



Equal support

**Do identity-based voluntary and community groups
need identity-based organisational development?**

A report by Equal to the Occasion for the Big Lottery Fund

May 2010

Foreword

Anyone involved in the voluntary and community sectors will know that groups and people need support and information to achieve their goals – and that the type and level of that support varies greatly.

While the sector and others have responded to many of these needs, there is also a widespread perception that groups that share specific characteristics may need very specific types of support. Groups that work with what are often referred to as ‘equalities groups’ are perhaps the prime example of this.

The last couple of decades have seen the growth of increasingly formalised infrastructure organisations, some of which aim to meet the needs of groups organised by identity. At the same time, ‘generic’ infrastructure agencies aim to provide local support to all VCS groups in their area. All these infrastructure services need to be paid for, and funders like the Big Lottery Fund can find themselves in something of a dilemma. First, in the light of the limited funding available, how far can we meet groups’ individual preferences about who might be best-placed to offer them support? And when we consider the needs of ‘equalities groups’, how do we reconcile varying claims about the suitability of what is meant to be universal provision by ‘generic’ groups?

Those are the sorts of questions that we wanted this research report to help us answer. Although we have heard that many people had previously thought about these questions, the very real and understandable sensitivities involved had discouraged them from commissioning reports like this one. We have to emphasise that this is not a study about the rights or wrongs of ‘single-group’ provision; instead, it focuses on the very specific area of organisational development – that is, the types of skills and approaches that all developing VCS groups are likely to need if they are to succeed in the long run. We had heard any number of stories about BME groups being referred by ‘generic’ providers to ‘their own’ infrastructure agencies – that is, to agencies whose time might be better spent on advocacy, campaigning and networking than on providing tailored support in finance or HR issues. And again, funders like BIG often have to make difficult decisions between apparently conflicting claims.

We have found in the course of this study that people with varying interests and perspectives have been willing to share their views and experiences openly and generously, and that they appreciate the importance of maintaining dialogue rather than retreating to entrenched positions, as some feared that they would. We hope that this report and your reflections on it will promote wider discussion in this area. We are grateful to the many groups who gave us their time and views, and to the research team and external reference group who have taken great pains to help open up this discussion.

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Equal to the Occasion conducted this study on behalf of the Big Lottery Fund. Led by Equal to the Occasion Director Helen Wollaston, the research team included independent researcher Lorraine Roberts, and Asif Afridi, Joy Warmington and Amy Wilkins from brap, an equality and human rights organisation based in Birmingham. We all have a personal interest in the topic because it touches on our other work to promote equalities and human rights within the voluntary sector.

We would like to thank the Big Lottery Fund for having the foresight and courage to commission this research. The Big Lottery Fund provided local knowledge and contacts as well as hosting many of the focus groups, but did not seek to influence the findings. The views expressed in this report represent our own interpretation of the evidence.

External reference group

We set up a reference group at the start of the study to give us an external perspective. This group involved people from across the UK with relevant expertise who are not directly involved in a BME, LGBT or generic infrastructure organisation and therefore would not be part of our interview sample or have a direct pecuniary interest. We are grateful for the time individuals from this group have taken to comment on findings and for their constructive suggestions. A list of those involved is given at Appendix 2.

The voluntary and community sector

Finally, we would like to thank all the voluntary and community organisations who engaged with the study. We understand the pressures you are all facing and appreciate how hard it can be to find the time to participate in research. The fact that so many of you have been prepared to share your views and experiences is testament to the level of interest in these subjects within the voluntary sector at this time. A list of organisations who participated in the research is given at Appendix 1.

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Executive summary

Introduction

Demand for capacity building support in the voluntary sector far outstrips the resources available. Some support providers offer 'specialist' support for voluntary and community organisations from particular backgrounds, (e.g. black and minority ethnic organisations – BME, or lesbian, gay, bisexual and transgender organisations – LGBT). Increased pressure on voluntary sector funding has led to a growing debate about how to allocate limited resources for capacity building to ensure value for money at the same time as ensuring effective support for groups working across all communities.

With a focus on organisational development support, as opposed to other infrastructure functions such as representation and voice, the purpose of this research is to explore whether voluntary and community groups need support to be delivered by organisations which share their identity. In order to answer this question, we looked at two types of identity-based groups: those working on ethnicity and those working on sexual orientation. Our aim was to provide new evidence and to make recommendations to the Big Lottery Fund and other funders to inform future policy and programmes.

We reviewed over 60 reports on voluntary sector capacity building and equalities. This report contains the results of subsequent qualitative research with over 130 organisations across the UK, including LGBT and BME frontline organisations, LGBT and BME infrastructure organisations and generalist infrastructure organisations at local, regional and national level. A summary of the findings of that report appears at Appendix 3. Research involved telephone interviews, an online survey and focus groups, conducted between January and March 2010.

Bigger questions

Our research was conducted against the backdrop of wider debates about equality and identity, the role of funders and nature of organisational development support.

Equality and identity

Some groups we spoke to echoed concerns raised by a number of recent reports about an approach to equalities based on single identity – that is, treating each equality strand separately. Concerns raised in this research include:

- Generalising about the BME voluntary sector masks significant differences between ethnic minority communities.

- Funding based on single identity sets up competition between groups about who is in greatest need and raises expectations of entitlement to like-for-like resources.
- Single-identity perspectives can lead funders to adopt a 'tick-box' approach, funding one BME and one LGBT group rather than looking at applications on a case-by-case basis.
- Separate provision for single-identity groups absolves mainstream organisations of their responsibilities to serve the whole community.
- Individuals with a dual identity – such as lesbians and gay men from minority ethnic communities – can feel excluded.

At the same time, there was support for a number of key principles:

- The right of disadvantaged groups to self-determination –to deliver support within their own community rather than relying on others to support them
- The importance of a strong voice to advocate for marginalised communities and to improve mainstream understanding and implementation of equalities
- Co-operation between equality strands, which can help to break down barriers and build understanding between groups (although there are fears that some strands, notably sexual orientation, will be less of a priority)
- Isolation and the absence of a critical mass make working on equality in rural areas more difficult.

Attitudes towards equality vary across different parts of the UK. In Northern Ireland, neither race nor sexual orientation has the same legal protection or political support as, for instance, in England. This poses different challenges for the BME and LGBT voluntary sector.

Role of funders

Participants raised issues about the role of funders that go beyond capacity-building:

- Should funders commission services from organisations with an established track record rather than issuing open invitations which allow any organisation to apply?
- Is it fair to fund mainstream organisations for new work with disadvantaged communities, but not fund identity-based organisations to expand their services to work with other groups?
- If funders want to encourage partnership working, they must allow sufficient time and resources for partnerships to develop and be managed.
- Funders should work together to support an agreed local strategy rather than making unconnected decisions about the projects they fund.
- Despite familiar complaints about the need to provide an exit strategy as part of an application, participants felt that any new organisations set up should be sustainable.

The nature of organisational development support

There are different definitions of organisational development support and different views on the best ways of delivering effective support to smaller groups.

- Generic infrastructure providers tend to offer standard training courses, factsheets and information services. The more resource intensive one-to-one tailored support, which is what most frontline groups would prefer, appears to be in decline.
- Some infrastructure organisations provide a neutral service in response to requests; others will challenge groups if they feel their plans are unrealistic or duplicate existing provision.
- Voluntary and community groups do not follow a standard model of development. Some do not aspire to bid for large amounts of funding or to employ staff. This does not mean that the services they provide are less important or that they do not have support needs.
- There is a tension between value for money and choice. Investing in fewer providers may improve quality because they will have more resources, but this reduces choice. Competition between providers may either drive up quality or reduce it because resources are spread more thinly.
- Some frontline organisations argue for more resources to go to them directly so that they can build capacity through their own staff, volunteers and management committees rather than relying on external support.
- Theoretical models separate organisational development support from other infrastructure functions such as representation or voice, but in practice many second -tier organisations provide a range of support to frontline groups. Several BME and LGBT infrastructure organisations in our research support individuals too, so the boundaries between frontline and infrastructure are also blurred. It may be clearer (and fairer) to categorise the activity rather than the organisations.

Findings

Support needs of frontline LGBT and BME groups

Overall, frontline BME and LGBT groups were clear that effective support required an understanding of the context they operate in. This means acknowledging racism and homophobia and being seen to tackle these issues within their own organisations and in the wider community.

- Needs assessment undertaken by infrastructure organisations tends to be ad hoc rather than formalised or systematic, but generic providers are more confident speaking about the needs of BME groups than about the LGBT voluntary sector.
- Funding is the top priority for frontline groups, many of whom are too busy dealing with clients to worry about their own support needs.
- There is general agreement that LGBT and BME frontline groups have similar needs to other small groups. Volunteer-led groups find it easier to take up support if it is available out of normal office hours.

- Groups working with marginalised communities need support with lobbying mainstream service providers, tackling equality within their communities, burn-out, finding appropriate staff and volunteers when fishing in a smaller pool, identifying sympathetic funders and understanding how the mainstream voluntary sector works.
- Particular effort is needed to establish trust and confidence with groups who face prejudice and discrimination.
- LGBT-specific needs in addition to those listed above include access to safe meeting space; advice on publicity and marketing in a hostile environment and help in producing evidence of need, especially given the lack of official data on the LGBT population
- BME-specific needs include integrating with the wider community, dealing with the politics of race relations and withstanding funder scrutiny. Newer communities often have difficulty communicating in English and in navigating the UK system. Refugee and asylum-seeker groups faced the additional challenge of uncertainty about the future.
- In rural communities, the lack of critical mass means there are few, if any, BME or LGBT organisations. Working with mainstream organisations to tackle prejudice and support individuals from minority groups was therefore identified as a higher priority than organisational development.

Current provision of organisational development support

Frontline BME and LGBT groups seek and receive support from a wide variety of organisations but we found a general consensus that current provision is fragmented, of variable quality and under-resourced, leaving many groups feeling that they have little choice of provider and that their needs are not being met.

- Practical barriers echo those found in our literature review, relating to cost, opening hours and location. A particular gap emerged for LGBT organisations which tend to cover a wide geographic area and have in some instances been turned away by generic providers who are funded to support groups within one local authority area only.
- Outreach and pro-active communications which are explicitly relevant to BME and LGBT groups make a big difference to raising awareness of the support available and establish credibility.
- Technical expertise, understanding and empathy are more important to frontline BME and LGBT groups than the identity of the provider organisation. However, many choose to go to identity-based organisations for support because they felt more confident of getting that understanding and empathy.
- Few providers monitor the proportion of ethnic minority or LGBT organisations using their services – making it difficult to prove who is or is not using different support agencies.
- There are strengths in generic providers and in identity-based providers, but both face significant challenges in providing high-quality support to frontline groups, not least because of inadequate funding.

- Good practice can be found in both generic infrastructure organisations and in identity-based provision.
- Most people recognise the value of working together to facilitate shared learning and improve access to support for all parts of the voluntary and community sector. There are promising examples of building effective partnerships, despite the challenges involved.

Conclusions

- Voluntary and community organisations expect the funding environment to be increasingly challenging in the years ahead.
- Support and funding for the voluntary sector and for work on ethnicity and sexual orientation in particular are influenced by the demographic, political and policy context in different parts of the UK. Any conclusions and recommendations about organisational development support have to take account of the national, regional and local context.
- BME and LGBT groups need similar support to any small, under-resourced and over-stretched voluntary and community group, but working with discrimination and disadvantage presents additional challenges, many of which are likely to apply to other identity-based groups. Generic infrastructure organisations need to demonstrate that they understand these challenges if they want to provide an effective and inclusive service.
- Across the board, people called on funders to look for evidence of reach, track record and outcomes delivered by generic and identity based providers alike.
- Existing provision does not meet the demand for tailored, one-to-one support from BME and LGBT groups (or from frontline groups more generally) because of the cost implications.
- There are even fewer resources to support groups working in rural communities, who face additional pressures of isolation and more overt prejudice.
- Most organisations recognise that it would be unrealistic, unsustainable and unnecessary for every identity-based group to have its own organisational development support. It is more important to invest in skills, technical expertise and specialist knowledge than it is in 'identity' per se.
- Partnership arrangements are relatively new and yet to be formally evaluated, but there is promising evidence of LGBT and BME infrastructure organisations using the trust and contacts they have with frontline groups to broker better access to mainstream support.
- In parts of the UK where there are very few BME or LGBT groups and a hostile political environment, their priority is to lobby for better recognition and resources for their sector rather than for organisational development support.

Overall, this study concludes that an LGBT frontline organisation does not need an LGBT infrastructure organisation to provide support to it on governance or accounts, and neither would other identity-based groups.

Identity-based infrastructure does however have a critical role to play in ensuring that mainstream support is accessible and inclusive – by acting as trusted intermediaries and by educating mainstream providers. We hope this report will help to inform future investment in voluntary sector infrastructure to improve coherence, value for money and equitable support across all communities.

We propose an approach that would offer more coherent support for the whole voluntary sector. As part of this, identity-specific infrastructure would work with mainstream providers to improve access to and inclusive support for BME, LGBT and other frontline groups. This vision informs the recommendations we set out below.

Recommendations

1. Improve the coherence of voluntary sector infrastructure at local, regional and national level.

- Funders and providers should define more clearly what they mean by ‘organisational development support’. A menu of activities setting out objectives, competencies, quality thresholds and delivery expectations should inform funding decisions.

2. Allocate funding on evidence of need rather than representation.

- Rather than assuming that each equality strand needs its own organisational development support, funders should identify gaps in provision based on evidence of local need.
- Funding for outreach and one-to-one advice should be prioritised as this improves support to groups working with marginalised communities.
- Organisational development support must take account of additional challenges facing voluntary and community organisations working with minority communities in rural areas.

3. Drive up the quality of organisational development support.

- Any definition of quality should include awareness and understanding of discrimination and disadvantage.
- Funders should invite those with proven track record to scale up and extend their provision rather than investing in new organisations. Benchmarks and quality standards for voluntary sector infrastructure could be extended.
- The presence of a strong voice to advocate for the interests of marginalised groups will drive up the quality of provision by mainstream agencies.

4. Improve the inclusiveness of generic provision.

- Generic infrastructure organisations should recognise that frontline groups working with communities facing discrimination and disadvantage often need more intensive support.
- Funders should validate claims about meeting the needs of BME, LGBT or other traditionally excluded groups through reviewing diversity monitoring by provider organisations.
- Guidance on inclusive organisational development support should be developed jointly by LGBT and BME frontline organisations and identity-based and generic providers.
- Funders should encourage and invest in shared learning between identity-based and mainstream providers.
- Funding should be available to identity-based infrastructure organisations to act as intermediaries.

5. Invest in partnerships.

- Funders and infrastructure providers should build in realistic timescales and resources for developing and managing partnerships.
- National organisations and funders should promote examples of good practice – with evidence of outcomes.
- Funders should issue grants assessors with guidance about the characteristics of effective partnerships.

6. Stimulate debate.

- We all have a responsibility to challenge unsubstantiated claims by *any* organisation claiming to meet the needs of specific communities.
- It would be helpful to identify and publish evidence about the outcomes of different models of organisational development support in meeting the needs of minority groups.
- The Big Lottery Fund or others may wish to develop practical guidance on how to spot a genuine partnership, how to spot inclusive organisational development support, how to deliver inclusive and effective organisational development support, and on how identity-based and generic providers can work together effectively.

1. Introduction

1.1 Research objectives

The question at the heart of this study is whether voluntary and community organisations in and from excluded communities need support delivered by infrastructure organisations from the same communities. Our focus was on organisational development support as opposed to other infrastructure functions.

We published an interim report based on a literature review in December 2009 (see a summary at Appendix 3). This informed our primary research, which had three objectives:

1. To explore the perspectives of single-identity groups, single-identity infrastructure providers and generic infrastructure providers across the UK, with a focus on sexual orientation and ethnicity.
2. To highlight key issues to be considered in developing policies and procedures in this area.
3. To consider how far any conclusions and recommendations arising from this study might be generalised across the four countries of the UK and applied to different 'equalities-based' groups or communities of identity.

1.2 Scope

1.2.1 Organisational development support

There have been various attempts to define and categorise voluntary sector infrastructure. Of the four functions identified in a report for Change up¹, reproduced in the table below, our research is focused on the first: Sector support and development.

<i>Higher-level outcomes</i>	<i>High-level outcomes</i>	<i>Functions</i>
Change within individual VCOs	VCOs are skilled, knowledgeable and well-run	Sector support and development
	VCOs reflect and promote diversity and equality	Sector diversity and equality
Change between and beyond individual VCOs	VCOs network and collaborate	Sector collaboration and co-ordination
	VCOs influence policies and programmes	Sector influence and representation

¹ PERFORM, An outcomes approach to voluntary and community sector infrastructure organisations, Communities and Organisations: Growth and Support (COGS), 2006

The Big Lottery Fund's brief for this study suggested that while identity-based infrastructure has a clear role in delivering the other three infrastructure functions described in the COGS report, the case for organisational development support to be delivered in this way was less obvious.

Put simply, the question we set out to answer could be summed up as – if a lesbian and gay group needs help with putting together a set of accounts or writing a governing document, would the group receive more effective support from a lesbian and gay infrastructure organisation than it would from a generic infrastructure provider?

We were interested primarily in voluntary and community organisations and their support needs. The Big Lottery Fund includes social enterprise within its definition of voluntary and community organisations and some of the organisations we interviewed self-define as a social enterprise. However, the specialist role of organisations promoting and supporting social enterprise per se was outside the scope of this research.

1.2.2 Ethnicity

One focus of the research was on the experience and views of groups working specifically with and for black and minority ethnic communities (BME). We used a broad definition to include groups working with any minority ethnic community in the UK, including refugees and asylum-seekers, Irish people and the Gypsy and Traveller community.

1.2.3 Sexual orientation

The second focus was on sexual orientation. We started with a strict definition of sexual orientation to include groups working specifically with and for lesbians, gay men or bisexual people (LGB). As the research got underway, we ended up taking a more pragmatic approach because many of the organisations in the sample also work on transgender issues and felt strongly that transgender should not be excluded from the study.

1.2.4 UK-wide study

Our research covered England, Scotland, Wales and Northern Ireland. Within England, we focused on London, the West Midlands and the North West as well as talking to organisations with an England-wide remit. Across the UK we talked to groups from rural communities as well as towns and cities.

1.3 Definitions

It rapidly became clear that many of the terms and concepts at the heart of this study are subject to different definitions and interpretations. To avoid confusion, we set out definitions of the relevant terms below, as used in this report:

1.3.1 Single identity: The phrase “single-identity organisation” was used by Ted Cantle in 2001 to refer to organisations based around a particular ethnic,

religious or cultural identity². It is problematic - we found that a lot of voluntary and community organisations were not familiar with the term or rejected it, feeling it misrepresents the multi-faceted identities of the people and communities they work with. The term is understood differently in Northern Ireland, where it is used to refer to organisations which are working with/for Unionist/Protestant or Nationalist/Catholic communities.

In this report, we use the term “**identity-based infrastructure**” to distinguish between infrastructure or second-tier organisations set up to support minority ethnic or lesbian and gay groups as opposed to ‘generic’ infrastructure organisations (whose function is to support the voluntary and community sector *as a whole*).

Several interviewees were at pains to distinguish between organisational identity and the identity of *individuals* working within an organisation. The Chief Executive of a council for voluntary service (CVS) in central London told us for example that 70% of his staff were from an minority ethnic background, whereas the co-ordinator of one LGBT infrastructure organisation is not herself gay. These examples are a useful reminder of the danger of simplistic definitions. Another point to remember is that the identity of staff within an organisation should not determine that organisation’s role and purpose – although it is often assumed to be the case.

1.3.2 Infrastructure: We use the term infrastructure to refer to second-tier organisations which support frontline voluntary and community groups. In practice, we found a blurring of roles. Many identity-based organisations which started off as frontline service providers were now also taking on a support function for smaller groups.

1.3.3 Specialist infrastructure: We recognise the term ‘specialist infrastructure’ is also commonly used to refer to organisations providing a specialist function – such as community accountancy, or to organisations supporting groups in a particular service area – such as advice, as well as specialising in supporting groups working with a particular community – which is the focus of our research. We refer to the latter as identity-based infrastructure to avoid confusion.

1.3.4 Capacity-building and community development: Organisational development support is often referred to as ‘capacity-building’ or ‘voluntary sector development’. Again we found that these terms were problematic because of the overlap with community capacity-building and community development. Some of the organisations we talked to were working at community level – with individuals rather than with organisations. This was particularly the case with lesbian and gay organisations and with refugee/asylum-seeker organisations where there are not so many established groups. We will return to a discussion of community development later on in the report.

² Community Cohesion: A Report of the Independent Review Team. Chaired by Ted Cattle, January 2001

1.4 Context

We covered the policy and funding context in some detail in the interim report, which is available on BIG's website. Key issues included:

- continuing debate about the impact on community cohesion of working with single communities
- unprecedented investment in voluntary sector infrastructure in England over recent years through Capacitybuilders, Futurebuilders and the Big Lottery Fund's programmes
- increased competition for funding
- the level of information required to satisfy expectations of funders and commissioners about effective governance and management
- growth of 'equalities networks' bringing together voluntary organisations working on individual equality strands
- concern that the BME voluntary sector is comparatively less well-resourced
- the small scale of the newer LGBT voluntary sector, with very few paid staff.

The primary research for this study was conducted in early 2010, against a backdrop of increased political and economic uncertainty. A recurrent theme through interviews and in focus groups was that funding for voluntary sector infrastructure was likely to reduce. Projects funded in the second round of the Big Lottery Fund's BASIS programme were entering their final year, the future of ChangeUp was uncertain and pressure on public sector budgets was likely to lead to reduced statutory funding for the sector as a whole. Changes in the public sector landscape and uncertainty about funding applied across the UK, even if other political issues faced the sector in different countries.

This uncertainty leads to increased competition, which has, perhaps not surprisingly, prompted some identity-based organisations to raise fears that smaller and less well-connected organisations will lose out. The voluntary sector press has run a story about minority ethnic organisations being disproportionately affected by the economic downturn, for example³.

In Northern Ireland, minority ethnic and LGBT organisations felt very strongly that funding continues to prioritise co-operation between the Catholic and Protestant communities, with little or no political will to support other communities of interest. LGBT groups were feeling the impact of the Good Friday agreement, because the Office for the First Minister and the Office for the Deputy First Minister does not support funding going to LGBT groups. The only infrastructure organisation, the Coalition on Sexual Orientation, no longer exists.

In Scotland, the Scottish Government's Single Interface Programme means radical changes to voluntary sector infrastructure funding from April 2001,

³ "Racism" blamed for decline in funding to ethnic minority charities, Third Sector online, 9 March 2010, article based on a report from the Council of Ethnic Minority Organisations (CEMVO)

linked to Single Outcome Agreements and Community Planning Partnerships (similar to Local Strategic Partnerships in England)⁴.

Against increasing pressure to compete for funding, partnership between organisations working with different communities continues to be encouraged by local authority community cohesion strategies and by national funding from the Equality and Human Rights Commission and others, such as the Baring Foundation's Awards for Bridging Cultures.⁵

Although there was a general consensus that working together was in theory a good thing, there was much discussion at the focus groups about the challenges of partnership working in a competitive funding environment. Groups want funders to recognise the time required to develop and nurture partnerships. Building trust is a challenge, especially when there is a power imbalance between the partners. Partnerships can be perceived as a cost-cutting exercise which reduces the level and quality of service to local groups rather than bringing added value.

The study is very topical and potentially controversial. We found that when we began to explore the research questions outlined below, we quickly became involved in debates around equality, identity, the role of the funder and models of organisational development and capacity-building. These debates take us beyond the scope of our research, but have implications for our findings. We have highlighted what we see as the key questions in chapter 3 as they put our findings into a wider context.

1.5 Questions arising from literature review

We reviewed over 60 reports and websites relevant to the study before embarking on our primary research. The findings of this literature review can be found in our interim report on the Big Lottery Fund website.⁶ In summary, although there was a lot of information about barriers facing BME and LGBT voluntary and community groups, there was no directly comparable evidence to compare with the experience of other small frontline groups. This made it difficult to draw conclusions about any specific organisational development needs they might have arising from their identity.

The evidence was inconclusive on how well generic infrastructure organisations are meeting the support needs of BME and LGBT groups. Many reports identified negative perceptions about generic organisations but there is a growth in the number of BME and LGBT groups joining their local Council for Voluntary Service. As there was no data on their use of generic services or satisfaction levels we have explored these questions in more detail in our primary research.

⁴ For more information, see briefing on the Single Interface Programme by Glasgow Council for Voluntary Service at www.gcvs.org.uk/documents/537

⁵ www.bridgingcultures.org.uk

⁶ www2.biglotteryfund.org.uk/er_coi.htm

The secondary research identified apparently positive examples of collaboration between identity-based and generic infrastructure, but these were all new developments and had not been evaluated. We therefore identified this as a fruitful area to explore in our interviews and focus groups, particularly as we did not find any guidance or models of good practice to support collaborative working of this kind.

Our primary research was designed to explore the ten areas listed below in more detail:

1. Specific support needs of BME and LGBT groups
2. Drilling down beneath immediate funding needs
3. Distinguishing between perception and hard evidence of ineffective support
4. Unpicking what is meant by 'cultural understanding'
5. Whether identity-based infrastructure can represent the interests of frontline groups without providing organisational development support
6. New or innovative models of delivering organisational development support
7. The effectiveness of brokerage arrangements or other collaboration between identity-based and generic infrastructure
8. Views on prioritising which frontline groups are supported
9. Extent of support for a market-based approach (giving frontline groups the resource to buy in support from their own choice of provider)
10. Outcomes for LGBT and BME communities resulting from investment in targeted organisational development support.

1.6 Methodology for primary research

Our primary research was qualitative, using telephone interviews, an online survey and focus groups to explore the ten areas listed above in more detail. We used purposive sampling to reflect a broad cross-section of views – hand-picking organisations from different parts of the UK, from rural and urban communities. We aimed for maximum diversity in terms of size, type of activity and beneficiary group within five categories:

- LGBT frontline organisation
- BME frontline organisation
- LGBT infrastructure
- BME infrastructure
- Generic infrastructure.

We identified our sample through personal contacts, internet searches, suggestions made by the external reference group and by Big Lottery Fund staff. While striving to reach as broad a sample as possible, the research cannot claim to be representative because the vast majority of BME and LGBT frontline groups are self-organised, volunteer-run and receive very little or no funding. The groups involved were nearly all funded and employing

staff, which meant they were better able to respond to emails and arrange times to give telephone interviews. Our sample was not restricted to organisations receiving lottery funding

BME frontline organisations interviewed were delivering services to a variety of identity-based groups. These included BME women, refugees and asylum-seekers, young people, Gypsy and Traveller groups and groups operating within a single locality/community centre. The majority began life as self-help organisations and have remained relatively small and largely dependent on volunteers. The two largest organisations in the interview group employed around 20 staff.

The services provided by LGBT frontline organisations included gay and lesbian switchboard services, befriending, health services for gay and bisexual men, gay radio, supported accommodation, youth services, advice and advocacy. The smallest organisation interviewed had no paid staff and no funding; the largest employed 27 staff and had a turnover of £1.2m. The annual turnover of the vast majority of organisations was less than £500k and about half the sample had turnovers of less than £100k. It was more difficult to get responses from LGBT organisations as the majority are contactable only via personal email addresses or PO Box numbers.

Telephone interviews

Telephone interviews were a cost-effective means of getting input from groups across the UK relatively quickly, but meant that in most cases we only spoke to one person from the group concerned, and they were not always able to answer all of our questions. We also experienced some difficulty getting hold of smaller, volunteer-led frontline organisations, even when telephone calls had been pre-arranged. Over a five-week period during January and February, we conducted interviews with 55 voluntary organisations ranging in length from 30 minutes to over an hour. A breakdown of the sample by stakeholder group, country and region is given below.

Telephone interview sample								
Category	England wide	London	NW	WM	Wales	Scotland	Northern Ireland	Totals
Front line LGBT	2	2	1	2	1	1	1	10
Front line BME	1	3	2	3	2	3	2	16
Infrastructure LGB	2	1	1	0	1	1	0	6
Infrastructure BME	1	4	3	1	0	1	1	11
Infrastructure generic	3	1	2	2	1	2	1	12
Totals	9	11	9	8	5	8	5	55

Online survey

We recognise that time pressures would make it difficult for some organisations to be interviewed or to attend focus groups, so we set up an online survey to enable those with an interest to input their views in their own time. 37 organisations took up this opportunity, including 14 generic infrastructure bodies, which helped to balance out the telephone interview sample. The online survey followed a similar format to the topic guide used in the telephone interviews.

Focus groups

During February and March we held a focus group in each country of the UK and in three English regions. The focus groups explored emerging findings and recommendations with a cross-section of stakeholder groups and funders. We invited everyone who had been interviewed previously, as well as External Reference group members, funders and other relevant organisations from the local area. In total, 46 people took part in seven focus groups, two of which were held in London and one each in Birmingham, Preston, Glasgow, Cardiff and Belfast. We tried to hold the Scotland group in Perth, because this would have made it easier for Highlands organisations to attend. But low take-up meant that we had to replace this focus group with a meeting in Glasgow where there is a much higher concentration of relevant organisations.

Having anticipated tensions and potential conflict at the focus groups, we were surprised by the degree of consensus. Identity-based and generic infrastructure organisations talked about the value of working together. We follow up some of the examples suggested in chapter 4 of this report. Participants challenged each other constructively, which helped us to test claims made during the one-to-one interviews.

Overall input

The table below shows the overall input by stakeholder group, country and region including telephone interviews, online survey responses and focus group attendance.

	England wide	London	NW	WM	Wales	Scotland	Northern Ireland	Totals
LGB Frontline	3	4	3	4	3	3	3	23
BME frontline	2	6	5	6	5	8	3	35
LGB infrastructure	4	3	3	1	2	3	0	16
BME infrastructure	4	6	7	2	2	5	3	29
Generic Infrastructure	6	4	6	3	1	11	3	34
Funder	0	0	1	0	0	1	0	2
Totals	19	23	25	16	13	31	12	139

The larger proportion of BME organisations in the sample reflects the size of the sector in comparison to the LGBT sector.

1.7 Our approach

The researchers brought together by Equal to the Occasion to work on this project have practical experience between them of working in the BME and LGBT voluntary sector as well as in generic voluntary sector infrastructure organisations at national and local level. Like everyone who contributed to the primary research, we are inevitably influenced by our own experience of different organisations, but we approached the research with an open mind. Lively discussions between ourselves, with members of the External Reference Group and with Steve Browning from the Big Lottery Fund have ensured a healthy scrutiny of individual views. We are confident that the conclusions and recommendations presented in this report are based on objective analysis of our findings.

2. Findings

This chapter sets out findings arising from our exploration of the ten research areas listed in paragraph 1.5.4. Because of overlap between areas and the different level of detail we uncovered, we have grouped the findings under four broad headings, as follows:

1. Support needs of frontline groups (research areas 1 and 2)
2. Current provision of support (research areas 3-5)
3. Delivery models (8-10)
4. Impact of different models in practice (6 and 7).

2.1 Support needs of frontline LGBT and BME groups

2.1.1 Assessment of needs

Analysis of need by infrastructure providers seems to be somewhat ad hoc rather than systematic or formalised. Some infrastructure organisations had been involved in research to assess development needs across particular localities. In other cases, need was assessed individually when groups came for support. By and large, generic providers spoke more confidently and knowledgeably about BME than about LGBT groups, although there were some regional differences. For instance, there was greater understanding and recognition of the LGBT sector as a key player in Greater Manchester, reflecting the development and visibility of LGBT organisations and businesses there.

Only two of the BME infrastructure organisations interviewed routinely utilised a diagnostic to assess clients' developmental and support needs. Tools ranged from a checklist based broadly on PQASSO⁷ to a custom-made diagnostic. More commonly, providers developed a picture of support needs through consultations, networks, forums or other events that they facilitated.

The Manchester-based Lesbian and Gay Foundation has secured funding from BASIS and Capacitybuilders to map lesbian and gay organisations across the North West. They found the organisations are mostly self-organised social or support groups with a turnover of less than £1,000 a year, and the Foundation is now in the process of meeting all the groups identified to assess their needs and experience.

2.1.2 Needs expressed by frontline groups

During the telephone interviews, we used a checklist to ask frontline groups about the areas on which they had received or wanted support.⁸

⁷ Practical Quality Assurance System for Small Organisations, developed by Charities Evaluation Services. It can be used as a self-assessment tool and an externally assessed quality mark. See www.ces-vol.org.uk.

⁸ The checklist was based on work by Charities Evaluation Services: How are you doing? A review of health checks used by voluntary and community sector infrastructure organisations in their capacity building work, CES, 2009

Not surprisingly, the most frequently cited reason these groups gave for seeking external support was that they needed help in securing funds. The networking and campaigning role played by many identity-based infrastructure organisations is important to them because it can help them to access funding. Although some had also sought help with governance, financial systems and employing people, organisational development in itself was a low priority for many frontline groups as they were too busy with service delivery:

“When you are responding to people in desperate situations, they will always be the priority”.

Refugee community organisation

2.1.3 Size of group

Most infrastructure providers (generic and LGBT or BME) and a number of frontline groups felt that the support needs of LGB and BME groups are more informed by the size and scale of the organisations than sexual orientation or ethnicity. This supports the findings from our review of previous research in this area summarised in the interim report.

One generic provider said: *“I have never seen any evidence in over twenty years of working in organisational development that there is any such thing as ‘BME organisational development’ or ‘gay organisational development’. It’s about the appropriateness of the organisational development interventions that are made. All that organisations from particular communities do is characterise common developmental issues – most typically of small, under-resourced organisations – and these are the same across communities.”*

An identity-based provider said: *‘Essentially the areas of support needed are not different, and often generic organisations are better placed to meet those needs, but groups will say their needs are different and they say they want different support.’*

2.1.4 Needs arising from work with marginalised communities

Some needs were identified which are likely to apply to other frontline organisations working with a marginalised community. These can be grouped into three categories, as set out below:

Areas for organisational development support

- Support in finding and managing volunteers is likely to be more relevant than support on employment issues.
- Burn-out is a big problem because people are personally involved in the cause and often struggling to meet demand with very scant resources. A paid worker from one LGBT organisation described his job as a joke, because of the huge expectations put on the role. A manager from another LGBT organisation said it was the hardest job she had ever had, much harder than managing a mainstream organisation. People in this situation might need support to manage expectations, help with time management and priority setting, succession planning or simply emotional support to build up their resilience.

- The people involved in running frontline BME and LGBT groups do not always have a wider voluntary sector background so need support to understand how the sector works. There may be an unmet need for a basic induction to the voluntary sector. They also need help to navigate and make connections with mainstream networks, which leads into specific areas of policy support listed below.

Policy support

- There is a need to lobby mainstream services to recognise specific needs, such as domestic abuse in same-sex relationships and mental health issues in minority ethnic communities. (This may be more relevant to the representation function of infrastructure than to organisational development.)
- Understanding that some of the issues which marginalised groups work on – such as gun crime – present challenges in winning public support.
- Many groups want to know how to work effectively with the issue of minorities within a minority. Although many other voluntary organisations need support on equality and human rights, there are particular cultural challenges – for instance, a refugee organisation might take up campaigns in the area of sexual orientation if they are called on to support people fleeing torture or even death in the country of origin because they are lesbian or gay.

Method of delivery

- Provision of support in the evenings and weekends is critical as small groups tend to rely on volunteers, who are often working during the day.
- Support providers need to understand the context that groups operate in. In comparison with ‘mainstream’ groups, their identity might give them less access to resources, whether financial, human or otherwise. For instance, it may be harder for them to find appropriate volunteers because they are fishing in a smaller pool.
- Trust and confidence in the organisation providing support are critical – more so than for groups who do not face prejudice and discrimination.

2.1.5 LGBT-specific needs

We identified some specific support needs that are important for LGBT groups:

- Safe space to meet – especially in rural communities, in the Scottish Highlands and in Northern Ireland where churches dominate community activity and do not always welcome LGBT groups on their premises
- Support with providing evidence of need to funders, given the lack of official data
- Help with publicising a service that may provoke hate mail or personal attacks on people involved
- Need to trust and have confidence that the provider will not be homophobic
- Support in dealing with homophobia from others

- LGBT experiences and perspectives on specific issues such as health, mental health, or housing, because mainstream organisations do not cover them and the LGBT infrastructure does not have the capacity to take on specialist work
- Recognition of the community development role adopted by some LGB infrastructure organisations: *'...our main role is to build communities across LGB communities, and we are in constant conversation about LGBT and race, LGBT and disability. We want to reach those that are on the fringes of the community and face multiple issues.'*

The last point is particularly important because it makes it hard to disentangle organisational development from other infrastructure functions. While some interviewees come squarely at the question from an infrastructure support perspective, others are more concerned with the support and welfare of individual LGBT people. There is of course also some overlap. This blurring of boundaries between the organisational and the personal was also raised by refugee infrastructure organisations.

2.1.6 LGBT groups in Northern Ireland and Scotland

LGBT groups in Northern Ireland and in Scotland reported feeling particularly marginalised. Those running the groups are usually volunteers, who may not be out to their employers or neighbours and so will not use generic voluntary sector support services locally because it would mean outing themselves. This was identified as a particular issue for young people in Northern Ireland who maybe unsure of their sexual orientation.

2.1.7 Needs of BME groups

- Understanding how things work in UK (applies particularly to refugee and asylum-seeker groups)
- Language (for some groups)
- Dealing with instability in refugee and asylum-seeker organisations – they often don't know if people will be here one week to the next
- Support to integrate with mainstream provision – such as the Refugee Council's encouragement of an Albanian day centre for elderly people is to make use of services provided by Age Concern
- Support with what one organisation described as "navigating the politics of race"
- Dealing with perceptions that funders monitor BME groups more than others.

2.1.8 Needs of groups based in rural communities

There is no critical mass of any minority community because the population is dispersed over a wide area– leading to isolation and invisibility.

"The perception is that the Lake District is a pretty, affluent place and based on this race equality goes even further down the list."

BME infrastructure organisation, Cumbria

This can mean that:

- racism and homophobia can be more overt, yet there are fewer support services;
- identity-based organisations focus more on supporting individuals than on organisational development;
- all service providers – not just in the voluntary sector – need support to address equality and diversity more effectively.

2.1.9 Importance of understanding the challenges faced by LGBT and BME groups

Many of the frontline organisations we spoke to identified the specific support needs as being related to ‘cultural understanding’. Many said that they spend a lot of time and energy proving their legitimacy in an external context which is indifferent or downright hostile. Although their development needs may be the same or very similar to other groups, delivery by an organisation which understands the context they are working in makes a big difference.

“We need one-to-one support delivered by people who understand the challenges we face that can impact on the success of our business.”

BME frontline organisation

“Small organisations just don’t have the time to keep educating generic providers, exploring the issues etc each time they want support so that the suggestions and solutions offered are relevant and realistic. With a specialist provider we can get straight to the point.”

LGBT frontline organisation

2.2 Provision of organisational development support to BME and LGBT organisations

2.2.1 Current provision – Where do frontline BME and LGBT organisations go for support?

Frontline groups are accessing support from a vast array of organisations. In addition to generic and identity-based infrastructure at local, regional and national levels, groups mentioned colleges, chambers of commerce, local authorities, the NHS, funders, private consultants and specialists in a particular field such as housing, the advice sector or regeneration.

There was consensus at all the focus groups that current provision of organisational development support is:

- fragmented, with insufficient partnership or co-ordination between providers
- of variable quality
- overstretched
- not meeting the needs of BME and LGBT frontline groups as well as it could (although as we did not have a control group, we cannot say

whether other frontline organisations would express similar frustrations with the support available to them).

The range of options available is confusing for small organisations and raises questions about duplication and value for money. The picture varies across the UK – in some areas there is no choice whereas in other parts of the country groups feel their needs are not being met properly by any of the providers.

“In one sense there seems to be lots of providers; in fact it’s confusing because there seem to be lots of organisations doing the same thing. It can be difficult finding what is best, but lots of it is too generic”

LGBT frontline organisation

A significant number of groups interviewed aim to bring the skills they need into the organisation via trustees or volunteers rather than rely on external support:

‘I’d get rid of them all and be able to get the money directly to buy support that we want’ BME frontline organisation

Overall, we did not get the impression that groups felt that support had improved, despite the significant investment in voluntary sector infrastructure in recent years.

2.2.2 Barriers for LGBT and BME frontline groups

Practical barriers

Many participants in the online survey and interviews echoed evidence from the literature review. These include cost, distance, opening hours and location. These would apply to other small groups, but a specific issue about geographical coverage has emerged.

According to one respondent, 85% of LGBT groups in London work across more than one borough (and we would note that this applies to many BME groups, too). Fewer organisations thus cover larger areas, often because their beneficiaries do not live in a single area.

Several groups reported that they had been refused help by a local CVS or equivalent, as the latter are funded only to work with groups within the local authority boundary.

For a national LGB organisation in Northern Ireland, though, the reverse was true – they were refused help by a local support organisation who perceived that all their activities were in Belfast.

Communication barriers

A mismatch between what the frontline groups want and what is offered to them can be down to communication difficulties or because the services are not tailored to the needs of different communities. Outreach is critical, because the LGBT or BME groups may not otherwise know about the generic

service or feel confident about working with it. So it is essential to build up trust. Interestingly, the quote below referred to a generic organisation which is working with LGBT groups:

Basically they want the same support as other organisations, but they are not confident or comfortable going to mainstream organisations, who could provide a perfectly good service, but don't reach out and enable groups to feel comfortable.

LGB infrastructure

"So I think that sometimes the giver and receiver aren't on the same wavelength and it's like stuff gets lost in translation. Perhaps literally sometimes because of language differences, but then other times the supporter gives information in this blanket way that perhaps isn't viable for an organisation because of the set of challenges it works with.

BME women's group, Wales

Assumed and perceived barriers

Many frontline groups raised what they perceived as a lack of cultural understanding as a barrier to receiving effective support but it was difficult to ascertain how far these were based on actual experience or assumption. It does seem that LGBT or BME groups sometimes assume that a generic service is not relevant for them or that they will experience racism or homophobia and therefore do not approach generic providers. As one provider pointed out, such assumptions will effectively deny them support from the outset:

'LGBT groups don't like going to CVS or generic providers. Often, if that's the only option, they just won't go for support. They feel that they just won't "get it".' LGBT infrastructure provider

"In my borough we are one of few BME groups – it is a fairly affluent area with a very small BME population. So the first time I engaged with CVS services I felt alienated. The other organisations that used CVS didn't relate to BME organisations." Refugee frontline organisation

2.2.3 Experience of providers

Very few infrastructure providers, whether generic or identity-based, monitor the diversity of groups who take up their services. Monitoring service take-up and/or membership by ethnicity is far more common than by sexual orientation – but even here the monitoring is relatively limited. Attendance at conferences, seminars and training events is more likely to be monitored by ethnicity (and this may be of the individual attender) than providers' overall services.

This is further complicated by the fact that – as almost all interviewees noted – generic infrastructure providers are operating at 'one remove' and so encounter predictable difficulties in determining the 'ethnicity' of the organisations they serve.

In addition, several identity-based providers reported receiving significant numbers of referrals from generic providers, often related to issues that those

generic providers would have been better placed to deal with. It seems that when BME or LGBT groups go to generic providers, some of these providers lack the confidence to support them or assume they would feel more comfortable speaking to an identity-based provider.

2.2.4 What matters to the frontline organisations

Generally speaking, the main determinants of whether external support is used revolved around accessibility, reputation, quality, and free delivery rather than issues such as cultural sensitivity or the 'identity' of the provider, although groups rarely felt they had a choice. In relation to organisational development support, where 'specialism' was a factor, at least amongst our sample, it was far more likely to be in relation to technical specialisms— such as legal or technical advice – than a specialism founded on ethnic identity or sexual orientation.

Interviewees were concerned that support should be:

- of the best quality possible
- one-to-one
- locally delivered and accessible
- free of charge
- relevant and timely.

However for some areas of organisational development support, a similar organisational identity was considered a useful factor. For example, identity-based providers were more likely to know which funders were sympathetic to LGBT applications for example and to understand how to make the case to funders. Identity-based provision is also seen as better placed to facilitate partnerships, network development, advocacy and peer support.

Amongst those interviewees who had *not* used infrastructure support, the reasons revolved around quality, relevance and accessibility rather than rejecting a provider because of their 'identity'. Interviewees' responses to the question of why they *had not* used infrastructure support could broadly be split into four categories:

- **Organisational development is a low priority** – *“When you are responding to people in desperate situations, they will always be the priority.”*
- **Groups don't know that it's available** – Lots of small LGBT and BME organisations have never heard of Councils for Voluntary Service, let alone know what they do, often people who set up the group had no prior experience in the wider voluntary sector.
- **Support is inappropriate** – Services are too far away, too expensive or not available outside of office hours, which is problematic for groups run by volunteers who are at work during the daytime.
- **Groups have a poor perception of support providers** – In some cases interviewees had negative experiences of attempting to use infrastructure

support – but these related to quality and dependability rather than ethnicity or sexual orientation.

The fundamental message from frontline groups was that they wanted more, higher-quality free support that was tailored to their needs, rather than identity-specific support.

2.2.5 Empathy more important than identity

Despite mixed views on the relative strengths of identity-based and generic provision, there was consensus that understanding and empathy were more important than shared identity.

‘They should have knowledge and understanding of the issues. Simply being a member of an equality group does not make an individual or an organisation an expert or a specialist. Identity should not be the primary deciding factor as has been the case.’

BME individual working for a generic infrastructure provider

However groups who did state a preference for using identity-based provision felt that these providers understood them and the issues they faced. One BME infrastructure provider believed they had been able to develop this understanding because of the time they invested in listening to groups:

‘It’s the lifestyle, cultural and work patterns that you need to consider when offering support to groups. We are able to understand communities and we develop a relationship with them. We’ve been doing this for years. It’s a process that happens over time and it’s about building trust and getting to know the group. It’s not just a case of going in, doing a quick talk on governance and leaving. It’s often about taking more time, going through issues with them and making sure that groups have the chance to really understand the implications of what they are doing. It’s about giving people options, rather than telling them “this is your option”.’

The challenge for generic providers is making sure their staff have the necessary understanding and then convincing frontline BME and LGBT groups that this is the case. A view was expressed in the North West focus group that generic providers do not give a high priority to equality and diversity. Often, in practice, it relies on a single individual and is not embedded within the organisation:

‘I lack confidence in mainstream providers because they clearly don’t understand LGBT issues, unless there is an employee there who is LGBT.’

LGBT frontline group

2.3 Comparing generic and identity-based provision

Positive and negative views were expressed about both identity-based infrastructure and generic providers. Their relative strengths were elaborated further through discussion at the focus groups. We have grouped the evidence into the tables below to compare the strengths and challenges that can affect both types of infrastructure organisation.

2.3.1 Generic provision

Strengths	Challenges
<ul style="list-style-type: none"> • Offer a wide range of support programmes • Expertise and experience in governance, human resources, income generation • Tend to be better resourced • Established track record • Well-connected with local public service providers and decision-makers • Good facilities • Wide-ranging knowledge, with good information provision and signposting • Neutrality, where there are tensions between different BME groups 	<ul style="list-style-type: none"> • Services based on a standard offer – such as training programmes and advice sheets on common issues which assume generic circumstances • Variable quality is variable – can be too basic, out of date or inappropriate • Rely on groups coming to them rather than outreach • Perceived as inaccessible to small, marginalised groups • Less likely to provide one-to-one support • Lack cultural understanding • Not confident about addressing sensitivities regarding sexual orientation and ethnicity • Making their service more inclusive harder than ‘offloading’ groups to an identity-based provider • Services targeting particular communities usually rely on short-term project funding and often on an individual staff member, rather than being embedded in the organisation

2.3.2 Identity-based provision

Strengths	Challenges
<ul style="list-style-type: none"> • One-to-one support tailored to individual needs • Cultural knowledge and understanding • Connections with ‘grass roots’ and ‘hard to reach’ organisations • Adaptable and flexible (providing out of hours support, doing more outreach) • Empathy • Develop relationships with frontline groups over a longer time • Establish confidence and trust so can challenge frontline groups • Can set up networks to provide peer support • Strong personal commitment means staff will ‘go the extra mile’ • Tend to be smaller, newer organisations but may therefore be more innovative in their approach 	<ul style="list-style-type: none"> • Lack resources to do the job properly. <i>“We say we will change the world for £50k”</i> • Establishing profile and credibility with limited resources • Attracting and retaining experienced staff as cannot afford competitive salaries • Some take on a support role when it is not their core function, so roles become blurred (especially in Northern Ireland, Scotland and Wales and where there are fewer identity-based support providers) • The primary role of most identity-based infrastructure is voice and representation. They do not automatically have expertise in organisational development • Insular/isolated from the mainstream voluntary sector • Do not always cater for needs of minorities within their remit. • Can be perceived as gatekeepers or competitors by the frontline groups they aim to support • Unrealistic expectations on them • Sustainability

2.3.3 Partnerships and joint working

People recognise that identity-based and generic infrastructure providers have a lot to learn from each other and want to see more joint working:

‘There is a need for single-identity organisations to work together more and only specialist infrastructure organisations can enable this.’

LGBT frontline group

‘We would like more support on partnership working. It seems more funding is going to bigger organisations, so it would be useful if help was provided on managing and negotiating relationships and collaboration. It would be useful if organisations like ROTA and NCVO put on more networking events, because that is where knowledge and information is shared.’

BME frontline organisation

2.3.4 Challenges of partnership working

We heard much about the challenges of partnership working, not least because providers are in competition for funding and do not always agree with each other's claims:

'An established delivery model has grown up that is largely self-selecting – such and such as specialist body or umbrella group or network will claim that it is the natural provider for its constituency and will defend this territory accordingly. But little judgment is made of their capacity or capabilities.'

Generic infrastructure provider

Virtually all the identity-based groups gave examples in the focus groups of having been cited as a partner on an application despite little or no prior discussion. Some felt that mainstream providers used their expertise to secure funding for a project but gave nothing back in return.

There was a strong feeling that funders do not appreciate the considerable time taken up in developing and managing effective partnerships. Someone in the Scottish focus group felt there was a risk of romanticising partnerships and glossing over the difficulties.

Despite these difficulties, many organisations believe that joint working is the only sensible way forward.

2.4 Good practice

2.4.1 Avoid duplication

Rather than duplicate existing services, by and large our research showed that people wanted funders to address shortcomings in existing provision.

'Investment should be made into the existing infrastructure provision. I wouldn't want to see lots of new provision propping up; it's a waste of investment. It's expensive to set new organisations up, so infrastructure provision should be established and investment should be made in those that can prove they are good at what they do.' LGBT frontline organisation

Generic and identity based infrastructure providers alike are aware that resources are declining and that there is a consequent need to invest in sustainable providers who have a proven track record in delivering quality to all sections of the third sector. Our research has identified the following characteristics of what high-quality support for frontline BME and LGBT groups might look like.

2.4.2 Characteristics of effective support to BME and LGBT groups

- One-to-one service (tailored rather than one size fits all)
- Effective listening skills to get to the real issues facing the group
- Understanding of cultural issues, history, context and barriers facing BME or LGBT groups

- Community development approach
- Use of needs assessment tool such as PQASSO or similar to take a holistic approach to the frontline organisation's support needs
- Willingness and confidence to challenge ineffective practice, duplication or unrealistic goals
- Consistency of personnel – that is, the same support worker who gets to know the group and build up trust
- Help with funding applications to establish credibility and a route into delivering other support
- Offer of a community building or access to office space, encouraging and enabling small groups to take up support and advice under the same roof
- Offering support at evenings and weekends
- Positive images and examples in literature, training courses and posters – explicitly BME or LGBT
- Diverse staff teams
- Active outreach to BME and LGBT groups so they know the support is available, accessible and relevant.

2.5 Delivery models

We found examples of support with the above characteristics being provided to BME and LGBT frontline groups by generic infrastructure organisations as well as by identity-based organisations. In many cases, infrastructure organisations were working in partnership at local or national level to ensure effective support to frontline groups.

2.5.1 Community development

Some identity-based infrastructure organisations do community development work to set up groups within minority ethnic or LGBT communities and provide what one LGBT organisation described as 'incubator support'. In theory, such support is time-limited and the frontline groups move on to make use of generic support once they reach a certain stage of development. Several organisations recommended distinguishing between short- and longer-term needs of frontline BME and LGBT groups.

In practice, however, LGBT and BME infrastructure organisations find that groups continue to want their support. A BME infrastructure organisation in the North West described helping the Chinese community to set up an organisation.

'At this point they were operating out of a basement. Now they are a huge community centre with about 60 staff and loads of resource and while they don't need support from us anymore, they still see us as a point of contact to get sound advice.'

Frontline groups will clearly prefer to go to a trusted source of support rather than approach a generic organisation where they may not be known. As one

national identity-based infrastructure organisation put it, *'They keep coming back to us and I do wonder what would happen if we ceased to exist'*.

2.5.2 Brokerage

To bridge the gap between frontline organisations and generic providers, some identity-based infrastructure organisations play a brokerage role – making frontline groups aware of what support is available, providing reassurance and sometimes making direct referrals. This helps to overcome the communications barrier – whereby the generic organisations are not aware of the frontline BME or LGBT groups and vice versa – but in a more pro-active way than signposting:

'Sometimes we just have to reassure organisations and refer them into support. They want us to be part of that process because it gives them a sense of security.' BME infrastructure organisation, NW

2.5.3 Partnerships

A variety of partnership arrangements between identity-based and generic infrastructure organisations have been set up to improve access to support for marginalised groups. Identity-based infrastructure organisations can help generic providers to make their services more inclusive. Some specialists see an important part of their role as being to educate and lobby mainstream voluntary organisations to better address the needs of minority groups:

'We might make some of the CVS services more accessible because of our relationship with them. But you need specialist organisations to ensure that the mainstream organisations are considering the needs of and getting to BME, LGB etc.'

In some local areas, infrastructure organisations work together to make sure the needs of all local groups are addressed:

'The CVS works well with the BME alliance to ensure there is no duplication. They are showing that by fostering a good partnership you can serve the needs of voluntary and community organisations across the patch – they are showing that it can work.'

2.5.4 Networks

Linking frontline BME or LGBT groups up with each other via a network helps to address isolation and burn-out. Managers of frontline BME and LGBT groups value the opportunity to share experiences with others in a similar position. In rural parts of the UK, virtual networks can be a cost-effective way of providing support to groups across a widely dispersed area. We explore one such example in more detail in chapter 4 of this report.

3. Bigger questions

In working on this project, a series of ‘bigger questions’ that surrounded or arose from the issue of identity-based support became apparent. We have called them bigger questions because they go beyond the scope of our research but are relevant to its findings.

3.1 Equality

“The relationship between identity, representation and equality is neither inevitable nor irrelevant, but occasionally contradictory and always complex.” Gary Younge⁹

3.1.1 History of identity-based organisations

Identity-based organisations have often developed in response to discrimination against minority communities as a means of challenging and protesting, providing services where the mainstream has failed and developing self-identity and community solidarity. Such organisations have been at the forefront of significant campaigns for social justice and have driven the UK to adopt the equalities legislation and practice we have today. Whilst campaigning has had a role in progressing legislative responses to issues of discrimination, legislation in itself has not had the expected impact of securing greater equality of outcome. In the last ten years a series of reports examining equalities policies and approaches have expressed concerns about the limitations of an equalities approach based on single identity.¹⁰

3.1.2 Single identity

The Commission on Integration and Cohesion gave four reasons why single identity funding has become the funding policy of most public bodies and charitable trusts: unmet need, discrimination, culturally appropriate services and demand from the voluntary and community sector. However a report from the Community Development Foundation recommends that funding decisions should be based on an organisation’s ability to deliver outcomes rather than on its identity.¹¹ A recent report from the Institute of Public Policy Research criticises ‘flag waving by various strands calling for attention to their own issue’ and argues that identity-based campaigns are outdated because of the huge variations between individuals in a group collectively labelled as black or gay.¹²

Despite what some commentators feel is the absence of convincing evidence, matching ‘like with like’, referred to by Ted Cantle as single identity funding¹³,

⁹ Black presidents and women MPs do not alone mean equality and justice, The Guardian, 15 March 2010

¹⁰ Our interim report reviews these reports in more detail, including the debate around funding for single-identity groups.

¹¹ Funding for Single Identity Groups, Community Development Foundation, May 2008

¹² You can’t put me in a box: super diversity and the end of identity politics in Britain, IPPR, January 2010

¹³ Community Cohesion - Report of the Independent Review Team, Ted Cantle, 2001

has been standard practice for decades, justified by equality and diversity strategies. Our research was not questioning the legitimacy of identity-based service provision by frontline groups, but a discussion about identity-based organisational development support often led into this wider debate. Some interviewees argued that funding should be targeted to redress past or current disadvantage and the latest Equality and Human Rights Commission guidance points out that funding only mainstream provision can reinforce inequality and disadvantage¹⁴.

BME and LGBT groups at the Northern Ireland focus group felt very strongly that they would not survive without ring-fenced funding in the current political climate. Identity-based infrastructure helps communities to help themselves and in that way achieves an outcome in itself:

'There is something about being a community – helping ourselves – it feels more empowering.' LGBT frontline organisation

On the other hand, some of those we spoke to raised concerns about the negative consequences of singling out groups for special treatment:

'There is a belief in the minority sector that if you see a community centre with your name on you think it is just for you. And then if you don't see one with your name on you think "where is my centre?". We have to think about what this means for our sector.' Focus group participant, North West of England

'As soon as you get everyone in a room to talk about their needs it becomes competitive and people claim more needs over someone else based on their identity and so people talk about these things in a competitive way.'

LGB infrastructure organisation

3.1.3 Targeting or tokenism?

Many funders have adopted funding policy or practice which includes an identity-based funding approach as a means of addressing inequality. However this is not always seen positively. One of our interviewees; a BME youth group, was very critical of targeted funding:

'It's the BME thing. It starts young. You're told you need to work harder because you are black. You're conditioned from a young age that your skin is a disadvantage and you need special favours and it just holds people back.'

Another interviewee from a generic infrastructure organisation felt that it was a mistake to offer separate infrastructure as a 'sop' to minority groups, whilst a participant at the Scotland focus group expressed frustration with a tick-box approach by funders:

'Funding one BME group and one LGB group is not equality.'

¹⁴ Cohesion and Equality: Guidance to funders, Equality and Human Rights Commission, October 2009, quoted in our Interim report

A specific example cited in Northern Ireland was of a funder who claimed to have met the needs of the LGBT community although they had funded only one project, which worked exclusively with adult gay men on health issues.

Accountability for equality is expressed and measured in terms of 'representation'. Questions will continue to be asked about whether all 'equality strands' are being fairly treated and whether the allocation of resources is fair, equitable and transparent. If diversity in grants awarded is the only measure of equality, there will continue to be confusion about the purpose of funding for voluntary sector infrastructure. Is allocation of funding intended to 'demonstrate' equality or to ensure the delivery of high-quality, sustainable organisational development support across the whole of the voluntary and community sector?

3.1.4 Mainstreaming versus empowerment

In all spheres there has long been a tension between mainstreaming equalities and separate, self-controlled, self-organised provision. Some argue that separate provision risks leaving equalities as an add-on, while others argue that mainstreaming equalities risks taking it out of the hands of those who know how to achieve it best. The challenge is how to ensure that generic third sector organisations are properly fulfilling their obligation to serve the whole community – a legal obligation for their public sector funders – while recognising where and in what circumstances specialised support might be required. Another challenge is balancing the legitimate desire for self-organisation amongst organisations that can clearly see that systemic inequality still exists on the one hand against the need to justify funding decisions in an increasingly competitive environment.

In a recent policy statement, one national generic infrastructure organisation asks a question which is very relevant to this study: *How can generalist organisations develop and deliver specialist services without undermining the 'run by and for' principle at the heart of equalities working?*¹⁵

3.1.5 Different needs within identity-based groups

It has long been argued that minorities within minorities can 'fall through the cracks' of a single identity or 'strand' approach to equalities. The National Equality Partnership reports, for example, that while LGBT groups working with older lesbians and gay men would go to age-related charities for support, BME LGBT groups said they were unlikely to approach BME support organisations¹⁶.

We found examples of identity-based organisations making particular efforts to address the needs of minority groups within their remit in a way that generic organisations setting up specialist services often did not.

¹⁵ Strong independent roots: Local infrastructure, leading voluntary action
NAVCA January 2010

¹⁶ Supporting Equality Groups, National Equality Partnership, 2008

3.1.6 Pan-equality

Pan-equality, or working together across equality strands, is clearly a hot topic.

'Working together to recognise and address commonalities of exclusion, inequality and disadvantage is crucial and not enough organisations do this.'

Generic infrastructure organisation

Although many of our participants supported that sentiment, there was a lot of anxiety about how pan-equality would work in practice. A BME women's group felt they might be excluded because they do not work with men. An LGBT frontline group feared that sexual orientation would always be at the bottom of the pile. Others expressed the view that pan-equality would perpetuate existing inequality and tension:

'Isn't it just a buzz word – are there any examples of it really working?'

Participant at Scotland focus group

3.1.7 Rural dimension

Rurality itself leads to exclusion because of transport difficulties and remoteness from mainstream services. Most voluntary sector infrastructure organisations are based in urban centres and do not have the resources to provide effective support to groups in remote rural areas.

'Newtown, the largest town in Powys, is 89 miles from Birmingham. It might as well be on the moon.' Generic infrastructure organisation, Powys

Providing adequate support to widely dispersed community groups could be hugely expensive unless new approaches are developed. An example was given by an identity-based Scottish infrastructure organisation of paying £300 to visit a group in Orkney.

One respondent from Scotland felt that rurality is such a significant driver of exclusion that it should be another equality strand – presumably meriting the same attention as race, disability, gender and so on.

3.1.8 Northern Ireland context

LGBT and BME groups in Northern Ireland are working in a very specific legal and policy context in terms of equality. Public bodies have a duty to consult with communities representing nine 'strands' of equality enshrined in legislation – which puts enormous pressure on a very small and under-resourced BME and LGBT voluntary sector. An LGBT frontline organisation at the Belfast focus group said they were sent a new consultation every week – the latest being from the Fisheries Board. At the same time, they felt that sexual orientation was written out of equality policy because priority is given to working across the sectarian divide.

Race relations legislation came much later to Northern Ireland than the rest of the UK and there is no government department with responsibility for race relations. The lack of recognition and lack of funding for work with BME or LGBT communities is the main concern of the BME and LGBT voluntary

sector in Northern Ireland. The LGBT sector particularly felt the absence of an umbrella body providing a 'voice' and lobbying for the needs of the LGBT community and the groups serving them. Talk of pan-equalities in this context is perhaps premature, as it was in rural parts of Wales where there is no critical mass of BME, LGB or other identity-based groups.

3.2 Questions for funders

Our research raises questions about the role of funders and their influence on the shape and function of the voluntary and community sector.

3.2.1 Open funding programmes versus targeted approaches

When funders set up a new programme to address unmet need, do they issue an open invitation for applications, or invite applications only from organisations with a relevant track record?. Many BME and LGBT infrastructure organisations argued for a more targeted approach, as they felt that open programmes give an advantage to organisations who may be better at writing applications but do not necessarily have a track record of working with BME or LGBT communities.

3.2.2 Typecasting identity-based organisations

Funders assume that identity-based organisations are interested in or capable of working only within 'their community', which restricts the funding available to them. Questions of skills, legitimacy and track record do not appear to be asked in the same way of generic providers:

'There is funding for generic organisations to work with individuals from different backgrounds but not the other way round. It is a crazy mixed-up situation at the moment.'

LGBT frontline organisation, Northern Ireland

3.2.3 Scrutiny, monitoring and evaluation

Large national funders such as the Big Lottery Fund find it difficult to validate claims made by applicants and grant recipients. Many of the groups we spoke to wanted to see more validation of the claims by generic organisations that they support BME and LGBT groups, making better use of local intelligence. Unless infrastructure providers monitor the diversity of groups using their services, however, it may be difficult to establish firm evidence. And it is important to remember that scrutinising claims in application forms more closely will add to administrative costs (and so away from grants).

3.2.4 Encouraging joint working

Should funders look for evidence of organisations working together to meet the needs of different communities, rather than investing in new support organisations? This could help avoid duplication, but means being able to spot genuine partnerships, which in themselves take money and effort to run.

Funders could go further by requiring partnership working as part of their funding criteria for organisational development support projects or by setting

up programmes specifically for joint working initiatives. Such an approach raises questions about the remit of funders – is it their role to direct the way in which voluntary organisations operate?

3.2.5 Strategic approach between funders

Funders have a big influence on the shape of the voluntary sector, but do not always appear to be acting strategically:

‘It’s like trying to plan a garden from an aeroplane. They want some red over there, they want to make that bit over there blue, but they have no idea what has already been planted, what survives and what doesn’t and whether what they want to go where is sustainable.’

LGBT infrastructure organisation

Our research raised the question of whether funders should work together to establish funding priorities so that there is a more coherent and strategic approach to meeting need, especially in the field of infrastructure support. There would obviously be winners and losers to a more joined-up approach and again the development of a coherent strategy would take time and resources, and would necessarily favour a funder-led vision of support.

3.2.6 Sustainability

Concern about sustainability was a strong theme running through all the research, particularly in the current economic climate. This meant most people were against funding for new organisations:

‘The emphasis should be on enabling or creating change in existing providers, not creating new ones. Funders should be investing in organisations that will survive.’

Generic infrastructure organisation

Short-term funding has led to a lot of ‘stop-start’ initiatives and can mean that groups are set up to fail. At the same time, funders have to be realistic about the likelihood of organisations securing alternative funding to continue projects. There is a continuing question about who will pick up core funding for voluntary sector infrastructure – whether generic or identity-based. There is also concern that existing support for some groups will be lost if funders set up programmes to meet the support needs of other identity-based groups which have not previously had ‘their own’ support.

3.3 The nature of organisational development support

2.3.1 Pressure on resources

As one of the national generic infrastructure organisations pointed out, the most popular, and possibly the most effective, form of organisational development support – one-to-one, sustained and tailored to the needs of the individual group – is also the most expensive. Most infrastructure organisations do not have the resources to meet demand, so have to make difficult choices about the level of support they can offer, and to whom.

Anecdotal evidence suggests that the numbers of small group workers, offering community development type or one-to-one, intensive support in CVS has diminished significantly.

In rural areas where delivery costs are higher because of the distances between groups, voluntary sector infrastructure is less well resourced and so under even more pressure.

3.3.2 Responsive or pro-active?

The priority for most groups is help in securing funding – this came out clearly in the secondary research as the main issue for BME and LGBT groups and was reinforced loudly and clearly in the primary research. Some activities and organisations are more likely to attract funding than others, which raises questions about the role of infrastructure providers in managing expectations.

Some generic providers adopt a neutral stance, providing support to any group which requests it without questioning their legitimacy or the area or type of support they want. Others will be more pro-active, identifying groups they feel need support and challenging groups if they do not feel their plans for growth are realistic or appropriate. If there are several youth organisations targeting the same community in a local area, for example, should an infrastructure organisation be supporting them to secure funding individually or encouraging them to join forces? If a group with a weak constitution and no financial procedures insists it only wants help in making funding applications and isn't interested in improving its governance, should the infrastructure organisation support them in making applications?

3.3.3 Models of development

There can be a mistaken assumption that all voluntary and community groups are aiming for the same end point – to employ paid staff, occupy their own premises and be in a position to compete for public service contracts. Comparisons are made between parts of the sector serving different communities, without questioning whether the needs are equivalent:

'The LGBT sector is where the BME sector was ten or fifteen years ago – fragmented, volunteer-driven, massively under-resourced, limited capacity, primarily self-organising grassroots organisations.'

Generic infrastructure organisation

Several of the LGBT infrastructure organisations raised the issue that some LGBT and BME groups were primarily social in purpose and simply needed small levels of funding to secure access to safe meeting spaces. While performing an important health and well-being function, they do not necessarily need professional structures and policies and do not aspire to compete for contracts or employ staff.

3.3.4 Questions of choice, quality and value for money

In the context of limited resources, there is a tension between increasing the range of providers and quality of service. Some frontline BME and LGBT groups may prefer to get support from an organisation with the same identity,

but does this mean funders should resource provision which may duplicate a service that is already available from a generic provider? A respondent to the online survey expressed concern that BME and LGBT organisations were being short-changed, because identity-based infrastructure was inevitably less well-resourced than generic provision so cannot provide support of equivalent quality. Although choice is valued by frontline groups, it may not always represent value for money in terms of outcomes. On the other hand, quality requires an understanding of equality issues.

3.3.5 Who decides what support is needed by frontline groups?

Some frontline groups felt funding should go directly to them so that they could buy relevant support as and when they needed it. However, infrastructure providers are often able to identify needs which a frontline group itself may not be aware of, such as in governance or business planning.

3.3.6 Links to other infrastructure functions

Although organisational development support is identified as a distinct infrastructure function in the COGS model (see section 1.3), in practice many second-tier organisations deliver support across these functions. This makes it difficult to isolate organisational development support from the other functions.

Some groups deliver organisational support and just happen to be 'BME' or 'LGBT'. Some do not aim to provide collaboration or representation functions; others set themselves up with a representation function but end up delivering organisational development support.

In summary, organisational development support is a slippery concept, meaning different things to different organisations and in different parts of the UK. Identity-based infrastructure organisations are perceived as being able to deliver particular infrastructure functions better than others. This study seeks to unpick these assumptions in order to better understand the infrastructure 'marketplace'.

4. Different partnership models in practice

This chapter explores different models of partnership working between generic and identity-based infrastructure organisations to improve organisational development support to frontline BME or LGBT groups. We followed up examples mentioned during the telephone interviews or focus groups. Please note that the examples are at different stages of operation so we cannot always report on their impact. The chapter concludes with a brief consideration of the benefits that joint working approaches might bring to each party.

4.1 Brokerage to improve support for lesbian and gay groups

This section describes two initiatives involving the Consortium of Lesbian, Gay and Bisexual and Transgendered Organisations (the Consortium). These initiatives are relatively new but appear to be working effectively. Challenges could arise if other partners have unrealistic expectations or perceptions of the Consortium's size and influence with its membership.

Encouraging LGBT groups to use their local CVS

The Consortium found that many of their 430 members were not using the services of their local Council for Voluntary Service (CVS) or equivalent body, and that CVS sometimes referred LGBT groups to them for support that they would provide to other groups directly. The Consortium wanted to enable more CVSs to provide support to LGBT groups on generic issues such as finance, performance and governance and to ensure that the Consortium can refer LGBT groups to CVS confidently.

The Consortium has worked with sub-regional CVS networks in London, providing training, advising them how to engage with LGBT groups and flagging the profile of LGBT groups requiring services.

The Consortium would like the brokerage to be transitional as it feels that LGBT groups should be using their local infrastructure more than the Consortium for support on generic issues such as finance, performance and governance. The Consortium sees its own role as specialist support on policy and representation. In practice, the brokerage role continues because new staff or volunteers in LGBT groups tend to come back to the Consortium as a starting point.

The Consortium works informally with the National Association for Voluntary and Community Action (NAVCA) to support this initiative. The Consortium can also raise any concerns that its members may raise about generic provision with NAVCA.

The Consortium makes 30 to 50 referrals a year to CVSs, while receiving around 20 to 30 referrals a year from CVSs. Limited monitoring to date of the

experiences of groups involved means that there is a lack of hard evidence on the impact of this arrangement.

Use of LGBT brand promotes access to financial services provider in London

Community Accountancy Self Help (CASH) wanted to work with the Consortium because LGBT groups were under-represented in their client group and were difficult to identify.

CASH approached the Consortium to be one of several partners in CASE (Community Accountancy Social Enterprise), which offers groups free community accountancy support for 6–12 months. This is a formal partnership, in which the Consortium has agreed to refer at least five LGBT groups to CASH over the life of the project. The Consortium receives only nominal funding for this role and the work is mostly incorporated within core activities.

The Consortium identifies potential referrals during an informal needs assessment of groups coming to them for support. They have made two referrals since the project started in October 2009. One LGBT organisation, which had previously relied on a volunteer to do its accounts, has had financial training for all their trustees, support in switching over to a new accounting system and free book-keeping support for 12 months. The Consortium's Chief Executive feels that the partnership approach has helped to raise the profile of LGBT issues within the wider voluntary sector: *'The links cultivated over the last five years are now providing opportunities to make sure that third sector agendas specifically include LGBT – we've managed to get on the radar at last.'*

4.2 Targeting BME groups via a trusted intermediary

Voice4Change identified the need to improve performance within the BME voluntary sector, while the Performance Hub and the Quality Standards Task Group wanted to improve reach into equality organisations, particularly BME groups. Charities Evaluation Services (CES) commissioned a small research project looking at what approach would have the greatest impact on BME organisations, which informs their delivery model with Voice4Change.

CES is the lead partner and accountable body for the resulting project, which targets voluntary organisations through infrastructure providers, including BME organisations through Voice4Change. In practice:

- CES delivers direct one-to-one support to frontline BME groups on strategy and business planning, which helps them to secure funding.
- Voice4Change has produced a series of plain English fact sheets on performance management with successful examples from BME frontline organisations.

- CES supports Voice4Change members to deliver performance management advice and training to other BME organisations.

CES feel that by working with Voice4Change, performance management is being raised with organisations that may not have considered it before. Identity-based infrastructure organisations are acting as a 'trusted intermediary'; able to reach frontline groups and giving credibility to the messages. CES do not feel that they, or small equalities teams or individual workers in any generalist organisation, can ever expect to have the same reach or credibility as an identity-based organisation. The organisation is now working with the LGBT Consortium to target other identity-based groups.

'This Programme has been a great success but should not be seen as a reason to remove choice.'

Tim Wilson, Director of Performance Programme, CES

4.3 Community development approach complements services provided by a CVS

Southall Community Alliance (SCA) is a community-based capacity-building organisation working in part of the London Borough of Ealing. While not set up specifically as an identity-based organisation, the vast majority of its user groups are from black and ethnic minority communities and were originally set up as self-help advocacy groups. SCA has built relationships and trust by listening and responding to the concerns of local groups and this reputation is passed on by word of mouth. It attracts groups that might not be comfortable going to an unfamiliar organisation; many groups come to SCA for support language, communication or cultural issues.

'When a place is in your local area and you can go there and see lots of different people there, it feels more like a place where you might be welcome.'

When groups first come into contact with SCA they complete a light-touch application form which helps to identify their support needs. Local research amongst BME organisations identified funding advice and access to accommodation as priorities for support.

Although the support worker is called a fundraising officer their role is in practice that of a development worker. Once groups have a better idea of a funder's requirements they recognise that they need support in other areas:

'Many of these organisations realise that to do all of the things that they want to they might need to make things a bit more formal... Often they are run entirely by volunteers.'

SCA runs a community building with a number of hot desks available free to local groups. Up to 40 groups use this service. This practical facility also encourages groups to work collaboratively, share resources and develop mutual understanding, which supports community cohesion.

SCA is in close contact with two other infrastructure providers in the borough – Ealing CVS and Acton Community Forum. Ealing CVS is the largest of the three, covers the whole borough and is more focused on supporting organisations that have paid staff.

This results in a pattern of infrastructure support that meets the needs of different sizes and location of groups, enabling a local, community development response where most needed. The three agencies meet regularly to consider who they are working with and to identify any duplication or obvious gaps. SCA's local focus works well at ensuring that the concerns of local BME groups are taken into borough-wide partnerships, enabling other organisations to better address their needs.

'Funders need to recognise that some things can be achieved at a local level that can't be achieved at a borough-wide or regional level.'

Janpal Singh Basran, Community Development Manager, Southall Community Alliance

4.4 Improving support for BME, LGBT and disability groups in a rural community

Cumbria Equality Resource Centre (CERC) was established by three core partners – AWAZ (set up to support BME organisations in Cumbria), Cumbria Disability Network and OutREACH Cumbria (which focuses on sexual orientation). Rather than focusing on development, CERC aims to ensure that equality and human rights are integral to the work carried out by organisations in all sectors. The three organisations had a history of working together to deliver training and to support statutory organisations with equality impact assessments and legal compliance.

In response to increased emphasis on cross-strand equality work, the organisations formed a partnership, resisting pressure to merge into one organisation. They have co-located and AWAZ Cumbria is the lead partner for their main joint initiative – the Mainstreaming Equalities Project, in which Cumbria CVS is also a partner.

Organisational development support and mainstreaming equalities are central to the project, which aims to:

- develop the sustainability of the three organisations
- support and capacity-build small, under-represented groups
- embed issues of equalities, diversity and human rights in the voluntary and community sector
- develop a legacy from the project in the form of online resources.

The project runs for three years and started in October 2009 with the recruitment of three community development workers. One officer has an expertise in BME communities, another in disability and the third in LGBT communities. Each officer is the key link for groups from their 'specialist'

community, but each may provide support to any beneficiary group according to their individual skill-set, thereby giving groups access to a wider range of expertise. Each partner recognises that they need an awareness of the specific issues a community might be facing – for example knowing safe and comfortable meeting places. CERC also refers groups to the CVS where appropriate.

By employing officers with separate specialisms, CERC maintains an overview of all three equalities areas and a 'real link' to each community. Groups in these communities are often transient. Inside knowledge of a community makes it easier to find groups and is very valuable to all partners. Groups appreciate consistent contact with one person with an overview of their needs. Helping groups to establish themselves and sustain interest and capacity should reduce the number which set up and then disappear.

CERC believes that the support needs of the groups they work with are very similar to other voluntary and community groups but the difference is in approach and delivery. CERC also advises Cumbria CVS on how it can improve the accessibility of its services. Under Capacitybuilders' Improving Reach programme the two groups collaborated to develop workbooks on governance and leadership. CERC brought an understanding of the strengths and weaknesses of identity-based groups; the CVS is developing business models for sustainability which will be very helpful to groups that CERC works with.

4.5 Raising awareness of equalities in a rural setting

The Scottish Council of Voluntary Organisations (SCVO) set up the Highlands & Islands Equality Forum (HIEF) in 2002 to raise awareness of equality and diversity in the Highlands and Islands, to work with the mainstream to prevent discrimination, and to create a positive environment for groups and individuals who currently face isolation and discrimination.

At the outset, equality issues were rarely discussed and there was little contact between groups. It was assumed that frontline BME and LGBT groups would be in touch with their local CVS but no one knew how many existed or where they were. HIEF found that people identified 'incomers' as being an excluded group, but did not recognise issues facing BME, LGBT and disabled communities

Rather than offering direct development support, it provides information, advice, training and facilitation of meetings, seminars and brain-storming events. It brings rural groups together and helps people in rural communities to network, develop their own solutions and share resources. HIEF facilitates networking across the sectors so that the voice of the Highlands and Islands is heard and can affect strategic policy more widely.

The Forum involves a number of partners, its membership and funding sources having increased over time to include all sectors. But voluntary sector

partners had initially identified low levels of awareness of the equality agenda. Over time, HIEF has deepened its understanding of the particular challenges of working on equalities in a rural context and has been sufficiently flexible in its approach to be able to respond to changing needs.

HIEF won a contract from EHRC in 2008 to develop the Scottish Rural Equality Network (SREN), whose work will enable community groups and individuals to take equality forward in their own local areas. HIEF are organising a national conference which will involve a central 'hub' and speakers in Inverness, but everything will be filmed and broadcast live across rural Scotland over the internet. There will be an opportunity for all viewers to break off into their own local discussions, as well as to make contact with the conference. An online discussion forum enables groups to communicate with and support each other. This sort of innovation and use of technology is invaluable to rural equality work.

The Forum's strong focus on rural issues and identity has helped to bring together different organisations, strands and sectors, enabling it to act as an independent facilitator, for instance by bringing different BME groups together.

HIEF has a significant policy role, using its expertise on rural equality issues to provide a voice for the Highlands and Islands at a strategic level. Rurality has become recognised by the Scottish Government and the EHRC Scotland as a theme within the equalities agenda. Issues such as transport, perception of personal safety and the visibility or invisibility of certain communities have been identified as particular areas of focus in a rural environment – affecting organisations as well as individuals.

4.6 Enabling refugee communities to use mainstream support

A nationwide survey recognised the importance of the role of community organisations in supporting refugees and asylum seekers. It also highlighted a need for infrastructure support as RCOs were not as successful as other voluntary and community groups in gaining funding.

The Refugee Council and Refugee Action responded by establishing the five-year Basis Project across England, which aims to:

- provide direct support to refugee community organisations (RCOs) on organisational management;
- to help funders and second-tier organisations to understand the needs and context of RCOs; and
- improve the ability of second-tier organisations to support RCOs.

The project aims to work with 250 RCOs and ultimately to '*work itself out of a job*'.

The partners work closely to manage the project with a central support team split across the two organisations. Twelve organisational Development

Officers work in the regions. Each partner has its own organisational style and feels that the combined approach adds value.

The project mostly works directly with RCOs – providing intensive one-to-one support on governance, financial management, fundraising, project development and management. Groups eligible for the programme receive a detailed needs assessment and agree a development plan with the organisational development officer. This plan often involves support from generic providers. The project also provides open training and ad hoc support for RCOs. It has developed toolkits that are relevant to RCOs in some of the areas mentioned above.

Local need determines how project staff work with generic providers. Local staff build up knowledge of provision and its accessibility and relevance to RCOs. This enables appropriate referrals, which in some cases will involve a personal introduction to the generic provider. The project has found that where there is not a critical mass, CVSs do not adapt their services or reach out to RCOs. The project works with them to change this, and have found that direct discussion between generic providers and RCOs can effectively clarify expectations.

The project encourages generic providers to empower groups. So rather than responding to immediate requests for help with funding applications, the provider will question groups, explore their needs and then support them in such a way that they will learn how to meet the need themselves or find appropriate support in the future.

So far, the project has identified the following lessons from its experience:

- It is more effective to put on a joint event with a generic support organisation, rather than taking an 'expert' stance.
- Work in rural areas is particularly important, as there may not be many RCOs. Generic providers in these areas need more support to encourage them to adapt their services and reach out to these isolated groups.
- Some generic support organisations do not realise what they need to do to make their services accessible and can find it difficult to work with very different leadership styles. (This point reflects findings reported in chapter 3.)
- The project feels that there will always be a need to broker the provision of support. Staff turnover in generic providers results in a loss of capacity to support RCOs.
- There are many ways that funders can make their programmes more accessible to RCOs. For instance, clear feedback can turn what would otherwise be a simple rejection into organisational development.

4.7 Summary of benefits to each party

The following table summarises benefits to various parties of the types of partnership working discussed in the case studies.

Generic provider	Identity-based provider	Frontline organisation
Services are more relevant and accessible	Frees up time to focus on specialist work that no one else is doing	More aware of the range of support services available
Up to date information about BME, LGBT and other groups	Relationships established with mainstream organisations, strengthening their policy and representation work	Access to a wider pool of expertise and professional support
Better knowledge and understanding of the context in which BME and LGBT organisations operate	Improved understanding of the wider policy context	Better placed to secure funding as a result of support provided to them on organisational development issues
Better understanding of the strengths and weaknesses of different community groups		Access to relevant guidance material
Improved equalities practice		Peer support and improved understanding of other frontline groups
Increased take up of services by 'hard-to-reach' groups		Better representation of their interests to mainstream providers

Many of the benefits identified were common to all the examples so are likely to be more generally applicable. Clearly there are costs involved in terms of the time it takes to establish the relationships and to adapt materials to suit the needs of different target groups. In the longer term, however, joint working should prove more cost-effective and sustainable than setting up a multiplicity of parallel services to support the needs of various groups.

The identity-based infrastructure provider's involvement is critical because they have specialist knowledge about their sector and trust and credibility with the frontline groups. In both of the rural examples, where there are fewer identity-based groups, the partnerships are working with statutory service providers as well as the voluntary sector to raise awareness of equality issues. In all cases, working together has minimised duplication and so demonstrates better use of resources. It is interesting to note the overlap between organisational development support and representation and policy work within many of these examples. Infrastructure organisations can use the intelligence they develop through delivering practical support to frontline

groups to lobby on their behalf. At the same time, the working relationships they establish with mainstream organisations helps to ensure that their issues are presented to wider audiences.

5. Conclusions

5.1 Complexity

Conflicting views and experiences, different regional and country contexts and disparate provision of organisational development support all make it hard to draw conclusions that would apply across the UK. The funding of minority ethnic, LGBT or other marginalised groups is not just based on need or on the most pressing equality challenges – it responds to public policy and political considerations in different parts of the UK. In determining what and who is supported, funders make assumptions about the experiences of organisations that work from within marginalised communities, as well as about the role that those groups and the role they can play in making an impact on inequality. The answer to the question about who is currently best-placed to support frontline BME and LGBT groups therefore depends to an extent on the national, regional and local context.

5.2 Discrimination and disadvantage

BME and LGBT groups need similar support to any small, under-resourced and overstretched voluntary and community group, but working with discrimination and disadvantage presents additional challenges. While some of these challenges are specific to sexual orientation or to ethnicity, many are likely to be shared by frontline groups from other disadvantaged communities. Generic infrastructure organisations need to demonstrate that they understand these challenges if they want to provide an effective and inclusive service. Barriers can be practical – such as cost, distance or opening hours – or result from (mis)communication and (mis)perception.

5.3 Pressure on resources

Many BME and LGBT groups do not feel that the generic ‘one-size-fits-all’ approach to support offered by mainstream infrastructure organisations is meeting their needs (but again, this feeling is unlikely to be limited to those groups). Outreach is essential to reach more marginalised groups and one-to-one, tailored provision by a dedicated support worker or mentor is the most valued type of support. Some frontline groups have been able to get effective support from a range of providers, but demand far outstrips supply because of the costs for all involved.

5.4 Challenges in rural communities

LGBT and BME groups in rural communities face additional challenges because of the lack of a local critical population mass, isolation and more overt prejudice. Yet voluntary sector infrastructure in rural areas is less well-resourced overall and more costly to provide.

5.5 Issues with current support provision

The array of organisations providing organisational development support is confusing, particularly for small groups. There is confusion between different infrastructure functions as well as confusion and conflict about the role and remit of different providers. Identity-based infrastructure organisations set up

to represent the interest of BME or LGBT groups have taken on organisational development support for their members because they understand the challenges they face. They tend to have better reach into marginalised communities, but do not have access to the same resources as generic providers, which makes it harder to provide an equivalent level of service. As well as strengths, we identified a series of challenges facing both identity-based and generic providers in meeting the needs of frontline BME and LGBT groups.

5.6 Evidence gaps

Evidence to quantify gaps in provision for BME and LGBT groups is difficult to come by, because few support providers monitor organisations using their services by ethnicity or sexual orientation, and it may not always be practicable to do so. There is anecdotal evidence of good and bad practice by generic as well as by identity-based providers, making it wrong to conclude that one or the other is better-placed to support frontline BME or LGBT groups. Across the board, people called on funders to look for evidence of reach, track record and outcomes.

5.7 Desire to see more coherence

We found a remarkable degree of consensus on the need to improve the coherence of support provided to frontline groups, particularly in the light of diminishing resources. Across the board, people have welcomed this study because they want to see a more open and honest debate on what the solutions should be, based on better evidence of what works.

Most organisations recognise that it would be unrealistic, unsustainable and unnecessary for every “equality strand” to have its own organisational development support. There is a marked convergence of opinion that it is more important to invest in skills, technical expertise and specialist knowledge than it is in ‘identity’.

Setting up new organisations to address unmet need is not sustainable in the current economic climate, so other solutions must be found to improve support for groups that are currently missing out.

5.8 Working together to improve provision for frontline groups

Joint working between identity-based and generic infrastructure can improve access to support and reduce duplication. Partnership working presents real challenges in an increasingly competitive funding environment but we have identified promising examples at local and national level. These arrangements are relatively new and yet to be formally evaluated, but there is clear evidence that LGBT and BME infrastructure organisations can use the trust they have with frontline groups to broker access to mainstream support. Partnership working benefits generic organisations, identity-based infrastructure organisations and frontline groups alike.

5.9. Different local contexts

There are distinct national differences and regional and geographical differences, some of which result from historical patterns of funding and political support for addressing issues associated with ethnicity and sexual orientation. Where there are very few groups and a hostile political environment, the priority is to lobby for better recognition and resources rather than to look for partnerships with other infrastructure providers.

5.10 Vision

A vision emerges from our research of more coherence in voluntary sector infrastructure provision. In this vision, funders would work together to invest in infrastructure support in which generic providers effectively supported the development needs of *all* voluntary and community organisations at a local, regional and national level, with identity-based providers funded to undertake community development work with new groups. Part of this would involve a brokerage and bridging role for LGBT and BME frontline organisations to feel confident in using generic providers. This would be coupled with a strong voice, representation and advocacy vehicle for identity-based organisations that would enable them to lobby for access to funding and support – including working with mainstream support providers to educate them about issues facing BME and LGBT groups.

6. Recommendations

1. Improve the coherence of voluntary sector infrastructure at local, regional and national level.

- Funders and providers should define more clearly what they mean by 'organisational development support'. A menu of activities setting out objectives, competencies, quality thresholds and delivery expectations should inform funding decisions.

2. Allocate funding on evidence of need rather than representation.

- Rather than assuming that each equality strand needs its own organisational development support, funders should identify gaps in provision based on evidence of local need.
- Funding for outreach and one-to-one advice should be prioritised as this improves support to groups working with marginalised communities.
- Organisational development support must take account of additional challenges facing voluntary and community organisations working with minority communities in rural areas.

3. Drive up the quality of organisational development support.

- Any definition of quality should include awareness and understanding of discrimination and disadvantage.
- Funders should invite those with proven track record to scale up and extend their provision rather than investing in new organisations. Benchmarks and quality standards for voluntary sector infrastructure could be extended.
- The presence of a strong voice to advocate for the interests of marginalised groups will drive up the quality of provision by mainstream agencies.

4. Improve the inclusiveness of generic provision.

- Generic infrastructure organisations should recognise that frontline groups working with communities facing discrimination and disadvantage often need more intensive support.
- Funders should validate claims about meeting the needs of BME, LGBT or other traditionally excluded groups through reviewing diversity monitoring by provider organisations.
- Guidance on inclusive organisational development support should be developed jointly by LGBT and BME frontline organisations and identity-based and generic providers.
- Funders should encourage and invest in shared learning between identity-based and mainstream providers.
- Funding should be available to identity-based infrastructure organisations to act as intermediaries.

5. Invest in partnerships.

- Funders and infrastructure providers should build in realistic timescales and resources for developing and managing partnerships.
- National organisations and funders should promote examples of good practice – with evidence of outcomes.
- Funders should issue grants assessors with guidance about the characteristics of effective partnerships.

6. Stimulate debate

- We all have a responsibility to challenge unsubstantiated claims by *any* organisation claiming to meet the needs of specific communities.
- It would be helpful to identify and publish evidence about the outcomes of different models of organisational development support in meeting the needs of minority groups.
- The Big Lottery Fund or others may wish to develop practical guidance on how to spot a genuine partnership, how to spot inclusive organisational development support, how to deliver inclusive and effective organisational development support, and on how identity-based and generic providers can work together effectively.

Appendix 1: Participant organisations

The following organisations contributed to the research via telephone interviews, focus groups or the online survey

Aberdeen Council for Voluntary Organisations
Aberdeenshire Council
ACEVO
Active Horizons
Acton Community Forum
Albert Kennedy Trust
All Wales Ethnic Minority Association (AWEMA)
Autumn Rainbow
AWAZ Cumbria
Ballymoney Community Resource Centre
BBC Children in Need
BEMIS (Black and Minority Ethnic Infrastructure Scotland)
Bi Cymru/Wales
Birmingham Voluntary Service Council (BVSC)
Black Women's Health and Family Support
BTEG
Capacitybuilders
Cara Friend
CEMVO
Cheshire, Halton & Warrington Race & Equality Centre
Chinese Community Centre
CIDA (Cultural Industries Development Agency)
Community Development Foundation
Community Foundation Northern Ireland
Craigavon Borough Council
CVO East Ayrshire
Dudhope Centre
Dundee Voluntary Action
East End Asylum & Integration network
East London CVS Network
Edinburgh Voluntary Organisations Council
Evaluation Support Scotland
Federation of Irish Societies
Gaydio
GALOP
Greater Manchester CVO
Gypsy & Traveller Voice, NW
Hammersmith and Fulham Refugee Forum
HAVCO (Haringey Association of Voluntary and Community Organisations)
Integrating Toryglen Community Ltd
Inverness CVS
Islay & Jura CVS
JH Foundations
Kairos in Soho
Lancashire BME Pact

Lancashire Ethnic Minority Women's Network
Lesbian and Gay Christian Movement (LGCM)
Lesbian and Gay Foundation (LGF)
Lesbian Community Project
LGBT Community Development Trust
LGBT Consortium
LGBT Excellence Centre
LGBT Network Stoke on Trent and North Staffordshire
LGBT Youth Scotland
London Friend
London Voluntary Services Council
Manchester Council for Community Relations
Merseyside Network for Change Ltd
MiNET
Minority Ethnic Women's Network (Wales)
Multi Ethnic Aberdeen Ltd
National Equality Partnership
NAVCA
NCVO
Northern Ireland Community of Refugees
Northern Ireland Council for Ethnic Minorities
Northern Ireland Council for Voluntary Action (NICVA)
Nottingham and Nottinghamshire Lesbian and Gay Switchboard
Office of the First Minister and Deputy First Minister, Northern Ireland
One North West
Oxfam
Pakistani Community Centre
Powys Association of Voluntary Organisations (PAVO)
Pride Glasgow
Race Equality Foundation
Refugee Council
Regional Action West Midlands
Scottish Council for Voluntary Organisations
Scottish Highlands, Islands and Moray Chinese Association (SHIMCA)
Shakti Women's Aid
Southall Black Sisters
Southall Community Alliance
Stonewall
Stonewall Cymru
Stonewall Housing
Strathbane Ethnic Community Centre
The Afiya Trust
The Equality Network
The Rainbow Project
Thurrock Racial Unity Support Task Group
Visible Minorities Development Council
Voice4Change
Voluntary Action Fund
Voluntary Action NW
Voluntary Action Scotland (VAS)

Voluntary Action Westminster
Voluntary Sector NW
Welsh Refugee Council
West Midlands Specialist Infrastructure Partnership
Windsor Fellowship

Appendix 2: External reference group

Lindsey Bromwell	Office of the Third Sector
Richard Davey	Capacitybuilders
Jenny Phillimore	Centre for Third Sector Research
Monica Brown	BBC Children in Need
Bob Cant	Independent
Keith Wimbles	Voluntary Action Fund, Scotland
Donna Darlington	Northern Ireland Government
	Voluntary and Community Unit
Avila Kilmurray	Community Foundation Northern Ireland
Steve Bennett	Equality and Human Rights Commission Wales
Ian McHugh	North West Development Agency

Appendix 3: Literature Review: Summary of key findings

Note: The full literature review is available on BIG's website at <http://www2.biglotteryfund.org.uk/coiinterim.pdf/>

Context

1. Policy

- More reports from England, but many likely to have had an impact in the other countries of the UK
- Ongoing debate about whether or not public funding should go to voluntary organisations working with single communities
- Latest advice from Equality and Human Rights Commission is for 'balanced approach'.

2. Funding

- Significant Government funding for voluntary and community sector (VCS) capacity building (£300m to Capacitybuilders and Futurebuilders alone), but focus is on capacity to compete for and deliver public services
- Less funding available for peer support, lobbying or campaigning
- National Association of Councils for Voluntary Action reports decline in funding for Councils for Voluntary Service and other local infrastructure providers
- Funding for specialist infrastructure to support BME and LGB groups (and other equalities), almost always time-limited project funding to support new provider organisations or pay for specialist staff within a generic provider

3. Voluntary and community sector

- High expectations from funders and statutory partners in terms of organisational capacity and business skills
- Increased competition for funding, especially funding that supports the organisation
- Demand from public services for BME and LGB groups to represent their communities and be vehicle for consultation, though rarely funded for this role
- Drive for "active citizenship" especially in disadvantaged communities
- Growth of equalities networks bringing together groups working on ethnicity, sexual orientation and other equalities strands, brings differences in size and capacity into relief
- Growth in variety of infrastructure/capacity building provision, both generic and specialist

4. BME voluntary sector

- Developed in response to racism and unmet need in a highly political environment
- Average BME group funding smaller than most VCS groups

- Role often limited to being providers of specialist services focused on their own communities
- Intelligence about BME VCS inadequate

5. LGB voluntary sector

- Not so long established, often rights based and/or social focus
- Sector very small in size and significant variations across the four countries
- Much smaller average level of funding and less likely to be a registered charity or to employ paid staff
- Lack of sexual orientation monitoring causes problems in evidencing need

Evidence to answer research questions

This section summarises existing evidence to answer research questions identified for this study.

1. Barriers facing VCOs serving communities of interest/Single Identity Organisations (SIOs)

- Lack of funding is always cited as the biggest barrier
- General consensus that support is inadequate, but less detail to explain in what way
- Long list of barriers ranging from time, cost, appropriateness of provision, access, availability of supply to prejudice, lack of understanding or reluctance of funders to prioritise ethnicity and/or sexual orientation
- Many of the above barriers likely to face other VCS organisations, especially smaller ones, but no directly comparative data identified
- Some barriers seem to specifically arise from being part of a marginalised community
- Some conflicting data including one survey suggesting groups with BME and LGB beneficiaries slightly more likely to feel they have sufficient advice and support than other VCS organisations

2. How do BME and LGB support needs differ from those of any small organisation?

- Little specific evidence or comparable data on this
- Funding may be even harder to attract and additional support on this required
- Pressures around sustainability, managing expectations and risk may be particularly felt
- Support is needed to confront and deal with prejudice and discrimination
- BME and LGB groups often need support in managing volunteers and there may be particular human resource issues around staff, volunteers and support for managers
- BME and LGB groups, while being small often cover a larger geographic area and may fall between support provision

- Peer support and learning is highly valued and trusted and information needs to be relevant to their context
- Lack of influential contacts and hard data evidence can impact on credibility and legitimacy

3. How well do generic support organisations deal with these surrounding issues?

- More evidence needed to answer this question
- Poor understanding of the context in which BME and LGB groups operate
- Generic organisations may not be able to encourage, challenge and support BME and LGB organisations to respond to the „niche provider assumptions
- Some generic support organisations may find BME/LGB groups ‘too hot to handle’ as likely to be critical of public services and statutory agencies may fear media backlash (although others have a positive and long track record of supporting such groups)
- BME/LGB groups likely to trust and learn more from their peers
- Gap in evidence of impact of specialist workers in generic support organisations

4. Where to LGB and BME groups go for support?

- Variable, LGB groups less likely to use generic providers
- Growth in membership of CVS and other local support providers by LGB and BME groups although overall numbers are smaller.
- Some LGB groups do not see need/relevance of infrastructure support
- Some BME groups prefer CVS as not seen as their direct competitors
- No evidence on use of specialist provision such as community accountancy
- Refugee groups have specific infrastructure support nationally and regionally

5. Can COGS support functions be separated and provided by different agencies?

- Not considered by existing evidence
- LGB and BME groups highly value peer-mentoring and peer support
- Huge demand for networking and collective influence by LGB and BME groups

6. What influences BME and LGB groups when choosing a support provider?

- Competence and credibility
- Cost, location and accessibility
- Knowledge of what is available and peer recommendation

7. Is there a genuine lack of support provision for BME and LGB groups?

- BME and LGB groups feel there is a lack of support but it is difficult to identify a significant body of hard evidence
- Confidence and expectations of generic support providers is low amongst BME and LGB groups
- Gap for dual identity groups may be more acute
- Lack of monitoring of service users by generic support organisations hinders assessment

8. Can generic organisations provide effective support?

- Dedicated services are often time-limited and not embedded in generic providers
- No hard data on take up or satisfaction levels
- Specialist support providers can provide brokerage service

9. Examples of generic and specialist infrastructure organisations working together to support BME and/or LGB groups

- Collaboration seen as a good thing, but no evidence found about how effective this has been.
- No 'toolkits' found to offer a model of good practice

10. Examples of a two-tier model where specialist organisation acts as a broker to smaller LGB or BME groups

- A few examples identified but were very new, so model not yet evaluated

11. Implications if funders prioritise generic provision of capacity building

- Not explored in any of the reports reviewed.

Conclusions and recommendations for fieldwork

- Organisational development needs often blurred with overall challenges facing groups
- Securing funds was always the biggest need identified.
- Some LGB and BME groups do not recognise they have organisational development needs, although their lack of organisational capacity may be a barrier to them securing funding
- support with business planning and risk management may be a particular need for some groups, as they try to address a wide range of unmet need on very limited resources
- The "user-led" basis of many LGB and BME groups raises particular issues
- BME and LGB groups in areas where the population is smaller/less visible have much more limited access to specialist support
- Legitimacy is affected by the overall lack of data on sexual orientation and currency of data on BME VCS

- The impact of LGB and BME groups is limited by having fewer influential contacts
- Increased expectations and need for LGB and BME groups to enable consultation with communities
- Collaboration between support providers is seen as a good thing but appears to be relatively new and has not been evaluated. We did not find any guidance or toolkits on best practice.
- Short-term, project funding has supported specialist posts in generic support providers, targeting BME or LGB groups or small groups in general, but evaluations or examples of the practice and learning having been mainstreamed was not found
- Little evidence of outcomes of organisational development support, especially for the communities concerned (ie the impact of supporting a BME or LGB frontline group on BME or LGB communities).