

SASCA
Somali Adult Social
Care Agency

MISSION STATEMENT

- SASCA exists to help identify and meet the needs of Somali adults in the City of Manchester, particularly those aged over 50, through a mixture of advocacy and information, low-level health and social care support, leisure activities, training and sign-posting to other agencies

Aims

- SASCA aims to ensure that its service users:
- are aware of the full range of public services available and are able to access them;
- have appropriate health and care support;
- they have social contact with others, both within their own community and with people in the host community;
- have a healthy diet and take regular exercise;
- are able to live safe and independent lives and reach their full potential, whether in work, education or retirement.

Unique Selling Proposition

- SASCA is unique in that it started life as a partnership of several different Somali community organisations and has a governing body drawn from a wide cross-section of the Manchester Somali community (Arlaadi Somali Community Centre, United Somali Bravanese Community, Somaliland Community Centre, Somali Brava and Banadir Unity, Somali Brava Sisters and International Disabled Society).
- Where other groups are carrying out similar work, we aim to collaborate with those groups and complement their work rather than competing for territory.

Strategic Objectives

- Deliver low-level health and social care support activities for Somali elders, such as social drop-ins and luncheon clubs, which will reduce social isolation and promote positive health and well-being.
- Advocate for Somali elders, both individually and as a group, by signposting them to appropriate sources of information and advice, helping them to obtain community care assessments and appropriate medical care, and supporting them in acquiring the local knowledge and skills necessary to live more independent lives within the host community, for example through Travel Training.
- Support the integration of Somali women of working age in work, education and leisure.

Evidence of Need

- SASCA carried out a sample survey in 2007 and interviewed 50 Somali elders. A data of 40 of them were analyzed and the picture that emerged is summarized as follows:
- **Older group:** The average age of the 40 respondents is 70, the oldest person being 89. Equal balance of women and men. Mainly from Moss Side and district (M14 70%, M15 18%).
- **Referral :** Everyone discovered the Project by word of mouth. None had been referred by health or other professionals.
- **Poor health:** 40 people made an estimated 15 visits to A&E, 19 out-patient appointments, 234 appointments with their GP in 3 months.

Evidence of Need

- Poor quality of life: 55% rate their quality of life negatively, of whom 18% rated it very bad and 20% the worst possible.
- Untouched by low-level preventative services: Not a single person has received meals on wheels or a home help or social worker or nurse or other medical staff. Only one has visited a day centre, drop-in or lunch club. None of them have accessed library services.
Limited social life: Contact with friends varied wildly from good to non-existent. However only 18% had engaged in other social activities and only 31% attended the mosque.

Evidence of Need

- Little informal care:
 - Only 18% receive help from family and friends.
- Very little exercise:
 - Only 10% ever engage even in moderate exercise. None ever engaged in vigorous exercise
- Limited education:
 - 86% have been educated only to school-leaving age.
- Extreme isolation:
 - Only 2 people appear to be living in an extended family.
 - 68% live in a domestic household as the only adult.
 - 70% feel either very alone or extremely alone.

Activities

- Social Drop-ins
- Men's drop-ins
- What: Conversation, Somali TV, cards, light refreshments, gentle / chair-based exercise, walks; peer befriending
- Women's drop-ins
- Same as above, plus sewing, music.
- Where: SASCA premises
- When: Tuesday, Wednesday and Thursday 10am–4pm
- Access: On foot, bus, Ring & Ride

Resources

- Manager
- Support workers x 2
- Volunteers x 3
- Monitoring: Quality of Life questionnaire; own monitoring tools; individual interviews

LEAD BOARD MEMBER:

Mohammed Jeilani and
Maimuna Bakari

General Advocacy

- At its most basic level, the advocacy role that can easily be combined with other on-site activities, such as running the drop-ins. This role will involve:
- helping people to make travel arrangements to reach the Centre;
- signposting and referral to sources of information and advice, including making appointments by telephone;
- arranging outreach visits from other agencies;
- helping people to understand letters and non-specialist written documents that they have received;
- interpreting at meetings between service users and support workers and other visitors to the Centre.

What else we do?

- Networking and awareness raising through different channels
- Capacity building for community groups and champions to sign post and support
- Open university for social mobility, service use and integration issues.
- Interpretations
- Accessible mechanism for clients with profound cultural difficulties to gain information and insight.

Other services.

- Finding help at home: Gardening or minor repairs.
- Benefits and pensions.
- Others: Such as paying for fuel or repaying debts.
- Housing and property matters: Such as repairs or moving home.
- Legal issues: Basic advice or referral to immigration law firm.
- Family or personal issues: Such as depression, bereavement, or being abused .

Stakeholder Involvement

- Partnership for Older People's Project managed by MCC
- the Black and Minority Ethnic Consultative Forum (BMECF);
- Manchester Race and Health Forum (MRHF);
- Manchester BME Community Network.