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## HOUSING DISCUSSION INVOLVEMENT EVENT REPORT

IN PARTNERSHIP WITH POSITIVE ACTION IN  
HOUSING

TUESDAY 26<sup>TH</sup> OCTOBER 2010



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## 1. Background to the Event

Capability Scotland and the Glasgow Centre for Independent Living (GCIL) were selected through the Housing Voluntary Grant Scheme as the Scottish Government's key strategic partner for housing and disability issues.

A key part of this project is a series of seven involvement events giving disabled people the opportunity to tell the Scottish Government about their housing issues and ways in which the housing problems faced by disabled people can be solved. The involvement events are running from August to October 2010.

This information is intended to feed into the Scottish Government's discussion "Fresh Thinking, New Ideas" which is calling for radical solutions to the housing crisis in Scotland.

This is the report of the second event, held in conjunction with Positive Action in Housing (PAiH) in Glasgow on Tuesday 26 October 2010. PAiH was set up over ten years ago when research identified that black or minority ethnic people do not have equal access to social housing.

19 black or minority ethnic disabled (BME) people with a range of different impairments and conditions attended the event including people with hidden impairments, people with physical impairments and people with learning disabilities. Several participants spoke minority languages therefore a Punjabi interpreter and a Kurdish interpreter facilitated their involvement in the event. Participants had a wide range of experiences of the housing system, including refugees who had been granted leave to remain and asylum seekers who were appealing the refusal of their asylum application.

## 2. Design of the Event

The involvement day consisted of group discussions with feedback. We used a different structure to the other events because open discussions with a lot of people do not work well when minority language translation is required. We found it worked better for every question to be discussed in small groups and then for each group to feed back on the issue in question.

### 1. What makes a house a home?

The participants were asked to think specifically as disabled home owners or tenants and consider what makes a house a home.

## 2. Experience of the housing system

This was a series of group discussions on different topics relating to BME disabled people's experiences of the housing system in Scotland.

## 3. What should the Scottish Government do to improve housing for BME disabled people?

Participants were asked to discuss in their groups what recommendations they would like to convey to the Scottish Government in relation to BME disabled people and housing.

# 3. Results of the Discussions

## 3.1 What makes a house a home?

Following 10 minutes of group discussion, participants were asked to feed back their top two aspects of what makes a house a home. The following elements were chosen as the top three issues by the different groups:

### Group 1:

- Warmth and light, especially as this helps to avoid depression
- Absence of dampness
- Easy access

### Group 2:

- Feeling safe in the home  
Feeling safe in the surrounding neighbourhood – participants felt strongly that racism in the community is still a big issue.
- Watertight and wind tight home

### Group 3:

- Accessibility
- Comfort
- House designed around their requirements and in consultation with them

### Group 4:

Two participants stated that to have a house at all would be wonderful. These participants had failed in their asylum application and were having to stay with friends during the appeal process.

Other key elements were:

- Not having to share with someone else.
- Feeling safe in the home
- Feeling safe in the surrounding neighbourhood.

The other aspects the groups recorded were:

- Cleanliness
- Enough bedrooms for each member of the family
- Absence of hooligans
- Close to place of worship
- Other people in community who share our faith
- Proximity to amenities
- A good GP
- Proximity to relatives
- Green space
- Enough space for children to play as playing in shared areas can annoy neighbours
- Good cultural awareness in the area
- Good neighbours.

It can be seen that safety, accessibility and faith/cultural issues were the key themes in this session. There was a good deal of experience in the group of participants experiencing discrimination and hate crime not just because they were BME, but also being disabled – dual discrimination. One participant, who was born in the UK but is of Asian descent, spoke of her experience of verbal abuse and being told to “Go back to her own country”. Participants spoke of feeling safer in communities where there were other people who shared their culture or faith.

**The following represent a consolidation of the views expressed:**

- Consider how people can be made to feel safer in their homes and communities by working with the police and with community groups.
- Consider a nationwide campaign to tackle hate crime and racial harassment.
- Recognise that building more homes will not solve the housing problems of BME disabled people. Homes must be in the right communities.

### **3.2 Experience of the housing system**

#### **Information Barriers**

Participants stated that it is difficult to find information about housing opportunities, particularly in minority languages. Participants did not always know where to go for information, or know what information to ask for.

One participant raised the issue that there are no equivalent words for many disability-related words in minority languages, which could lead to messages being lost in translation. Terms such as 'disabled', 'independent living', 'blind' and 'Deaf' do not translate well into Urdu, Punjabi or Hindi. The equivalent words in the minority languages are often negative, for example, there is no word for 'wheelchair user'. People are instead referred to as people who 'can't walk'. Visually impaired people are referred to as people who 'cannot see' and hearing impaired people are referred to as people who 'cannot hear'. The word 'disabled' translates as 'ill'.

The impact of this on minority ethnic disabled people cannot be underestimated. The disability rights movement in Britain has campaigned for years for only positive or neutral phrases to be used to describe disability. This has seen phrases such as 'wheelchair bound' and 'confined to a wheelchair' become less frequent in their usage.

Participants agreed that housing associations rely heavily on importing information to tenants through the written word. However many of the participants, for whom English is a second language, do not have a good grasp of written English. Therefore these letters can be difficult to understand, especially when they contain complicated words and jargon. Not being able to understand the letters could lead to the person's tenancy being at risk.

One participant showed her group a letter that she had received from her housing association. It referred to the possibility of her housing benefit being stopped as a result of a change in status of her employment benefits. The letter requested the participant to contact the person who wrote it. However it was not signed and there was no telephone number. The participant was very stressed about the situation, which she had to a certain degree misunderstood as a result of the way the letter was written and because she was not able to contact the person who wrote it.

#### **The following represent a consolidation of the views expressed:**

- Develop a strategy for disseminating accessible information about housing issues to the public, including the intricacies of translating information into minority languages.
- Consider developing an information portal which would act as an online one stop shop for information about housing issues. This could be used by advice providers as well as individuals.

- Encourage housing associations to keep a record of the language requirements of tenants to ensure that appropriate information is sent.

### Experience of the Asylum System

It is beyond the scope of this project to make recommendations about the asylum system. However, it should be noted that participants reported the following issues:

- Having to move house when they are granted leave to remain
- Having their house taken away from them if their asylum application is not successful
- Having to share a house with other asylum seekers who are in most cases strangers - "You don't know who they are, they speak a different language."
- Being refused asylum despite having mental health issues and the support of their psychiatrist.
- Living in substandard accommodation with no kitchen or bathroom that "Nobody born here would be willing to live in".
- Failed asylum seekers not being classed as homeless and having to rely on friends to stay off the streets.

A family that was unable to attend the event sent the following explanation of their experiences to be included in the report:

"We are a couple with three children, including a young child with profound physical and learning disabilities. We came to Scotland seeking asylum and were housed in a flat which had a flight of stairs descending immediately on entering the front door. The only way of accessing any of the rooms in the flat was to go down these stairs. Half way down there was a landing which the bedrooms and bathroom came off, and then more stairs down to the lounge and kitchen. This layout was very unsafe because we had to carry our disabled child down the stairs. This became more and more of a risk as he grew bigger.

We only had two bedrooms so our three children had to share a room. Due to our youngest child's medication his soiled nappies were strong smelling which impacted on the siblings sharing a room with him. Our disabled child kept the other, older, children awake at night, potentially impacting on their alertness at school. The older children also had no space of their own which meant they didn't bring friends home as they were embarrassed and thought their friends might not understand the disability. This led to the children being even more isolated from their peers than they already were.

When we were granted leave to remain we were eventually re-housed. Our new house, although a ground floor flat, has steps into the close. It proved difficult to build a ramp. Our new OT stated she wouldn't have approved the new house and wasn't very supportive. Our disabled child is now older and his wheelchair is very heavy to bump up and down stairs."

### Experience in the rental sector

Several participants stated that they prefer being in housing association tenancies rather than private rental tenancies because they felt more secure in social housing. There was a feeling that in the private sector the landlord could ask for the house to be vacated at any time.

One participant spoke of a traumatic experience when the housing association she rented from changed the locks on her flat when she was out at the shops. She now lives in a flat in Glasgow and has had a lot of problems with the facilities. She had no heating from April to October this year, which led to dampness in the bedrooms. The toilet also does not work. Her heating was only fixed after she enlisted the help of her local Citizens Advice Bureau. She feels that she was being ignored by them before this.

A participant with multiple illnesses spoke of trying to move to London for the past six years to be with her family. She does not understand why it is impossible for her to get social housing in London.

A couple spoke of their experience of overcrowding and insect infestation in a Glasgow housing association flat. They are a family of six living in a house with two bedrooms. The house is infested with small biting insects but the housing association has done no more than once send a pest control officer round. The insects quickly came back after the house was sprayed.

The issue of overcrowding was shared by many participants. One participant said that it is common for BME families to be large and therefore for houses to be required with more than three bedrooms. But there is a shortage of houses of this size in Glasgow, especially houses of that size which are physically accessible.

### **The following represent a consolidation of the views expressed:**

- Recognise that many BME families require larger homes to accommodate all family members.

### Adapting the Home

Participants spoke of waiting a long time to get adaptations to social housing. One participant said "There is a waiting list to get on to the waiting list."

Some participants had experience of private landlords refusing adaptations altogether or insisting that the property had to be put back to the way it was before the person moves out. This was felt to be impractical as it could be years later and it is often not practical to store the original fixtures and fittings to put back in.

A participant talked about wanting a community safety alarm but not being able to get one because it requires a landline and her housing association refuses to allow landlines in temporary accommodation. She therefore does not feel safe which could lead to mental health issues.

A participant whose first language is Punjabi spoke of problem he was having with power companies who wrote to him asking for meter readings. But his meter is too high up for him to access so he is not able to provide a reading. But this means that his bills are not accurate. He has asked for the meter to be lowered but this has not been done.

### **The following represent a consolidation of the views expressed:**

- Take action to reduce waiting times for equipment and adaptations.

### Race Discrimination

Participants felt that racism is still rife in Scotland and that racism – direct, indirect and institutional – plays a major role in the stories of bad service and substandard housing reported by participants.

However, throughout the event, when asked why something had happened the way they described, the participants stated that they did not know. For example they did not know why they were being told that they could not have something, or could not move to a certain area, or were not eligible for a certain benefit. This indicates that the information is not being well communicated to them. A lack of understanding of how the system works in some cases and what the eligibility criteria are for different opportunities can lead to an assumption that the person is not receiving something that they have a right to for discriminatory reasons. In some cases this may be true, but in other cases it is a result of the way the system works and the eligibility criteria.

### **The following represent a consolidation of the views expressed:**

- Carry out a nationwide campaign to tackle racism in partnership with BME voluntary groups.
- Ensure that policies, procedures and strategies in relation to housing emphasise the importance of making people aware of the reasons behind decisions that are made about their situation and what they are eligible for so that people understand why they are being treated the way they are.

### Lack of Advocacy

Participants reported that there is a need for greater advocacy support for BME disabled people in relation to housing and asylum issues. The group felt that people with experience of housing issues from BME communities should be employed in these services so as to be able to effectively empathise with the issues.

The participants also felt that the advocacy should have power behind it – empowered advocacy rather than just talking on someone's behalf.

**The following represent a consolidation of the views expressed:**

- Consider developing an empowered advocacy service for BME disabled people experiencing issues in relation to housing, perhaps by providing additional funding to existing BME voluntary organisations such as Positive Action in Housing.

Funding

Some participants spoke of their experience in applying for a Community Care Grant. One person has applied four times and not been successful once. He feels that he is entitled to the grant and wonders if there is a policy to “keep refusing people until they give up”. He has been through the appeal process many times, which he feels is a waste of money. He stated that “The Government spends money to keep hold of their money”.

**The following represent a consolidation of the views expressed:**

- Ensure that all agencies that provide funding give clear information about the criteria for funding and the reasons why applications are turned down.

**3.3 What should the Scottish Government do to improve housing for BME disabled people?**

During the group discussions the following additional recommendations were made by the participants:

- Take action to tackle antisocial behaviour
- Build more social housing so as to reduce the long waiting lists for social housing in good areas
- Standardise the allocations policies and points systems used by different housing association and local authorities
- Provide greater access to grant funding for repairs, adaptations and basic equipment like showers and washing machines
- Carry out research into the housing support needs of BME disabled people
- Collate information about the housing needs of disabled people by asking people to phone or email a hotline to report issues directly to the Scottish Government
- Build more homes for life so disabled people do not have to move house when their needs change.
- Provide BME disabled people with a single point of contact within their local authority for housing enquiries who can see a case through from the beginning to the end and has an understanding of their information and communication requirements.

## 4. Summary of Views Expressed

- Consider how people can be made to feel safer in their homes and communities by working with the police and with community groups.
- Consider a nationwide campaign to tackle hate crime and racial harassment.
- Recognise that building more homes will not solve the housing problems of BME disabled people. Homes must be in the right communities.
- Develop a strategy for disseminating accessible information about housing issues to the public, including the intricacies of translating information into minority languages.
- Consider developing an information portal which would act as an online one stop shop for information about housing issues. This could be used by advice providers as well as individuals.
- Encourage housing associations to keep a record of the language requirements of tenants to ensure that appropriate information is sent.
- Recognise that many BME families require larger homes to accommodate all family members.
- Take action to reduce waiting times for equipment and adaptations.
- Carry out a nationwide campaign to tackle racism in partnership with BME voluntary groups.
- Ensure that policies, procedures and strategies in relation to housing emphasise the importance of making people aware of the reasons behind decisions that are made about their situation and what they are eligible for so that people understand why they are being treated the way they are.
- Consider developing an empowered advocacy service for BME disabled people experiencing issues in relation to housing, perhaps by providing additional funding to existing BME voluntary organisations such as Positive Action in Housing.
- Ensure that all agencies that provide funding give clear information about the criteria for funding and the reasons why applications are turned down.
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This report is available in a variety of accessible formats. To discuss your requirements please contact the communications team at Capability Scotland on 0131 347 1052 or [communications@capability-scotland.org.uk](mailto:communications@capability-scotland.org.uk).

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