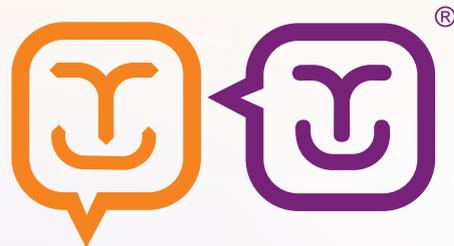


WHO IS 'HARD TO REACH'? TIME TO CLOSE THE COMMUNICATION GAP



HAPPY TO **TRANSLATE**

Research report on the impact on ethnic minority service users with a language barrier of the increase in use of technology by service providers

June 2023

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Acknowledgments

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Background

The production of this report came about from discussions during the Happy to Translate (HTT) Advisory Group of March 2022, regarding the differences between pre and post Covid working practices and the potential impacts these have had subsequently on service users, particularly those from ethnic minority communities who speak a little or no English or who live with additional communication barriers.

Discussions turned to review the phrase 'hard to reach', a term used to describe those customers deemed to be on the periphery of accessible services.

The phrase was considered to be outdated since it places the onus on the customer to make themselves accessible and understood in order to receive support from organisations.

From the outset the research needed to focus on considering that it is the service providers who are hard to reach, that it is they who need to actively remove the burden from those who face barriers to having their needs understood and met.

Introduction

Whilst we have returned to normality with the impact of the Covid-19 pandemic already a distant memory for some, for those whose lives were forever changed due to personal or financial loss, there remains a constant reminder of what they have endured. The global pandemic wrought many changes to all our lives, not least of which was the shake-up of the workplace landscape, in many cases irrevocably.

The consequences of these changes have provided many benefits for employees, offering opportunities such as remote working, reshaping the working day, the structure of which had remained virtually unchanged for almost a century.

The impact of these changes on those who rely on public services for support has not yet been fully determined, with only anecdotal evidence of many struggling to adapt. In many cases, the processes implemented to allow for business continuity during long periods of lockdown have been adopted indefinitely, with no plans to return to their pre-pandemic format.

There has always been a constituent part of the population who has found it a struggle to communicate their need for, and access to, additional support. The struggle was evident even before the significant alterations to the day-to-day organisational processes and procedures that the pandemic provoked.

At that time, service providers were making their services accessible to varying degrees, with some more invested than others. The Covid pandemic exaggerated the inaccessibility of services and highlighted the barriers those communities had always experienced.

Whereas the newly introduced workplace models may be beneficial to organisations, they have had a detrimental impact on those who relied on frontline staff to access services, someone whom they could contact when

in need, particularly community organisations for ethnic minority people, which was often a lifeline for them.

The community organisations provided a link between mainstream services and the communities themselves, as they provided language support and understood users' cultural needs.

For some, the systems of mainstream service providers which were once unfamiliar, were made workable through time and practice.

Even then, this contact was lost due to the pandemic as organisations tried to find ways to continue their day-to-day business.

Temporary measures were put in place with the expectation of returning to 'business as usual' after a short period.

There was widespread acknowledgement of the need to find solutions as it appeared that Covid was with us for the long term. These solutions resulted in an increase in the use of technology and further distancing of those who already faced multiple communication barriers.

The pre-pandemic best practice model was to strive to break down communication barriers; the new norm has been to maintain or uphold the additional barriers that were established during the pandemic in a bid to keep people safe.

This report will aim to shed a light on the impacts that changes in the workplace to accommodate remote and flexible working have had on the people organisations are in place to support.

Methodology

HTT has an extensive track record of working with the ethnic minority communities at a grassroots level and have organised consultations for many organisations who find it challenging to engage with the communities.

For this research, HTT set on a path to reach out to ethnic minority communities and individuals who face language barriers and who are traditionally considered to be 'hard to reach', to seek their opinion and to note their lived experiences.

The research was carried out between December 2022 and April 2023 and is based on interviews with individuals and groups from ethnic minority communities from across Scotland.

Our bilingual researchers also conducted a number of 'mystery shopper' experiences, to investigate how prepared (if at all) organisations are to provide language support to those seeking information and services and who speak a little or no English.

The methodology was as follows:

- 25 individual interviews conducted either face-to-face or by phone in the participants' first language
- 2 group consultations (Glasgow (24 participants); Inverness (26 participants))
- Languages covered included: Urdu, Bengali, Hindi, Cantonese, Polish
- Locations: Edinburgh, Glasgow, West Lothian, Perth, East Renfrewshire, Inverness
- 9 mystery shopper experiences

Our Mystery Shoppers

Our mystery shoppers are experienced bilingual community support workers and know only too well the obstacles that people who need to access services endure when they speak only a little English or none at all.

As one of our research participants put it:

“Some words I know in English but putting them together in a sentence is a major task for me!” – Mrs J

Our research highlighted the convoluted route people who don't speak English have to follow in order to obtain the information they need to make decisions; it almost always involves introducing a third party to operate on their behalf, which unless this is a co-habiting family member, can lead to delays in accessing information or services, while waiting for that person to become available.

The dependence for language support shifts the power away from the individual to make independent decisions, undermining their self-confidence and compromising their privacy.

Even those research participants who told us they could speak a little English have faced problems in making themselves understood.

“I called for an appointment to see the doctor. I gave my name and date of birth. But when the receptionist asked me for details of why I needed the appointment, I couldn't explain it to her.” – Mr N

We wanted to emulate and document the experience of those who would attempt to contact service providers themselves, in the hope and expectation that language support would be available.

Mystery Shopper Experience

Our caller phoned a housing association to obtain information on housing for her mother. In broken English, she explained to the call handler that she spoke only Urdu.

The call handler didn't know what Urdu was and proceeded to ask our caller for her contact information. Our caller persisted with her request for language support, saying 'Urdu, Punjabi', but the call handler replied, 'No, sorry' and suggested she go to the Council to apply for housing.

Reliance on family and friends

Almost all of the participants in our research relied on a family member or a friend, and in one case – neighbours, to make contact when they were in need of services (e.g. GP; dentist; council). Not only does this reliance compromise the confidentiality of the participant, they are dependent on the availability of their family or friend to make the call on their behalf, which they have felt undermines their independence and self-esteem.

Mrs Y has lived in Scotland for more than forty years. She speaks Chinese but can neither read or write, nor can she speak or write English. She lives alone in sheltered housing.

When Mrs Y needs to see a doctor, she walks to her surgery with a piece of paper with the words 'Can I make an appointment' written on it by her friend. The surgery staff write the appointment date and time on the paper and Mrs Y then asks her friend to relay the message to her in Chinese. Mrs Y has found a process that works for her currently but worries about what could happen if there is a medical emergency and her friend is unavailable, or she is no longer able to walk to the surgery.

Many of the research participants stated that their adult children are already occupied with their own families and feel they are an additional burden, as Mrs H explained:

“My son makes all the appointments for me. I have to keep reminding him when I need to see the doctor or to phone for my results. He has a busy life and can only phone when has some spare time.”

Mrs H felt fortunate that she had someone to help her, but acknowledged it wasn't the best scenario. She added:

“What I would like to do is to be able to speak to someone directly who speaks my language, to explain my issues in confidence.”

Mrs K relies on her adult children for any contact with services, health, local authorities or when making any financial decisions. She claims that she is lucky to have good children and her daughters-in-law make appointments and accompany her. On one occasion, she refused a male interpreter at a visit to the doctor as she didn't feel comfortable explaining her illness to a man. Her daughter-in-law had to act as interpreter.

Mrs K told us she is grateful for the help of her family but understands that those with no family support can suffer, as she wouldn't know where to start looking for information or assistance without them.

Some public service organisations are still not aware that they have a duty to comply with equality legislation by providing information that is accessible. So when we heard of examples where participants have been asked to bring along someone from home / neighbourhood / community, to provide language support, we were not surprised.

Even these avenues are not open to some people who need extra support. Of one of the groups we consulted, approximately 80% were living alone, which contradicts the assumption that people from ethnic minority communities live in multi-generational homes.

Of those who had no support and were faced with making contact themselves, most struggled to follow the system of call options when phoning an organisation. For callers who speak a little or no English, this facility creates a barrier that induces confusion, stress and anxiety.

Of those who make it through the various options to speak to the call handler, they still struggled to make themselves understood, further adding to their frustration and anxiety.

When no one is available to make an appointment on their behalf, one participant told us:

“I have to go in person at 7.30am to the surgery to make an appointment.”

Mr A lives with his wife, who is blind, and their children in a council property. He speaks broken English but still finds it a strain to book a GP appointment by phone or to request repeat prescriptions. He is not computer literate so goes in person to his GP surgery to speak to the reception staff and has only been given language support if he has insisted. When making enquiries about housing needs at the Council, he has never been offered language support.

“My flat is very damp and I have struggled to explain the situation in person to the Council. The delay and not being understood is very frustrating and is causing health issues for my family.”

He also told us:

“I have missed out on requesting support for my children at school and with meals because I cannot fill out any forms. I need support with them but have never been

offered any. It can become emotionally distressing when you cannot express your thoughts and describe the situation to get help.”

Mrs S told us:

“I don't have family or friends nearby to help me so I find it difficult at times when I have to call these services. It is so frustrating not being able to find the correct words to speak and I feel so useless.”

Whereas Mrs F told us:

“I have friends who can help, but everyone is busy with their own lives and my time doesn't suit with their time. I really don't want to inconvenience anyone with my problems.”

Too often there is an expectation of an organisation that there is ‘someone’ who can readily provide interpretation and translation for a customer and the onus is on the customer to produce that person for phone calls and meetings.

“I am usually not understood during the conversations. On one occasion I was told to either speak English or call back with someone who could. This made me feel bad.” – Mrs A

In scenarios where the organisation is not prepared to provide language support and the customer has travelled alone to an appointment, it seems anyone will do, as Mrs B described during her experiences at hospital appointments:

“The staff call the Ukrainian cleaner who knows Polish. When she isn't available, I can't communicate. I want to go home badly because of that.”

Mystery Shopper Experience

Our caller phoned their council offices with a query. She chose the option for Council Tax and when the call was answered told the call handler 'no English, interpreter please'.

The call handler apologised and replied they do not have interpreters. Our caller repeated: 'no interpreter?' and the call handler apologised again and said 'no interpreters'.

Our caller said goodbye and the call ended.

First Contact: Attitude and Behaviour

Almost as important as having language support facilities available is the attitude and behaviour shown towards a person who requires that type of support. Our research has shown that how a customer

or service user from an ethnic minority community is treated will have an impact and will influence whether they continue to seek support, or abandon the attempt.

Mystery Shopper Experience

Our caller phoned a housing association to ask for information about sheltered housing. She was presented with a number of options, none of which were related to language support. Bearing in mind that our mystery shoppers are bilingual, they all had to act as though they don't understand and so our caller proceeded to wait until all the options had finished and then ended the call.

Our caller phoned again, and this time pressed one of the options, hoping it would take her to someone who would offer language support. The call was answered by a member of the repairs team who, when confronted with an individual who only spoke Chinese, told her that they couldn't help her, that no one spoke her language there. Our caller apologised and ended the call.

One of our research participants, Mrs A, described her experience at their local council offices where she needed to sort out a rent issue. Mrs A had been advised by a community worker to request an interpreter, as local authorities are duty bound by the Equality Act. However, she told us:

“I had an appointment at the Council and asked for an interpreter. I was almost laughed at and ended up using an online translator to communicate.”

Mrs S described how she felt when she phones her GP surgery to make an appointment:

“Most of the staff are quite helpful, they do take their time with me when I'm trying to explain myself. But on a few occasions, I could hear staff huffing and trying to end the call without giving me any kind of assistance. It is so frustrating not being able to find the correct words to speak and I feel so useless.”

When Mrs F calls her local GP surgery, from their tone of voice, she can tell staff are sympathetic. However, she adds:

“But if I can't understand what they are saying, then what can they do for me?”

If service providers claim to be inclusive, they must find ways to ensure their customers have the means by which they can express their needs. Working in conjunction with these customers will go a long way to ensure that their needs are understood and being met.

“My energy supplier provided a questionnaire in my language. It made my life so much easier.” – Mrs J

The Equality Act 2010 is clear about the duty of a public organisation to make sure its services are accessible to all. In terms of language support, responsibility lies with the organisation to make interpretation and translation services available to those who need it, overcoming a fundamental barrier for many seeking assistance.

“I felt frustrated that I couldn't explain myself when I called the service. If only I could speak a little bit of English maybe that would have helped.” – Mrs F

Mystery Shopper Experience

Our caller phoned their local council offices to make a query about her bin collection and in broken English, asked for an interpreter. Our caller felt the call handler was quite abrupt in his manner, and transferred her back to the main menu. Our caller chose the repairs department. Again, our caller made it clear she needed language support. The call handler did not respond but transferred our caller immediately back to the main menu. On a third attempt, our caller chose the Council Tax option. This time, the call handler asked our caller which language she spoke.

Our caller informed us: 'I am grateful that finally there was someone who took their time to help me. She listened to me and did go the whole way to speak to her manager and arrange an interpreter for me. She was very polite and spoke very slowly and with a soft tone so that I would feel relaxed to understand her, which made me feel very good.'

Mystery Shopper Experience

Our caller phoned an organisation that provides support. She told the call handler that she didn't speak English, just Polish and asked for help. The call handler apologised stating she didn't speak Polish but asked for the caller's email address and phone number, and that she would try to find someone who speaks Polish and call them back. The caller thanked her and ended the call. Our caller's overall impression was that the call handler was 'a very nice lady' and the customer service was 'very polite' and 'calm'.

For private sector organisations that are not subject to the duties of the Equality Act, having access to language support facilities for their customers makes good business sense.

Mystery Shopper Experience

Our caller phoned a bank, which as expected, had several automated recordings with options. The caller chose the option for 'any other queries' and told the advisor who answered that she didn't speak English. The advisor replied that 'we only speak English' but said he would check if anyone in the office spoke Polish. He returned after a few minutes, apologising that nobody spoke Polish there. The call ended. Our caller's impression of the call handler's attitude was that he was very friendly and seemed like he genuinely wanted to help.

Our caller went a step further and visited a branch. She approached an employee and asked what support was available for customers who can't speak English. She was given the same response as on the phone, i.e. if there is a colleague at the branch who speaks this language, that person will get help with interpretation. But if there are only English-speaking advisors, the customers have to rely on their friends or children, the bank advisor admitted that this happens a lot.

Our view is that if a client of the bank has to share personal finance information to a family member, a friend or a member of the community, this could leave them vulnerable to financial abuse.

Access before the Covid outbreak

Participants were asked if they had noticed a difference in service provision since the outbreak of Covid.

Here's what some of them had to say:

“All the services are offered over the phone and we find it difficult to communicate. The walk-in services have been removed and only phone and online queries are available. I find it difficult to request to be seen by a medical professional; I have not been seen by the diabetic team. Before COVID I was called every year for a check-up but since COVID I have not been to the diabetic clinic. Most of the services now offer phone interpreting and not face-to face which is difficult sometimes to understand.”

“The procedures to make an appointment have changed. Now you have to wait for a call back and have restricted times to call for an appointment. On many occasions when the GP has called back I was not able to communicate without a family interpreter.”

“All these changes have had an impact on my physical and mental wellbeing. It is so frustrating when you can't get hold of a family member who can make a call on your behalf or follow up a query from the GP. I always get stressed when I have to ask a family member to request my blood pressure medication online or over the phone because it has to be requested

every two months otherwise I will not get my medicine on time, which can cause further health problems. Before COVID it was easy just to tick the repeat prescription and take it to the GP, which I was able to do easily myself.”

“Before COVID I was able to make an appointment myself because not many questions were asked about why I needed to see the GP and I would get an interpreter in person. But now I struggle to see the GP or to get a referral to the hospital.”

Even when phone interpretation is available and offered by a service provider, other barriers prevent the user from accessing this support.

Some participants reported that they have found it difficult to understand telephone interpreters due to hearing problems or their use of terminology when it's not fully translated. They aren't confident enough to ask the interpreter to repeat something not understood or heard correctly. They have said that in-person interpretation enables them to lip read, connect with the interpreter and allows them to ask for further explanation.

Mystery Shopper Experience

Our caller phoned an organisation looking for benefits advice and was presented with a number of options. She chose to wait on the line until the call was answered. The conversation between the advisor and our caller has been reproduced below:

Advisor: What advice are you looking for?

Caller: No English, speak Urdu.

Advisor: Where are you calling from?

Caller: Glasgow

Advisor: What do you need help with?

Caller: No speak English, language help.

Advisor: No language help. What help do you need? Is it with benefits, debt?

Caller: Benefit

Advisor: Which benefit do you wish to apply for: PIP, Universal Credit?

Caller: No English, language help.

Advisor: No language help.

Caller: My English not good.

Advisor: Hold the line.

Caller: Ok.

Our caller waited on the line for ten minutes before an interpreter joined the call, asking for their name, address and why they were calling. The caller told them they needed help with applying for Universal Credit. The interpreter gave them a phone number to call to apply for the benefit and the call ended.

Of the experience, our caller said:

'It was a real struggle to get the advisor to provide an interpreter but eventually got there'.

Mystery Shopper Experience

Our caller phoned their council to make a request for information on housing. She found the phone number under the contact tab on the council's website, where it stated that language support was available. This was not a dedicated phone number for language support but the main phone number, and once again with several options, each one offering four services provided by the Council. Our caller chose the option for housing but there was no response. Our caller tried phoning a second time, chose the first option with an automated message referring the caller to visit their website to complete their query.

Our caller phoned a third time, chose the final option which was for 'anything else' and waited for 12 minutes before it was answered, at which point an interpreter was offered upon request.

Digital Access & Capability

Even before the pandemic struck and lockdowns forced us from the workplace back into our homes, the trend of moving from in-person contact to digital had been steadily increasing, first initiated by the banking industry. However, the arrival of Covid and unprecedented national lockdowns precipitated the widespread introduction of the blended working model - accommodating for some but devastating for others.

Many organisations will encourage phone callers to 'go online' for their query to be answered through Frequently Asked Questions or 'Ask the Community'. While this process may meet the needs of the mass population, a vulnerable minority are forced to find alternative means to find information, often leading to feelings of isolation and being left to fend for themselves.

In one of the consultation groups, out of a total of 20 attendees, just 3 had the ability to use the internet. In a large widespread rural area, we were told that there was 'no chance of getting information

if no-one was available'. There was a pervasive feeling of helplessness and as one participant offered: 'you just feel alone'.

From our one-to-one interviews, we were told:

"I am not computer literate so I can only call the GP or go to the surgery in person to make an appointment. When I call the GP I communicate in broken English and try to request a face to face appointment. I don't always get an appointment because I struggle to explain why I need to be seen by a GP, which can be very frustrating. Even to request a repeat medication we struggle over the phone. So on many occasions I have just gone to the surgery to request medication etc. and have only been offered language support if I have insisted."

One group participant told us that even using a bank ATM was a struggle. Bank staff offered to show her how to use it, but being elderly, she was prone to forgetting the steps.

On a subsequent visit she asked for help from bank staff, who were reluctant to show her a second time and instead wrote down the instructions in English. The bank staff were unaware that this customer couldn't read or write in her own language, let alone in English.

From our one-to-one interviews, one participant said:

“I guess there are many people out there like me who need help but it's not knowing how to get it. I don't know how to use a computer, if I did then maybe it would have been easier to get information for whatever my needs may be.”

Mrs B told us about her experiences in reporting anti-social behaviour at night from her neighbours:

“I used my phone as I can't read much in English so using the website to report the incidents is a bit overwhelming for me. Also, when the incidents are happening, I am very stressed and nervous so the online reporting facility is not good for me.”

She continued:

“My support worker instructed me in what to say: 'I can't speak English, Polish please'. I did say it when I called but I was not given an interpreter. I called a few times and then stopped calling, as it is pointless in my opinion.”

Our mystery shoppers were persistently instructed by automated response to 'go online' for information or to complete a process. Redirecting callers to follow the digital route for information and services discriminates against those who rely on personal interaction for reasons of digital illiteracy, competency, or language barriers.

Mystery Shopper Experience

Our mystery shopper contacted a national energy supplier to query her tariff. She first had to go online to find a phone number. The company's website did not offer any language support. Because our caller speaks English, she was able to find the correct 'tile' to click for further information. Of all the assistance on offer, telephone was the last option; at every turn, assistance was offered by way of further website search, email or social media.

Once the correct number was located, our caller was put on hold, where a recorded message suggesting the caller could 'perhaps resolve their query online' was relayed. The call was eventually answered by a call handler, who - when spoken to in Chinese - responded that she couldn't speak Chinese. The call handler spoke slowly, was patient, friendly and apologetic and suggested the caller send her query by email.

Language Barriers In Business

One of the participants in the group consultation has a catering business and told us of his struggle with understanding visits and documentation from the council's Environmental Health officer. He was unaware that as a public authority, the council had a duty to provide information in an accessible format.

A theme from both group consultations was that many who wish to, don't know how to make a complaint or make their feelings known to a service provider. For this purpose, they use their community group leader, once again relying on a third party to engage with mainstream organisations.

Conclusion

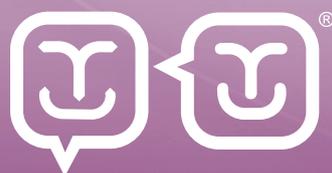
Service providers who wish to truly provide inclusive services could do well to test their accessibility by working in partnership with customers who face language and other communication barriers, and by filling the gaps identified.

When it comes to the post-pandemic era of service redesign and the rapid embracing of new ways of working, service providing organisations must remember that in the attempt to build back better, they cannot do so at the expense of meeting users' needs.

Findings and Recommendations

- Service providers to **establish a process of accessibility** for the most vulnerable who don't have access to, or knowledge of technology.
- **Test newly designed inclusive processes** with a section of the target audience for accessibility before launch.
- **Improve telephone access** – First option could potentially be an offer of language support.
- **Attitude of staff** – train staff to understand how to communicate with those with a language barrier and from a different culture.
- **Web access** and online forms should be one option, not the only option.
- **Make contact telephone number easy to locate** - finding a number to call is difficult; it can be frustrating and induce anxiety if it's hidden within reams of information.
- Finding the right person to call is increasingly challenging, even for those who are comfortable using digital devices. Job titles or departments have been removed from websites, anonymising the organisation which has meant a reduction of human contact and distancing staff even further from the public, the very people service providers are meant to be serving.

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