



brap

getting off  
the merry-  
go-round

public participation and  
involvement



brap is an equality and human rights charity, inspiring and leading change to make public, private and third sector organisations fit for the needs of a more diverse society. We offer tailored, progressive and common sense approaches to equality training, consultancy and community engagement issues.

'Getting off the Merry-Go-Round' is part of a series of papers outlining our thinking on key areas of policy and practice.

### The story so far...

- our work is focused on getting beyond stereotypes and trying out new methods of community involvement. brap has helped a range of organisations engage with 'minority' groups. We've worked in mental and public health, criminal justice, housing, education, and employment
- we were talking about human rights in healthcare before it was cool. In the late 2000s we devised human rights schemes for a number of Birmingham primary care trusts (remember them?). One of them, Heart of Birmingham PCT, was showcased by the DoH in its publication *Human Rights in Healthcare: a framework for local action*. In particular, the report highlighted how we created an equality and human rights impact assessment tool, an off-the-shelf human rights in healthcare training programme, and an organisational wide human rights strategy

who  
are  
brap?

- in 2012 we delivered a programme of intercultural training to 100 public and voluntary sector workers. In doing so we gave them key intercultural skills (facilitating difficult conversations, designing inclusive services, principles for fair engagement)
- going into schools, hospitals, and anywhere else people meet people, our training sessions and workshops help explore the grey areas in equality, cohesion, and human rights practice. Do you know what role 'race' should play in adoption? Do you know how human rights are relevant to housing? The 2000+ people who

last year attended our courses do

- we've responded to the challenges of a 'diverse' society by pioneering new approaches to rights-based equalities practice. For example, a national human rights based standard for cancer care we developed on behalf of Macmillan Cancer Support was recently

recommended by the DoH as good practice in their National Cancer Reform Strategy. We engaged with over 500 people nationally (patients, carers and clinical staff) to explore the ways in which inequality in cancer care is being routinely replicated, and to come up with an innovative model to help to develop behaviours that will improve experiences and equalise the service offer.

- finally, we've conducted a number of research projects looking at interculturalism, engagement, and representative structures...

All these reports are available online: a quick Google search will throw them up.

- 'Interculturalism: A breakdown of thinking and practice' (commissioned by the Baring Foundation, 2012)
- 'It's Not About Us!! A manifesto for engaging older BME people' (commissioned by Age UK, 2011)
- 'Managing Competing Equality Claims' (commissioned by the Equality and Diversity Forum, 2010)

## our research

- The Religion or Belief Equality Strand in Law and Policy' (commissioned by the British Humanist Association, 2010)
- 'Engaging People' (commissioned by Government Office for the West Midlands, 2009)
- 'Race, representation and influence' (commissioned by Government Office for the West Midlands, 2009)
- 'Community Cohesion and Deprivation' (commissioned by the Commission on Integration and Cohesion, 2007)

- The demographics of the UK have changed a lot over the last 40 years. Approaches to engagement haven't. We are still heavily reliant on 'representative' models of community engagement that engage people from particular backgrounds with particular characteristics. Little emphasis is placed on the skills and knowledge of the people participating
- Public bodies usually engage in public participation because they are 'expected' to do so. Rarely are there clear answers to key questions: What change do we need? What needs to be done to achieve this? Who should help in achieving it?

## key findings

- Existing guidance to support public organisations with engagement is unsophisticated, often blurring the lines between 'community needs' and 'community wants'. Little is done to balance talk of 'rights' with talk of 'responsibilities'.
- Staff are often afraid of 'getting things wrong' when working on equality issues or interacting with minority groups. Faced with this threat they sacrifice professional autonomy for the safety of mechanical adherence to policy or the approbation of community groups. There is little questioning of interventions in this field.
- Practitioners lack a useable, common sense framework to respond to the myriad

(sometimes competing) demands and expectations placed on them by minority and majority groups.<sup>1</sup>

- Public policy is not responding to some of the complex delivery tensions felt by frontline workers. The need to respond is becoming more pressing as public resources become squeezed in the recession and communities become more ethnically and religiously diverse.
- Equality law can put people into boxes they'd rather not be in. There is a tension between the need to offer a minimum level of protection from discrimination but also the need to be more responsive to people's real lives and their sense of identity. When legislation dictates the design of policies and interventions it tends to diminish our potential to identify and promote a shared humanity. Policy and interventions for new arrivals often assume they are interested primarily in maintaining their culture – as opposed to discussing their equal and reasonable access to employment, education, and housing entitlements
- There is some uncertainty amongst public and voluntary workers on how to handle competing rights claims involving faith and belief. We need to develop more nuanced frameworks for dealing with these issues.
- We often hear organisations echo our concerns about the practice of engagement. There is often far less benefit realised from the process, both for the individuals included and organisations who support their participation.
- There is a significant risk that the same mistakes that were made in the past will be made again. The 'Merry-Go-Round' of community engagement interventions will continue because we are afraid or do not know how to question their purpose and their impact. Take for example the creation of Health Watch by the NHS/ CQC. The model for local delivery of this community engagement forum across the country looks set to replicate the representative model adopted in previous LINKS arrangements (securing forum members from particular groups – often the 'usual suspects' – to represent the views of their community). How do we break the cycle?

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<sup>1</sup> For example, the nursery worker who is asked by a parent to keep their daughter from playing outside with boys because she doesn't do that at home. Or the newly arrived immigrant community that requests resources to set up a community centre because other immigrant communities have had funding in the past.

- People don't know everything about their communities – it is impossible for them to represent a community. People can only speak from a set of unique experiences: their own.
- Organisations collect a lot of information – patient feedback, complaint data, consultations on priorities. Engagement events should only be held once this data has been reviewed thoroughly.
- There is an opportunity to think critically about the outcomes we want from engagement. Our current approaches could be reinvigorated by helping practitioners differentiate between cultural stereotyping and understanding where rights/entitlements have been infringed. Engagement should be used as a tool to support 'whole community learning': a tool that can prevent the silos which form as a consequence of media fora and learnt assumptions.
- Public sector staff often have to have challenging conversations with colleagues and members of the public: how should scarce resources be allocated? how can discriminatory attitudes be challenged confidentially? how can people's right to a personalised service be squared with conflicting demands of regulation, equalities best practice, and professional expertise? These are questions that are

## ways forward

central to making engagement meaningful and helping to create more equitable provision.

- Engagement shouldn't be left to people who look like the people that you would like to engage with. It is important to remember the whole organisation has contact with service users. This type of engagement also tends to reinforce stereotypes and positions members of staff as 'experts' when they too only have their own experiences to offer.
- Often engagement, especially with diverse communities, or communities who are seldom heard is needed. But this type of engagement should also be diverse. People, even those from similar communities or identities, are also individuals.
- Remember discrimination. This can be a hard point to understand, but people are often not very subtle about who they dislike. If you gather information that is too delineated it may send you down a path where you're trying to commission training for gay BME women. What are the real issues?
- Communities always complain that they get no feedback on decisions. Be clear about what people can influence, and let them know what you have decided – even if it was that no action was needed



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**brap**

making equality work for **everyone**

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