness about educational/career issues.

### **Racism/ Bullying/ Islamophobia**

This was the issue most commonly identified by participants as affecting young BME girls. For the most part - but not always - racism and bullying were seen as interlinked, with most bullying being racist in its focus, and most of this taking place within schools.

Racism or discrimination against Muslims was also identified to be a common experience for BME young females, according to participants. However, most participants agreed that it was not the biggest issue affecting them as young BME females.

Nevertheless, the issue was significant, and many of the participants said they felt like they stood out, were made fun of for 'being different', and were often 'stared at' in school. For Muslim females who wore the headscarf, the focus of bullying was often their Islamic head scarves (Hijabs). Importantly, there were also a few young females who felt that racism was no longer such a big deal – and that they were able to rise above racism when it did occur.

### **Racism:**

Interviewer: *"Racism – how does it affect you?"*

"Most often it's in school"

"People look at you...."

"It affects the way people act and talk"

"Yeah, people look at you weirdly"

"Most people from a different background have experienced bullying"

"They said they do it for a joke but I don't find it funny at all."

Interviewer: *"Is racism acted upon?"*

"I feel people talk about it more than act on it."

Interviewer: *"Would you like more action?"*

"There's no point... because, if you say something, after that it just carries on - they just don't care.."

"I think with bullying and racism they should be addressed before it starts – rather than when it's done and then try to fix the problem – they should get in there before it starts."

Interviewer: *"Would you feel confident to report it?"*

"Not really.."

"Not really. You wouldn't really feel confident, because if it's someone of like from a different race, then like you really wouldn't feel confident, 'cos they wouldn't understand what you're going through."

### **Bullying:**

Interviewer: *"How does bullying affect you?"*

"If someone bullies you – you're normally too scared to tell someone, in case they threaten you and it might get worse."

"We've been getting bullied and they haven't done much about it."

"We need more support .... from teachers.."

"We've told the head of year and all he does is shout at them... and it gets worse"

### **Islamophobia**

"Now, it's all "terrorist this..., terrorist that..."

"It affects you in school"

"It can make Muslims just hang around with other Muslims"

"I think there needs to be more awareness"

"I think it's against the headscarf"

"like after 9/11, no-one came to explain to the school what Islam really said about suicide bombing and all that, so it was just left ...and everyone thought we were murderers..."

Interviewer: "*Islamophobia – is it widespread?*"

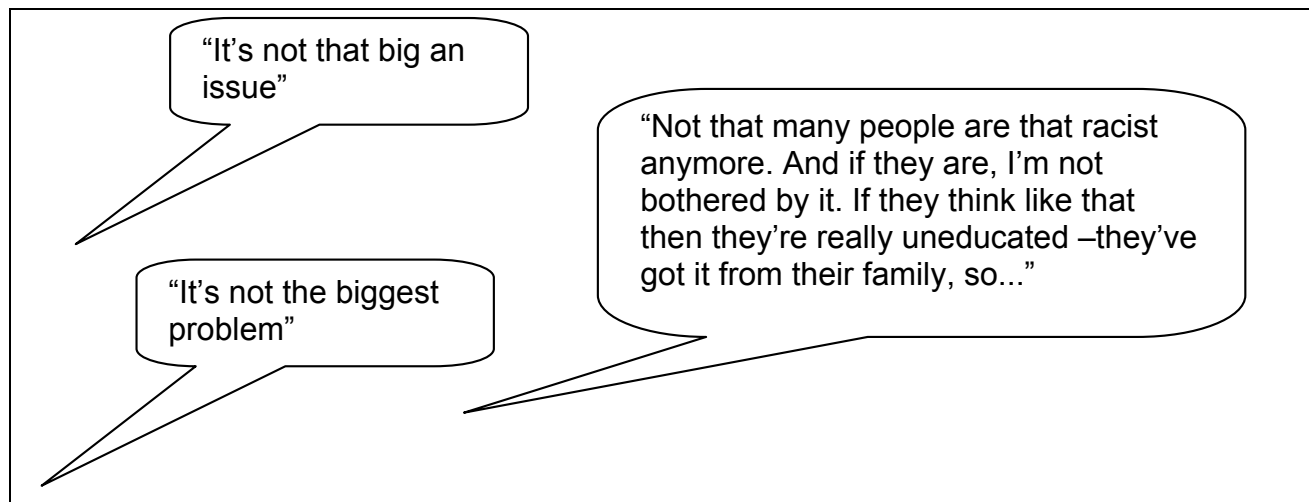
"Yes"

"Personally, I think.... there's not enough understanding. If they explained it in school in like RE or something..."

"Yes, because they don't understand it, that's why they make fun. "

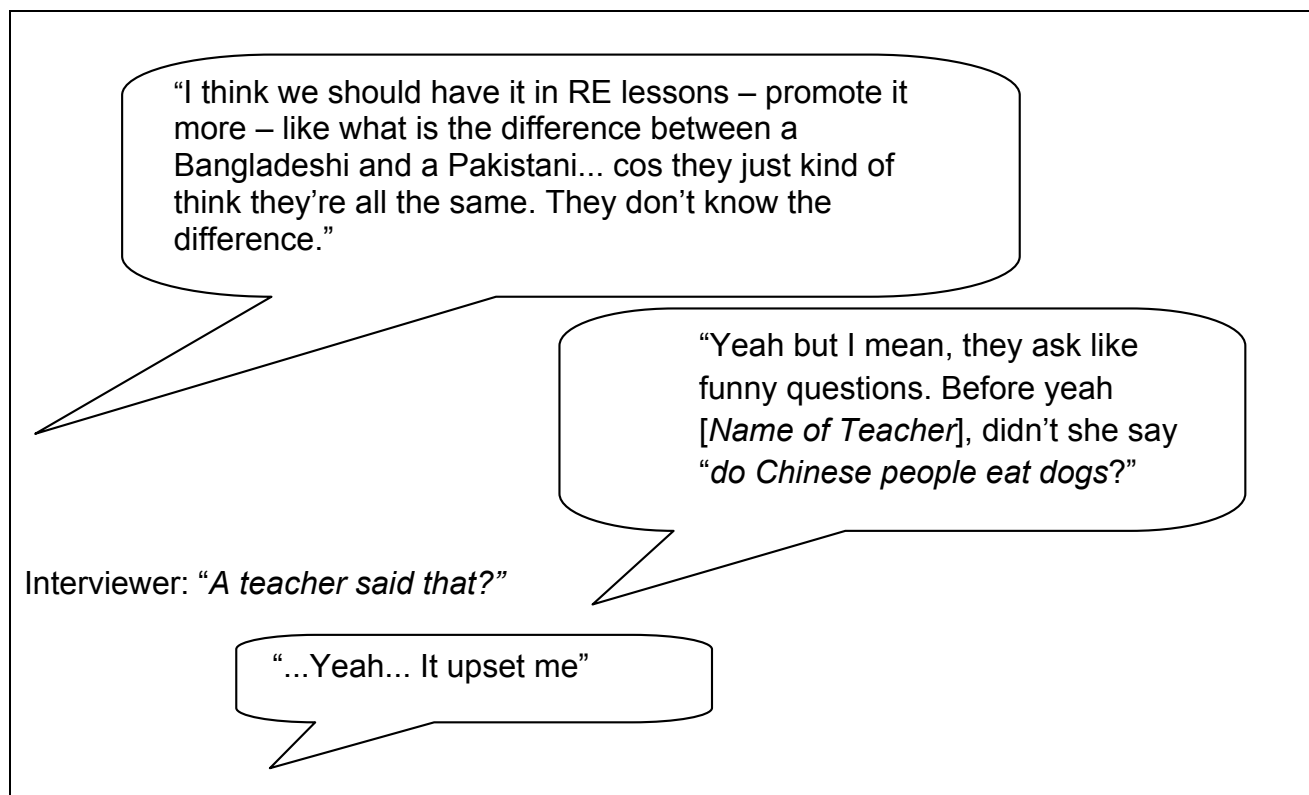
"Tea-towel they used to call it when I was in school "

However, there were some young females who felt confident in dealing with racism and stressed that it wasn't that big a deal, and that they could rise above it.



### **Schools/ Teachers' response**

However, a common theme was the sense that teachers often shared in their fellow pupils' lack of knowledge and understanding about different backgrounds, and so could not effectively address the issue.



## Family/ Cultural Expectations

The second most commonly identified issue was the issue of family and cultural expectations conflicting with those of the school/ peer group/ western society. This was raised predominantly but not exclusively by Asian/ South Asian participants. Ethnic minority families were said to be more 'traditional' than the more 'liberated' western families, and this was seen to impact specifically on the education and employment prospects of young BME girls as well as on how much freedom they felt they had to engage in certain social and leisure activities. Participants also highlighted the gender inequality which they perceived between how they were treated compared to their brothers.

Overall, even though this issue was not so frequently mentioned as racism/discrimination, after discussion, most girls agreed it was the biggest single issue impacting on their lives as young BME females.

### Family Issues

Interviewer: "Can anybody say what you mean when you say Family is an issue?"

"I think ethnic minority families are very traditional –most of us are very conservative"

"And like we're not allowed to go places with others like...."

"Yes, for girls it's different - there's one rule for the boys and another for the girls"

"There's a communication gap....especially with certain issues"

### Lack of Freedom

Interviewer: *“What do you think is the biggest thing ethnic minority girls have to deal with growing up?”*

“Not being able to have freedom. No freedom”

“Like when all your friends are going out, and you can’t...It makes you like in a position with your friends, like when they all go out, you’re not allowed to go with them, and it makes them think bad about your religion... it’s like you can’t do anything.

“And it makes you feel like boys have more freedom, and like girls don’t. Cos they get to - like my brother for instance - he gets to go out and if he comes home late my mum and dad don’t say anything. If I was to do that, then my mum and dad would shout at me.”

### **Family/ Cultural Expectations’ impact on Education**

“They [families] may not encourage their daughters into education... cos of their expectations”

“Juggling the two [school & family] is difficult – there are conflicting expectations

“Girls tend to have more responsibilities – we more or less run our own homes. And if we told schools that they wouldn’t really understand.”

### **Identity**

Although identity was not a term used by the participants, when asked, some girls did describe themselves as feeling to be in between two cultures of 'Asian' and 'white' people, and this was due to the conflicting cultural expectations they experienced.

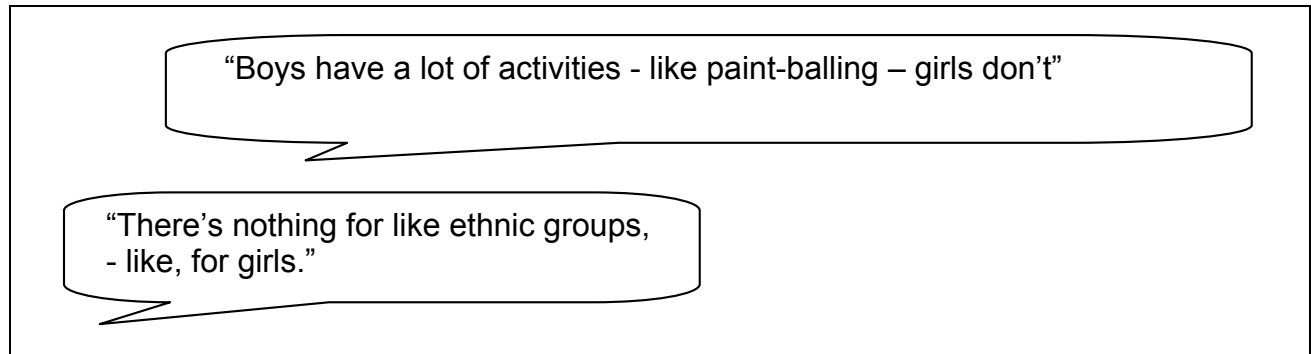
Interviewer: *What about cultural identity – is it hard to figure out who you are?*

"It depends who you're trying to fit in with."

"With me, i'm not really with white people and i'm not with Asians. And, because i'm not with Asians, because they're not allowed to go out, but I am allowed to go out. Like when i'm with white people they do drink and they do drugs and they drink, so that's when like ...it's hard for me... yes."

Another of the key themes was that of culturally appropriate social and leisure opportunities, which they mostly felt were insufficient to meet their needs. They also perceived that boys had more access to activities than girls did:

### Opportunities for Girls

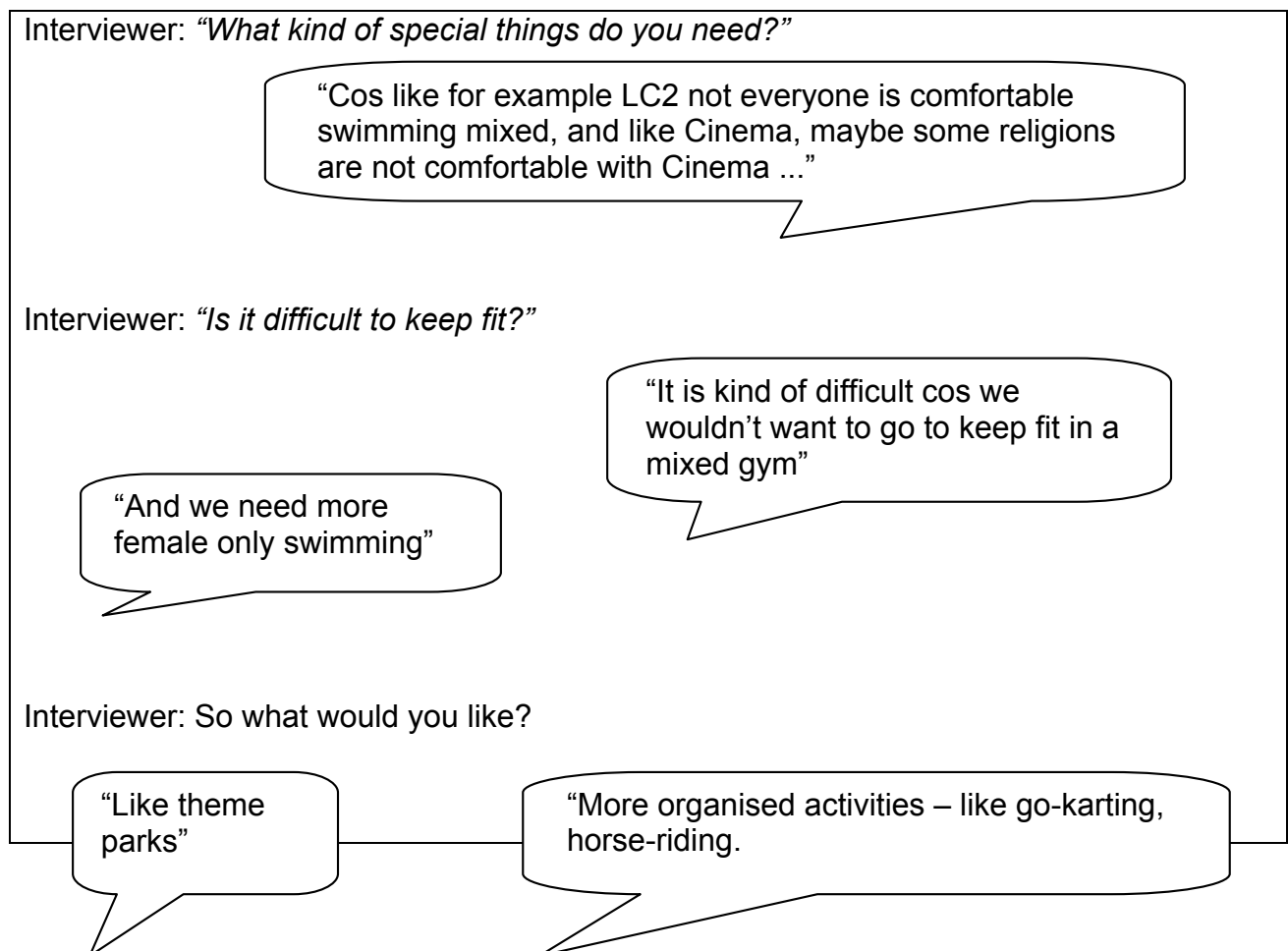


“Boys have a lot of activities - like paint-balling – girls don’t”

“There’s nothing for like ethnic groups, - like, for girls.”

### Cultural requirements

The specific requirements participants discussed included things like single-sex provision, and more organised activities led by leaders whom their families knew and trusted.



Interviewer: *“What kind of special things do you need?”*

“Cos like for example LC2 not everyone is comfortable swimming mixed, and like Cinema, maybe some religions are not comfortable with Cinema ...”

Interviewer: *“Is it difficult to keep fit?”*

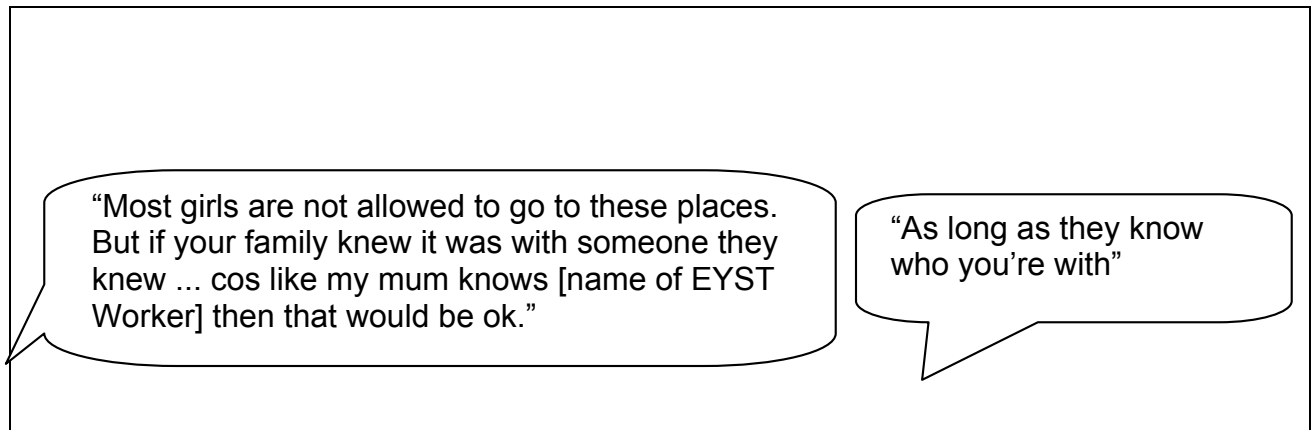
“It is kind of difficult cos we wouldn’t want to go to keep fit in a mixed gym”

“And we need more female only swimming”

Interviewer: So what would you like?

“Like theme parks”

“More organised activities – like go-karting, horse-riding.”

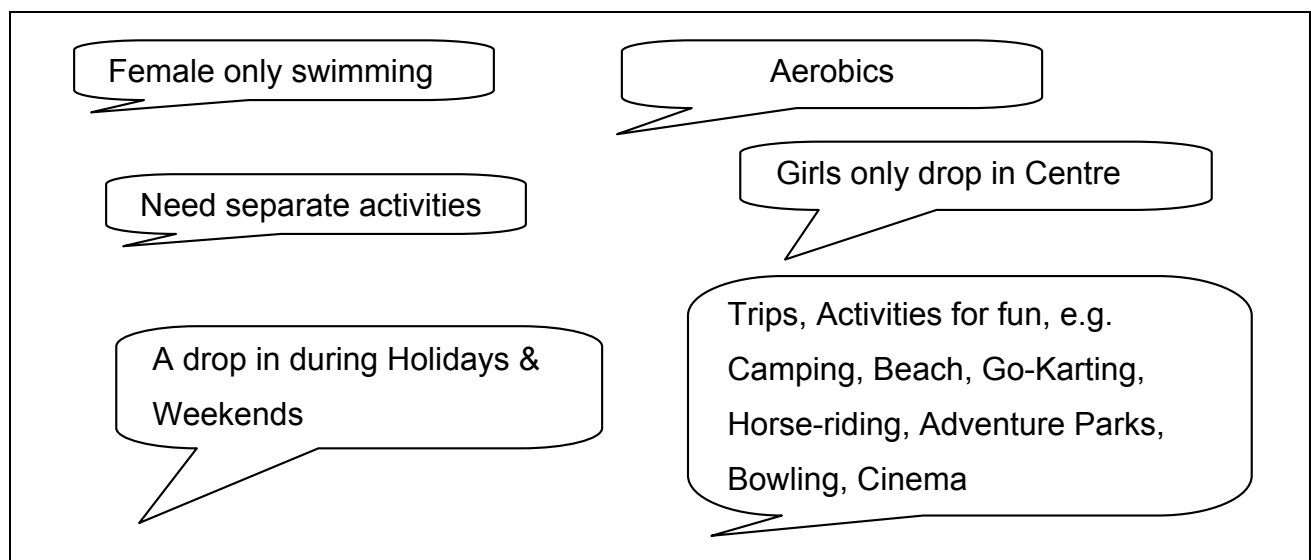


### Socialising

In terms of socialising, the main barrier referred to was the perception that places like youth clubs or school proms/disco's/sixth form parties etc, may have alcohol present, or may be otherwise intimidating. Others mentioned, that they felt that out of school activities were not advertised enough, and should be publicised more in schools. The need to better inform parents and get them on board was also raised again. Having a trusted worker was also seen as a good way of getting both the parents and young girls on board.

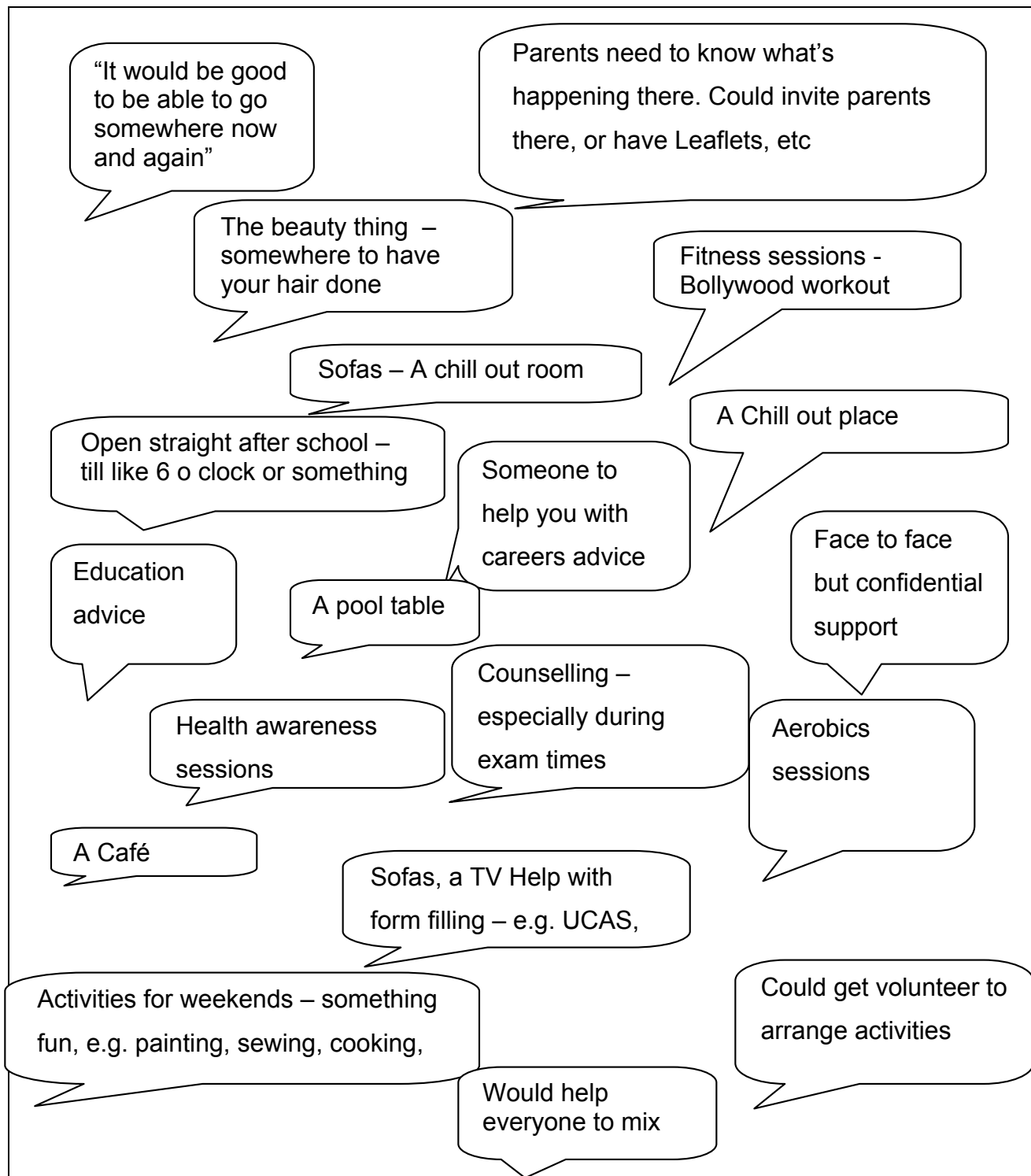
### Activity wishlist

The girls were asked what kind of activities they would like ideally:



### Girls Drop In Centre

Girls were also asked if they would like a Drop In Centre similar to the EYST boys' drop in Centre. Nearly all participants said that this would be something they would like.



### **Culturally appropriate worker**

Many participants also raised the importance of having a worker who is known and trusted by both their parents and by them as young people, and a few participants also

suggested that the worker should ideally be from a similar cultural background to themselves.

“There’s certain things that you can’t talk about with everybody – cos of different cultures”

“You need someone from the same background cos they’ll understand you more”

“Maybe have coffee mornings for older women to attend – it would be nice for them, and would help them to build trust in the organisation, so then they would be happy for their daughters to come and encourage and allow them to come”

Interviewer: *What kind of support exists at the moment?*

Just sister Momena – that’s it!”

Nothing apart from sister Momena. Although now there is an EYST Girls worker...

Before, there was no-one to go to”

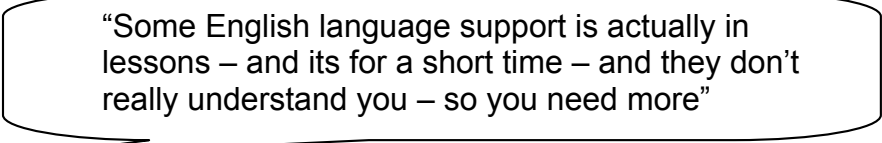
### **Education/ Employment/ Careers Support**

Another common theme was the area of education, employment and careers support, in which many participants felt there was a lack of understanding , or sometimes

assumptions made about their cultural background. Many also felt that the conflicting expectations from their families' and the schools of them put them in an awkward situation, where it was hard to please either party. However, they did recognise the value of services such as EMLAS for example, as well as the Council's Ethnic mentoring service provided by Momena Ali (previously referred to as 'Sister Momena').

### **English Language support**

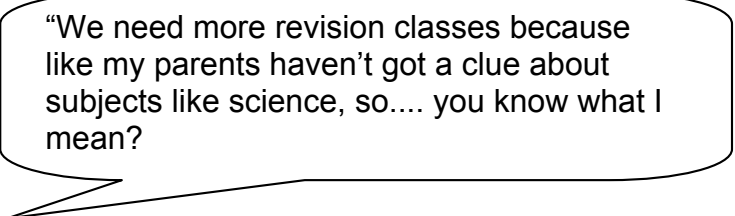
Most participants were aware of EMLAS, and for those who received additional English language support, they felt this was a good service, however they felt they needed more of this type of support.



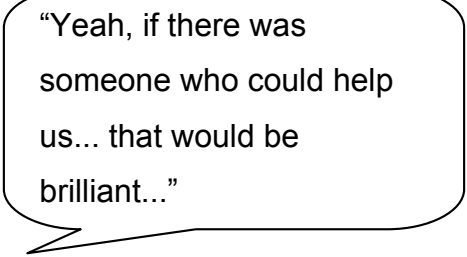
“Some English language support is actually in lessons – and its for a short time – and they don't really understand you – so you need more”

### **Additional Homework/Revision support**

Many participants felt they would benefit from more additional support like homework clubs or revision classes, as their own parents lacked the time or ability to help them.



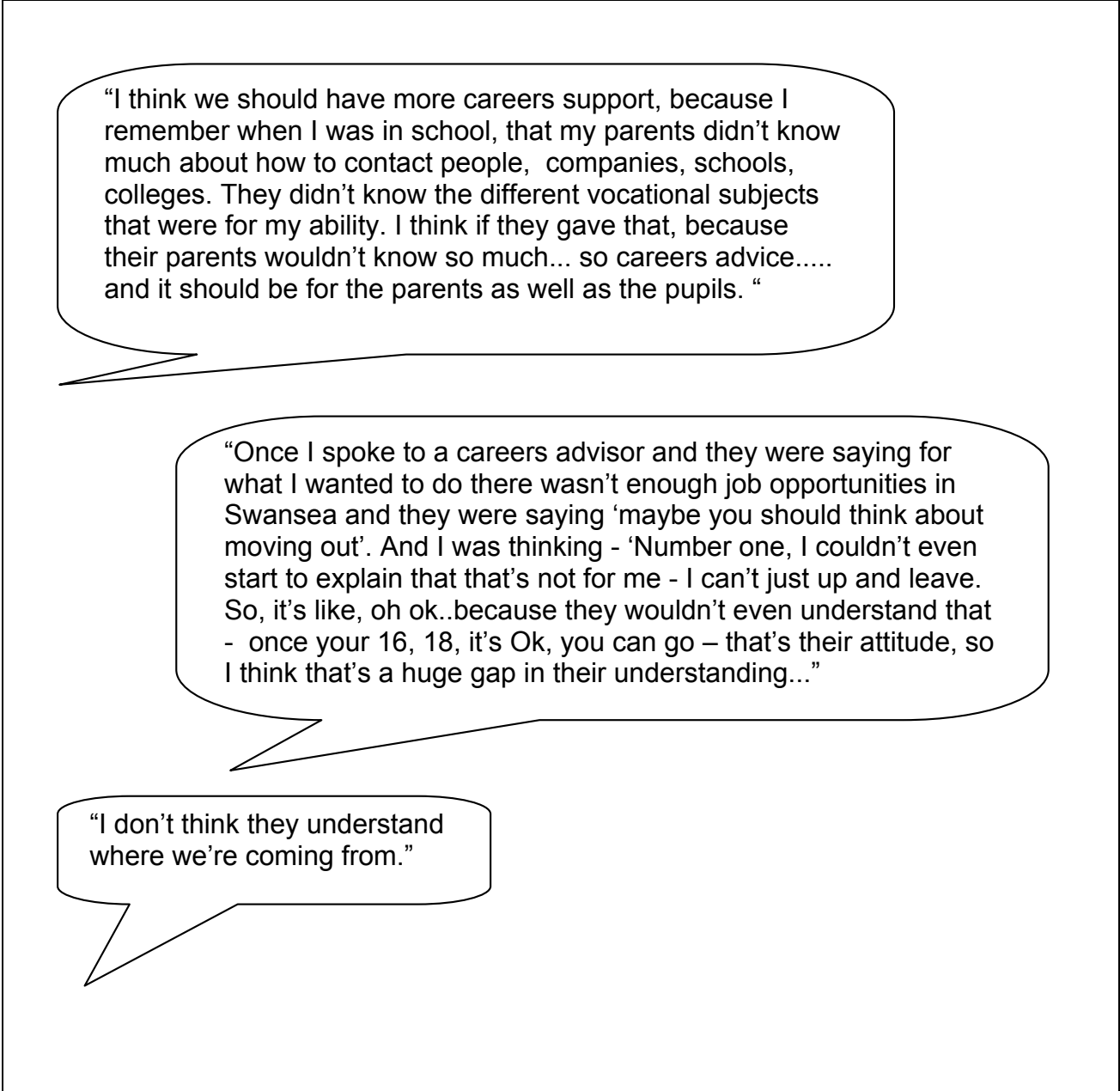
“We need more revision classes because like my parents haven't got a clue about subjects like science, so.... you know what I mean?”



“Yeah, if there was someone who could help us... that would be brilliant...”

### **Careers Support**

Many participants also raised the issue that they felt they were not well understood by careers advisors within schools, and also that their parents lacked understanding of the career options available to them.



“I think we should have more careers support, because I remember when I was in school, that my parents didn't know much about how to contact people, companies, schools, colleges. They didn't know the different vocational subjects that were for my ability. I think if they gave that, because their parents wouldn't know so much... so careers advice..... and it should be for the parents as well as the pupils. “

“Once I spoke to a careers advisor and they were saying for what I wanted to do there wasn't enough job opportunities in Swansea and they were saying 'maybe you should think about moving out'. And I was thinking - 'Number one, I couldn't even start to explain that that's not for me - I can't just up and leave. So, it's like, oh ok..because they wouldn't even understand that - once your 16, 18, it's Ok, you can go – that's their attitude, so I think that's a huge gap in their understanding...”

“I don't think they understand where we're coming from.”

**Employer discrimination**

A few of the older participants who had had experience of the job market felt that they were discriminated against by potential employers for wearing the Muslim headscarf (Hijab) or the Muslim dress (Jilbab).

“So many girls feel that they get an interview but then when they walk in the room they’re like..  
“oh...” and then it goes against them...”

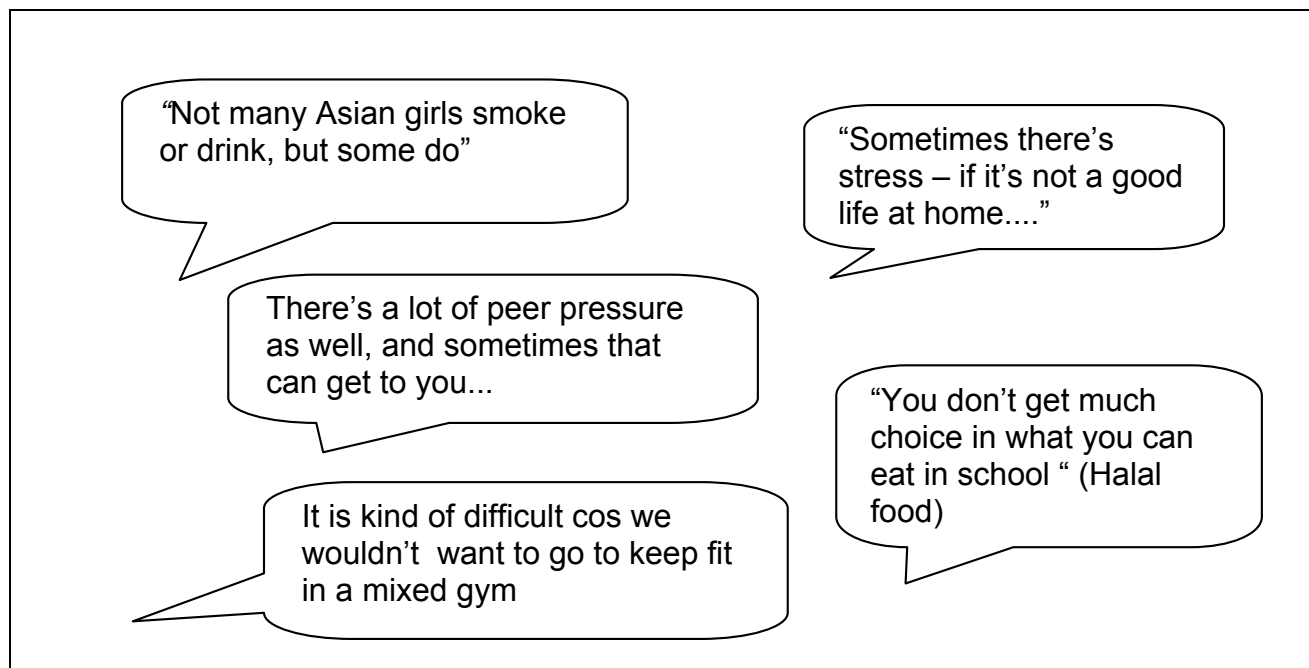
“Primark’s not racist!”

“I think it affects careers advice as well, because they make assumptions about you”

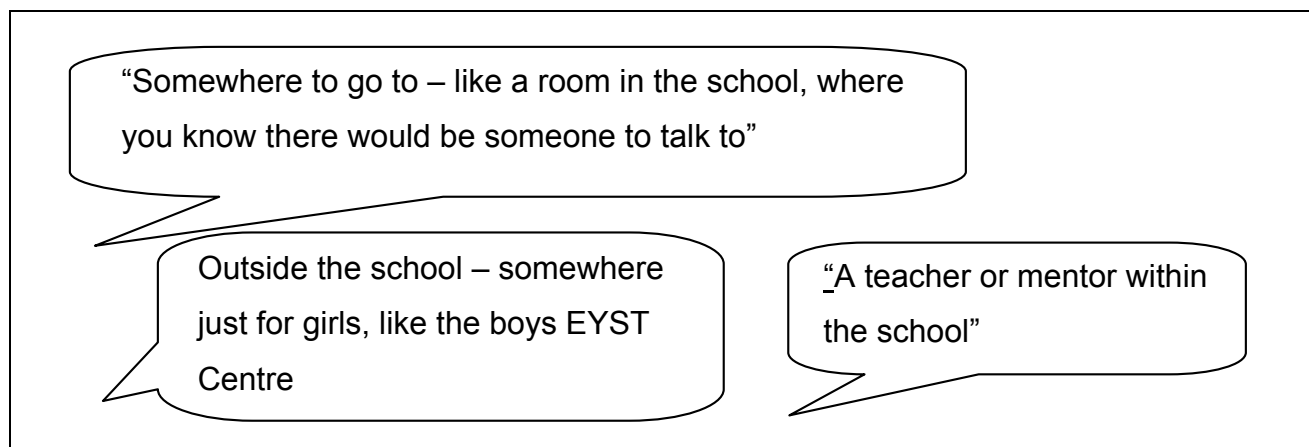
“In certain places they wouldn’t want you cos they want you to have to dress a certain way”.

“Also in my workplace, my manager has seen the racism I get, so I don’t think they would employ another Asian just so not to have the hassle from customers!”

The final theme emerging was that of health and wellbeing, with many participants mentioning the increasing incidence of smoking and drinking amongst ethnic minority girls, alongside other issues such as stress, isolation and peer pressure. However, upon further discussion this was usually related back to the issue already discussed of conflicting expectations from different cultures, as well as the barriers to accessing mainstream health, social & leisure activities.



Overall, the solution was seen as providing ‘somewhere to go’ and ‘someone to talk to’ –



#### **Interviews with Service Providers**

Three interviews were undertaken with the following experienced service providers:

- One female with 10 years experience of mentoring BME young females in Swansea
- One female with 10 years experience of managing a BME women’s organisation in Swansea
- One female with over 7 years experience of providing English as an additional language support within a diverse comprehensive school

**What would you say are the main needs of BME young females?**

Service Provider Responses	Key Themes
<p><i>For those that came to us in [service] – I would say:</i></p> <ul style="list-style-type: none"> <li>- <i>generally no support mechanisms in their lives if things went wrong at home or in school</i></li> <li>- <i>basically no one to go to</i></li> <li>- <i>their problems could have been avoided if someone had been around sooner</i></li> <li>- <i>issues like – drugs; forced marriage; child protection/family abuse; sexual abuse; racial abuse</i></li> </ul>	<p>LACK OF SUPPORT</p> <p>ISOLATION</p> <p>ISSUES OF ABUSE (SEXUAL ABUSE/ DOMESTIC ABUSE/ RACIAL ABUSE)</p>
<p><i>It is dependent on their ethnic background – not across the board.</i></p> <ul style="list-style-type: none"> <li>- <i>Bangladeshi girls (who make up approx 80% of our ethnic minority pupils) - tend to not participate in outside activities as much – e.g. school holiday activities – are reluctant.</i></li> <li>- <i>They like to have a familiarity with the people they are working with.</i></li> <li>- <i>There are lots of pastoral issues – they like to talk to someone within the community but who they can trust and in confidence.</i></li> <li>- <i>I find they want to question things, to bounce ideas around.</i></li> <li>- <i>They also like the link of working with somebody of the same religion and/or culture</i></li> </ul>	<p>NOT PARTICIPATING</p> <p>LIKE FAMILIARITY</p> <p>PASTORAL ISSUES</p> <p>QUESTIONING</p> <p>CULTURAL UNDERSTANDING</p>
<p><i>There are some similar issues as with boys, but with girls it tends to be much more complex. – e.g. a Bangladeshi girl having a boyfriend is 100 times worse than the other way around. Everything is magnified if they are female – it makes the job much more difficult.</i></p> <ul style="list-style-type: none"> <li>- <i>I am mainly talking about the South Asian community –</i></li> </ul>	<p>GENDER INEQUALITY</p> <p>SOUTH ASIAN CULTURE</p>

<p><i>Bangladeshi, Pakistani, Sikh, Hindu</i></p> <ul style="list-style-type: none"> <li>- <i>It is the concept of honour – the family honour is seen as solely to do with way the females conduct themselves.</i></li> <li>- <i>I've supported Bangladeshi, Pakistani, Sikh girls, - they share common issues – the faith may be different, but the culture is very similar in terms of gender relations.</i></li> <li>- <i>They would need like a one-stop shop where they can come for mentoring and also get advice on issues like forced marriage, sexual health (but it needs to be discreet – can't be openly offered). Pre-marital sex is increasing – e.g. in Tower Hamlets the highest abortion rate is amongst Asian girls.</i></li> <li>- <i>I fear that issues like drugs, alcohol and rebellion may increase – we need to avoid becoming like London and places like that.</i></li> <li>- <i>I'm not saying that all rebellion is bad – if it is standing up to oppression, then it's good.</i></li> <li>- <i>But to me, they are taking it too far &amp; losing their self-respect and losing who they are. Their idea of being western and free is distorted – so they end up sleeping around – it's all part of a deeper identity crisis – it's an issue of huge complexity.</i></li> <li>- <i>All of these issues are why there is a 3 times higher suicide rate amongst Asian girls than white girls aged 16-25 - the mental pressure is too much, The layers of complexity and cultural issues are too much – they are trapped by their culture, they feel. The consequences of their actions are too heavy.</i></li> </ul>	<p>HONOUR CONCEPT</p> <p>ONE-STOP SHOP</p> <p>DISCREET SERVICES</p> <p>REBELLION</p> <p>IDENTITY CRISIS</p> <p>MENTAL HEALTH/ SUICIDE</p>
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**Are these needs being met?**

<p><i>No - Nobody in my old role now dealing with forced marriage. The only other organisation dealing with this is BAWSO – but this is only suitable for girls who have left home. Nobody is doing any preventative work – preventing girls from having to leave their homes. Nobody is doing much around preventing or supporting</i></p>	<p>No</p>
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<i>cases of racial harassment, etc. In my view, there are absolutely no services for young BME girls in Swansea currently (*)</i>	
<i>Things are starting to happen, but I think there is a need for somewhere to meet and discuss things in a safe environment. There is a need for the equivalent of EYST for the girls.</i>	Slowly
<i>No, not at all. Because I am frustrated that it is either me or nothing. I even feel guilty having a longer holiday, because I know there is no other service or worker there that I could even signpost them to.</i>	No

### **If not, how could these needs be met?**

<p><i>There definitely needs to be a project that looks at girls':</i></p> <ul style="list-style-type: none"> <li>- <i>educational needs</i></li> <li>- <i>forced marriage/ domestic abuse issues</i></li> <li>- <i>girls' social aspect – i.e. there are no opportunities for socialising</i></li> <li>- <i>we need to ask them – what can we do?</i></li> <li>- <i>Also need a health project/fitness project –</i></li> <li>- <i>There is no provision dedicated to them</i></li> <li>- <i>Also a need for more positive role modelling in schools – a lack of aspirations</i></li> <li>- <i>All to be provided in a single sex environment.</i></li> <li>-</li> </ul>
<p><i>Things like speakers, activities, would be good. The only thing I've noticed EYST is not accessed by the people of Hafod – if it could be based more within the communities – e.g. so Hafod could access it. Also, the evening might be more difficult for the girls – weekend might be better. I do see a real need for support for the girls – there are particular issues for girls within the Muslim or Bangladeshi communities.</i></p>
<p><i>They need a place and workers – both have to come together. Like at the moment, they have me, but I have nowhere to take them, so I have to take them to Debenhams coffee shop all the time! They need somewhere where there is a counselling room there, a place to volunteer, they need somewhere which is seen by parents to be culturally appropriate and can help them to deal with their issues in a positive way.</i></p> <p><i>They need help from various roles:</i></p> <ul style="list-style-type: none"> <li>- <i>an education support role</i></li> <li>- <i>A health support role</i></li> <li>- <i>Mental health support role</i></li> <li>- <i>A volunteer co-ordinator</i></li> <li>- <i>Also employment support</i></li> </ul>

### **Any other issues or comments?**

<p><i>A lot of previous work has been under-resourced and therefore never achieved its full potential. Such high demand projects needs to be properly resourced &amp; to be delivered by the right people – need to be well aware of the cultural and religious requirements &amp; needs to be from an organisation that the community trusts and is credible in the community and professionally. – In</i></p>
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*order for parents to allow their girls to attend.*

*Even mainstream service providers don't appreciate the importance of cultural sensitivity – so lose the trust of the family and the community – so the communities and families close away. - We previously did a lot of training and advisory support to address this issue.*

*There is a need for a strategic and operational advice role for mainstream organisations – they are explicitly asking for help – so we need to have people to support that.*

*The biggest pressure they live with is that of honour – from a young age – ‘what will people think?’. Even simple things like driving in the night are disapproved of – ‘what will people say’ ‘think about our family’, etc.*

*Whatever service is planned has to be very very sensitive. Even the slightest thing wrong – from – who is mentoring the, to where they are going, how they are being worked with - could destroy the whole project.*

*Other projects – e..g BAWSO – can't really support girls because by going there girls would get stigmatized even more.*

*Especially health workers and activities are not culturally appropriate – so they face total isolation.*

### **Summary of Service Provider Responses**

The service providers interviewed concurred in the main issues by the young BME females interviewed, and highlighted the huge conflicts between the cultural expectations arising from their own South Asian culture and that of mainstream or ‘western’ society. However, understandably, given their respective longstanding careers in the field, the service providers gave much more in-depth perspectives and on the potential impact of this cultural conflict, drawing on their experience of supporting young BME females through all forms of abuse, forced marriage, mental ill health and so on. These issues were also recognised by the English language support professional, although this response focused more on the needs of young Muslim girls to question differing cultural beliefs and to ‘bounce ideas around’ in order to establish their own identities.