

Alcohol Services and the needs of Black and Minority Ethnic Groups

Introduction

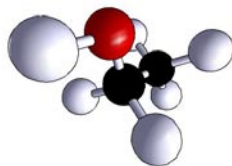
The Alcohol Harm Reduction Strategy for England began to address many of the problems caused by alcohol misuse. However, the Strategy is poor in addressing the needs of problem drinkers from black and minority ethnic (BME) communities.

The Alcohol Research Forum in its report for Alcohol Concern (2002) noted that past research failed to lead to effective action to address the needs of black and minority ethnic groups. Needs analysis was based on poorly conducted research, small samples and outdated studies, and there were significant gaps in the knowledge base. Institutional racism has led to inequalities being experienced by BME communities in accessing all health and social care services in Britain. Existing services have often been culturally inappropriate in terms of a lack of BME staff, knowledge of cultural, religious and language needs, activities and policy. If this is combined with service users lacking awareness of what services offer, then the low take up in services by the BME communities is the inevitable outcome.

This study was commissioned by the Alcohol Education Research Council to avoid repeating the mistakes of the past and to contribute to the debate surrounding the national strategy on alcohol. It drew upon a combination of literature review, consultation with communities themselves, and examination of professional 'best practice', including work with projects and agencies embedded in meeting the specific needs of black and minority ethnic groups. The work was carried out by Mark R D Johnson, Pam Menzies Banton, Harrinder Dhillon & Gersh Subhra

We have sought to investigate current knowledge about alcohol use and misuse in the South Asian and African-Caribbean communities and, in particular to:

- explore specific needs in relation to education and service provision;
- review current service planning and provision in the light of any identified needs;



Alcohol Services and the needs of Black and Minority Ethnic Groups

- review current research initiatives and their relevance to the South Asian and African-Caribbean communities and to identify gaps;
- consider the appropriateness of current research frameworks;
- present an overview of the capacity for research within these communities.

All relevant papers have been listed in a full bibliography and data extracted to a 'systematic-review' type grid to permit ease of access and review of the evidence. Copies of all items located have been filed in a central collection held at the Mary Seacole Research Centre (MSRC) in Leicester for reference, along with items of 'good practice' submitted by agencies seeking to meet these needs.

Findings

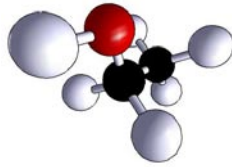
There remains a paucity of data and good quality research into aspects of the use or misuse of alcohol among black and minority (BME) communities.

Mainstream services are rarely designed for, or capable of meeting, the needs of people from BME communities and cultural backgrounds.

Alcohol services are in general failing to monitor the use made of what they do offer, by members of BME communities. Where data are collected, they may not be analysed or used to inform practice, and it is therefore difficult to assess real levels of need and exclusion.

Exceptionally few 'mainstream' (i.e. majority-oriented) service providers offered language or culture-competent support and even these rarely monitored their need or use.

There is a central issue of shame and fear of the community 'finding out' about individuals with alcohol-related problems in most BME communities. This leads to poor levels of help-seeking behaviour.



Alcohol Services and the needs of Black
and Minority Ethnic Groups

The example of a small number of BME-community-based projects and targeted interventions demonstrates that good results can be achieved when based on appropriate principles, and presenting culturally appropriate messages in suitable media (for example, the concept of 'sensible drinking' has little appeal or salience to a non-drinking culture).

The few examples which were located, of assertive and culturally competent outreach to seek to deliver alcohol-related services to members of BME communities, reported high levels of satisfaction with the results

The workforce in alcohol-related services appears to show gender and ethnic imbalance, with particular shortages of staff from South Asian backgrounds, and relatively few men. This may affect agencies' ability to engage with key user populations.

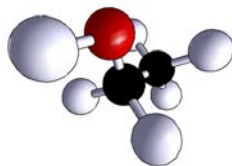
Implications

Alcohol services appear to be failing to meet their obligations under the Race Relations Amendment Act, and are certainly not reaching and delivering services to people from BME communities who need them. Action is required to remedy this.

There needs to be more explicit and overt organisational commitment to diversity, and more resources dedicated to meeting the needs of people from ethnic and culturally diverse communities.

The review repeats recommendations which have been made several times before, both in this field and in related areas:

- Primary research is needed to develop brief interventions to reduce alcohol misuse and evaluate their effectiveness among minority ethnic groups, particularly among South Asian and African-Caribbean communities, as well as minority religious groups.



Alcohol Services and the needs of Black and Minority Ethnic Groups

- The effects of community approaches on different groups of the population needs investigation. It is particularly important to consider the extent to which programmes reach or include identified 'at risk' groups. This might include a review of the impact of workplace interventions to prevent alcohol misuse among minority ethnic groups.
- There need to be studies to further understanding of the factors and processes involved in heavy single-episode drinking within these particular (BME) communities.
- Research is needed to examine the impact and effectiveness of community safety and public health campaigns.
- There is a need for research to explore the relationship between alcohol use and risky behaviour, and examination of the effect of a person's drinking on others particularly among BME groups.
- It would be helpful to have research studies analysing help-seeking behaviour and the responses made to alcohol issues being presented by BME users.

Further Inquiries

Copies of the full report, the papers and review procedures are held at the Mary Seacole Research Centre at De Montfort University for use by visitors.

Contact Professor Mark R D Johnson, MSRC, De Montfort University 266 London Road Leicester LE2 1RQ.

E-mail: mrdj@dmu.ac.uk

Website: www.dmu.ac.uk/msrc

Further enquiries may also be addressed to Dr Gersh Subhra at the University of Derby. Email: v.subhra@derby.ac.uk

ALCOHOL INSIGHTS

Alcohol Insights are brief summaries of the findings made from research or development grants.

They may be copied and used without permission provided that the source is attributed to the AERC.

Further information about *Alcohol Insights* can be found at www.aerc.org.uk or email: info@aerc.org.uk

the alcohol education and research council