



---

# EVALUATION REPORT

## JULY 2021

**A community COVID19 response initiative targeting  
Bangladeshi communities in London boroughs of  
Hackney and Tower Hamlets**

Submitted to:  
The National Lottery Community Fund,  
Board of Bangla Housing Association,  
and BME London Landlords Collaboration

**Evaluation author  
Khalid Mair, FSRA**





# CONTENTS

---

<b>Foreward by Khalid Mair</b>	<b>4</b>
<b>Introduction</b>	<b>6</b>
• Evaluation report	
• Methodolgy	
<b>Summary</b>	<b>7</b>
<b>Findings</b>	<b>8</b>
<b>Recommendation for further work</b>	<b>10</b>
• A Marmot Approach	
<b>A Question of Funding</b>	<b>12</b>
<b>BCAP Outputs Table</b>	<b>13</b>
<b>The Project</b>	<b>14</b>
• Why was it important to provide this service	
<b>Member of BME London Landlords Collaborative Group</b>	<b>16</b>
• Funding	
<b>Project Aims</b>	<b>18</b>
• Implementing the Project Plan	
<b>Managing the project / Creating social value</b>	<b>19</b>
• Project Workers	
• Volunteer Community Champions	
• Impact management to optimise impact	
• Becoming part of the Statutory COVID response	
• Media	
• Bangla HA staff time	
• Video production produces additionality with NHS video (Bangla and English versions)	
• Leaflets	
• Partnership on a number of levels	
• Partnership with Spitalfields and BME London Landlords Collaboration Group	
• Questionnaires to derive impact of project to shape further provision	
<b>Bangla Housing Association – A Trusted Community Organisation</b>	<b>25</b>
<b>Views from Project staff and Volunteers</b>	<b>26</b>
<b>Appendices</b>	<b>27</b>
• Sample Tenant Telephone Response – Appendix 1	
• Key Stakeholder List – Appendix 2	
• Project Budget (Community Fund) – Appendix 3	
• Bangla COVID19 Advice Project Bangla HA Residents Survey Response March 2021	
• Bangla COVID19 Advice Project Volunteer Champions Survey Responses	

---

# FOREWORD BY KHALID MAIR

This evaluation report is effectively a case study of Bangla Housing Association journey from ideation to gaining support from BME London Landlords Collaboration group, developing an outline project, writing a bid seeking funding; successfully acquiring funding, the recruitment, selection, and building a project team. A process that involved developing additional capacity within a small community facing housing association to deliver a separate project. Bangla HA in developing The Bangla COVID 19 Advice Project, committed to a challenging set of management tasks (within a six month period) in the most challenging of circumstances (The 2nd and 3rd UK lockdowns).

4 This project started in earnest with a partnership arrangement with Hackney Volunteer Centre in October who provided COVID19 advice training for the project team. The project team developed appropriate support questions to ascertain support needs, evaluating telephone engagement processes, continuing iteration in the engagement of residents. The Project engaged and developed a partner implementation network, built digital assets; produced several COVID advice videos and leaflets in Bengali/English for distribution via community partners. Secured involvement of Hackney and Tower Hamlet local authorities at Mayoral level; leveraged Deputy Mayoral support at the Greater London Authority. Implemented an evolving media strategy and engagement via Bengali TV, national press and social media. Building working alliances with local mosque networks, Bengali media professionals, Bengali local politicians, Bengali medical professionals and community celebrities.

Bangla HA and its Chief Executive Bashir Uddin have demonstrated excellent leadership in their diligent work to overcome these challenges to achieve the project aims. This case study is worthy of reflection because in reviewing the work we highlight what is possible when the objectives are clear, everyone is aligned with a sense of purpose, and those with the required skills and experience are enabled to take action.

Bangla HA as with other BME led registered social landlords occupy a unique space as the most sustainable BME community facing enterprises, who over several decades have been supporting their communities with quality affordable social housing and a multitude of additional support programmes that go under the radar, but are significantly impactful in their residents and communities lives.

This is an excerpt from a conversation with Bashir Uddin, Chief Executive of Bangla Housing Association, the project lead speaking on some realisations he had 5 months into delivery this project:-

"After attending a NHS leaders meeting and hearing the stats regarding Bangladeshi and Pakistani communities being the worst hit BME communities with COVID in the first wave of the pandemic, I became very concerned about the vaccine take up for our community; early figures from the meetings with the local public health teams showed that they were least likely to take the vaccine. Which means a lot more work is going to be needed to advocate and advise for the vaccine. We've done the work. We have a clear role in explaining the need for a culturally sensitive approach. Do not patronise us, how can you be trustworthy. 30 years relationship of working with the community, they trust us. The messaging from Bangla Housing is much stronger, more impactful.

Amongst the community there has been mistrust in the Government messaging, based on their double standards, nationally and internationally. Take for example, Grenfell and Windrush. Or when people say to us "Go Back Home", or look at the treatment of illegal immigrants in detention centres.

Many of our people feel powerless, and very wary of Government thinking. For some in our community it feels like there is 'no place for us in this country'. When you see and hear quotes and attitudes like to this from senior politicians it makes you not want to engage. It's just racism. This comes from UK history, then there is the stigmatism of Islamic Terrorism, and the language used by politicians. Policy makers and politicians have to be careful how they communicate. When you speak like this you must think."

"The last five months working on this project it was at the back of my mind, now it's coming to the front of my mind. I wish I could sit down with politicians, policy makers and express my mind. Working with the community on this particular project, on what COVID has thrown in. It's now making me feel, 'what's been going on for all these years and what about the future, what does it hold for the Bangladeshi community.' If we sit back and accept it as it is, that's not fair. We've been telling you this all this time and you didn't believe us now COVID has laid the facts bare about the inequalities. You are saying it yourself, look at the evidence, you know what the issues are. Let's sit down and see what are you going to do about it. We are happy to engage with you, ...happy to get the community to engage with you, but what have you got to offer us. What are you going to do? That's what I feel like saying and shouting at people. If only people would be willing to listen to the community and work with them to meet their needs."

# INTRODUCTION

---

## Evaluation report

The specific purpose of this report was to document and provide a record of the implementation of The Bangla COVID 19 Advice project to provide an evaluation, assess the experience of delivering this community response to the Covid-19 pandemic, to highlight priorities for a longerterm COVID recovery plan for local communities.

The evaluation of the project includes two elements, firstly a narrative summary which is this report which outlines what took place to articulate and demonstrate the process of the projects delivery.

Secondly there is the Social Return on Investment valuation impact report which mapped stakeholder involvement and presents a social value according to the Social Return on Investment framework to assess the impact of Bangla COVID19 Advice Project, in financial terms in the subsequent SROI report.

---

## Methodology

From inception of the project, an action research technique was used whilst seeking to measure the projects social value using the Social Return On Investment framework (See BCAP Impact Report).

Action research is a process of deep inquiry into one's practices in service of moving towards an envisioned future aligned with values. Action Research is the systematic, reflective study of one's actions and the effects of these actions in a workplace context. As such, it involves deep inquiry into one's professional action. The researchers examine their work and look for opportunities to improve. As designers and stakeholders, they work with others to propose a new course of action to help their community improve its work practices.

Social Return on Investment (SROI) is based on the Social Value Principles but uses financial proxies to apply the principle of valuing what matters. This provides the opportunity to compare and contrast different opportunities for creating value starting from a common yardstick. It also means that the efficiency by which resources are used to create value can be assessed.

A requirement of the SROI process (See BCAP Impact report) is to involve stakeholders at centre of the process so that they can inform what is of value to them, so that the organisation can seek to improve or do more of what is of value to them as stakeholders.

Between February 2021 and March 2021 during third lockdown the project conducted an online survey targeting specific project stakeholders, including residents and clients of Bangla HA, project workers and volunteers of BCAP, and community organisations and mosques who were involved in the distribution of the resources produced by the project.

Ninety-eight (98%)percent of responses to questionnaires were by people identified as Bangladeshi, giving a detailed insight into the experience of the negative impact of COVID 19 in their community. Ninety-one (91) fully completed surveys were received from:residents (35), clients (19), volunteers (19), project staff (6), Mosques (5), Community Partner Orgs (7).

The majority of the findings in this report are drawn from feedback provided key stakeholders via survey questionnaires two examples of which can be found in the Appendices. We have also referenced Sir Michael Marmot's Fair Society Healthy Lives 2010 report in our recommendations to contextualise BCAP works in light the potential for further work.

# SUMMARY

## The Bangla COVID19 Advice Project (BCAP) a community led response to the spread of the Coronavirus amongst the Bangladeshi Community in Hackney and Tower Hamlets in London.

The Project plan focused on raising awareness by producing videos, leaflets, and posters, in Bengali on Covid-19 safety and the vaccine promotion to reach out to 40,000 people in the two boroughs through social media, personal contacts, and direct advice and support telephone calls to Bangladeshi social housing residents.

Despite The Government's and NHS COVID19 national campaigns on how to keep safe, the Bangladeshi community was at seriously high risk with the highest mortality rates confirmed by The Public Health England (PHE) report published in June 2020 that as of 13th May 2020, Bangladeshis were the most at risk BAME community in the UK of dying from COVID 19 with people of Bangladeshi ethnicity twice at risk of death than people of White British ethnicity and in comparison people of Chinese, Indian, Pakistani, Other Asian, Black Caribbean and Other Black ethnicity had between 10 and 50% higher risk of death when compared to White British. The PHE report gave the directive that their findings needed to be widely discussed and considered by all those involved in and concerned with the national and local response to COVID-19.

BCAP was rapidly established as a strategic community intervention for 6 months between October 1st 2020 and March 31st 2021 to reduce disproportionate impact of the COVID pandemic on the Bangladeshi communities in Hackney and Tower Hamlets. The initiative developed by Bangla Housing Association with the support of community partners organisations, volunteer community champions, and BME London Landlords was funded by The National Lottery Community Fund, to reinforce the core health safety messages coming from the NHS and the UK Government; targeted specifically at the Bangladeshi Community in Hackney and Tower Hamlets.

The Bangla COVID19 Advice Project mobilised the 3 funded project workers and 21 volunteers all of Bangladeshi origin to work directly with their own community, producing several COVID safety videos, sharing the content on social media, making welfare calls, communicating in Sylheti and Bengali with targeted Bangladeshi community stakeholders sharing COVID safety information and ascertain what their support needs were.

BCAP reached out to 228 community facing agencies serving the Bangladeshi community in Hackney and Tower, including schools, NHS agencies, Mosques and local voluntary organisations to support the distribution of the videos produced on social media and via email. With the majority of organisations not open or providing community support the project was limited to making contact people by telephone, and email. BCAP Volunteers and Project Staff made a total of 1680 telephone support calls to Bangladeshi residents, family and friends reported an estimated 20000 Bangladesh beneficiaries who saw either the videos, received project literature (posters or leaflets) with the COVID 19 safety, advice and support messaging produced by the project.

Because of the lockdown restrictions during the November, January and March most of the engagement and project work, with residents, clients, volunteers and project staff took place remotely by telephone and virtually via zoom meetings. The key deliverables were:-

- **Video Production,**
- **Advice and Support Calls,**
- **Production and Distribution of Leaflets and Posters in Bengali,**
- **Volunteer and Staff Training in delivering COVID Safety Advice**
- **Engaging and managing Community and Statutory Partners network to promote awareness around COVID Safety, Advice and Support**
- **Evaluating the impact**

# FINDINGS

**BCAP as the only coordinated local community response targeting the Bangladeshi community during the second and third UK lockdown (5th Nov – 2nd Dec 20, 14th Jan – 29th Mar 21) in Hackney and Tower Hamlets.** The project team knew that any data it could collect from the field would be useful to make the case for more resources to meet an underserved need.

**The aggregate social value created by the Bangla COVID 19 Advice Project is £270618. BCAP used a Social Return on Investment (SROI) framework to ascertain the social value produced as a result of the project.**

Giving Bangla COVID 19 Advice Project SROI ratio of 4.02:1 that equates to, every £1 invested £4.02 of social value is created in terms of reduced healthcare costs, reduced benefit costs and taxes collected.

**Incorporating a project evaluation (SROI) process underpinned by impact management thinking created opportunities to optimise the projects impact.**

Additional videos were made, links with a community agency who delivered food parcels to tenants, as well as electronic devices were given to a few families. By focusing on stakeholder involvement by adapting, and managing resources as government lockdown restrictions influenced how the project could be delivered. Where contact with stakeholders could only be made via telephone, online conference video calls, emails and post. To assess the impact of COVID 19 on stakeholders and experience of the projects delivery, questionnaires were designed to elicit well defined outcomes from those identified as key stakeholders as part of an essential element of the SROI exercise for the purpose of establishing a financial value to frame the social value produced (BCAP Impact Report).

**Bangla HA's BCAP demonstrated how mission focused BME led registered social housing provider as community anchors occupy a uniquely crucial space between statutory agencies and local communities and can be highly effective in providing support services to groups that are not fully engaged with the NHS agencies or accessing the necessary support to meet their health needs.**

**Bangla HA was ideally placed to lead and develop this project, with the required administrative infrastructure, project management experience, governance, as a registered social landlord to manage funding and delivering services to the community.**

With its established links in the community it serves and its record of providing quality affordable homes at social rent, with over 45% of its tenants identifying as Bangladeshi there is a clear role. The impact of the project has built a greater level of connection and trust between Bangla HA and its residents.

**Across the housing sector many feel that partnership working has improved during the pandemic, with the sense of urgency creating the impetus to overcome the barriers that usually prevent effective partnership working.**

Bangla HA was able to call on the Mayor of Hackney and Mayor of Tower Hamlet which led to ongoing engagement with their respective COVID strategic leads and both local authorities public health teams and NHS North East London CCG. BCAP project workers were able to involve Bangladeshi influencers in the community, ranging from a TV presenter, Doctors, local Imams, an Elderly celebrity fundraiser to participate in the videos giving a health message to their Bangladeshi community. Other Bangladeshi community group partners, including Mosque groups.

**As a result of BCAP work additional partnership health projects have developed, Bangla HA has arranged several COVID 19 Vaccine Pop Up Clinics in Hackney during June 2021,** in partnership with Hackney Public Health, and North East London CCG, Hackney Central Mosque.

There exists an opportunity to build on these links in a way that builds the capacity to work collaboratively. Another follow up partnership initiative Bangla HA are involved with as result of the BCAP work is the The Open University and The Housing Learning and Improvement Network, the Amar bari amar jibon – My home, My life developing living environments for Bangladeshi elders.

**Bangla HA effectively used its membership of BME London Landlords collaboration group to develop support for the project, with the group sponsoring the funding proposal and bid to The National Lottery fund.** The collaborative group also seconded their own executive support resource to provide ongoing project management support. Both on a



hyper local level in Hackney and Tower Hamlets, Bangla HA use of leveraging collaborative working practices and understanding the collaborative model provides learning and a model template for how housing associations role as community anchors can be leveraged with a range of stakeholders to drive innovation to best meet need in local places. The Bangla COVID19 Project became central to BME London Landlords strategic thinking as it developed its collaborative strategic 5 Pillar framework, Influence, Leadership, User Experience, Efficiency, Community Engagement. BCAP in its execution embodied this thinking with the BME Landlords exploring how it's collaboration group can learn from the project model, Bangla HA has developed with BCAP to develop local projects with other members in the collaboration.

**Bangla Housing Association residents, welcomed telephone calls reaching out to them giving advice and seeking to support.** Bangla Housing Association Residents expressed were willing to share information on their experience of the impact of COVID 19 and express what they would accept support with their issues if they trusted the organisation.

In response the questions on how the three lockdowns had impacted them Bangla HA residents gave feedback in terms of suffering from bereavement and loss of family or close friends, reduced income, mental health issues, issues relating to family care and family relationships, physical health lack of exercise **(Sample 35 Bangla HA residents):-**

- 40% of Bangla residents had a family member or close friend die from COVID 19.
- 37% of Bangla residents had a family member that was hospitalised as a result of COVID 19.
- 28% of residents said COVID 19 negatively affected their family life.
- 22% of residents said COVID 19 negatively affected their mental health.
- 22% of residents said they felt isolated.
- 17% of residents said COVID negatively affected physical wellbeing.

When asked about what support they think they needed moving forward

- Over 65% Bengali residents stated preference was to communicate in Sylheti and to be contacted by telephone rather than email, letter or a home visit.
- 25% of residents said they wanted support with issues relating to family care and family relationships
- 25% of residents said they wanted support with Mental Health, Stress and Anxiety,
- 40% of residents said they wanted support with bereavement/loss of family and close friends
- 25% of residents said they wanted support with accessing short term basic needs
- 20% of residents said they wanted support with employment opportunities

#### **Impact of BCAP project delivery – From Project Workers and Volunteers Perspective (Sample 20 Project Workers and Volunteers)**

- BCAP – Project Workers and Bangla HA staff and Volunteer responses
- 65% Project Workers felt that users were better able to respond to changing circumstances
- 35% felt that users were better supported through bereavement or loss
- 55% felt that user's short-term basic needs were met better (e.g. financial, food, clothing, shelter),
- 60% felt that users had more social contact
- 60% felt that users were less lonely
- 50% felt that user's mental health and wellbeing was better
- 35% felt that users children's education situation was better
- 25% felt that users were protected from violence, harm or abuse

# RECOMMENDATION FOR FURTHER WORK

Sir Michael Marmots Fair Society Healthy Lives, published in 2010, made recommendations in six domains:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control of their lives
- Create fair employment and good work for all
- Ensure a healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention

Our contention is that social determinants that affect those most in need in terms of health inequalities, must have joint up thinking in applying the resources to effect a robust community response as part of the strategy to improve community health. The Bangla COVID19 Advice Project is now a case study of how this thinking can be applied.

10

Published in February 2020 as the UK government were working towards making the decision of a national lockdown, **Health Equity in England: The Marmot Review 10 years, gave an analysis of inequalities in health 10 years after** stating:-

Since 2010 life expectancy in England has stalled; this has not happened since at least 1900. If health has stopped improving it is a sign that society has stopped improving. When a society is flourishing, health tends to flourish.

The health of the population is not just a matter of how well the health service is funded and functions, important as that is. Health is closely linked to the conditions in which people are born, grow, live, work and age and inequities in power, money and resources – the social determinants of health.

The lower people are in the hierarchy and the more deprived, the greater the threat to health. A proportionate universal approach addresses the social gradient. As Coventry City Council has put it: “A Marmot approach demands that we resource and deliver services at a scale and intensity proportionate to the degree of need; just focussing on one group of disadvantaged individuals or one geographical area won’t deliver change”

---

## A Marmot Approach

Both the Marmot Review 10 years on (Health Equity in England\_The Marmot Review 10 Years On - Feb 2020) and the Public Health England Report (COVID-19: review of disparities in risks and outcomes June 2020) provide clear ample evidence to the Health inequalities and inequities BME communities face, itself making a case for why the Bangladeshi community should be targeted with specialist support.

Bangladeshi's as community in East London fall into so many deprivation indices which by default categorises them at high risk well before the Coronavirus arrive. The crisis of COVID19 and the data from the Public Health England Report in June enabled BCAP to deliver a community response, which has led to collaborative work with Hackney and Tower Hamlets local authority's public health teams, and their corporate strategic leads, as well as a work relationship with Hackney Voluntary Centre, and a range of additional community groups.

Based on the identified needs from the key stakeholder groups questionnaires, we intend to pursue to emergent opportunities to extend work of Bangla COVID 19 Advice Project to meet the continued Health and Wellbeing, Finance and Debt Management, Employment and Training needs of the Bangladeshi community in London Boroughs of Tower Hamlets, Hackney, Newham and the City of London with the BCAP recovery project.

Fundamental key elements of this project, was that Bangla Housing Association as the strategic lead, a registered social landlord whose business model has been sustained for 30 years as a provider of social housing; with the necessary management and administrative capacity, already operated in close proximity and directly for Bangladeshi groups the organisation was ideally placed to pivot to acquire National Lottery funding to develop this project and focus on engaging its community stakeholders with Bengali/Sylehti speaking project workers to address the urgent need to community crisis. By optimising existing Bangladeshi community links and networks to the best effect to get across the seriousness of the message of COVID 19 safety, and provide a valuable resource the community could access.

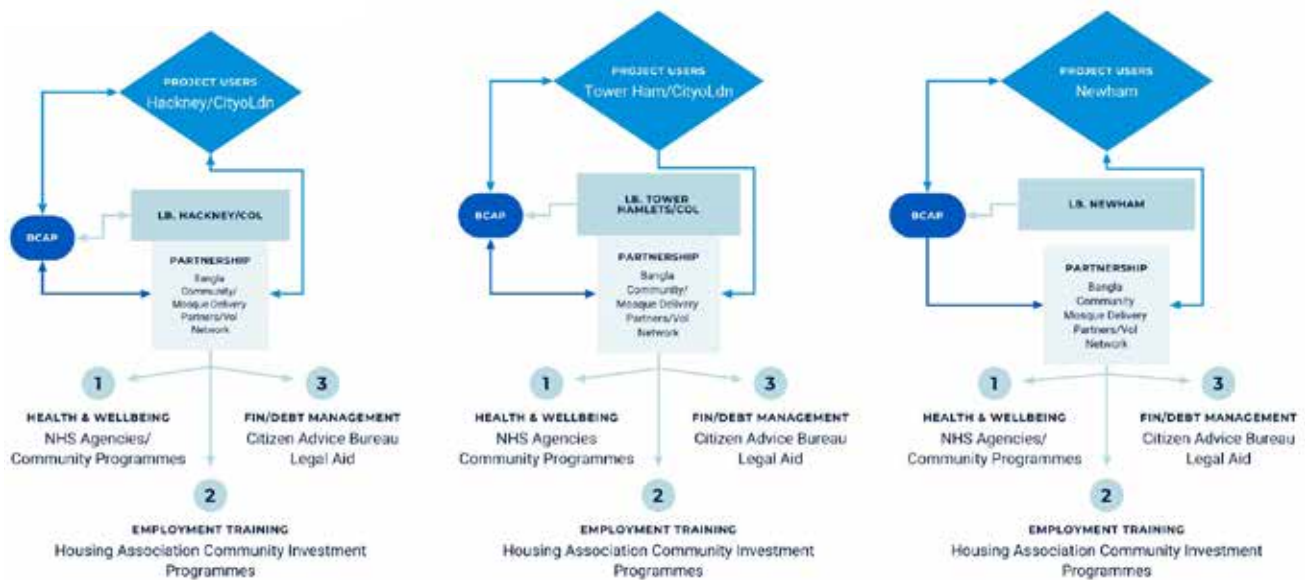
Local data collected evidences that COVID19 had a far reaching impact on The Bangladeshi Community in Hackney and Tower Hamlets because of multiple reasons, not withstanding the underlying health conditions as well as the social determinants including, deprivation, labour conditions, overcrowding.

# A QUESTION OF FUNDING

## Schematic Diagram of proposed BCAP COVID Recovery Project Delivery plan

### BCAP – Covid Recovery Project

Schematic diagram of project delivery to Bangladeshi Community in Hackney, Tower Hamlets, Newham and City of London (COL)



12

A key question for Bangla Housing Association is, where they have demonstrated the ability to build capacity effectively implementing and executing a project plan with determinable social value identified by a range of community stakeholders, will it possible to access more funding to build upon joined up collaborative thinking and action that allows to increase capacity within local Bangladeshi communities in East London to be at the centre of providing frontline services to meet local needs effectively.

Bangla COVID19 Advice Project is poised to continue working with other voluntary, community groups and mosques including the Hackney Voluntary Centre, City & Hackney NHS CCG, Hackney Faith Forum, and Hackney and Tower Hamlets Public Health teams and the Citizens Advice Bureau to the end.

# BCAP OUTPUT TABLE

BCAP outputs table

	Project Total	Project/Staff Productivity	Involving Volunteers	Beneficiaries	Management	Community Partner Network
Distribution/Reach	20,900			20,900		850
Calls	1,680	435	1,245	1,680		
Video Views	5,130			5,130		
COVID Trained	27 staff 864 Users	6	21	864	1	
Videos Produced	5				5	
Community Forums Mtgs	15	8	3		15	30
Media Engagements	21				21	
Public Health Forums	12	12			12	
Community Touch Points	228	228	Unspecified	Unspecified Friday Project Announcements		228
Reports		16	1		8	
Counselling/Support Calls	435	435	1,245	1,680		
Recruitment	4	5	22			

# THE PROJECT

## The Project

After the first of the UK lockdowns The Bangla HA staff team were very concerned about the impact on their tenants and wider community with the real possibility of more Bangladeshi deaths, where it was unclear as to reasons why the Bangladeshi community and other BAME communities were disproportionately suffering higher mortality rates from COVID19.

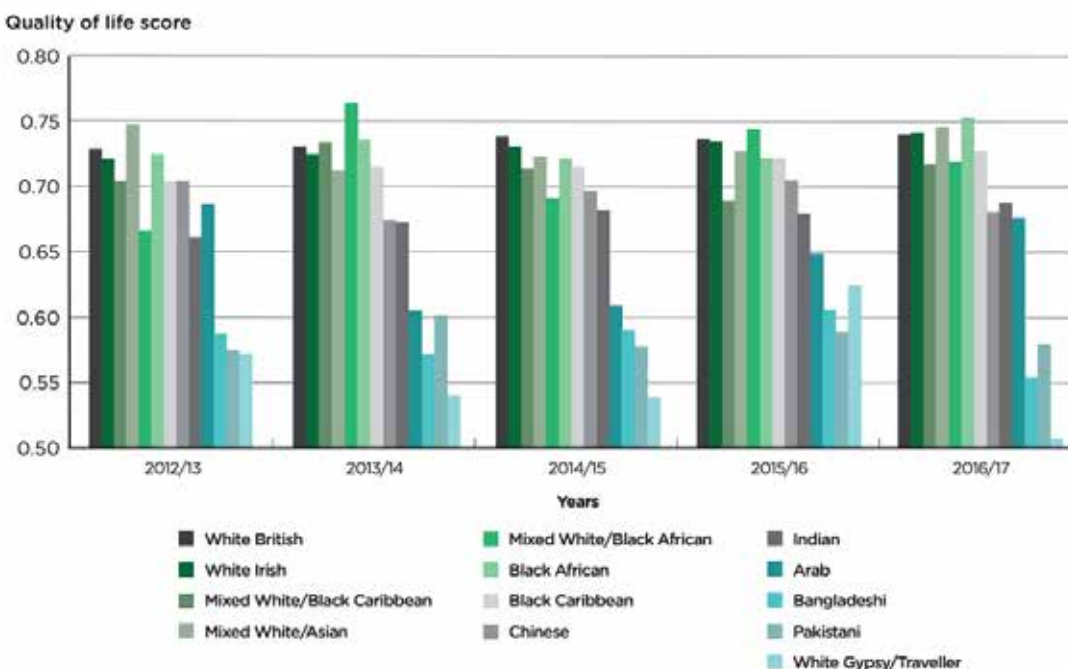
With the restrictions of not being able to leave your home, bereavement due to COVID, deteriorating physical, mental and financial wellbeing, restricted access to social care support, and the challenge of education for children at home became key issues for Bangladeshi households.

## Why was it important to provide this service?

Bangladeshis in Britain are heavily concentrated in London's inner boroughs and experience a range of socio-economic problems. According to the 2011 Census 447,201 Bangladeshis lived in the UK, i.e. 0.8% of the total population. 49.7% of the Bangladesh population live in the Greater London area and a high proportion of these London inhabitants were located within the inner London boroughs. Indeed, the 'heartland' of the London Bangladeshi community is to be found in Tower Hamlets, which contained 81,311 Bangladeshi residents the highest ethnicity in the borough at 32% also significantly 18.18% of the UK Bangladeshi population. In Hackney Bangladeshi residents represent 2.5% of all Hackney residents and a total 6180 Bangladeshi people. Bangladeshis, both here and in other parts of Britain, experience disproportionately high rates of unemployment, overcrowding, and certain types of health problems Bangladeshi households.

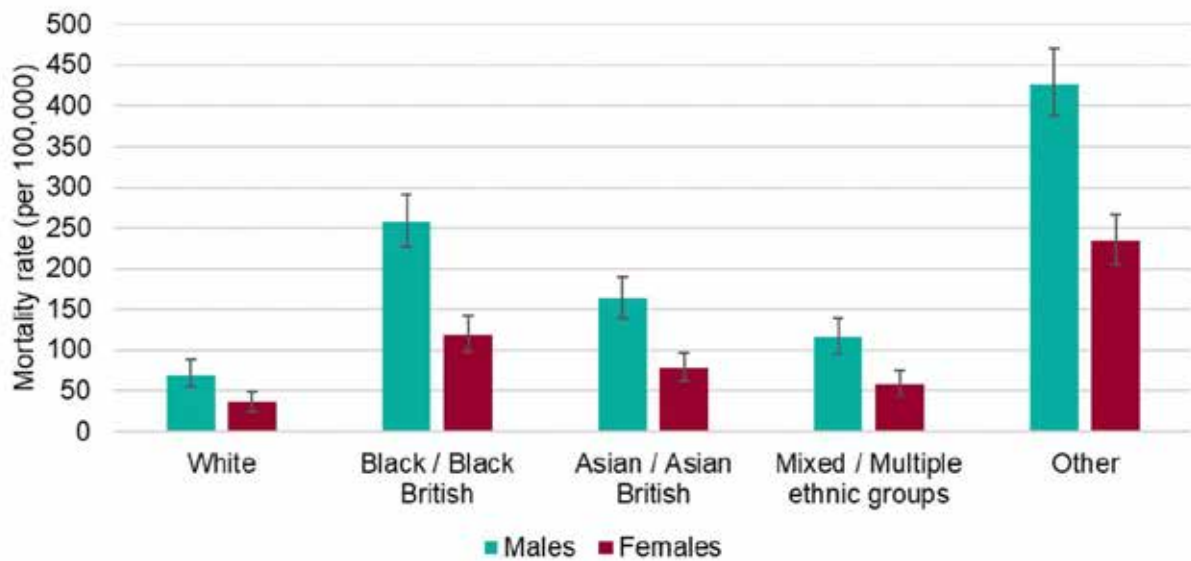
### Average health-related quality of life score for people over 65

**Figure 2.10 Average health-related quality of life score for people aged 65 and older, by ethnicity 2012/13–2016/17, England**



Source: Based on PHE, 2019 (18)

## Disparities in the risk and outcomes from COVID-19



The early anecdotal evidence from feedback Bashir and his staff team at Bangla HA, all of whom are of Bangladeshi origin made it clear that COVID 19 was having a devastating effect within the Bangladeshis in Hackney and Tower Hamlets. Reports of deaths were circulating from within their family and community networks, confirmed by the Office for National Statistics and the University of Oxford study in February and then more widely reported in newspaper articles and further news reports on television were indisputable when crisis was confirmed by Public Health England when they published COVID-19: review of disparities in risks and outcomes.

An Office for National Statistics and University of Oxford study has found that while Covid-19 mortality rates among some groups have dropped in the second wave, the rates for Bangladeshi and Pakistani groups have remained stubbornly high, and far above the average for white people.

**BBC 19 February 2021**

An analysis of survival among confirmed COVID-19 cases and using more detailed ethnic groups, shows that after accounting for the effect of sex, age, deprivation and region, people of Bangladeshi ethnicity had around twice the risk of death than people of White British ethnicity. People of Chinese, Indian, Pakistani, Other Asian, Black Caribbean and Other Black ethnicity had between 10 and 50% higher risk of death when compared to White British.

**Public Health England - Disparities in the risk and outcomes of COVID-19 - June 2020**



# MEMBERSHIP OF BME LONDON LANDLORDS COLLABORATIVE GROUP



16

It was at this time towards the end of the first UK lockdown Bashir Uddin Chief Executive of Bangla HA posted in the BME London Landlords WhatsApp group a newspaper article "I was preparing for death: coronavirus in England's Bangladeshi Community's" which described how people of Bangladeshi heritage grappled with the trauma as data from the Public Health England Report showed that they are dying at twice the rate of white people, a higher death rate than any ethnic community in the UK.

Bangla HA's membership at BME London Landlords (A group of 14 BME led registered social landlords based in London who formed a structured collaboration group for the benefit of their residents and wider BME communities) meetings who at this point were involved in regular discussions on the impact of COVID19 and Black Lives Matters protests to find practical actions the group could take, to support their residents and local BME communities.

Bashir Uddin's proposal to develop Bangla's COVID19 Advice Project (BCAP) to deliver a specifically targeted community response to address crisis within the Bangladeshi community, found unanimous support leading to the group sponsoring a funding bid to the National Lottery Community Fund.

The collaborative group who from their operational experience recognise there is a clear role for BME London Landlords members to play a key as a strategic partnership body to build capacity to ensure more impact projects are delivered to underserved BME communities made representation to The Deputy Mayor of London for Housing, Tom Copley regarding the funding proposal.



---

## Funding

In late September 2020 received notice from The National Lottery community fund that Bangla Housing Association funding application was successful and would receive £50,000 to deliver the Bangla COVID19 Advice Project for 6 months from 1st October 2020 – 31st March 2021. BCAP was then set up to deliver COVID19 health advice and support to the Bangladeshi Community in Hackney and Tower Hamlets with funding Bangla Housing Association received £50,000 to deliver the Bangla COVID19 Advice Project for 6 months from 1st October 2020 – 31st March 2021.

By the end of the project Bangla HA's staff time would equate to £16,770 in-kind funding. Add £500 sponsorship funding given by BME London Landlords for a bid writer a figure of £67,270 can be apportioned as the total cost of the project.

The aggregate social value created by the Bangla COVID 19 Advice Project is £270618 using the SROI framework, equates the project's SROI ratio of 4.02:1 implies that for every £1 invested £4.02 of social value is created in terms of reduced healthcare costs, reduced benefit costs and taxes collected.

# THE PROJECT AIMS

## Project aims

To reach out to 10,000 households and 40,000 people in the community across both boroughs engaging with others raising awareness. Emphasis to be given to the most vulnerable including the elderly and those with underlying health conditions.

This was to be achieved by Bangla COVID Advice Project setting out to:-

1. Employ two Bengali speaking community health professionals for six months who will visit Bangladeshi homes from the Housing Associations and the communities within which they live.
2. Develop translated leaflets campaign materials which will be distributed via a range of community organisations and with groups including mosques
3. Production of a short video which will be mounted on the Bangla and Spitalfields Housing Associations websites. The videos will be shown at community organisation events including lunch clubs for the elderly Bangladeshis in Hackney and Tower Hamlets, in the entrance to mosques and in local community halls

## Implementing the Project Plan

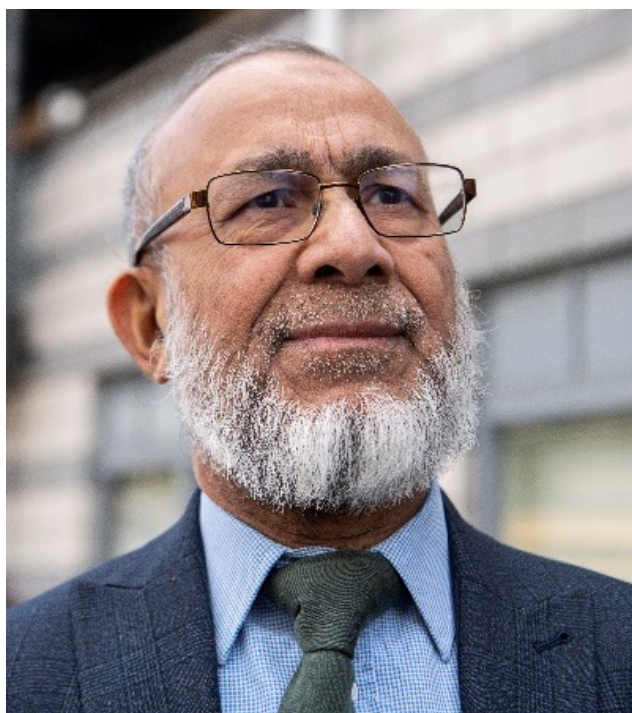
As an underserved migrant community with well documented challenges with regards to deprivation (Hackney and Tower Hamlets being ranked 10th and 11th most deprived local authority areas in the UK), and overcrowding in UK society. Bangla Housing Association is a registered social landlord operating for 30 years with established community links and an existing knowledge of its community's characteristics, with staff members who share the same language, culture, religion, knowledge of the history, narrative of migration; with an acute understanding of the issues of deprivation, family, community and intergenerational dynamics, and poor housing conditions Bangladeshis face. It was ideally placed to develop the Bangla COVID 19 Advice project as a community response that would begin to start addressing the communities support needs.

Bangla COVID 19 Advice project had to work out how to mobilise a small staff project team and volunteer group with other community partner organisations to support getting the core messages beyond its own tenants to provide core advice and support messages to the wider Bangladeshi community in Hackney and neighbouring London borough of Tower Hamlets recognised as the heartland of London's Bangladeshi community with over 18% of the UK Bangladeshi community.

The key deliverables were:-

- **Video Production,**
- **Advice and Support Calls,**
- **Production and Distribution of Leaflets and Posters in Bengali,**
- **Volunteer and Staff Training in delivering COVID Safety Advice**
- **Engaging and managing Community and Statutory Partners network to promote awareness around COVID Safety, Advice and Support**
- **Evaluating the impact**

# MANAGING THE PROJECT / CREATING SOCIAL VALUE



Bashir Uddin Chief Executive of Bangla Housing Association, the BCAP lead, 36 years personal experience of work in the regulated social housing sector, and 17 years with Bangla HA; enabled him to use his existing professional and community contacts, to hit the ground running with the recruitment and selection process, securing high calibre experienced Bengali/Sylehti speaking community development workers as candidates to appoint within 2 weeks of the project start.

Brought in as a Community Engagement Advisor was Abdal Ullah, a known Community Influencer, Broadcaster and Connector, who has an impressive network in around the Bangladeshi community in around Tower Hamlets, Hackney and UK wide, facilitating important introductions, and influencers to be involved with the project. Also Abu Masum member of the British Bangla Press Club who facilitate the projects messaging to reach Bengali printed press and cable TV channels which facilitated Bashir Uddin with a number media interviews.

Also supporting the project was Khalid Mair as a secondment from BME London Landlords, and Margaret Aboraa, Director of Resources at Spitalfields Housing Association, who were seen as a key partner stakeholder with 500 Bangladeshi residents who benefitted from the project.

# MANAGING THE PROJECT / CREATING SOCIAL VALUE



## Volunteer Community Champions

The project recruited 21 volunteer community champions from existing relationships with the team, all of whom received COVID 19 advice training with the rest of the staff team in October provided by Hackney Volunteer Centre.

Volunteers used their personal and family connections and networks to disseminate information BCAP produced around staying COVID safe, also making telephone calls, sharing content digitally.

## Project Workers

20

Key to the success of the project was securing two Bengali/Sylehti Community Health advice project workers who could communicate with the Bangladeshi community, who understood the cultural and inter generational dynamics of working directly with the Bangladeshi community living in the UK.

BCAP were able to successfully contract two very experienced community workers, Arisa Jannat, an experienced female Bengali translator and Ashak Elahi Chowdhury an experienced community development manager currently working for Faith Regeneration Foundation charity who were prepared to second, Ashak to BCAP. Another key the frontline project team member was Aminur Rahman who was also responsible for making calls to Bangladeshi clients of Bangla HA.

## Impact management to optimise impact

From early discussions it was agreed that BCAP would try to adopt an impact management approach. Rather than only an Impact measurement approach (measurement and evaluation) Impact management is an ongoing practice designed to inform decision making for improvement. In order to make continued informed decisions, open engagement with the most important stakeholders was necessary.

The project made a conscious choice to use the SROI framework assess the Social Value of the project. Adopting an impact management approach, means not settling for delivering the impact within the stated aims but look for opportunities to increase and improve that impact. At team meetings project workers looked at ways the project could engage better, by unpacking what was happening within the community as the project engaged with project users and what it meant in the now, what extra could be done to meet that need and identify provision moving forward.

# MANAGING THE PROJECT / CREATING SOCIAL VALUE

Meaning that the project would seek to maximise the value it could produce from the project and the resources available. With this focus to manage the project in a way to increase the positive changes and reduce negative changes it became a prerequisite to develop an open and transparent operational culture, where residents, staff, volunteers and community partners would be encouraged to give their view of the validity of the project aims and objective, with open dialogue and questions explore how best the project could meet the needs of the Bangladeshi community.

It was this outlook that enabled the project to adapt from just seeking to provide COVID Advice, to promoting the take up of the vaccine, seek to develop new working relationships with statutory bodies, seeking to identify the most vulnerable tenants and provide appropriate support, coordinate, develop and mobilise a volunteer and community partners network, engaging with partner organisations to look at extending the work of the project.

Other Examples of this was how the project increased the number of videos produced, translating the existing NHS Hands, Space and Face video with a Bengali narrator and providing Bengali subtitles. Linking up with Dorset Community Association who provided hot meals to a number of residents.

---

## Becoming part of the Statutory COVID response

The invitation to the two London borough Mayor, Bashir enabled BCAP to leverage further support from the two local authorities Mayors and their senior executives responsible for the COVID response in their respective boroughs plugging into the coordinated community champion forums and Public Health team COVID response meetings and initiatives.

---

## Advice Calls Turn Into Counselling and Listening Support

Given that the (BCAP) project started before the second lockdown and the development of the COVID 19 Vaccine, the project delivery plan adapted evolved to rather than home visits, the Bengali/Sylehti speaking project workers making over 600 telephone calls direct to social housing tenants initially to ensure the most vulnerable tenants were aware of how to keep COVID19 safe; with these telephone calls turning into counselling and listening support calls where, isolation, stress, anxiety around care, social and physical wellbeing became more of a focus with tenants and residents appreciating contact from outside the home taking interest in their condition.

Reflections from Arisa Jannat, the female COVID19 Advice project worker, who is an experienced community development worker and Bengali and Sylehti interpreter, when recommending how services should be shaped going forward asserted that she felt mental health assessment were needed for some Bangladeshi women she spoke to having made over 300 calls. Explaining that she felt some women she spoke to, were suffering in silence highlight some of the key issues of the lockdown being Isolation, Special Needs, Children, Exercise, Obesity, Comfort Eating.

Aminur Rahman a male COVID19 Advice project worker spoke of the challenge of isolation where grandparents complained of their grandchild not calling them. Other tensions within the family being the inter-generational dynamic that appeared were where elders became undecided about the vaccine where they were originally prepared to take the vaccine, their children's generation were in some cases advising against the vaccine.

# MANAGING THE PROJECT / CREATING SOCIAL VALUE

Arisa felt home visits need to be made now telephone contact has been made. She knows that people are turning to comfort eating, need exercise and support with reintegrating into the community and social activity. In team meetings both Arisa and Aminur gave detailed feedback which highlighted a range of support needs, but also a real sense of appreciation that Bangla HA had enough concern about them as members of the community.

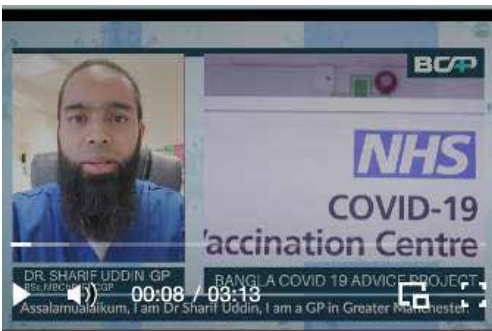
## Media

It was these same connections that led to a groundswell of media interest in the project from the National Press, London commercial radio as well as opportunities to speak about the project in many other community network settings.

22

## Bangla HA staff time

As the project unfolded Bashir Uddin, the BCAP lead, admitted that BCAP took up in excess of 60% of his time in managing the project over and above the work of Bangla HA. Such was the importance of the work. In addition to managing four members of staff for Bangla HA, Leena Khan and Fatima Begum who also worked extra hours on top of their core work activities to facilitate the project work, which included taking and making calls from tenants and partner organisations; as project lead Bashir was responsible for a larger BCAP project team. The operational management involved significantly increased the organisations management workload.



## Video production produces additionality with NHS Video (Bangla and English versions)

At an early video planning meeting the suggestion that the NHS Hands Face Space video should be translation into Bengali with subtitles would be an effective use of resources. This became the first that was released to all Bangla tenants and clients and community members on the mobile via WhatsApp and email. These videos were extended to tenants and members of BMELL to publish on their websites. Other community partners as with the leaflet and poster distribution. The YouTube video achieved over 2.6k viewings in two months.

Where a single video production was planned and produced with known Bangladeshi community influencers including the Mayors of London Borough's of Tower Hamlets and Hackney, BCAP an additional video webinar with a Dr. Sharif Uddin addressing information and community concerns about the Vaccine to promote take up within the Bangladeshi Community. Within the video production there were notable contributions from the Imam of East London Mosque, one of the largest mosques in the UK, as well as a range of celebrated individuals from the Bangladeshi community (See Video/Leaflet links)





# MANAGING THE PROJECT / CREATING SOCIAL VALUE

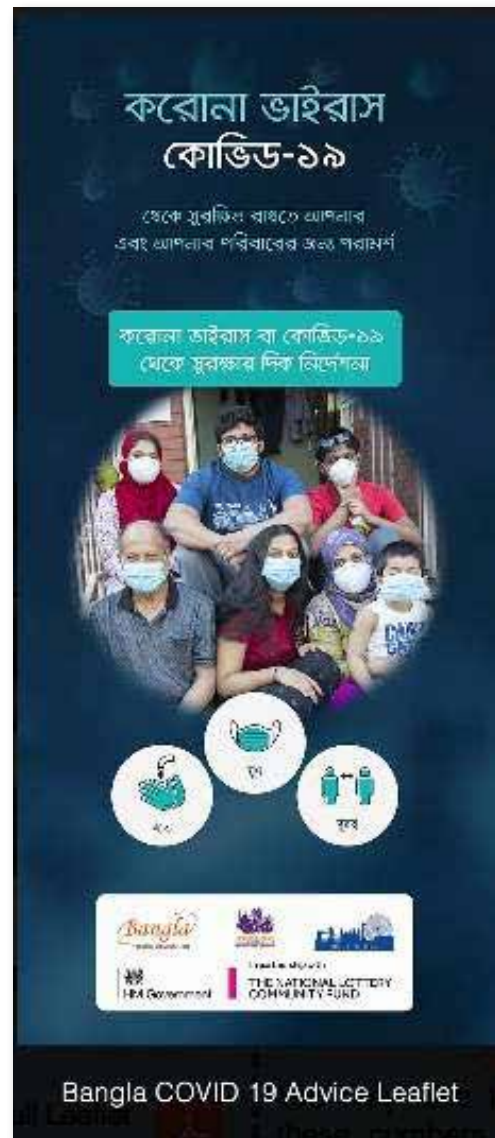
## Leaflets

The project published and delivered 10,000 translated leaflets and A3 size translated posters to mosques and shops and community centres – sent out to all Bangla and Spitalfields HA residents (over 650 leaflets). Ashak Elahi Chowdhury, BCAP Community Development manager sent out to 144 primary and secondary schools, in Hackney and Tower Hamlets, 33 medical centres, 27 mosques, via email and sending hard copies as requested.

## Partnership on a number of levels

BCAP developed a network of community partner agencies to promote COVID safe videos produced and distribute leaflets from the project including Hackney and Tower Hamlets Mosque network. Where there was no response calls were made to follow up by Ashak Elahi BCAP Community Development worker with the view of developing a named contact to ensure the resources delivered were being shared.

Involving Mayors of Tower Hamlets and Hackney led to Bashir Uddin on behalf BCAP becoming part of the borough's COVID response community champions forum and engaged with both boroughs Public Health teams. Other partnership engagement touchpoint were COVID Advice Training provided for the staff team and BCAP volunteers by Hackney Voluntary Centre. Other key community partner agencies were Dorset Community Association led by Nazrul Islam who facilitated food parcels to residents, and the Faith Regeneration Foundation, who seconded a project worker and leveraged community networks in Tower Hamlets such as the Tower Hamlet mosque network they were responsible for developing.



# MANAGING THE PROJECT / CREATING SOCIAL VALUE

---

## Partnership with Spitalfields HA and BME London Landlords Collaboration Group

Bashir also utilised Bangla HA's partnership with Spitalfields HA and their membership of BME London Landlords Collaboration with 12 other BME led housing associations regularly to give regular feed back to the collaborative group who adopted BCAP as its own initiative promoting it at every opportunity, which via meetings with the GLA, in their ask's from Deputy Mayor's of London for Housing, and Deputy Mayor for Social Integration, Social Mobility and Community Engagement, both Deputy Mayor's gave their expressed support for the work of BCAP. BMELL in turn was monitoring BCAP progress as a pilot community investment project, with key focus as a collaboration to deliver ambitious and innovative projects to address the needs of its BME tenants and wider BME communities throughout London. The conflation of COVID 19 and the Black Lives Matters movement had changed the operational environment for BME communities. As sustainable community enterprise models as a result of each housing organisations housing stock, the group were looking at exploring how it could support initiatives such as BCAP and leverage its collective power to make a claim for money charitable funds to support underserved communities.

---

## Questionnaires to derive impact of project shape further provision

Knowing that an evaluation report would be required for the funders, the project adopted an impact management approach by designing questionnaires that would enable feedback from key stakeholder groups to make an assessment of the needs from each stakeholder group, with a view to assess the impact of the work and what would be needed post lockdown to contribute to a COVID recovery plan for the Bangladeshi client group. (See questionnaires and summary responses).

BCAP via their engagement with different stakeholder groups were well placed to ask tenants, staff, volunteers and partner organisations what were the important issues to be addressed from the experience of being in three lockdowns and from the impact of COVID 19 on the Bangladeshi community. Staff, residents, volunteers and partner organisations made up the primary key stakeholder groups who were asked questions to elicit their feeling about the impact of COVID 19 and the impact of the lockdown on home, family life, wellbeing and their community. The project workers who made direct calls to residents, and Bangla HA clients, were also able to capture feedback as a result of calls made also questionnaires they were asked to complete at the end of the project



# BANGLA HOUSING ASSOCIATION – A TRUSTED COMMUNITY ORGANISATION



Bangla Housing Association has been serving the Bangladeshi Community in Hackney for 30 years delivering its culturally sensitive provision with the unique understanding of the community at its challenges, needs and difficulties faced by the Bangladeshi community in East London. The development of BCAP's targeted Covid-19 health awareness messages in Bengali, the language most Bangladeshi understand and can read has been well received by the community. Using and developing further a wide network of contacts in the community helped us to get the message of this project across effectively.

The use of different social media platforms videos sent out in YouTube, WhatsApp, Facebook, Twitter and by emails enabled our messages to reach not only our targeted areas but also other parts of the country. Comments made in feedback from users of the project included:-

# VIEWS FROM PROJECT STAFF AND VOLUNTEERS

The project teams response to the questionnaire about why they thought Bangla HA were well placed to deliver this project, reflected the buy in the project team had in contributing to the project.



26

## BCAP – HACKNEY VACCINE POP UP CLINIC: JUNE 2021

"BCAP has a clear understanding about the need for the mentioned community. They have used the right tools at the right time and utilised the medium to reach the maximum number of the members in the community."

"The overwhelmed message that was also much needed to get across the households in different medium which in return was very useful and life saving."

"The community recognises Bangla and therefore people found it easier to engaging"

"Good community standing over the last 4 decades. Widely known staff who are pillars of the community and have an excellent network of links."

"Bangla did a fabulous project, it made a lot of difference talking to the tenant offering them support network. Bangla has made great impact in the community as well as their own housing tenant. The project offered many services including link to hackney council. I must say Bangla did a excellent job support the Bangladeshi community"

# APPENDICES

## Sample Tenant Telephone Response – Appendix 1

COVID	Financial difficulty	Watched Videos
Yes very severe	Furlough not enough to cover costs, utility bills have not decreased, nor have most other expenses. So ongoing financial struggles.	Yes, very useful and insightful about the symptoms and the vaccines
No – but mother had heart attack in March 2020 from what they consider as the fear of Covid instilled by the media and government on the elderly	no employment – tesco – lost income	yes – very useful to the parents who are bengali speaking only
Yes had covid by nearly everyone. No support received but didn't think too much about it as NHS is stretched and we had family support. But can understand for those that do not have family or friends for emotional and mental support they would have appreciated if the healthcare services provided it or even local community groups.	Have not managed to work for a year as he is aged 64 and struggling with isolation and work environment plus jobs no longer there for his age group of people So he has struggled to make payments, and struggling with utility bills he said. Asked if any local support is available as the national government support has not been enough.	Yes, useful moderately in terms of raising more awareness. More beneficial was the one by the doctor on vaccines and the effects of vaccines
Yes, recovered. Son is a teacher who caught it in school and brought into the house. But was unwilling to go to hospital. Son became very weak and fatigued, so not going to work in school on sick leave. Rest it was less severe in symptoms	Worked in restaurant but was let go when lockdowns closed restaurants. Has struggled financially but claimed Universal Credit. He has finally managed to get work again for the last 6 weeks but is financially worse off	Yes, watched and appreciated the fact that it addressed conspiracy theories and scare mongering. Felt is good for the elders as well as middle age people.
When it did not go away on the second week and she became bedbound NHS services diagnosed it as covid and asked her to admit herself into the hospital but she was unwilling to do that as it was more scary to be left isolated and alone than dying at home surrounded by her family and children.	Lockdown meant loss of income. government grants have not been enough but with the help of children's income we have managed to keep the house running but this will affect the children's savings for their long term prospects	Yes, watched them – felt they were more like scientific adverts giving advice. Useful when it's the first video being watched but with so much information around if people have watched other clips then the BCAP one is not so different
No – we have been cautious of germs even before the Announcement of covid.	Claiming UC since November Lockdown caused the restaurant he worked for to close.	Yes, didn't watch as there is too much information – so overload.
Twice – both recovered but had severe symptoms. But didn't go hospital due to fear of death alone. She is pregnant so cannot take medicine	Did not claim UC – doesn't want the hassle of job centres, paperwork and online stuff. They tightened their spending and got by with supporting each other	yes, did not fully watch, as I felt it was a repeat of whats on the news

# APPENDICES

## Key Stakeholder List – Appendix 2

Key Stakeholders	Reason for Inclusion
Bangla HA Tenants	Primary beneficiaries of the service. Bangladeshi tenants received advice and support calls in Sylheti and Bengali, and additional support where project identified it could signpost or provide additional service
Spitalfield Tenants	Primary beneficiaries of the service. Bangladeshi tenants received advice and literature in Sylheti and Bengali
BCAP staff team	Key Stakeholders Involved in delivering the project. Likely to be experiencing significant outcomes if intervention is successful.
Hackney Mosque Network	Primary beneficiaries of the service/Community Group Partner. Bangladeshi users received advice and literature in Sylheti and Bengali, announcements via Friday khutbahs on streamed social media
Tower Hamlet Mosque Network	Primary beneficiaries of the service/Community Group Partner. Bangladeshi users received advice and literature in Sylheti and Bengali, announcements via Friday khutbahs on streamed social media
Mayors of Hackney, Tower Hamlets	Key Stakeholders/Statutory Partner involved in delivering the project. Plugged project into local authorities COVID recovery plans
TNL Community Fund	Provided funding for project delivery
Hackney Health Public Health Team	Key Stakeholders/Statutory Partner involved in delivering the project. Providing bi-weekly meetings sharing info updating community partners local data and trends, facilitating accessibility to NHS
Tower Hamlet Public Health Team	Key Stakeholders/Statutory Partner involved in delivering the project. Providing weekly meetings sharing info updating community partners local data and trends, facilitating accessibility to NHS
Bangla HA	Project lead accountability for strategic management of project delivery
BMELL Partners HA's	Collaboration partners supporting and advocating project at Senior strategic level, seconded executive support
Community Partners Network	228 organisations contact by email, post and telephone to share resources produce with Bangladeshi users
Bangladeshi Community Partner Network	Bangladeshi organisations and groups enlisted to promote work of BCAP, by Project Team and Volunteers
Faith Regeneration Foundation	Key Stakeholders seconded experienced project worker to BCAP and leverage Mosque networks they already facilitated in Tower Hamlets
Hackney Voluntary Centre	Provided COVID19 training to Project and Volunteer Team
NHS Local Agency Network	87 NHS clinics, GP's surgeries and other NHS local agencies contact by email, post and telephone to share resources produce with Bangladeshi users
Dorset Community Association	Partner Community Project delivering South Asian cuisine food parcels

---

## Project Budget (Community Fund) – Appendix 3

Cost	Agreed budget	Actual spend	Variance
Recruitment, Salaries & Travel	£34,830.00	£34,895.63	£65.63
Video & Marketing	£4,500.00	£4,385.90	£114.10
Stationary, design & print	£2,500.00	£2,418.52	£81.48
Phone & laptops	£2,400.00	£2,284.93	£115.07
Management	£5,000.00	£5,065.86	£65.86
<b>Total cost</b>	<b>£49,230.00</b>	<b>£49,050.84</b>	<b>£179.16</b>

# BANGLA COVID19 ADVICE PROJECT

## BANGLA HA RESIDENTS SURVEY

### RESPONSE MARCH 2021

**61**  
Views

**47**  
Uniques

**35**  
Responses

**78.69**  
Avg. score

---

#### 1. Are You ?

- Male - 15
- Female - 20
- None of the above - 0

---

#### 2. What is your ethnic group?

- Asian / Asian British - 1
- Indian - 0
- Pakistani - 0
- Bangladeshi - 34
- Black / African / Caribbean / Black British - 0
- White - English / Welsh / Scottish / Northern Irish / British - 0
- Other ethnic group - 0

---

#### 3. Did you receive a telephone call from Bangla Housing Association about COVID 19 Advice?

- YES - 35
- NO - 0

---

#### 4. How many calls did you receive?

- Only 1 - 9
- More than >1 - 18
- More than >2 - 6
- More than >3 - 2
- More than >4 - 0
- More than >5 - 0

---

#### 5. What language did the worker from Bangla Housing Association/COVID 19 Advice Project speak to you on the phone?

- Bengali - 4
- Sylheti - 23
- English - 7
- A mixture of all three of the above - 1

---

## 6. What language is best to communicate with you in?

- Bengali – 4
- Sylheti – 23
- English – 8

---

## 7. What is the best way to communicate to with you? Please select answers that apply

- By email – 12
- By Telephone Call – 33
- Home Visits – 2
- By letter – 2

---

## 8. How useful/helpful was the telephone call from Bangla Housing Association on COVID advice?

- Very useful – 21
- Useful – 14
- Didn't need it – 0
- Not useful at all – 0

---

## 9. Did anything negative or unexpected happen as a result of the COVID Pandemic to you or your family? Please select answers that apply?

- A family member died because of COVID 19 – 9
- I felt I was at a higher risk of contracting Covid-19 – 5
- I felt isolated – 8
- I felt in conflict with others – 1
- It negatively affected my family life – 10
- It negatively affected my mental health – 8
- A member of my family went to hospital because of COVID 19 – 13
- It negatively affected my physical wellbeing – 6
- A close friend died because of COVID 19 – 5

---

## 10. What changed for you as a result of the telephone call from Bangla Housing Association/COVID 19 Advice Project? Please select any answers that apply

- I/We learned more about COVID 19 and what to do to keep safe – 6
- I/We learned more about what to do if someone had symptoms of COVID 19 – 6
- I/We knew that we could now contact Bangla Housing Association/COVID 19 Advice Project if we need help – 13
- I/We felt that Bangla Housing Association/COVID 19 Advice Project cared about us and that made feel more supported – 22
- I/We felt less alone and had someone to call if we needed help – 10
- I/We felt less alone – 4

---

## 11. Did you see COVID 19 Advice videos that Bangla Housing Association produced?

- Yes – 34
- No – 1

---

## 12. Did you see the leaflet that Bangla Housing Association produced about how to stay safe from COVID 19?

- Yes – 35
- No – 0



# BANGLA COVID19 ADVICE PROJECT

## BANGLA HA RESIDENTS SURVEY

### RESPONSE MARCH 2021

---

#### **13. On a scale of 1 – 5 how important has the work Bangla Housing Association/ COVID 19 Advice Project been? 5 being very important and 1 not being important at all**

- 5 Very Important – that a community organisation targets COVID 19 Advice to Bangladeshi in their own language – 20
- 4 Important that there is a community project to support Bangladeshi community – 10
- 3 Important to reach out to all communities – 4
- 2 Good to know that this is happening – 1
- 1 Not important at all – 0

---

#### **14. Which of the following areas would you like Bangla Housing Association to provide support in? Please select any answers that apply**

- Support with Mental Health, Stress or Anxiety – 9
- Support relating to Challenges of a reduced income – 7
- Support with issues relating to family care and family relationships – 9
- Support in accessing health care – 2
- Supporting in accessing social care services – 2
- Support with bereavement/loss of family and close friends – 14
- Support with Physical Health, fitness and exercise – 4
- Support in accessing short-term basic needs (e.g. financial, food, clothing, shelter) – 9
- Support with employment opportunities – 7

---

#### **15. How would you value the work Bangla Housing Association/COVID 19 Advice Project has done?**

- The same as having a Katchi Biryani meal with your extended family and friends for 20 – 25
- The same as having a Katchi Biryani meal with your family for 6 – 8
- The same as having a Katchi Biryani meal for 3 – 1
- The same as having a Katchi Biryani meal for 1 – 1



# BANGLA COVID19 ADVICE PROJECT

## VOLUNTEER CHAMPIONS SURVEY

### RESPONSES

56

Views

56

Uniques

14

Responses

62.5

Avg. score

---

#### 1. Are You ?

- Male - 12
- Female - 2
- None of the above - 0

---

#### 2. What impact did the 1st lockdown (23rd March 2020 - 15th June 2020) have on you as a volunteer/community champion? Please select answers that apply

- Impacted my mental health - 5
- Reduced the income coming into my household - 8
- Increased concern caring for family and family relationships - 5
- Created difficulty in accessing health care - 8
- Created difficulty in accessing social care services - 1
- I suffered bereavement or loss of family or close friends - 4
- Affected my physical health - 7
- Created more difficulty in accessing short-term basic needs (e.g. financial, food, clothing, shelter) - 4

---

#### 2a. If there were other impacts can you describe what those impacts were?

- Because off my jobless I was in financial crisis and I couldn't take appointment directly with Doctor,,so my doctor did not understand by video call what is my problem actually .
- Lack of support with family around

# BANGLA COVID19 ADVICE PROJECT

## VOLUNTEER CHAMPIONS SURVEY

### RESPONSES

---

#### **2b. What impact did the 1st lockdown have on your family and the wider community? Please select all that apply**

- Mental Health issues – 8
- Reduced income – 11
- Created issues relating to family care and family relationships – 6
- Increased difficulty in accessing health care – 6
- Increased difficulty in accessing social care services – 4
- Suffering from bereavement and loss of family or close friends – 6
- Physical health lack of exercise – 8
- Difficulty in accessing short-term basic needs (e.g. financial, food, clothing, shelter) – 6

---

#### **3. Were there any changes in the impact the 2nd lockdown (5th Nov – 2nd Dec) had on you as a volunteer/community champion? Please select all that apply**

- Increased issues with my mental health – 5
- Reduced the income coming into my household – 10
- Increase concerns regarding caring for Family and family relationships – 7
- Created difficulty in accessing health care – 6
- I suffered bereavement of loss of family or close friends – 5
- Affected my physical health – 5
- Created difficulty in accessing short-term basic needs (e.g. financial, food, clothing, shelter) – 5

---

#### **3a. If there were other impacts can you describe what those impacts were?**

- I used to like outdoor play but for pandemic my partners didn't come to play. So I was also mentally depressed .

---

#### **3b. What impact did the 2nd lockdown have on your family and the wider community? Please select all that apply**

- Mental Health issues – 7
- Reduced income – 9
- Created issues relating to family care and family relationships – 7
- Increased difficulty in accessing health care – 7
- Increased difficulty in accessing social care services – 2
- Suffering from bereavement and loss of family and close friends – 6
- Physical health lack of exercise – 7
- Difficulty in accessing short-term basic needs (e.g. financial, food, clothing, shelter) – 5

---

#### **4. Are there any changes in the impact the 3rd lockdown (11th January 2021 – to date) is having on you as a volunteer/community champion?**

- Increased issues with my mental health – 4
- Reduced the income coming into my household – 8
- Increase concerns regarding caring for Family and family relationships – 7
- Created difficulty in accessing health care – 5
- I suffered bereavement of loss of family or close friends – 2
- Affected my physical health – 7
- Created difficulty in accessing short-term basic needs (e.g. financial, food, clothing, shelter) – 3

---

#### **4a. If there are other impacts can you describe what these impacts are?**

- I am still a Student ,so I missed my class and I am very concerned about my degree.

# BANGLA COVID19 ADVICE PROJECT

## VOLUNTEER CHAMPIONS SURVEY

### RESPONSES

---

#### 4b. What impact did the 3rd lockdown have on your family and the wider community? Please select all that apply

- Mental Health Issues – 5
- Reduced income – 11
- Created issues relating to family care and family relationships – 8
- Increased difficulty in accessing health care – 6
- Increased difficulty in accessing social care services – 3
- Suffering from bereavement of loss of family and close friends – 5
- Physical Health lack of exercise – 7
- Created difficulty in accessing short-term basic needs (e.g. financial, food, clothing, shelter) – 4

---

#### 5. What was your role in supporting the BCAP?

- Volunteer (community Champion)
- Community champion
- I always trying to connect with my communities.. as a leading member from my committee I was trying to touch help them from every steps.like giving proper advice,,supporting foods and other essential things,making phone call whenever they need,,Sharing with my all experiences with BCAP and tried to sort out arising any kind of problems.

---

#### 5a. Did your role with BCAP involve any of the following? Please select all that apply

- Leading a group/member of a committee – 4
- Getting other people involved – 7
- Making telephone calls and befriending people – 6
- Helping people access food and essential items – 7
- Supporting people to access services – 11
- Ongoing mentoring or support for people – 9
- Giving advice/information/counselling – 11
- Administrative or technical support – 4
- Sharing the resources BCAP developed for the community – 13
- Any other help – 1
- None of the above – 0

---

#### 6. What did you think BCAP/Bangla HA had to offer that made it well placed to engage the wider Bangladeshi Community about COVID 19 ? Please select all answers that apply

- It is a trusted organisation in the community – 12
- It has knowledge of the community – 13
- Ability to engage with individuals and the wider community – 14
- Ability to speak the language – 14
- Understands the culture of individuals in the community – 10
- The organisation has a credible track record – 9
- Knows services to signpost to provide necessary support – 11

---

#### 7. Do you receive any specific training regarding COVID 19 Advice

- YES – 7
- NO – 7

---

#### 7a. How useful/helpful was receiving specific training on giving COVID advice to your role with BCAP?

- Very useful – 9
- Useful – 1
- Didn't need it – 2
- Not useful at all – 0

---

#### 8. Did you make calls to people in the community/tenants and residents to give them about COVID 19 Advice?

- YES – 12
- NO – 2

# BANGLA COVID19 ADVICE PROJECT

## VOLUNTEER CHAMPIONS SURVEY

### RESPONSES

---

#### 8a. If Yes, Were you providing COVID advice speaking in Bengali, English or Sylheti to the Bangladeshi community?

- Bengali - 1
- Sylheti - 2
- English - 1
- A mixture of Bengali, Sylheti and English - 10

---

#### 8c. If Yes How many calls to people in the community/tenants/residents did you make?

- Greater than >10 - 2
- Greater than >25 - 5
- Greater than >50 - 0
- Greater than >75 - 1
- Greater than >100 - 2
- Greater than >200 - 3
- Greater than >300 - 1

---

#### 9. Did you share the all the COVID 19 Advice videos that BCAP produced with service users and the wider community? YES or NO

- YES - 14
- NO - 0

---

#### 9a. Did you share the all the COVID 19 Advice leaflets that BCAP produced with service users and wider community?

- YES - 14
- NO - 0

---

#### 9b. How did you share the resources BCAP produced with service users and wider community? Please select all

- Digitally by sending video and leaflet links within emails to my contact lists - 12
- Digitally by sending video and leaflet links to my social media contacts - 10
- Handing leaflets out to people I knew in the community - 6
- Finding Bengali community networks to publicise resources - 9
- By post sending physical leaflets to address on your database - 3
- By making calls and speaking directly to people in my personal network - 8

---

#### 9c. How many people/children/families do you think you reached with the re-sources (Videos/Leaflets) BCAP provided as part of this project?

- Less than <100 - 0
- Greater than >100 - 4
- Greater than >500 - 3
- Greater than >1000 - 4
- Greater than >5000 - 3
- Greater than >10000 - 0

---

#### 10. On a scale of 1 - 5 how important has the work you have done with Bangla COVID 19 Advice Project been? 5 being very important and 1 not being important at all

- 5 Very Important - that a community organisation targets COVID 19 Advice to Bangladeshi in their own language - 13
- 4 Important that there is a community project to support Bangladeshi community - 1
- 3 Important to reach out to all communities - 0
- 2 Good to know that this is happening - 0
- 1 Not important at all - 0

# BANGLA COVID19 ADVICE PROJECT

## VOLUNTEER CHAMPIONS SURVEY

### RESPONSES

---

#### 10a. What was the most important reason why you worked on BCAP for Bangla HA? Please select all that apply

- I wanted to do something useful during the pandemic – 13
- The cause was really important to me – 8
- Bangla Housing Association was really important to me – 5
- Someone asked me to give help – 4
- It's part of my religious belief / philosophy of life to help people – 6
- I wanted to take part in my community's response to the pandemic – 8

---

#### 11. What difference, if any, do you think the work that BCAP has done in Hackney and Tower Hamlets for the Bangladeshi Community? Please give multiple answers if applicable

- People were better able to respond to changing circumstances – 8
- People were better supported to access the health care they needed – 12
- People were better supported through bereavement or loss – 5
- People's short-term basic needs were met better (e.g. financial, food, clothing, shelter) – 9
- People had more social contact – 10
- People felt less lonely – 9
- Children and young people's education and development was better – 6
- People's mental health and wellbeing was better – 7
- People of all ages were better protected from harm, violence or abuse – 4

---

#### 12. On a scale of 1 – 5 how difficult would it have been to develop the resources BCAP have provided without the BCAP? 5 being very difficult and 1 not difficult at all

- 5 Very Difficult – Impossible – 0
- 4 Difficult, not achievable – 5
- 3 Difficult, but not unachievable – 5
- 2 Difficult, but achievable – 3
- 1 Not difficult at all – 1

---

#### 13. Did anything negative or unexpected happen?

- It negatively affected my physical wellbeing – 2
- I felt pressured by BCAP to do more than I would of liked – 2
- Too much of my time has been taken up – 1
- I felt unappreciated – 0
- I felt I was at a higher risk of contracting Covid-19 – 0
- I felt isolated – 0
- I felt I wasn't part of the group (i.e. excluded) – 0
- I felt in conflict with others – 0
- It negatively affected my family life – 0
- It negatively affected my work or studies – 0
- It negatively affected my mental health – 0
- None of these – 3
- None of the above – 10

---

#### 14. Are there any other areas that BCAP and Bangla HA could work to provide help and support to Bangladeshi community? Please select all answers that apply

- Food distribution – 12
- Mental Health Support – 12
- Finance and Debt Advice – 7
- Employment and Training Support – 5
- Managing Health and Wellbeing – 9
- Isolation – 6
- Family Relationship – 4
- Relationship Breakdown – 4

# BANGLA COVID19 ADVICE PROJECT

## VOLUNTEER CHAMPIONS SURVEY

### RESPONSES

---

#### 15. In your opinion what do you think BCAP does well?

- Serving the community
- It was a very difficult time for everyone, BCAP has done a great job for the Bengali community.
- BCAP done very well for our Community.They are very experienced and skilful to involved communities peoples .
- Connecting with the community and providing one to one tailored support
- Community engagement and creating awareness
- Community related important such as covid issues. Helping people needing housing.
- Creating awareness in the Bengali community as well as the wider communities

---

#### 16. Please list further areas of work BCAP should develop as a result of this project

- Nothing
- I think this project should continue with the information, guidance and support to the community for at least next 6 months.
- In Newham area Large number of Bangladeshi peoples are living.I guess this Borough should to be also their listed.
- Mental health support for the community to help with the recovery of Covid crisis on community
- Food distributions, Finance and debt advice, Health and wellbeing
- Community based issues.
- Go back to these people and check how they are getting on.

---

#### 17. How would you value the impact to each user who was engaged as a result of the work you done with BCAP, in terms of the answers given below?

- The same as having a Katchi Biryani meal with your extended family and friends for 20 – 9
- The same as having a Katchi Biryani meal with your family for 6 – 5
- The same as having a Katchi Biryani meal for 3 – 0
- The same as having a Katchi Biryani meal for 1 – 0

---

#### 18. What is your ethnic group?

- Asian / Asian British – 1
- Indian – 0
- Pakistani – 0
- Bangladeshi – 13
- Black / African / Caribbean / Black British – 0
- White – English / Welsh / Scottish / Northern Irish / British – 0
- Other ethnic group – 0



---

## **Bangla is a Charitable Housing Association**

### **Registered Office**

100 Morning Lane  
London  
E9 6LH

T 020 8985 1124  
F 020 8533 5973  
E [info@banglaha.org.uk](mailto:info@banglaha.org.uk)  
[www.banglaha.org.uk](http://www.banglaha.org.uk)

Registered Society under the  
Co-operative and Community  
Benefit Societies Act 2014.  
Reg. No. 27419R.

Homes England  
Reg. No. L4534

VAT Number  
863897462





