

Research with black and minority ethnic groups

Do you really need to carry out this consultation?

Before you carry out any research / consultation, please make sure that it is really necessary to do so. Find out what other similar activities have been undertaken by Kirklees by checking [Involve](#), our partnership planning tool for community engagement activities.

Why research black & minority ethnic (BME) groups?

BME groups make up approximately 8% of the UK population and approximately 14% of the Kirklees population. These proportions are predicted to increase in the future. It is therefore increasingly important that the council understands and meets the needs of its diverse population. Cultural and religious differences; communication, language and literacy issues; as well as experiences of and perspectives on 'race' and discrimination are important additional reasons for carrying out research/consultation with BME communities.

Commissioning BME research

Researching BME groups should be seen as a 'specialism'. www.multicultural.co.uk provides practical information on working with ethnic minorities and faith communities. Consultants will need to have the relevant experience and expertise to do it effectively - the Market Research Society suggests some key questions to ask consultants in order to assess their suitability to carry out BME research / consultation. These include: Do they use freelancers? Do they provide bi-lingual interviewers/ moderators? Are their recruitment methods appropriate? Do they translate interview transcripts? How do they ensure representative sampling? Are their methodologies appropriate?

Many well known research companies claim to undertake BME research but in reality many of them sub-contract to a limited network of specialists. Alternatively they may use conventional methods to carry out the research in a similar way to 'mainstream' population research. You should clarify this before you commission a consultant. For research where the BME sample is part of a larger 'mainstream' project, it might be appropriate to invite a specialist team to work alongside a large company and provide separate contracts.

Planning ahead for BME research

In BME research it is important to think about the information that will need to be given to participants/ respondents to overcome any concerns they may have. This includes details about the research aims and objectives; confidentiality issues; quality control (e.g. re-contacting some respondents); and the value of taking part (e.g. benefits to communities).

Think carefully about how you define and want to find out about ethnicity. Pre-description (for example, using the standard Kirklees categories may be the most useful. Self-description can reveal more about participants' perspectives on ethnicity but is more difficult to analyse. Using additional questions linked to ethnicity may build a fuller picture of participants, for example, own / parents' country of origin; religion / faith; main / other spoken languages; main language spoken at home, etc. However, do not ask for additional information if you do not intend to use it.

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What type of research method is best for BME groups?

The research method(s) that you choose must be appropriate both for the research questions / issues that you want to explore and your target group(s). Before you decide which quantitative or qualitative methods to use (please refer to the other research and consultation guidelines for more information), you should also consider the following issues before you carry out any research / consultation with BME groups.

Quantitative research issues

Sampling

For general information on sampling, please see the 'Sampling' guideline. Remember that BME target groups may be 'low penetration' (i.e. they represent a tiny proportion of the general population). They may also be 'clustered' (i.e. tend to live in particular postcode areas, wards, etc). BME target groups may also be 'low penetration' and 'unclustered' (e.g. the Chinese community). Approaches to sampling may therefore need to be adapted in order to obtain appropriate and representative numbers of BME groups.

Three sampling strategies, in particular, may be helpful in BME research. They are

(1) 'high penetration' sampling (sampling from areas where the target BME groups represent a large proportion of the general population)

(2) snowball sampling (asking respondents to nominate others they know who fit the recruitment criteria) and

(3) focused enumeration (the respondent acts as a 'proxy screener' – they are asked to provide information on neighbours to see if they fit the recruitment criteria). However, all of these have their problems! The advantages and disadvantages of each of these are set out in the following table:

Sampling strategy	Advantages	Disadvantages
Sample high penetration areas	Areas can be identified from Census, etc.	Clustering effects – degree of bias interviewing in high penetration area.
		Views of target BME audience may be different to those of BME people living outside that area.
		Census data does get out of date.
		Additional sampling costs
Snowball sampling	Useful for unclustered target audiences	Tend to get like-minded / behaving respondents
	Useful for very specific 'audiences within audiences' (e.g. Pakistani women who use a particular service)	Sensitivity issues
		Logistics (clustering, contacting the snowballed)
Focused enumeration	Can extend number of addresses screened to boost sample size	This becomes increasingly unreliable
		Relies on potentially flawed knowledge
		May be perceived as insensitive
		Fieldwork logistics (what is 'next door'?)
		Only works for 'visible' minority groups

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Questionnaires – self-completion

In addition to the usual issues to consider in questionnaire design (please see the 'Questionnaires' and 'Writing questions' guidelines, there are several important factors to consider when using questionnaires with BME groups. For example, self-completion questionnaires sent to certain ethnic groups (i.e. postal surveys) often have poor response rates. Even with tailored covering letters, response rates are often low because of misunderstanding/ suspicion of the purpose of the research and language / literacy issues. If a postal method must be used, a translated sheet should be enclosed that allows respondents to request information in another language.

Respondents who have language or literacy barriers sometimes ask family members and friends to help them to complete questionnaires. Responses may not therefore reflect the views of the target groups.

Translated questionnaires are often not cost-effective. Translations must be checked properly (and piloted if possible) to make sure that they are accurate, make sense and that the language is not too formal or traditional. In addition you need to remember that second and third generation BME respondents may speak the language fluently but not read it.

Questionnaires – using interviewers

'Real time' translation (i.e. an interviewer translates the questionnaire face-to-face with the respondent) is likely to produce much better response rates than pre-translated questionnaires. You should first consider using interviewers that are able to speak the same language as the respondents. Translators accompanying interviewers are a possible alternative but will require a fieldwork phase that is much longer, expensive and less satisfactory.

The use of bi-lingual interviewers in BME research needs to be carefully planned. Some important points to remember are:

- An initial small-scale qualitative phase may help to improve the questionnaire design and content. This may require liaison with community leaders, etc.
- Same sex interviewing may be necessary for some BME groups.
- Allow a minimum of 20% more time for undertaking translated interviews.
- Allow more time for recruiting skilled interviewers.
- If showcards (i.e. cards that list the options that can be selected when answering a question) are to be used in questionnaire interviews, they should be bi-lingual.
- Interviewers must have strong ability in both languages and be well briefed, trained, rehearsed, supported and quality controlled.
- Higher costs will result from all of the above.

Qualitative research issues

Recruitment

Standard recruitment methods 'in the street' or door-to-door tend to lead to under-represented BME samples. Using BME recruiters can have advantages such as their greater cultural understanding, language skills and contacts in the community. However, 'conventional' recruiters

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are often better trained and more experienced and, when working in conjunction with local BME contacts, may be just as effective as BME recruiters. You need to select the best approach to suit your research project.

Resistance to the research from BME communities can sometimes be overcome with good publicity to raise the profile of the research, seeking guidance on language and cultural issues and using community organisations / figures to help overcome concerns and provide 'insider' information. Using community organisations in the recruitment process does have disadvantages. For example, they are potentially inexperienced in recruitment and research, may introduce bias and may assume they know better. However, thorough briefings on the research objectives and who / how to recruit can help with this.

Using community 'leaders' in the recruitment process can help to promote the research and benefit from their cultural know-how. However, as with community organisations, there can be disadvantages to their involvement. For example, what standing do they really have in the community? They are also potentially difficult to get hold of and could be obstructive gate-keepers. An alternative might be to use community workers. They can also provide cultural know-how, may be closer to the 'real people' and possibly more accessible.

Matched or mixed BME respondents

Mixing BME and white participants in group discussions can be acceptable if the budget and timescales are tight (so extra groups are not possible); if ethnicity is not the core focus of the research; and if the topic is one of general or 'neutral' debate. However, including one or two BME participants in a mixed group can be seen as 'tokenism' and may overlook essential issues, details and context for BME communities. Mixing BME groups may also result in tension and disruptions because of cultural / religious conflicts.

Researchers should also consider the make-up of qualitative groups in terms of gender, age, religion and cultural background. Separation should be considered in some instances. For example, separate male and female groups are preferable for Muslims when respondents are older or when researching sensitive subjects.

Matched or non-matched moderators

Some researchers believe that it is important for moderators (facilitators / interviewers) and respondents to be from the same or similar ethnic backgrounds. This is often called 'ethnic matching'. In general there is no clear consensus on the issue of matched moderators. You will have to make your decision on a case by case basis and remember that the skill of the moderator can overcome many barriers. In some cases, joint moderation may be possible.

The advantages and disadvantages of matched and non-matched moderators are summarised in the table below:

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Approach	Advantages	Disadvantages
Matched moderators	Similarities can be encouraging	BME moderators hard to find
	Easy to establish rapport	Time and cost implications
	Overcomes suspicion	Not always appropriate to topic
	Facilitate communication	Lack of experience in the field
	Insightful questioning	
	Incisive analysis and interpretation	
	Can be essential for certain subjects (e.g. racism)	
Non-matched moderators	Value in differences	Lack of cultural understanding/ awareness
	Less taken for granted	Potential for insensitivity/ racism
	More insight	
	Opportunities for greater probing	
	Reduced pressure to conform to community norms (e.g. status, dress & behaviour)	
	Perception of more confidentiality	

Other factors to be considered in the selection of appropriate moderators include age, class and gender. The MRS advises on ethnic matching for young black men, non-English speakers and older members of the Chinese community.

Language & translation

The options for moderating group discussions with BME groups are (a) to use interpreters, (b) mother tongue moderation or (c) joint moderation (i.e. a researcher and a bi-lingual moderator working together).

Again, there are advantages and disadvantages to each approach, and these are summarised in the table below:

Approach	Advantages	Disadvantages
Using interpreters	Control lies with the researcher	Slow and laborious
	Consistency across the sample	Probing more difficult
		Disruptive (relationships with respondents and group dynamics)
Joint moderators	Overcomes hurdles of using interpreters	Good communication between researcher and moderator needed
	More consistency	Could be hard to find the balance

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	Freedom to follow up key issues	
Mother tongue moderation	Proper discussion	Costly
	Better flow of questioning	Time consuming
	Increases comfort of respondents	Dependent on researcher availability
	Flexibility of follow-up	

The ultimate decision on this will depend on practical factors and its importance to the research.

Data analysis / interpretation

For more information on the analysis of qualitative data, please refer to the 'Analysing and reporting qualitative data' guideline. The analysis and interpretation of data from BME research can be more difficult and time-consuming than 'conventional' research. The reasons for this include the need for translations into English; full transcripts not being possible if discussions were conducted in other languages; cultural concepts can be difficult to interpret and the moderator may need to be involved in this process; and the researcher's own cultural frameworks (e.g. beliefs, understanding and experience) can influence the interpretation and analysis.

Other issues in BME research

- Effective publicity in advance will alert the community of interest to the research and may help to increase response rates.
- Be culturally sensitive, e.g. avoid taboo subjects and be sensitive to global events that may be affecting the target audience.
- Avoid carrying out recruitment or fieldwork during religious holidays. See the religious calendar link below.
- Avoid running groups at prayer time or provide a break and suitable space for prayer.
- Venues should be accessible and suitable, e.g. pub rooms are not suitable for Muslims.
- Refreshments should be selected, prepared and presented in a manner suitable for the respondents.
- Consider piloting incentives prior to a research project ensure that they are appropriate to the respondents.
- Ensure that the research results are shared appropriately with the BME communities involved. This is particularly important in local authority research and especially if community leaders / groups / workers have helped in the project.
- BME research requires a realistic timescale and budget and liaison with those in the community.
- Remember that differences and conflicts can exist both within and between BME and faith communities. For example, a young Pakistani woman may feel that she has more in common with a young white woman than an older Pakistani man.
- Be thoughtful, patient, sensitive and attentive to detail. There are no hard and fast rules in BME research – a case by case approach is needed.



Useful resources / links

Religious calendar:

<http://www.bbc.co.uk/religion/tools/calendar/>

Ethnic group population statistics for Kirklees:

<http://observatory.kirklees.gov.uk/dataviews/tabular?viewId=224&geoid=6&subsetId=>

What next?

If you would like to know more about this topic or any other aspect of research or consultation, please contact any member of the team:

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