Researching Access to Education and Training for the Eritrean & Ethiopian Communities in North London

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Acknowledgements

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Executive Summary

Introduction

Despite the availability of many adult educational programmes or opportunities throughout London boroughs or indeed the UK, there is growing evidence that only few or small percentage of people from Eritrean and Ethiopian background take advantage or make effective use of these education and training opportunities, indeed this could well be a problem among refugees from all different countries.

Hence this report seeks to explore the underlying reasons underpinning poor uptake of adult education among these specific communities residing in Camden, Islington and Haringey. These three north London boroughs have a sizable population from these two communities.

Not having UK recognised qualification and skills especially English language skills could greatly limit people access to public and private services e.g. Health, education, council services, Banks and post offices services), also it could limit their access to employment and indeed severely reduce their ability to network, engage and integrate with mainstream British society

Aim and purpose of the research

The aim of this report is to investigate and highlight the issues facing refugees from Eritrea and Ethiopia in accessing Educational and Training programmes within Camden, Islington and Haringey.

The term refugee will be used to describe all forced migrants from asylum seekers on temporary admission to people with Indefinite Leave to Remain who came to UK as forced migrants
Researching access to Education & Training for the Eritrean/Ethiopian communities in North London.

The research purpose is.
To try to identify and highlight the various reasons that stop these refugees from taking up these available opportunities, is it language barrier, the uncertainty of their legal and immigration status, lack of interest and ambition or is it just lack of information and awareness of what is available and how to access it.

To identify the type of support services available to these refugees to access educational and training opportunities and how effective is it in meeting their needs?

Methodology
This research was carried out using several approaches; initially a literature review was carried out using Google search, African refugee council website with it many links, then qualitative methods which consisted of a focus group meeting and discussion, and two semi structured interviews were used for data collection and analysis.

Research key finding
1. Refugees Immigration Status limits their capacity to access publically funded education and training.

2. Limited English Language skills are a big barrier to climb specially if combined with limited access to English or ESOL courses, ESOL is English for speaker of other language.

3. Inadequate advice and guidance services, especially in community languages, to help refugees make an informed decision about their best available options.

4. Limited ambition, drive and interest in education that could partly attributed to the long uncertainty and distress they have faced.
5. Health issues both physical and mental specially anxiety, mental distress and depression.

6. Isolation and lack of networking and integration with main stream British society or even with other migrant communities in UK.

Conclusion and recommendation

1. Adequate provision of publicly funded English language or ESOL courses especially at Beginners or Elementary level at least for eligible refugees if not all.

2. Eritrean and Ethiopian Community organisations should actively seek to network, link and cooperate with other organisations to develop new skills and build capacity to refocus and improve their services with emphasis on providing information, advice and guidance on education and training programmes.
Chapter 1:

(i) Central aim

The report aim is to investigate and highlight the issues facing Eritrean and Ethiopian refugees in accessing Education and Training opportunities in North London, specifically Camden, Islington and Haringey boroughs and report its findings.

The researcher is an Ethiopian by origin but was born and grew up in Khartoum, Sudan where he completed high school (12 grades). The researcher first language is Arabic but also do speak Amharic, the main Ethiopian language and understands Tigrinya which is an Eritrean, Ethiopian language.

The researcher came to the UK as a refugee and have experienced similar barriers, which in some way might had some impact or influence on the way the research was approached, with assumption that he is being there before and understand it, but the scale of the problems and complexity of the present bureaucracy or system and the multiple barriers and restrictions it imposes upon refugees made the researcher realise that his “similar” experience bear little resemblance to the present refugees experience.

(ii) The purpose of your research

1. Try to identify the main barriers that stop these refugees from accessing their local educational and training programmes. Is it lack of English language skills, or is it their unresolved immigration status with restriction to access publicly funded services or is it just lack of interest, drive and ambition or may be lack of awareness of what available and how to go about.

2. To identify the type of information, advice and guidance services available to these refugees with regard on how to access their local educational and training programmes and how effective is it in meeting their needs?
(iii) Literature review

The purpose of this section is to review and evaluate any available literature concerning the multiple barriers to education and training faced by Eritrean and Ethiopian refugees residing within North London in particular and UK in general.

Mainly by using Google search, typing. Ethiopian, Eritrean and African refugees then Refugees Council website resources and links. ICAR resource guide and links, African educational trust published report plus many other materials.

Accessing and gathering data about refugee population is difficult and challenging. Quevedo (2010) because population censes and Annual population surveys not only does not mention or specify immigration status but only specify ethnicity and country of birth for the largest population groups.

However estimate for Eritrean and Ethiopian communities living in the UK does vary but respective community organisations suggests it is over 40K and 20K respectively. A considerable amount of literature has been published on barriers and discrimination faced by refugees in the UK,

These studies has investigated the level of discrimination and barriers to access basic services like education, health and housing, as well as barrier to participation in training and employment Brahmbhatt et al 2007 has indicated and found that several key factors are acting as barriers. Lack of immigration status is a key theme or barrier as asylum seekers are not eligible to access publicly funded ESOL classes, further education and vocational training.

English language skills is key tool for interacting and accessing services specially education and training programmes and searching for and gaining employment, Bloch (2002);Craw et al (2007). And of course is essential for networking and making friends with people outside their community and integrating with main stream British society.
Researching access to Education & Training for the Eritrean/Ethiopian communities in North London.

(iii) Methodology

This research was carried out using several approaches, a Focus group meeting/discussion with 5 participants was conducted and finally two semi-structured interviews was carried out. These qualitative methods allow the researcher to interact face to face with the participants group, explore their experiences and views, gather in depth information and hopefully gain insight and understanding about the issues at hand.

Participative and collaborative methods were used. Colleague from the organisation were involved in the initial stages of bringing research participants together. Participants were randomly chosen from our community including some ex clients.

A focus group is a group discussion with a set of predetermined questions designed to gain insight into people’s views and experiences of certain issues. They can be chosen to have similar background, e.g. of the same ethnicity.

The semi-structured interview is a one to one process where questions are addressed to a participant. It is designed to allow the participant to say what they have experienced, from pre-designed questions but with flexibility and more open-ended styled questions.

Focus Group

Benefit

1. It is appropriate and relevant for this type of topic, which is neither sensitive nor controversial, but still very useful and effective tool to explore the group/participant’s attitude and experiences about the issues facing them and allow me to gather in depth information about the scale of the problem.

2. Provides me with an insight and understanding into the way community members collectively make sense of the issues, and how they feel about it, and how they came to that understanding.
3. It is very useful and effective way of getting a range of views and suggestions for development and improvement of future services and activities.

Challenges
1. Fewer questions would be asked due to time constraint.
2. Researcher may not have control over proceedings
3. Usually based on small samples which make it is difficult to generalise findings.

- **Semi structured Interview**

Benefits
1. It provides it me with an opportunity to get in depth info and further views from certain participants who felt intimidated or uncomfortable within a group setting.
2. Verbal questions would be useful for getting views from people who have difficulty dealing with written questionnaire.
3. Could generate detailed explanation and feedback and explore sensitive or personal issues.
4. Might get a high response rate

Challenges
1. Time consuming and can be intrusive for people.
2. Costs per individual interview are high
3. Lack of standard response make harder to analyse.
4. Small sample no limit the ability to generalise finding.

(v) Ethical considerations

The researcher is from the community and has some awareness about the issues facing them but tried his best not to let that influence the process by keeping an open mind.

Prior to the meeting information about the purpose and the voluntary nature of the meeting was provided.
Participating were informed about the need to keep the discussion confidential and that anonymity would be preserved, written consent was obtained.

During group discussion there was some tension/friction as some members tried to dominate the meeting and engaged in interrupting and criticising other participant, and it was a challenge for the researcher to keep discussion focused on the issues at hand.
Chapter 2: Research findings and discussion

The research participants were five Eritrean women. The interviewees were from the focus group and therefore were also women and Eritrean. One of them was by telephone interview and one in person.

They were aged between mid-20s and mid-40s. One had been here for over 10 years and the others were here for over 5 years. All but one had finished High School.

This section is a summary of the key findings from the interview and the focus groups.

1. For the research participants who had been here for over 5 years, they highlighted that lack of immigration status and Home office restriction to access publicly funded education and training had been a major issue for them as colleges educational & training service provider tend to play it safe and reject refugees or apply 3 years residency rule for basic course. And most refugees who are still waiting for a positive outcome have no documents to prove their residency status.

“If you don’t have the Home Office letter, nothing we can do unless you pay”

Only one participant was here for over 10 years before these rules were changed meaning that she could access publically funded educational opportunities …

Interestingly she had had a much more positive experience of UK than the others

“oh – i didn’t find any problem “ went form English course to IT courses – building her skills set – moving forwards – went as a placement after the course and then was offered a job as result of this …years later went on to do another course in counselling. now works as a counsellor
Seems as if she has integrated and really settled, especially compared to the other participants who haven't accessed any educational courses beyond basic ESOL classes / different laws has affected people.

2. In the research findings, those participants who said they had difficulty accessing courses, stated that Lack of English Language skills was a big barrier to climb specially if combined with limited access to English/ESOL classes. English languages skills is key tool and life line to access services like health, education and training or dealing with day to day issues like forms, official letters, bills, deliveries or make contact to with people outside their community.

"Without English you are stuck, no education no job".
It seems that without English, the research participants felt stuck and isolated. Before taking any move, they have to arrange for someone to come along with them to interpret. There is a feeling of powerlessness. An example of this was with one participant who reported that she had been placed in temporary housing. She said that she had no idea what to do or who to approach; no one that she knew from her immediate community could help her. The system seemed too complex for her and the others to understand. She had to get a friend to take her to a community centre who in turn arranged an interpreter. The Council doesn't have interpreters for this type of service. The women talked about how you have to show private letters to people you don't know and how disempowering this felt. This created a sense of hopelessness.

For the participant who had been here longer than 10 years, because she could access courses and had studied learned English, had it easier and didn't face the same struggles as the others. In the discussion, she did not face the same level of difficulty the others had faced. This may be because she had been able to access these courses but may be due to other life circumstances (she had an elder sister who had settled in the UK before her who was able to guide her and provide interpretation).
Brahmbhatt et al (2007), states that even for refugees who have here for years there was still much to be done on building English for employment. The lack of English skills was noted as a key barrier.

3. Lack of advice and guidance services (especially in community languages) to help refugees make an informed choice/decision about their best available option.

Community centres seem to focus their services/time on dealing with certain issues: housing, Home Office, interpreting etc. Some participants said that when they approached their community for support, there was no one who could give them basic information about and training. As above, they couldn't access English information as they had no English skills. There was no mother tongue support.

“The community does not help us”

One participant reported that she had started an English course with numeracy and literacy so this was very positive. This was with a local college in Islington. However, there was one part-time advisor. You had to make appointment weeks in advance to get any support.

Overall it is very clear that the support from both community organisation and statutory provision was very limited, meaning that making informed decisions was quite impossible

4. Lack of confidence/drive/motivation/interest which partly attributed to years of uncertainty, disruption and hardship they have faced in dealing with the system and it effect on their mental wellbeing. All that make them lose confidence in
themselves and have no hope for the future which in turns made it extremely difficult to make plans.

The participants reported that they had arrived with high expectations that they could resolve their immigration status within a few years and begin to settle but over the years, they had not managed to gain a positive decision about their status; they also had high expectations of gaining better education (the majority apart from one had finished high school) but over the years and knowing that the next year you still might not be able to do anything with your life – you are not studying or working or participating in any activities, it creates a feeling of helplessness; time is passing and you are doing nothing with it. There is a feeling of their lives being wasted.

It is clear that having to wait, not being able to access education or training, without a positive immigration decision, means that the research participants have a feeling of being imprisoned.

Also, the introduction of the voucher system (over a decade ago), participants noted, that had led to a feeling of further stigmatisation. They felt people looked down on them. It seems to me, through my experience of working in the community, and this may be due to the Eritrean/ Ethiopian culture – that there is more of a tendency to sharing problems, not sharing solutions or practical tips for moving forwards. For example, for those who seek advice from those who have been here far longer, they are told that things are difficult they need to wait – there is a level of pessimism that they pass on. This is still around today.

5. Health issues both physical and mental mainly depression, mental distress and anxiety.

The fact that the participants have to wait, living with uncertainty is affecting them negatively. Within the community, this anxiety may not be recognised as a mental health issue (it is a taboo). However, it is clear that there is mental distress.
This was not directly spoken about but some of the participants did admit to experiencing difficulties (a word from local language that can be translated as more than just difficulties – not being able to cope – was used). Also, the participants spoke about how other people in the community faced this as an issue but would not speak directly on this topic any further. (This was one useful learning point for me in that I asked about participants’ direct experience but also for them to speak on behalf of the rest of the community too) As a researcher from the community, I knew I could not push this point. And I wouldn’t get far. I had to be cautious and be sensitive. They would have been uncomfortable to speak about these issues.

In a research done by Migrant and refugee communities forum, Palmer (july2007) entitled an exploration into the impact of resettlement and mental health issue within Ethiopian community in London, highlighted the high degree of mental distress and use of Khat and alcohol. NB this was not a direct issue from my research participants but is one I am aware of in the wider community.

Plus as a community worker, I am very aware that this is an issue although a taboo one and therefore not an area I could push directly in my research. Participants would not have used the word ‘mental health.’

6. Poor community service provision (too many community organisations focusing on practical support like housing, health issues i.e. counselling and job centre applications. and very few if any, deal with or provide guidance, advice about education services and training programmes.

7. I mentioned the difficulties of good advice on arrival above but there is another point to be made about supporting Ethiopians/Eritreans on educational advice.

The participants stated that they went to Eritrean community groups for practical issues. The community groups seem to see issues such as housing, health which is regarded as pressing issues and a priority. The participants stated that community organisation had not advised them on education or training. This is something they would have to resolve themselves through accessing English/mainstream information. Therefore this is a gap.
In my experience, there are some groups I have come across beginning to offer workshop/training on self-employment do work around volunteering placements, liaising with employers etc. They are trying to build employability and offer placements. However, there did not seem to be support available beyond this placement. More needs to be done here.

Referencing the point about the issue of adequate working language being a barrier for employment, community organisations also need to address this further. (See point 2 above)
For my understanding this seems to be due lack of capacity or funding issue.

8. Isolation and lack of networking/integration with main stream British society or with other communities.

Two or three of the participants made statements about how they stick together as a community and how as a community they have not gotten to know other communities or networked. They recognised this was not a positive point at all and were self-critical about it.

Some of the participants stated that they had not lived anywhere else (Eritrea and UK only). They do not have many friends outside of their own community. They are no opportunities for them to meet others.

This may be because they are not working (apart from one) or participating in other activities like volunteering or education/training which might enable them to make contact with people outside their own community.

The one participant, who had been here longer, interestingly noted that she had a more positive experience. Once again this may be because of a number of reasons. One she had a sister here already. Also, she had stayed in Sudan and Saudi Arabia (this living in another culture may be a contributory factor). Also when she first came, she was placed
in an area with few Eritreans – this may have forced her to make contacts with others. Finally it may be because she is in employment. It may be a combination of all these variables.
Chapter 4
(i) Conclusions

1. Refugees Immigration Status limits their capacity to access publically funded education and training.

2. Limited English Language skills are a big barrier to climb specially if combined with limited access to English or ESOL courses, ESOL is English for speaker of other language.

3. Inadequate advice and guidance services, especially in community languages, to help refugees make an informed decision about their best available options.

4. Limited ambition, drive and interest in education that could partly attributed to the long uncertainty and distress they have faced.

5. Health issues both physical and mental especially depression, mental distress and anxiety make the issue more complex.

6. Poor and inadequate community service provision -too many community organisations focus on providing practical support like housing, health issues i.e. counselling and job centre applications. Very few if any, deal with or provide information/advice about education and training. An English course for employment is also a key issue that needs addressed.

7. Isolation and lack of networking and integration with main stream British society or with even other migrant communities in UK.
(ii) Recommendations

1. Adequate provision of publicly funded English language or ESOL courses especially at Beginners or Elementary level at least for eligible refugees if not all.

2. Eritrean and Ethiopian Community organisations should actively seek to network, link and cooperate with other organisations to develop new skills and build capacity to refocus and improve their services with emphasis on providing information, advice and guidance on education and training programmes.

3. Community organisations should try to develop programme and activities that would improve the physical and mental wellbeing of its members, therefore helping them to better deal/cope with the distress and uncertainty of their new life.

4. There is a high concentration on Ethiopians and Eritreans in London especially in north London like Haringey, Islington Camden, some councils do provide some funding to community organisation but also there need to fund project on employment and employability.

5. If those waiting for immigration status were allowed to access publically funded training and education courses on language, this would make a significant difference to their lives.

(iii) The strengths and limitations of research

In this project, the qualitative aspect of the research had some challenges – arranging the focus group and running it was challenging – this was the first time I did this. Ensuring ethical conduct was worrying – I felt anxious about this. There were some tensions in the discussion- one participant wanted to impose her views on the others. I had to be careful what I pushed regarding leads. My priority became answering my topic areas. Some of the answers weren’t as directly about the questions that I would have liked... Another challenge was the assumption that I understood the participant’s experiences and I have been through this myself.
Another point to note, I had hoped to have a higher number of participants in this research including a mixture of men and women and combining Ethiopians and Eritreans, but this was not possible in the time I had. I would ideally change this in any future research.

Positives included that I got to understand the difficulties the participants were facing – the feeling of being stuck, doors being closed and not knowing where to turn or where to seek help, I gained more understanding of what they are facing.

The interview was good as it allowed me to explore certain issues, particularly provision of advice and guidance services within colleges. The focus group’s interaction was the most positive aspect for me. The exchanging of ideas and examples was very positive.

If I were to do a future study, I would use the same tools (if the research were similar). I would be more confident about approaching people to take part. I would consider having a female moderator/interviewer for female participants. I had a helper in my research and without her; I am not sure the women would have opened up or even agreed to take part in the meeting/discussion in the first place.

There is reluctance from the community to take part. With more time, I would have designed information and publicity talking about the benefits of the research and what was expected from them.

(The above mentioned helper was also assisted me to bring the group together and only then did I give them information about the research – it would be better to have done this earlier).
Bibliography


Palmer, D (2007) An Exploration into the impact of resettlement experiences, traditional beliefs and custom on mental illness in Ethiopian community in London. Migrant and Refugee Communities Forum,

Quevedo,G (2010) ,Mapping refugee and migrant communities in the UK, ICAR resource Guide
Appendices

Community based action Focus group meeting was held on January 23rd 2012 between 11.am to 12.45pm, at Rain Project Office based in Manor Garden Centre, London N7 6LA

Introductions/welcome

Basic Rules

Research question were

1. What are the issues and difficulties facing Eritrean & Ethiopia refugees in Camden, Islington and Haringey, in accessing further education and training opportunities (FETO)?

2. What support is available to these refugees to access these opportunities and how effective is it?

3. How best can these issues/difficulties be addressed?

4. What is the role of the refugee community in addressing these issues/difficulties?

Discussion

Conclusion

Thanks/appreciation and Close