

# The Experience of Racism: Black Staff in Social Services

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## **Abstract**

*The paper examines how racism is experienced by Black and minority ethnic staff in social services. Departing from previous approaches using pre-determined definitions, the research is based on self-defined incidents of racism. It provides an insight into personal and structural features influencing perceptions and coping strategies, illuminates different forms of racism and examines the relationship between institutional and personal racism. It is argued that anti-racist policies in social services have so far failed to address the important role of institutional racism, thus leaving power structures intact and perpetuating racism at the personal and organisational level.*

## **Introduction**

A striking feature of racism has been the difficulty in measuring or identifying its operation. This has been partly because of divergence about definitions and concepts, with emphasis on psychological explanations in the past and a greater emphasis on institutional explanations more recently (Ahmad et al, 1998). More fundamentally, however, some have suggested that investigations using this concept will inevitably be reductionist, and contribute little to understanding differing outcomes as a result of the complex interaction of class, gender or even personal preference (Miles, 1993). This has resulted in a number of recent studies focusing as much on the experience of disadvantage as on the experience of discrimination (for example Berthoud, 1998). At the same time, criticisms of the 'anti-racist' movement suggest that Black and minority ethnic communities have too often been seen as monolithic and static victims of racism (Gilroy, 1990).

Investigating the impact of racism continues to be politically controversial. The impetus given to the investigation of institutional racism by the Macpherson Report (1999) into the death of Stephen Lawrence has not necessarily led to an improvement in the viability of studying racism, nor has it helped to articulate the relationship between institutional racism and the expression of racism at the personal level.

The present study examines how different forms of racism are experienced by members of Black and minority ethnic staff in social services. Based on the reports of staff, who themselves defined

whether what they experienced was racist, the study illuminates different forms and dimensions of racism, and comments on the relationship between personal and institutional racism (Bowling, 1998; Dominelli, 1997). Institutional racism not only legitimises and gives rise to overt expressions, it also facilitates rather more subtle, often inarticulate forms of racism. It has now been widely acknowledged that racism is endemic in western society, and that it informs the organisations and practices at every level of society (Bowling, 1998; Dominelli, 1997; Katz, 1996; Penketh, 1998). Commentators refer to the political discourse in Britain, which, as exemplified in the Race Relations Acts, has defined Black and minority ethnic people as a problem for British society (for example Lavalette et al, 1998).

Institutional racism within organisations can give the authority of everyday common sense to certain practices and behaviours, which are perceived by Black and minority ethnic people as discriminatory. Our study will show that everyday comments or behaviour connect with institutional factors and power structures that amplify the discriminatory experience. Indeed, covert and subtle forms of racism may have a much greater adverse impact than explicit comments. The relationship between institutional and personal racism may also help to illuminate the phenomenon that people who express racism commonly deny intent. As has been suggested, attitudes and behaviour may perpetuate racist values without people 'necessarily holding a racist ideology themselves' (Tizard and Phoenix, 1993: 89).

Any analysis of the experience of racism, particularly when founded on self-defined experiences, must recognise the resistance of Black and minority ethnic people to the imposition of power (Sivanandan, 1990). Thus, we examine closely how Black and minority ethnic staff perceive racist comments, while documenting possible resistance to such effects. One form of resistance may be reluctance to acknowledge racism or its impact in any public arena, an issue that we consider in relation to staff who did not report racism. Thus, resistance may lead, at the very least, to under-reporting of racism or, worse, to the 'explaining away' of racist intent.

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In the light of the complexity of both the expression and the perception of racism, we will take issue with current policies designed to combat racism, e.g. the approach of zero tolerance currently employed in the NHS campaign against violence. If racism is perpetuated by and helps to perpetuate institutional norms and practices, it must be tackled at the institutional level too. This calls into question the effectiveness of policies designed to individualise and criminalise racism, as exemplified in a Home Office study seeking to establish 'a profile of perpetrators' (Sibbit, 1997: 4).

The study of racism has a particular resonance in social care, since social care agencies have a formal responsibility to implement equal opportunities policies. This is underlined by the high proportion of people from Black and minority ethnic groups in social services (15%) (Balloch et al, 1995), indicating that this sector represents a key employment opportunity for Black and minority ethnic people. Yet, social services departments have gone from a point of having four Black or minority ethnic directors out of a total of 116 in 1990, to one out of 153 in 1999 (Audit Commission/Social Services Inspectorate, 1999). Furthermore, the increasing emphasis on the ability of social services to deliver non-discriminatory services suggests the need to address the discrimination experienced by members of its workforce.

### **Aims of present study**

Research into the experience of racism by Black and minority ethnic staff formed part of the NISW

workforce study of social services staff in England (Balloch et al, 1995). This longitudinal survey was conducted within five local authorities: two Metropolitan boroughs, one inner and one outer London borough, and one county council, though the last did not have records of Black and minority ethnic staff. A stratified sample was taken in which men and black staff as well as managers and field workers were over-sampled to ensure sufficient numbers of these groups. There was a high representation of Black and minority ethnic staff in the four social services departments (10, 19, 18 and 35%) compared with the proportion of residents of working age from Black and minority ethnic groups living in these authorities (10, 28, 15 and 17%) (Butt and Davey, 1997). Although it would have been useful to explore the factors that led to these proportions within the social services workforce, the study did not collect information on the local equal opportunities policies. The survey consisted of two sets of interviews with people drawn from four job types: manager, field worker, residential worker, and home care worker. Analysis based on data from the first interview (n= 1,276) revealed the widespread nature of the experience of racism among the 15% of staff who classified themselves as members of a minority ethnic group (Williams, 1995).

The present analysis draws further on the data obtained in the second interview (n= 940), which addressed respondents' experience of racism 'in the previous 12 months' (Butt and Davey, 1997). It is designed to gain a better understanding of the nature of racism, and the context in which it occurs. Looking at different forms of racism and the ways in which it is perceived and dealt with by staff elucidates different coping strategies, which in turn may go towards an explanation for the variation in reporting across job types. By recognising that certain mechanisms of resistance may lead staff not to report racism, attention is equally drawn to the incidence of not reporting. The issue of under-reporting must be of particular concern, given its potentially considerable costs not only to individual members of staff but to the organisation as a whole (Beishon et al, 1995).

The analysis draws primarily on respondents' accounts of the most recent incident of racism. It is less concerned with the frequency of racist

incidents than with gaining an understanding of the experience of racism by analysing a range of typical incidents. Although our sample is not necessarily representative of the population of Black and minority ethnic staff in social services departments, the incidents described are typical of the experiences of Black and minority ethnic staff.

While it is recognised that there are important differences between ethnic minorities, the sample is too small to consider groups separately in any meaningful way, and all respondents who classified themselves as other than 'white' are referred to collectively as 'Black and minority ethnic' staff.

### The sample

Nearly 80% of staff classified themselves as Black Caribbean, Black African or Black Other, while 18% were of Indian, Pakistani or Bangladeshi origin. In terms of job types, field workers constituted the largest group (one-third), followed by residential workers (27%), managers (23%) and home care workers (16%). There were slightly more staff aged under 40 than older staff (54% vs 46%). Two-thirds of our sample were women. Field workers were the youngest group in our sample, with almost three-quarters below the age of 40. Residential workers were oldest amongst job types, and two-thirds of them were over 40. Around 70% of men in our sample were below the age of 40, compared with less than half of women.

### Methodology

The data were obtained through structured face-to-face interviews. Staff were asked whether and how often they had experienced racism from service users and/or relatives and from colleagues and/or managers within the twelve months prior to the interview (on a scale from 'never' to 'very often'). Respondents who reported racism of either type were then asked to provide details of the most recent incident, including location, type of activity, type of perpetrator, and the extent to which the incident had affected them (on a scale from 'not at all' to 'very much'). They were asked to give further details of what form the racism had taken. This was based on self-definition, although prompts were given when asked (e.g. *'reluctance on the part of white clients to accept a service*

*from', 'undermining your work by white colleagues'*).

The interviews were conducted by Social Community Planning Research (SCPR) and no stipulations were made concerning matching of interviewers and interviewees in terms of ethnicity, gender or age. It is likely, therefore, that no matching took place. Moreover, the context in which the interviews took place is unclear. For example, we do not know the locations in which interviews were conducted and whether other staff and in particular supervisory staff were present or within earshot. This means that we cannot guarantee that Black and minority ethnic staff felt able to disclose details of racism in a receptive and favourable environment. In addition, the extracts contained in this paper are largely paraphrased comments and should not be treated as quotes or verbatim remarks.

For the purpose of the analysis, different categories of racism were developed in order to enable the distinction between, and evaluation of, different forms of racism in terms of context and perception. The approach drew on the general analytic framework of grounded theory (Strauss and Corbin, 1997), which calls for a process of constant comparison of emerging categories in the empirical data. Based on induction, the data form the starting point for emerging categories, which are examined – and either strengthened or rejected – with each new 'incident' in the data. The emerging categories were analysed and compared by a team of three co-researchers, and agreement formed on the final set of categories and their defining properties.

### Racism from service users and/or relatives

Sixty respondents (45%) reported racism from users and/or relatives within the twelve months prior to the second interview. However, there were variations among different types of staff (Table 1). As our previous research found (Butt and Davey, 1997), racism from this source was slightly more often reported by men and staff from the younger age groups than by women and older staff. Among job types, proportionately more field workers and managers reported incidents than did residential and home care workers.

**Table 1**  
**Percentages of Black and minority ethnic staff reporting incidents of racism from service users and/or relatives by gender, job type and age**

	Reporting racism		Not reporting racism		Sample	
	Percentage	n	Percentage	n		
All	45	60	55	74	134	
<b>Gender</b>						
Women	43	39	57	52	91	
Men	49	21	51	22	43	
<b>Job type</b>						
Managers	48	15	52	16	31	
Field workers	62	28	38	17	45	
Residential workers	39	14	61	22	36	
Home care workers	14	3	86	19	22	
<b>Age at first interview</b>						
Under 30	73	8	27	3	11	
30 to 39 years	48	30	52	32	62	
40 to 49 years	49	18	51	19	37	
50 and over	17	4	83	20	24	

*Most recent incident*

An examination of respondents' accounts revealed that the particular context and form of abuse, the type of staff and nature of work are all factors influencing perceptions and coping strategies - and possibly the decision whether to report incidents.

There are indications that individual coping strategies are influenced by the motivation underlying the abuse as perceived by staff, and by levels of awareness of the discourse of racism. The PSI study of racial harassment within the NHS found that many minority ethnic staff experienced abuse from white patients but, attributing it to patients' vulnerability or sickness, considered it part of the job (Beishon et al, 1995). In our study, while older staff, residential and home care workers may have experienced racism to an extent similar to that experienced by other staff, they may be more likely to adopt the view that racism constitutes part of the daily work with vulnerable users. By contrast, young field workers and

managers may be more aware of the issue of racism, having developed a language for challenging it, and may thus be more willing to report it (Butt and Davey, 1997).

*Types of racism from service users and/or relatives*

Four broad categories of racist incidents were identified: 'general verbal abuse' (41); verbal abuse in the form of 'open rejection' of Black and minority ethnic staff by service users (7); 'covert rejection' (6); and 'racial violence' (2).

**Table 2**  
**Racism from service users and/or relatives by category and job type: number of incidents**

Type of racism	Managers	Field workers	Residential workers	Home care workers	All
General verbal abuse	11	19	10	1	41
Open rejection	1	4		2	7
Covert rejection	3	3			6
Racial violence			2		2
No racism from users and/or relatives	16	17	22	19	74
<b>Total sample of Black and minority ethnic staff (n=134)</b>	31	45*	36*	22	134*

**Note:** \* Numbers do not add up as 4 incidents could not be classified due to missing data.

For the sample as a whole reporting racism from service users/relatives, the majority of respondents (about 60%) reported being affected 'a little'/'not at all'. More residential workers than other staff reported not being affected at all. All three home care workers said they had been affected 'very much'/'quite a lot'.

General verbal abuse

General verbal abuse was the most common type of racism. It includes incidents of name-calling, derogatory comments, and accusations of favouritism towards fellow Black and minority ethnic people. Field workers and managers more often reported this type of racism than other staff.

Respondents in this category reported being less affected by incidents than staff in the other

categories of racism from users. Nearly three-quarters reported being affected 'a little'/'not at all'. One possible interpretation is that racist remarks were perceived by staff as not being directed at them personally, either as individuals or as professionals:

*'I was told to go back to my own country'*  
(male residential worker, intervening when a child in care was teasing another)

*'I knocked on the door and the person said "oh, I didn't know it was going to be a Blackie"'*  
(female field worker, assessing a woman with learning disabilities)

*'he wouldn't get the service when wanted, he said if it was for my own kind then I would jump to it'*  
(female field worker, on duty with an elderly male service user)

*'they call me names, I don't take notice, they are ill and I give them allowance for that'*  
(female residential worker, providing personal care to an elderly male resident)

The latter account illustrates the view referred to earlier, whereby racist remarks are seen as stemming from service users' vulnerability and thus are somehow 'excusable'. Importantly, rationalising incidents in terms of users' powerlessness may reflect a strategy of resistance which may have led some staff not to report it at all.

#### Open rejection

This category consists of cases in which users made it clear (in the eyes of respondents) that they did not want to be serviced by Black or minority ethnic staff. The fact that most incidents took place in the service user's home may point to the significance of a user's home as his or her private sphere. The user may feel 'entitled' to ask Black or minority ethnic staff not to encroach on their personal territory. It is thus noteworthy that no residential worker described this type of racism.

It appears that where remarks were perceived to be more personal and specific, possibly questioning professional ability, effects were more serious:

*'she said to me "get out and leave", she does not like the way I do the work'*  
(female home care worker, providing personal care to an elderly female user at the user's home)

*'he said he doesn't want me there, he phoned my supervisor, I wasn't informed'*  
(female home care worker, providing personal care to an elderly male user at the user's home)

However, effects may vary according to the type of staff and their particular role. All home care workers in our sample were affected 'very much' or 'quite a lot', which may well relate to the nature of their work, which is likely to involve a more personal relationship. The importance of home care workers developing a close relationship with the user has been described elsewhere (McLean, 1994). Thus, racist remarks in the context of home care may generally be of a more personal nature and generate more serious effects.

#### Covert rejection

Covert rejection was identified in accounts of behaviours or attitudes (rather than words), which were understood by respondents to have been motivated by racism.

The reported effects of racist incidents in this category were more serious than in the others (most were affected 'very much'/'quite a lot'). The fact that this category comprised field workers and managers only may be indicative of their professional role involving a certain authority, and further illustrates the ways in which the type of work partly determines perceptions of racism. All the incidents involved staff feeling that their authority was being challenged:

*'everything I did he double-checked with the other worker, he would totally ignore me – get the message through somebody else'*

(female field worker interviewing, perpetrator: male relative of a service user)

*'she didn't acknowledge me, she went to the clerk to ask about her mum even though she was told to come to me'*

(female manager, on duty, perpetrator: female relative of a service user)

these examples illustrate the subtlety of covert forms of racism and their serious impact.

Racial Violence

Two accounts in our study involved physical attack, perceived to be racially motivated. The respondents who had experienced 'racial violence' were 'very much' and 'quite a lot' affected.

**Racism from colleagues and/or managers**

Almost one-third of respondents reported racism from colleagues and/or managers. Again, field workers and managers, and staff under 40 more often reported incidents than did residential workers, home care workers and older staff. Overall, staff were less likely to report this type of racism compared with racism from service users (Table 3).

*Most recent incident*

The data were analysed to highlight different coping strategies among staff, thus providing some insight into the variations in reporting. The analysis shows that perceptions are determined by a range of factors, such as the form of abuse, the context and the nature of work.

*Types of racism from colleagues or managers*

Two broad categories of types of racism were identified: 'general derogatory comments' (21), and 'undermining professional ability/unfair treatment' (20).

**Table 4**  
**Racism from colleagues and/or managers by category and job type**

Type of racism	Managers	Field workers	Residential workers	Home care workers	All
General derogatory comments	9	8	4		21
Undermining/unfair treatment	5	12	2	1	20
No racism from colleagues and/or managers	16	25	30	21	92
<b>Total sample of Black and minority ethnic staff (n=134)</b>	<b>31*</b>	<b>45</b>	<b>36</b>	<b>22</b>	<b>134*</b>

**Note:** \* Numbers do not add up as one incident could not be classified due to missing data.

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**Table 3**  
**Percentages of Black and minority ethnic staff reporting incidents of racism from colleagues and/or managers by gender, job type and age**

	Reporting racism Percentage	n	Not reporting racism percentage	n	Sample n
All	31	42	69	92	134
<b>Gender</b>					
Women	31	28	69	63	91
Men	33	14	67	29	43
<b>Job type</b>					
Managers	48	15	52	16	31
Field workers	44	20	56	25	45
Residential workers	17	6	83	30	36
Home care workers	5	1	95	21	22
<b>Age at first interview</b>					
Under 30	55	6	45	5	11
30 to 39 years	32	20	68	42	62
40 to 49 years	32	12	68	25	37
50 and over	17	4	83	20	24

It appears that this less tangible form of racism not only undermines staff's professional role, but is harder to deal with, particularly if experienced on a continuous basis. Whereas explicitly racist remarks may be put down to users' vulnerability – and thus can be rationalised by staff to retrieve some form of control - being continually ignored or by-passed impinges on the worker's sense of self, as a professional and as a person. Crucially,

Overall, the effects on staff were more serious than on those who had experienced racism from service users. Two-thirds of respondents were affected 'very much' or 'quite a lot', with staff aged 40 and over reporting more serious effects than younger staff.

#### General derogatory comments

This category involved all those incidents which were not found to have an immediate bearing on the individual's professional role, but were more generalised comments, such as insensitive references to Black and minority ethnic culture.

This type of racism was predominantly reported by managers and field workers and by staff under 40. In most cases, comments were made by a colleague rather than a manager.

Staff were affected to varying degrees by what often appear to be very similar remarks. While eleven of the 21 respondents were affected 'very much'/'quite a lot', ten reported being affected 'a little'/'not at all'. This again may point to different coping strategies. Typical comments were:

*'sarcasm about a TV programme featuring Africans dancing - she said there are your friends'*  
(male residential worker, working with a user, comments by female line manager)

*'insensitive comments about Black people under the general assumption that I would go along with it'*  
(female field worker, in the staff room, comments by female team colleague)

*"God, these people still live in jungles and their environment is so uncivilised", referring to a TV programme about Jamaica'*  
(female manager, in the staff room, comments by female colleague)

#### Undermining professional ability / unfair treatment

This category consists of incidents in which respondents felt that the racism was directed against them in their role as professionals, either in relation to their work, or as members of a team. This is reflected in the nature of activities

respondents were involved in at the time of the incident, which were largely work-related. Half the incidents were perpetrated by managers. The category includes accounts of a more subtle, non-verbal nature, involving certain attitudes and behaviours perceived to be racist.

Incidents in this category were predominantly reported by field workers. Staff were older than those in any other category. More staff aged 40 to 49 described incidents of this type than other age groups in our sample, which may be indicative of this particular type of racism as it relates to the professional status of staff.

Also, and in contrast to staff who had been subjected to general derogatory comments, all respondents in this category reported being affected to some extent (three-quarters said they were affected 'very much'/'quite a lot'):

*'she refused to hear my viewpoint, undermined whatever I said, refused to acknowledge my role in the interview process, .... she disagreed with all my points in a way that I thought rather racist'*  
(female manager about another female manager, discussing the interview process)

*'I was asked to go into a user's house on my own although we have to go in pairs, I was treated rudely by my colleague'*  
(female field worker about a female colleague, on duty)

*'my manager related to me in a condescending manner that he wouldn't have used towards my white counterparts'*  
(female manager about her male line manager, she was being supervised)

None of the accounts involve racist language and white staff may well have been unaware that their actions were perceived as racist. This may point to the role of institutional racism, giving rise to everyday common practices and behaviours perceived as discriminatory by Black and minority ethnic staff. It is equally arguable that the

incidents represent the nature of daily interactions between staff in general, which includes disagreements, misunderstandings or even being patronised, regardless of people's ethnic origin. The fact that respondents viewed these experiences as racist may be seen as a reflection of their disadvantaged position in a white-dominated society and in the context of past experience.

### Discussion and policy implications

This was a small scale, primarily qualitative study of the experience of racism, and caution is warranted in drawing conclusions. What the study does show is that racism is a common experience for Black and minority ethnic staff. However, it is not a monolithic experience, and perceptions and coping strategies are influenced by a combination of factors. It appears that incidents perceived to be directed at the professional role and identity of staff have a greater effect than more general comments. The nature and type of work, as well as the age, status and role of the member of staff all impact on the ways in which racist abuse is perceived and handled.

It is important to consider the possible resistance to racist and discriminatory practices resulting in under-reporting. Attributing incidents to service users' powerlessness appears to offer a strategy for dealing with racism, which mitigates the effect of incidents and may lead many staff not to report them at all. This could partly explain the comparatively greater reported impact of racism from colleagues and managers. The decision to report incidents may further depend on the level of awareness of the discourse of racism among Black and minority ethnic staff, and on their familiarity with the language and concepts of equal opportunities. Others may not see any value in reporting if nothing will be done about it. Thus, the evidence presented in this paper must be regarded as indicating the minimum level that staff experience.

Crucially, the research has illustrated the subtle nature of some forms of racism. It appears that these incidents have a greater impact on staff than do more explicitly racist comments and practices. Both the subtlety and the fact that many of the 'perpetrators' may not have been aware of being racist, point to the important role of institutional

racism. From the perspective of Black and minority ethnic staff, while these subtle forms of racism are difficult to grasp, they appear to amplify the daily experience of being an ethnic minority person (Bowling, 1998). The study of racism in social services should be considered in the wider context of a society in which racism is endemic. Thus, a policy approach which focuses primarily on individual racist behaviour risks ignoring its foundations in the power relations in our culture, institutions, discourses and day-to-day practices. Accordingly, overt racism must be seen as merely an expression of racist norms inherent in underlying social structures. A zero tolerance approach must therefore be regarded as a poorly-founded strategy in that it implies that racism may be readily identified and, ultimately, eradicated. In contrast, as we have seen, there are no simple definitions or criteria that can be applied, and it is often difficult to provide concrete, incontrovertible evidence as the basis for claiming exposure to racism.

While both the 9<sup>th</sup> Social Services Inspectorate report (2000) and the TOPSS National Training Strategy for England (1999) make reference to the importance of the advancement of Black and minority ethnic staff in the social services, the effectiveness of equal opportunities policies in tackling racism is questionable. Clearly, a key element in reducing racism must be the increased promotion of Black and minority ethnic staff to management positions. However, based on our discussion of institutional racism, several shortcomings need to be considered. Firstly, equal opportunities policies aim at formal equality that leaves the underlying power structures intact. Secondly, as a 'top-down' policy it may serve to push overt racism underground, making it more difficult to address subtle forms of racism and discrimination (Dominelli, 1997). Thirdly, this approach is likely to meet with the resentment of white majority staff who feel threatened by accusations of being racist, thus acting as a barrier to the implementation of anti-racist policies (Penketh, 1998).

The intractable nature of institutional racism, its manifestations in certain attitudes and behaviours (which may be free of racist intent), call for an approach aiming at raising awareness among white

staff at all levels of the workforce of the perceptions and experiences of Black and minority ethnic workers. It means engaging with staff and managers, and convincing them of the necessity of anti-racist strategies by 'obtaining [their] willing and informed consent' (Dominelli, 1997: 139). Any strategy should aim at creating a culture in which Black and minority ethnic staff are assured of the firm support of management, and in which they feel confident to voice their concerns. Education and training about the extent and impact of racism must be aimed firstly at managers with responsibility for change: this will greatly enhance its perceived value for other staff, and act as a marker of organisational commitment to this issue.

Developing an effective anti-racist strategy also means engaging with service users and user groups. In our study, the expression of racism from users was often rather more crude and explicit than that emanating from colleagues and managers. While these incidents again must be viewed as being underpinned and legitimised by underlying racist norms, there is a parallel with studies of violence from users against staff, that consider certain forms of abuse as functional in expressing anger and frustration (Brockmann and McLean, 2000). Thus, users may employ racist language to give substance to their anger resulting from feelings of powerlessness. Again, a zero-tolerance approach may be counter-productive inasmuch as it may exacerbate the power imbalance between staff and users, leading to increased resentment on the part of the latter. Policy on these issues should be drawn up in discussion with service users, and regularly revised in the light of experience.

Lastly, policy makers should recognise that our research-based knowledge of these issues is far from complete. We have reported evidence from a survey of social services staff, but have no information on racism experienced by staff in the independent sector. Particular attention should be given to the experiences of home care staff, who work on their own with users and on whom racism may have especially adverse effects. Further research would need to be informed by our greater understanding of the methodological difficulties in gathering data on people's experiences of racism: in particular, research must pay greater attention to

interviewer matching and the social context of research contact (including the potential costs to respondents).

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